

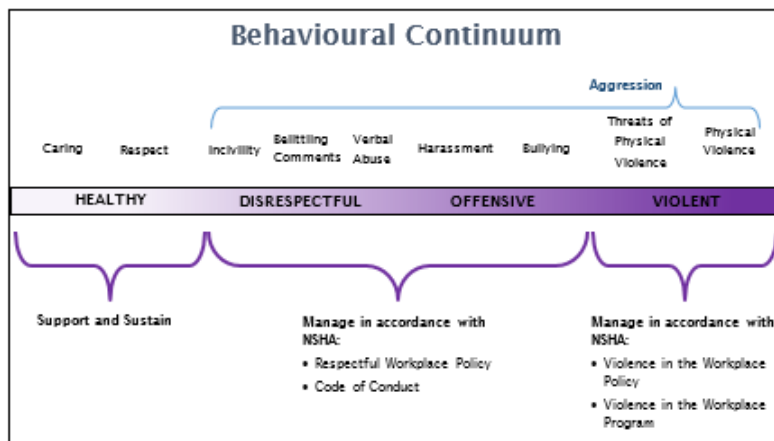
NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

General Users’ Instructions for Completing this Violence Risk Assessment (VRA) Template

This VRA template should usually be completed by the unit/dept/team Manager. The Manager may choose to delegate this function to another competent person. If so, the Manager is still responsible to review the completed VRA template before advancing it for review.

Where multiple units, departments or teams exist or provide care/service in the same or very similar Workplace(s), and where the circumstances of their work are alike, the managers can collaborate to complete one, collective VRA.

1. **Save this VRA template** to your preferred computer folder location and identify the file name so that you are able to access it later. For improved legibility and revisability, this VRA template should be completed electronically (i.e. should not be printed, with handwritten responses or notes added).
2. **Familiarize yourself with these General Users’ Instructions and with this entire VRA template.**
3. **Determine who will assist you with completing this VRA template.** To achieve a broad-based, accurate assessment, it is important to engage a small group to assist you. Select persons who are most familiar with the hazards. Consider supervisors, point of care or service Team Members and others, as you feel appropriate.
4. **Complete this VRA template from beginning to end, in the same order that the sections are arranged.** Open this template in “Edit Document” view and click the “Enable Content” box, near the top of your screen. A dialogue box will appear. Answer “yes” -- this is a trusted source.
5. **Print Appendix A – Assigning a Risk Score** and have it available for ready visual reference as you and the assessment group work through the questions in section 7.
6. **Additional instructions, guidance and examples** are provided throughout this VRA template, in red text. These can be removed as you complete the template, to reduce clutter. Contact your Zone OHSW Team for additional assistance, if needed.



This Behavioural Continuum illustrates the relationship between violence and other behaviours.

Violence is defined as:

- i. threats, including a threatening statement or threatening behaviour that gives an employee reasonable cause to believe that the employee is at risk of physical injury, and/or
- ii. conduct or attempted conduct of a person that endangers the physical health or physical safety of an employee.

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

1. General Information			
Zone			
Program			
Facility/Site			
Unit/Dept/Team Name			
Unit/Dept/Team Work Location(s)			
Director			
Manager			
Supervisor(s)/Team Leader(s)			
Days/Hrs of Operation			
Total number of NSHA Team Members you are responsible for, who regularly work in this Unit/Dept/Team	Day:	Evening:	Night:
Approx number of patients/residents/clients at peak times (if applicable):			
Approx number of visitors at peak times (if applicable):			

2. Summary of Care and/or Service Delivered and the Overall Exposure to Violence
<p>The risk of workplace violence in healthcare is significant. NSHA Team Members (including Employees, Physicians, learners and volunteers) see patients and families during difficult and stressful circumstances. Patients and visitors may become violent, aggressive or responsive due to a medical condition, medication, an established tendency towards violence or aggression, or because of feelings of anger resulting from their current situation. These individuals may be acting on feelings of helplessness or frustration in response to their environment or because of unmet needs. These complex, emotionally charged environments pose an increased risk for violence.</p> <p style="color: red;">[Add additional details below specific to clinic/site e.g. doors, lock style, swipe entry or not, workstation placement]</p>

3. Incident History			
<p style="color: red;">Instruction: Describe the incidents of disrespectful behaviour, aggression and/or violence that have occurred in this Unit/Dept/Team in the past 12 months.</p> <p style="color: red;">Guidance: Past incidents of disrespectful behaviour, such as incivility and verbal abuse, should be considered because they can be a predictor of violence. Utilize reports from SIMS, SAFE Line or other available sources. If actual data are unavailable, use estimates.</p>			
Types of Disrespectful Behavior, Aggression and Violence	Approximate Number of Incidents in past 12 months	Approximate Number of NSHA Team Members Affected	Approximate Number of Shifts Affected
Incivility			
Verbal abuse			
Threats of violence			
Physical violence			

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

Other (specify)			
-----------------	--	--	--

4. Locations with Risk for Violence and the Means by Which it Could Occur

Instruction: Check all that apply for your unit/dept/team. Add any additional locations and/or means, if relevant.

Guidance: Ensure that the “Enable Content” box, near the top of your screen, has been clicked. A dialogue box will appear. Answer “yes” to the question. This is a trusted source.

To check or uncheck a box, below, double click before or on the check box. A window will open “Check Box Form Field Options”. Click on “checked” or “not checked” and then click “OK”. The box should now have an “X” in it or removed from it, as applicable.

<input type="checkbox"/> patient rooms <input type="checkbox"/> nursing stations <input checked="" type="checkbox"/> common areas: corridors, lobbies <input type="checkbox"/> conference rooms <input checked="" type="checkbox"/> reception areas <input checked="" type="checkbox"/> waiting areas <input checked="" type="checkbox"/> in the community <input type="checkbox"/> at patient’s residence <input type="checkbox"/> vehicle <input checked="" type="checkbox"/> parking areas	<input checked="" type="checkbox"/> elevator <input type="checkbox"/> offices <input checked="" type="checkbox"/> other (briefly explain) Exams rooms in clinic. <input checked="" type="checkbox"/> in person <input checked="" type="checkbox"/> phone <input type="checkbox"/> email/instant message/text <input checked="" type="checkbox"/> social media <input type="checkbox"/> other (briefly describe)
--	--

5. Basic Mandatory Education for the Prevention and Management of Violence

Instruction: Review the list of basic education, below, that is mandatory for all NSHA Team Members. For each item, check the corresponding box if 80% or more of your NSHA Team Members have completed it and have met the repeat requirements (where specified).

Guidance: To check or uncheck a box, double click before or on the check box. A window will open “Check Box Form Field Options”. Click on “checked” or “not checked”, as applicable, and then click “OK”. The box should now have an “X” in it or removed from it, as applicable.

<input checked="" type="checkbox"/> On-line Learning (LMS) - NSHA-OHSW-2017: General OHSW Training (mandatory for all NSHA Team Members; annual repeat requirement) <input checked="" type="checkbox"/> On-line Learning (LMS) – NSHA-WV1-2017: Introduction to Workplace Violence part 1 (mandatory for all NSHA Team Members; annual repeat requirement) <input checked="" type="checkbox"/> On-line Learning (LMS) – NSHA-WV2-2017: Introduction to Workplace Violence part 2 (mandatory for all NSHA Team Members; annual repeat requirement) <input checked="" type="checkbox"/> Familiarization with the NSHA Violence in the Workplace Policy, Workplace Violence Prevention Statement and Violence in the Workplace Program Guide. <input checked="" type="checkbox"/> Familiarization with the NSHA Respectful Workplace Policy and Code of Conduct. <input checked="" type="checkbox"/> Familiarization with the NSHA Code White Guidelines and Code Silver Guidelines.
--

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

6. Walk-through Assessment	YES	NO	NA	Notes
<p>Instructions: For each current condition or process, below, place an “X” in the appropriate cell for Yes, No or NA (not applicable). If appropriate, add a brief note.</p> <p>Guidance: Your assessment group needs a clear understanding of these current conditions and processes. This will prepare you for section 7 of the template, where you will be assessing and scoring your unit/dept/team’s risks related to violence. It is advisable for your assessment group to do a walk-through so that you can accurately complete this section. Also, security assessments have been conducted for many NSHA sites and/or departments. Where they exist, security assessments can help inform your responses to these questions. If you are unsure about the availability of a security assessment, contact your Site Leader or OHSW Team. Answer questions to the best of your ability.</p>				
A. Parking Area(s)				
• Are parking area entrances and exits well marked?				
• Are parking areas signed with security reminders (e.g.: lock your car, security patrolled, video surveillance, etc)?				
• Do parking areas have sufficient lighting?				
• Are there obstructions that could be used as hiding places (e.g.: waste receptacles, shrubs, dark corners, etc)?				
B. Facility/Site				
• Are you aware that the facility/site has ever been visited by violent criminals?				
• Is it foreseeable that the facility/site could be visited by persons impaired by alcohol or drugs?				
• Is the facility/site in an isolated area?				
• Does the facility/site, or adjacent buildings, have graffiti?				
• Do the facility/site grounds have sufficient lighting?				
• Do all facility/site entrances have sufficient lighting?				
• Are all primary entrances easily observable and free of obstructions that could be used as hiding places?				
• Do all facility/site exterior doors close and latch/lock properly?				
• Are all or most facility/site exterior doors locked during specific hours? If yes, note specifics.				
C. Unit/Dept Reception and Waiting Areas				
• Is your reception/waiting area clearly marked and easy to locate?				
• Is the reception/waiting area the first point of contact for persons presenting for care or service?				
• Does your reception/waiting area utilize a sign in/sign-out process?				
• Does your reception/waiting area have adequate space and seats to prevent overcrowding?				

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

6. Walk-through Assessment	YES	NO	NA	Notes
• Is your reception/waiting area, including entrance/exit points, clearly visible to Team Member(s), at least from a reception counter(s)?				
• Are areas behind the reception counter(s) secured to prevent unauthorized access?				
• Is a barrier in place at the reception counter(s) to prevent unauthorized access and for infection prevention (e.g. glass panel with pass-through provision)?				
• If there is no barrier, is reception counter sufficiently wide and/or tall to ensure that Team Members are not in the strike zone should a person escalate to violence?				
• Is the reception/waiting area reasonably pleasant?				
• Are there suitable distractions for persons who are waiting?				
• Are furniture and fixtures in your reception/waiting area secured to the floor or heavily weighted so they cannot be thrown?				
• Are there objects in your reception/waiting area that could be easily thrown or used as weapons?				
• Is information about wait times and delays clearly and frequently communicated?				
• Are Patients escorted into the main unit/dept/team care area from your reception/waiting area?				
D. Care and Service Areas				
• Is access to care and service areas secured and controlled by key, ID card, buzzer or other method?				
• Are there locations where a lone Team Member could become cornered or trapped by a person who is aggressive/violent?				
• If an identification and communication system is in place to flag aggressive patient/persons, is it effective?				
• Are specialized care plans, behavioural plans or safety plans routinely used for patients who are aggressive/violent?				
• Do specialized care plans, behavioural plans or safety plans include details on behaviours, triggers, appropriate strategies to deescalate and mitigate the risk, and the response actions?				
• At shift changes and other key times, is there an effective process to update all affected care team members on patient behavioural concerns (e.g.				

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

6. Walk-through Assessment	YES	NO	NA	Notes
safety huddles)?				
<ul style="list-style-type: none"> Is there an effective process to notify non-dept/unit persons who may be required to enter an aggressive patient's room (e.g. x-ray, blood collection, maintenance)? 				
<ul style="list-style-type: none"> If least restraint methods are used by your Team Members, are they effective at managing aggressive/violent behaviours? 				
<ul style="list-style-type: none"> Are staffing levels generally adequate to safely manage patients who are aggressive/violent? 				
<ul style="list-style-type: none"> Are opioids and other drugs that are a theft risk always secured and dispensed in accordance with approved methods? 				
<ul style="list-style-type: none"> Are there objects in your care area(s) that could be easily thrown or used as weapons? 				
E. Offices; Interview, Counseling, Treatment and Similar Rooms				
<ul style="list-style-type: none"> Are offices and other rooms where your Team Members meet with potentially aggressive/violent persons located in visible, well-traveled locations? 				
<ul style="list-style-type: none"> Do your Team Members have a safety huddle before meeting with a person who may become aggressive/violent? 				
<ul style="list-style-type: none"> In offices and other rooms where aggression/violence may be encountered, does the placement of furniture and seating arrangement provide for adequate physical separation and quick exit by your Team Members? 				
<ul style="list-style-type: none"> Are offices and other rooms used by your Team Members locked when they are not in use? 				
<ul style="list-style-type: none"> Are there objects in those offices and other rooms that could be easily thrown or used as weapons? 				
<ul style="list-style-type: none"> Is there an unobstructed view into those offices and meeting rooms, through shatterproof glass panels in walls and/or doors? 				
F. Walkways, Corridors and Stairways				
<ul style="list-style-type: none"> Do walkways and corridors used by your Team Members have clear sight lines? 				
<ul style="list-style-type: none"> Are there alcoves or blind corners, within the areas used by your Team Members, where someone could hide? 				
<ul style="list-style-type: none"> Are convex mirrors used to eliminate blind spots in walkways and corridors used by your Team Members? 				
<ul style="list-style-type: none"> Are interior stairwells and exits used by your Team 				

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

6. Walk-through Assessment	YES	NO	NA	Notes
Members clearly marked and well lit?				
<ul style="list-style-type: none"> Is access and exit from those stairwells appropriately controlled without restricting emergency egress? 				
G. Washrooms				
<ul style="list-style-type: none"> Is public access to Team Member washrooms controlled? 				
H. Confidential Information				
<ul style="list-style-type: none"> Are confidential records and files used by your Team Members kept in locked cabinets? 				
<ul style="list-style-type: none"> Are confidential records and files used by your Team Members kept in locked rooms? 				
I. Security Systems and Security Staffing				
<ul style="list-style-type: none"> Are ID cards and keys always recovered from your Team Members upon termination or retirement? 				
<ul style="list-style-type: none"> Is immediate action always taken to cancel ID card access or change locks when cards/keys are lost or stolen? 				
<ul style="list-style-type: none"> Are door alarms used to signal when someone exits or enters through a restricted exterior door? 				
<ul style="list-style-type: none"> Is a Video Surveillance Recording System, also known as a security camera system, installed at your facility/site? 				
<ul style="list-style-type: none"> Are Video Surveillance Recording Systems and any other systems, intended to keep the site or unit/dept safe, effective based on past performance? 				
<ul style="list-style-type: none"> Is security staff coverage available at your facility/site during appropriate hours? 				
<ul style="list-style-type: none"> Can security staff respond to your unit/dept/team location within a reasonable time? 				
J. Signage				
<ul style="list-style-type: none"> Is there adequate signage outside and within the facility/site indicating that smoking is not permitted? 				
<ul style="list-style-type: none"> Is there adequate wayfinding and directional signage within the facility/site to minimize confusion and frustration? 				
<ul style="list-style-type: none"> If hours of operation and/or visiting hours apply, are there adequate signs/posters to indicate that? 				
<ul style="list-style-type: none"> If a Video Surveillance Recording System is used at your facility/site, are there adequate signs/posters to inform of that? 				
<ul style="list-style-type: none"> Are there adequate signs or posters, in public areas 				

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

6. Walk-through Assessment	YES	NO	NA	Notes
of your unit/dept/team locations, indicating that disrespectful and violent behaviours are not tolerated?				
<ul style="list-style-type: none"> Are there adequate signs or posters, in Team Member areas, indicating that disrespectful and violent behaviours are not tolerated? 				
K. Facility/site Emergency Preparedness and Response				
<ul style="list-style-type: none"> Is a duress (panic) alarm system utilized at your unit/dept/team work area? 				
<ul style="list-style-type: none"> If a duress alarm system is utilized, is it tested at least weekly with records kept? 				
<ul style="list-style-type: none"> If a duress alarm system is utilized, does it reliably provide a quick, effective alert that results in appropriate response? 				
<ul style="list-style-type: none"> Are fixed (stationary) duress alarm buttons installed in your unit/dept/team work areas? 				
<ul style="list-style-type: none"> Are wearable, personal duress alarm devices (e.g. wrist or pendent alarms) provided to your Team Members who need these devices? 				
<ul style="list-style-type: none"> If wearable, personal duress alarm devices are provided, are they consistently used by all of your affected Team Members? 				
<ul style="list-style-type: none"> If a duress alarm system is utilized in your unit/dept team work area, are affected Team Members aware of written instructions or a procedure that includes alarm use, maintenance and testing information? 				
<ul style="list-style-type: none"> Does the facility/site have a Code White response protocol? 				
<ul style="list-style-type: none"> Does the facility/site have a Code Silver protocol? 				
<ul style="list-style-type: none"> Does the facility/site have a Lockdown protocol? 				
<ul style="list-style-type: none"> If the above facility/site protocols are established, are all of your Team Members aware of the details and are all of the protocols effective? 				
L. Work in the Community				
<ul style="list-style-type: none"> Does a pre-visit assessment always occur before a Team Member enters a residence for the first time? 				
<ul style="list-style-type: none"> Are Patients (i.e. clients) sometimes transported in vehicles owned or leased by NSHA? 				
<ul style="list-style-type: none"> Are Patients (i.e. clients) sometimes transported in personal vehicles owned or leased by NSHA Team Members? 				
<ul style="list-style-type: none"> Are all affected Team Members aware of written practices and/or procedures for safe work in 				

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

6. Walk-through Assessment	YES	NO	NA	Notes
community settings?				
<ul style="list-style-type: none"> Is a special safety plan always put in place when it is determined that there is an elevated risk of violence in a community work setting? 				
<ul style="list-style-type: none"> Do all Team Members working in the community have a cell phone or other means of summoning assistance? 				
<ul style="list-style-type: none"> Do all Team members working in the community use a process for informing others of their work schedules? 				
<ul style="list-style-type: none"> Is a check-in process in place to alert others if a Team Member does not return from a community assignment by the expected time? 				

7. Assessment of Factors Affecting the Risk of Violence

Instruction: The following 13 questions lead your assessment group through the interactions, situations and activities that may expose NSHA Team Members to violence. Answer each question (yes, no, unknown) by placing an “X” in the appropriate box.

- If the answer is no to a question, then proceed to the next question. No additional information needs to be provided.
- If the answer is yes or unknown (unk) for any question, provide the additional information prompted for and then assign a risk score. Refer to Appendix A – Assigning a Risk Score. It is recommended that you print Appendix A and have it available for ready visual reference as your assessment group works through the questions.

Guidance: To check or uncheck a No, Yes or Unk box, double click before or on the check box. A window will open “Check Box Form Field Options”. Click on “checked” or “not checked”, as applicable, and then click “OK”. The box should now have an “X” in it or removed from it, as applicable.

1. Do NSHA Team Members serve the public or is the work area accessible by the public?		No <input type="checkbox"/>
		Yes <input checked="" type="checkbox"/>
		Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency:
		+ Probability:
		+ Severity:
		= Risk Score Total:
Description of the circumstances that affect the risk for violence:		

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

2. Do NSHA Team Members provide direct care to patients?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency: _____ + Probability: _____ + Severity: _____ = Risk score Total: _____
Description of the circumstances that affect the risk for violence:		
3. Do NSHA Team Members interact with persons known to be aggressive or violent?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency: _____ + Probability: _____ + Severity: _____ = Risk Score Total: _____
Description of the circumstances that affect the risk for violence: Examples: A person known to be aggressive (verbally or physically) is a good indicator that they could become physically aggressive when interacting with them. This provides an opportunity to prepare for such interactions with the individual to ensure the safety of NSHA Team Members, patients and visitors. NSHA Team Members may interact with patient family members who are known to be violent. <u>Delete</u> any example information that is <u>not</u> relevant; add additional as required.		
4. Do NSHA Team Members sometimes need to enforce rules of conduct and/or deliver news or information that would be perceived as unwanted or negative?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency: _____ + Probability: _____ + Severity: _____ = Risk Score Total: _____
Description of the circumstances that affect the risk for violence: Examples: NSHA Team Members may be required to enforce rules of conduct including: restricting patient or visitor privileges; discharging a patient from care due to non-compliant behavior; smoking/tobacco use; unacceptable behaviours (Respectful Workplace Policy); scent reduction policies; etc. Providing patients and/or family members with negative news or information, such as a difficult diagnosis or unfavourable prognosis may be met with aggressive/violent behaviours. <u>Delete</u> any example information that is <u>not</u> relevant; add additional as required.		
5. Are there situations where NSHA Team Members interact with persons impaired by alcohol or recreational drugs?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency: _____ + Probability: _____ + Severity: _____

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

	= Risk Score Total:	
<p>Description of the circumstances that affect the risk for violence: Examples: Healthcare facilities are considered public places. Due to this fact, there is always the potential for persons impaired by alcohol or drugs to enter the workplace or arrive for medical care. Not all persons using alcohol or drugs are aggressive/violent; however, this is a factor that could increase aggression or violent behaviour if not managed appropriately. <u>Delete</u> any example information that is <u>not</u> relevant; add additional as required.</p>		
6. Do NSHA Team Members handle or deliver opioids or other drugs that may be a theft risk?	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Unk <input type="checkbox"/>	
Affected NSHA Team Members:	Frequency: + Probability: + Severity: = Risk Score Total:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>Description of the circumstances that affect the risk for violence: Examples: Opioids and other controlled drugs are kept on the unit. NSHA Team Members, on occasion, may need to pick up opioids from the facility pharmacy. These drugs present a theft risk, which may expose NSHA Team Members to violence. <u>Delete</u> any example information that is <u>not</u> relevant; add additional as required.</p>		
7. Do NSHA Team Members handle cash or other items of value?	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Unk <input type="checkbox"/>	
Affected NSHA Team Members:	Frequency: + Probability: + Severity: = Risk Score Total:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>Description of the circumstances that affect the risk for violence: Examples: NSHA Team Members may handle cash as a regular part of the job. Items of value can be encountered when patients are admitted. Cash and other items of value can present a theft risk. There may be disagreements over ownership, amounts of cash or mislocated valuables. These and other similar situations may expose NSHA Team Members to violence. <u>Delete</u> any example information that is <u>not</u> relevant; add additional as required.</p>		
8. Do NSHA Team Members work in community-based settings?	No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Unk <input type="checkbox"/>	
Affected NSHA Team Members:	Frequency: + Probability: + Severity: = Risk Score Total:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>Description of the circumstances that affect the risk for violence: Examples: Working in community-based settings, away from an NSHA facility, poses unique circumstances. NSHA Team Members meet with patients in public places.</p>		
9. Do NSHA Team Members travel between work locations?	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

		Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency: + Probability: + Severity: = Risk Score Total:
Description of the circumstances that affect the risk for violence: Example: NSHA Team Members are often required to travel between work locations to attend meetings and training. Departing from or arriving at work locations in the darkness may increase the risk of violence. This risk is heightened if an NSHA Team Member is travelling alone, where no one is immediately available to respond if aggression/violence is encountered. The risks associated with the hazard of violence, while traveling between work locations, are usually low. <u>Delete</u> any example information that is <u>not</u> relevant; add additional as required.		
10. Are there times when only one NSHA Team Member is present at an NSHA site or work area, during regular days/hours or after-hours, where no one is immediately available to respond if they encounter aggression/violence?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency: + Probability: + Severity: = Risk Score Total:
Description of the circumstances that affect the risk for violence:		
11. Do NSHA Team Members work late hours of the night or early hours of the morning?		No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency: + Probability: + Severity: = Risk Score Total:
Description of the circumstances that affect the risk for violence: Examples: At a small community hospital with an Emergency Department, staffing compliment is reduced 2300 – 0700. Limited security coverage is available. Depending on the circumstances, late hours of the night or early hours of the morning can be times when criminal activity is greater and police response times are longer, etc. <u>Delete</u> any example information that is <u>not</u> relevant; add additional as required.		
12. Are there crime generators near the workplace, such as liquor stores, bars, significant loitering, or signs of vandalism?		No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Unk <input type="checkbox"/>
Affected NSHA Team Members:		Frequency: + Probability: + Severity: = Risk Score Total:
Description of the crime generators and circumstances that affect the risk for violence:		

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

13. Are there any other circumstances or situations that are specific to your unit/department that has not been taken into consideration?		No <input checked="" type="checkbox"/>
		Yes <input type="checkbox"/>
		Unk <input type="checkbox"/>
Affected Team members:	Frequency: + Probability: + Severity: = Risk Score Total:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Description of other circumstances or situations that affect the risk for violence:		

8. Requirement for a Violence Prevention Plan (VPP)

Requirement for an NSHA Violence Prevention Plan (VPP)

Low Risk: If all questions in section 7 of the VRA score in the Low Risk range (3, 4, 5, 6), the Basic NSHA Violence Prevention Plan (VPP) is usually adequate.*

Medium Risk: If one question or more in section 7 of the VRA scores in the Medium Risk range, the Manager/delegate must prepare a Customized NSHA Violence Prevention Plan (VPP) to supplement the Basic VPP.

High Risk: If one question or more in section 7 of the VRA scores in the High Risk range, the Manager/delegate must prepare a Customized NSHA Violence Prevention Plan (VPP) to supplement the Basic VPP.

*The Manager/delegate of a Low Risk unit/dept team may decide, in consultation with their assessment group, to supplement the Basic VPP by completing a Customized VPP.

Instruction: Check the appropriate box, below:

The Basic NSHA Violence Prevention Plan (VPP) is adequate. **Complete steps 9 and 10 of this VRA template now.**

OR

A Customized NSHA Violence Prevention Plan (VPP) must be prepared, to supplement the Basic VPP. **Proceed, with your assessment group, to prepare a customized VPP before completing steps 9 and 10 of this VRA template.**

9. VRA Preparation Details

Date Prepared:
MM/DD/YYYY

Prepared/Reviewed by (Manager or delegate):

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

Members of the assessment group who participated in preparation of this VRA template

Point of Care/Service Team Members

Names:

Supervisor:

Names:

10. JOHSC or OHS Representative Feedback

NS Violence in the Workplace Regulations require that you must consult with the appropriate facility/site Joint Occupational Health and Safety Committee (JOHSC) or OHS Representative (for sites with 5-19 NSHA Employees) before finalizing this VRA Template and, where required, your Customized VPP.

Instructions: Email your completed VRA and, where required, your Customized VPP to the appropriate address below. Retain copies for your own records. See additional instructions, below.

- Central Zone: CZ.WPViolence@nshealth.ca
- Eastern Zone: EZ.WPViolence@nshealth.ca
- Northern Zone: NZ.WPViolence@nshealth.ca
- Western Zone: WZ.WPViolence@nshealth.ca

Your Zone NSHA OHSW Team will:

- a. review your completed VRA/VPP documents, identifying any necessary corrections for your attention before proceeding;
- b. distribute your VRA/VPP documents to the appropriate JOHSC or OHS Representative for review and feedback; the JOHSC or OHS Representative may request that you or a delegate attend a meeting to help facilitate an effective review;
- c. email you the completed JOHSC or OHS Representative VRA/VPP Feedback Form for your review and consideration. The Feedback Form may or may not include recommendations.

11. Finalizing Your VRA and, Where Required, Your Customized VPP

If no recommendations are provided on the JOHSC or OHS Representative VRA/VPP Feedback Form, you have successfully completed the submission process.

Final Instructions:

- Familiarize your NSHA Team Members with the finalized VRA and VPP (Basic or Basic + Customized, depending on your VRA risk scores) and ensure that they are aware of the risks of violence and the controls to be used.
- Follow up to ensure that all actions required to implement the controls identified in your Customized VPP, if required, are completed.

If recommendations are provided on the JOHSC or OHS Representative VRA/VPP Feedback Form:

NSHA VIOLENCE RISK ASSESSMENT TEMPLATE

Instructions: Upon receiving a completed Feedback Form with recommendations, review the recommendations with your assessment group. Make revisions or not, as agreed upon by the assessment group. In some cases, it is possible that the JOHSC or OHS Representative may recommend that the VRA risk scores be adjusted from Low to Medium or High. This would require development of a Customized VPP. If that situation occurs, complete and submit a Customized VPP for review.

Check the appropriate box, below:

The VRA and/or, if required, the Customized VPP were not revised after considering the JOHSC/OHS Representative recommendations.

OR

The VRA and/or, if required, the Customized VPP were revised after considering JOHSC/OHS Representative recommendations.

Final Instructions:

- If the VRA and/or, if required, the Customized VPP were revised, email the finalized copies to the appropriate zone address provided in section 10, above. Identify, in the file name, that it is a final revision.
- Provide the finalized VRA and VPP (Basic or Customized, depending on your VRA scores) to your NSHA Team Members. Educate them on the violence risks and the controls to be used.
- Follow-up to ensure that all actions required to improve controls and reduce risk are completed.

----- End of Template -----

Appendix A – Assigning a Risk Score

Assigning a score to each of the factors affecting the risk of violence in section 7 of the Violence Risk Assessment (VRA) is an important way to help determine how serious each factor is and which one(s) require additional controls to improve safety. A risk score is established by taking into account the frequency of exposure to violence, the probability of harm and the severity of harm.

- **Frequency of Exposure** – for each factor in section 7 of the VRA, how frequently are NSHA Team Members exposed to violence?
- **Probability of Harm** – when NSHA Team Members are exposed to this violence, what is the reasonable probability, or likelihood, that they would experience harm?
- **Severity of Harm** – if NSHA Team Members experience harm from this violence, how severe would it be? What is the most likely, reasonably possible outcome or consequence?

Frequency of Exposure - how frequently are NSHA Team Members exposed to violence?		
Score	Frequency	Descriptor
5	Daily	Violent events could occur daily.
4	Weekly	Violent events could occur approximately every 1 - 3 weeks.
3	Monthly	Violent events could occur every 1 – 3 months.
2	Yearly	Violent events could occur 1 – 3 times per year.
1	Rarely	A violent event has not occurred in the last year.

Probability of Harm - what is the probability that harm from violence will be experienced?		
Score	Probability	Descriptor
5	Almost Certain	Given the current controls, harm is almost certain.
4	Likely	Given the current controls, harm is likely.
3	Possible	Given the current controls, harm is possible.
2	Unlikely	Given the current controls, harm is unlikely.
1	Highly unlikely/not possible	Given the current controls, harm is highly unlikely.

Severity of Harm – if harm from violence is experienced, how severe would it be?		
Score	Severity	Characteristic
5	Catastrophic	Violence would likely result in loss of life or harm that could prove to be fatal or permanently disabling.
4	Critical	Violence would likely result in critical harm requiring emergency care. Significant temporary disability and lost time from work would likely result.
3	Serious	Violence would likely result in serious harm requiring emergency care. Temporary disability and lost time from work would likely result.
2	Minor	Violence would likely result in minor, non-disabling harm.
1	No Harm	Violence would likely result in no harm.

Appendix A – Assigning a Risk Score

Instructions: For each of the 13 questions in section 7 of the VRA, the assessment group will review the information about NSHA Team Members affected and the description of the circumstances that affect the risk for violence. Then, for each question, discuss and assign the appropriate numerical values for Frequency, Probability and Severity. Add those values to obtain the Risk Score Total. Record the Risk Score Total for each question.

For each of the 13 questions, determine if the Risk Score Total places that question in the Low, Medium or High Risk category, as indicated in the table below:

	Low Risk		Medium Risk (significant)		High Risk (significant and unacceptable)
	Risk Score Total is 3-6		Risk Score Total is 7-12		Risk Score Total is 13-15

Low Risk (3, 4, 5, 6): Risk is considered acceptable. No further action or additional controls, beyond a basic level, are necessary. Any actions to further reduce these risks are assigned a low priority. Regular monitoring should be performed to ensure that the controls are maintained and continue to be effective.

Medium Risk (7, 8, 9, 10, 11, 12): Risk is significant. Whenever reasonable, improvements are required to reduce the risk to a more acceptable level.

High Risk (13, 14, 15): Risk is significant and unacceptable. Improvements in risk control measures are urgently required to reduce the risk to a more acceptable level. Risk reduction measures should be implemented immediately and it may be necessary to consider suspending or restricting the activity at least until short-term controls are implemented.

Requirement for an NSHA Violence Prevention Plan (VPP)

Low Risk: If all questions in section 7 of the VRA score in the Low Risk range (3, 4, 5, 6), the Basic NSHA Violence Prevention Plan (VPP) is usually adequate.*

Medium Risk: If one question or more in section 7 of the VRA scores in the Medium Risk range, the Manager/delegate must prepare a Customized NSHA Violence Prevention Plan (VPP) to supplement the Basic VPP.

High Risk: If one question or more in section 7 of the VRA scores in the High Risk range, the Manager/delegate must prepare a Customized NSHA Violence Prevention Plan (VPP) to supplement the Basic VPP.

*The Manager/delegate of a Low Risk unit/dept team may decide, in consultation with their assessment group, to supplement the Basic VPP by completing a Customized VPP.