VI) Violence in Workplace

ATTACHMENT 5.01

Risk Assessment Template

Department	**Division**
Section	**Location**
Completed by	**Date**

1. Has the staff experienced verbal abuse while working? ☐ yes ☐ no

If yes, did staff report the incident(s)? ☐ yes ☐ no

If yes, did staff report the incident(s) ☐ orally? OR ☐ in writing?

What was the relationship of the abuser?

☐ client/customer

☐ member of the public

☐ other (please specify)

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2. Have staff experienced written abuse while working? ☐ yes ☐ no

If yes, did staff report the incident(s)? ☐ yes ☐ no

If yes, did staff report the incident(s) ☐ oral OR ☐ in writing?

What was the relationship of the abuser?

☐ client/customer

☐ member of the public

☐ other (please specify)

3. Have staff experienced a threat of physical violence while working or as a result of work? ☐ yes ☐ no

If yes, did staff report the incidents(s)? ☐ yes ☐ no

If yes, did staff report the incident(s)? ☐ orally OR ☐ in writing?

What was the relationship of the abuser?

☐ client/customer

☐ member of the public

☐ other (please specify)

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4. Have staff experienced a physical assault or attack while working? ☐ yes ☐ no

If yes, did staff report the incidents(s)? ☐ yes ☐ no

If yes, did staff report the incident(s) ☐ orally? OR ☐ in writing?

What was the relationship of the assailant?

☐ client/customer

☐ member of the public

☐ other (please specify)

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5. Do staff ever:

work alone or with a small number of co-workers? ☐ yes ☐ no

work in a community-based setting? ☐ yes ☐ no

work late at night or early in the morning? ☐ yes ☐ no

6. Are staff/management concerned about violence on the job? ☐ yes ☐ no

What is the source of concern?

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Does such a possibility represent a ☐ high risk ☐ medium risk ☐ low risk?