WORKPLACE VIOLENCE PREVENTION CHECKLIST

PURPOSE

Workers in health care facilities face significant risks of workplace violence. This Health care Checklist is designed as a prevention tool to enable health care and community care facilities to adopt leading practices when establishing systems and practices to prevent workplace violence.

Health facilities are required to comply with the workplace violence provisions as set out under the *Occupational Health and Safety Act (OHSA)* and the regulation respecting *Health Care and Residential Facilities*, where applicable. This tool is intended to be used in addition to the Act and other existing tools such as the Violence, Aggression and Responsive Behaviours (VARB) tools available on the Public Services Health and Safety Association (PSHSA) website at www.pshsa.ca/workplace-violence. This checklist serves as a mechanism through which the health sector can implement a standard of practice which goes beyond compliance and brings Ontario's health sector in alignment with industry best practices when dealing with the prevention of workplace violence.

RATIONALE

In the literature¹, action plans to prevent violence in the workplace have tended to include five (5) key focus areas, namely:

- Leadership Support and Worker Participation: The commitment of leadership to the
 prevention of workplace violence provides the motivation and resources for workers and
 employers to become involved in and prioritize the successful implementation of a workplace
 violence prevention program.
- 2. Hazard Identification and Risk Assessment: Risk assessment is necessary to identify the specific risks of exposure to violence in particular work settings, considering the type of work being done and the physical environment; to recognize potential risks of violence previously identified in similar work settings; and to put in place controls to prevent and minimize, to the extent possible, the occurrence of workplace violence. Participation of workers, unions, and the JHSC along with employers in identifying and assessing risks in the workplace is a benchmark of a successful violence prevention program.
- 3. **Risk Mitigation, Hazard Prevention and Controls:** The risk assessment should serve to pinpoint appropriate steps that can be taken to address the identified risks. Risk mitigation

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¹ OSHA (2015). Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers. https://www.osha.gov/Publications/osha3148.pdf.; CDC (2004). Workplace Violence Prevention Strategies and Research Needs. https://www.cdc.gov/niosh/docs/2006-144/pdfs/2006-144.pdf.; HROntario (June 2010). Workplace Violence Prevention Program: Guide to Conducting Workplace Violence Risk Assessments.

strategies could include implementing controls that eliminate or reduce the risks of violence, modifying environmental design and physical layout of the unit/facility; and developing and maintaining administrative and work practice controls. Risk mitigation strategies should also include mechanisms where organizations learn from past incidents in order to protect workers from future workplace violence incidents.

- 4. Education and Training: Education and training ensure that all staff members are aware of potential hazards. In addition, it helps to increase their awareness and competence about how to protect themselves and co-workers through established policies, measures, and procedures. Education and training should be established in a manner that adequately protects all staff against common risks, while recognizing that certain environments and roles require increased specificity in workplace violence training for certain segments of the worker population.
- 5. Performance Reporting (Key Performance Indicators) and Evaluation: The tracking and analysis of established/standardized key performance indicators provides a basis for assessing an organization's strengths and weaknesses in addressing risks associated with workplace violence. These results can provide key learnings to create action plans to address persistent areas of concern. Maintaining a repository of data which contains workplace violence key performance indicators ensures that workplace violence programs can be evaluated, which is essential in demonstrating an organization's commitment to continuous improvement, transparency and accountability in the prevention of workplace violence.

This tool consists of two parts:

Part I: Program Assessment Checklist

The checklist below sets out a number of criteria under each of the aforementioned focus areas to serve as a best practice guide for health care facilities committed to preventing harm to health care workers resulting from workplace violence.

Part II: Proposed Action Plan

The Action Plan Template is included in this tool so organizations can formulate next steps in order to bring existing workplace violence prevention policies and procedures into alignment with leading practices. The proposed actions would be founded upon the gaps identified through the Program Assessment Checklist in Part I.

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Part I: Program Assessment Checklist

1. Leadership Support and Worker Participation									
Criterion		eets Re	equiremer	nts	Action Required	Explanation			
Citterion	Yes	No	Partial	N/A	(Yes/No)	Explanation			
 Our CEO is personally accountable, leads and champions workplace violence prevention initiatives 									
 Our organizational culture focuses on prevention of workplace violence: Included in strategic plan, vision, mission statements, policies, procedures, contracts, mandates, action plans, and safety plans Utilization of leading practice strategies such as PSHSA VARB tools and promising practices in use at other health care facilities 									
3. Our organization has identified representatives amongst executives, managers, supervisors and workers who are responsible and accountable to the CEO for championing, implementing and monitoring workplace violence prevention initiatives									
4. Our organization has established a crisis management/chain of command team and their roles and responsibilities are clearly outlined in a procedure (who responds first, who are first complaints reported to, who is next in line to receive the complaint if that									

1. Leadership Support and Worker Participation										
Criterion	Me	eets Re	equiremer	nts	Action Required	Explanation				
	Yes	No	Partial	N/A	(Yes/No)	Ελβιαπατίστ				
individual is not available or does not act upon the complaint)										
 5. Management demonstrates commitment to the health and safety of workers and patients/clients by: prioritizing its discussion in meetings enacting risk mitigation strategies 										
6. The organization has a documented workplace violence prevention policy and program (Sample Workplace Violence Policy & Examples of Measures and Procedures for Workplace Violence Programs, including all sample measures from the toolkit)										
7. The organization's workplace violence prevention policy and program includes procedures, practices, and training and education requirements pertaining to identifying, reporting, and addressing domestic violence, abuse, and/or harassment as it relates to the workplace										
8. Our organization has an adequate number of security guards trained in use of force on all shifts who can intervene to protect workers and patients from workplace violence										

1. Leadership Support and Worker Participation											
Criterion		ets Re	quireme		Action Required	Explanation					
	Yes	No	Partial	N/A	(Yes/No)	Explanation					
 9. Our organization makes all persons entering the hospital aware that workplace violence will not be tolerated. Our organization: holds all perpetrators of workplace violence accountable for their actions has resources for patients and families to encourage them to participate in workplace violence prevention implements organizational plans to increase awareness of the organization's and public's accountability and responsibility for adopting leading practices in workplace violence prevention 											
10. Our organization includes workers (including point-of-care workers) and the Joint Health and Safety Committee (JHSC) or Health and Safety Representative (HSR) to champion workplace violence prevention initiatives within the organization, including in the development, implementation, evaluation of workplace policies and programs											
11. Our organization implements appropriate recommendations generated from workers and the JHSC/HSR											

1. Leadership Support and Worker Participation										
Criterion			quireme		Action Required	Explanation				
	Yes	No	Partial	N/A	(Yes/No)					
12. All employers, supervisors, practice leaders, and workers are aware that they may report a concern about workplace violence, including domestic violence.										
13. All employers, supervisors, practice leaders, and workers are aware that they must report witnessed workplace violence, including domestic violence.										
14. Workers are aware of who to report incidents to (including who is next in line to receive the complaint if that individual is not available or does not act) and how they will be investigated										
15. Our organization demonstrates how they welcome and value reporting										
16. The reporting and investigation of complaint process takes into account confidentiality, where possible										
17. Our organization ensures that there are no obstacles or penalties for workers that report injuries or concerns										
18. Our organization has a procedure that outlines the employer's reporting obligations to WSIB, MOL, JHSC or HSR and the union										

1. Leadership Support and Worker Participation

Criterion		ets Re	equireme	nts	Action Required	Evalenation
Citterion	Yes	No	Partial	N/A	(Yes/No)	Explanation
19. Our organization responds to all reports of workplace violence, whether verbally or in writing						
20. Our organization requires that leadership review incidents of workplace violence, do a root cause analysis, and implement an action plan to reduce incidents of workplace violence, including improving the WV prevention policy, program, measures and procedures.						
21. Our organization informs all affected staff of any measures and procedures taken (or to be taken) to resolve issues identified in the investigation and the timelines they should expect for these problems to be resolved						
22. Our organization develops and implements safety plans that articulate what measures are in place for workers who are victims of domestic and/or workplace violence.						
23. Our organization enables workers to obtain post-incident care including: debriefing, counselling and referral to/facilitation of care						

2. Hazard Identification and Risk Assessment										
Criterion		eets Re	equiremer	nts	Action Required	Explanation				
	Yes	No	Partial	N/A	(Yes/No)	∟∧ριαπαιίσπ				
 1. Our organization has appointed a lead for the workplace violence risk assessment process. They are responsible for ensuring that: a risk assessment process is put in place risk assessments are conducted control measures are implemented and maintained 										
Our organization conducts a pre-risk survey of the workers prior to conducting a risk assessment										
 3. Our organization conducts risk assessments to determine the risk of workplace violence associated with: nature of the workplace type of work patient population patient acuity conditions of work/work flow communication (please consult the PSHSA Workplace Violence Risk Assessment Tool) 										

2. Hazard Identification and Risk Assessment										
Criterion	Ме	ets Re	quireme	nts	Action Required	Explanation				
	Yes	No	Partial	N/A	(Yes/No)	Explanation				
4. Our risk assessments include an analysis of:										
incidents										
accidents										
 near misses 										
 code white calls 										
security reports										
staff reports/discussions										
5. Our organization has a process to identify										
and address any gaps in skill sets and core										
competencies within the team related to workplace violence prevention.										
Our risk assessments are conducted in										
consultation with the JHSC or HSR,										
occupational health & safety team, clinical										
staff, and other relevant parties to assess										
the risk of workplace violence.										
7. Our organization reports the findings of risk										
assessments to the JHSC, and provides the										
committee with a copy if the assessment is										
in writing										
8. Our organization has established a protocol										
to determine when a re-assessment of risk is										
required Our organization conducts to assessments										
Our organization conducts re-assessments of risk as often as necessary to ensure that										
the policy and program continue to protect										
workers from workplace violence										

	3. Risk Mitigation, Hazard Prevention and Controls									
	Criterion	Ме	ets Re	quireme	nts	Action Required	Explanation			
		Yes	No	Partial	N/A	(Yes/No)				
1.	Our organization has established processes to control and/or eliminate, where possible, risks identified through the risk assessment. (See Risk Assessment Tool for more details of the assessment of environmental design)									
2.	Our organization has put into place environmental design measures to eliminate hazards which could lead to workplace violence incidents (See PSHSA Workplace Violence Risk Assessment Tool for more detailed assessment of environmental design, VARB tools)									
3.	Our organization has established measures and procedures to complete regular reviews and updates of risk assessment measures and procedures									
4.	Our organization implements measures and procedures to control the gaps identified in root cause investigations of hazards, near misses, accidents, and illnesses									
5.	Our organization involves frontline staff in the designing of controls and solutions to address workplace violence									

3. Risk Mitigation, Hazard Prevention and Controls										
Criterion	Me	Meets Requirements		Action Required	Explanation					
	Yes	No	Partial	N/A	(Yes/No)					
6. Our organization consults with the JHSC or HSR to solicit input on ways to reduce risks for workplace violence, improve workplace violence prevention procedures and policies, and prevent future occurrences of workplace violence										
 7. Our organization utilizes measures to prevent future occurrences of workplace violence such as: Using personal alarms Having security guards or security-trained staff immediately available Implementation of environmental/physical plant safety measures (e.g., cameras, mirrors, lighting, visibility/sight lines) 										
8. Our organization has an electronic and visual flagging system where a patient's history of violence, triggers, potential negative behaviours, and safety measures for patients and workers is permanently tracked (unless removed due to a successful appeal)										

3. Risk Mitigation, Hazard Prevention and Controls										
Criterion	Ме	Meets Requirements		Action Required	Explanation					
	Yes	No	Partial	N/A	(Yes/No)					
9. Our organization provides information (including personal health information) necessary to protect workers from the risk of violence committed by a person with a history of violent behavior (including during escorts/transfer, upon readmission) and mitigate risk										
 10. Our organization encourages safe work practices such as: reviewing patient profiles before meeting with the patient communicating relevant safety-related information at high risk times (e.g., shift changes, escorts, on transfer) 										
11. Our organization establishes safety plans (ideally on admission) for individuals identified as a risk for workplace violence which includes communication of information and instruction about managing a person with history of violent behaviour, security assistance, triggers, coping strategies, and preferred interventions. Safety plans should be communicated and understood by all staff who have contact with the high-risk patient.										

3. Risk Mitigation, Hazard Prevention and Controls										
Criterion	Me	ets Re	quireme	nts	Action Required	Explanation				
	Yes	No	Partial	N/A	(Yes/No)					
 12. Our organization has established mechanisms whereby workers can signal for help and summon immediate assistance in the event of a workplace violence incident, including using: personal panic alarms with GPS, two-way voice activation and linked to security noise makers code buttons telephones cameras in high-risk areas availability of workers such as security trained in emergency response and workplace violence prevention 										

4. Education and Training									
Criterion		ets Re	quireme	nts	Action Required	Explanation			
Citterion	Yes	No	Partial	N/A	(Yes/No)	Explanation			
 1. Our organization provides instruction on the contents of the workplace violence policy and program, including: managing high-risk patients summoning for immediate assistance how to report incidents of workplace violence how the employer will deal with and investigate incidents, complaints and threats 									
2. Our organization provides training to workers and all levels of management related to violence committed by patients (including those with a history of violence), visitors, staff, and others. This training should include a practical component.									

4. Education and Training						
Criterion	Meets Requirements				Action Required	Explanation
Onterion		No	Partial	N/A	(Yes/No)	Explanation
 3. Our organization has established specialized education and training for workers in jobs with a higher risk of violence (if applicable), including: predictive factors for aggression and violence verbal and physical methods to diffuse, de-escalate, or avoid aggressive behavior techniques for responding to violent individuals response options in the event of a physical attack (e.g., break-free, blocks, take down procedures, restraint application, and other self-defense techniques) management of violent disturbances the emergency response plan including: codes, workplace organization, handling of disturbed persons, risk assessments in place 						
 Our organization ensures everyone who carries out work (including contract work and transfers/escorts) in the workplace receives training on workplace violence prevention appropriate for their work. 						

4. Education and Training						
Criterion	Meets Requirements			nts	Action Required Evalenation	Explanation
Citterion		No	Partial	N/A	(Yes/No)	Explanation
 Our organization trains workers on all of its workplace violence measures and procedures that are relevant to their work (refer to Training Matrix developed by the WV Leadership Table) 						
 Our organization requires workers and management to participate in all workplace violence prevention training 						
7. Our organization has trained employers, supervisors, practice leaders, and workers to identify and report signs of abuse and domestic violence						
8. Our organization has trained employers, supervisors, practice leaders, and workers to respond appropriately to workers who are the victims and perpetrators of domestic and other forms of violence						
 Our organization ensures that workplace violence related training is developed, established and provided in consultation with JHSC/HSR 						
10. Our organization requires re-training on an as needed basis and this retraining includes a practical component						

5. Performance Reporting (Key Performance Indicators) and Evaluation							
Criterion	Meets Requirements		Action Required	Explanation			
	Yes	No	Partial	N/A	(Yes/No)		
Our organization includes workplace violence prevention in the Quality Improvement Plan(s)							
 2. Our organization tracks and analyzes key performance indicators regarding workplace violence including the number of: Violence incidents Near misses Security calls Code white calls (both those resulting in injuries and those not leading to injuries) Incidents resulting in the use of force (physical contact) Risk factors identified that are associated with incidents or near misses Patients with a history of violent behavior flagged (visually) along with their triggers, behaviours, and safety measures to protect patients and workers Risk assessments conducted (please refer to suggested indictors from the Workplace Violence Prevention in Health care Leadership Table) 							

5. Performance Reporting (Key Performance Indicators) and Evaluation						
Criterion		ets Re	quireme	nts	Action Required	Explanation
	Yes	No	Partial	N/A	(Yes/No)	
Our organization uses standardized metrics to capture incidents and near misses						
 Our organization conducts post-incident investigations to assist in determining the root cause of the incident, with reporting back to the worker involved 						
 Our organization reports all incident data to the leadership team/senior management, JHSC, and makes this data available to all workers 						
6. Our organization has established a cyclical review process, in consultation with the JHSC, to evaluate the validity and efficacy of workplace violence policies, measures						
7. Our organization assesses our key performance indicators, and conducts an annual evaluation of the efficacy of our existing workplace violence policies, measures, and procedures						
8. Our organization meets program objectives and identifies trends in workplace violence incidents to assist the employer with revising policies, measures, and procedures to address concerns						

Part II: Proposed Action Plan

For each section of Part I where the organization has identified a need to improvement (i.e. a 'Yes' has been inserted in the 'Action Required' column), suggest actions to be taken for each focus area in the tables below.

1. Leadership Support and	Worker Participation		
Gap Identified	Action Step(s) Required	Person/Department Responsible	Review/Completion Date
1.			
2.			
3.			
4.			
5.			
2. Hazard Identification and	d Risk Assessment		
Gap Identified	Action Step(s) Required	Person/Department Responsible	Review/Completion Date
1.			
2.			
3.			
4.			
5.			

3. Risk Mitigation, Hazard F	Prevention and Controls		
Gap Identified	Action Step(s) Required	Person/Department Responsible	Review/Completion Date
1.			
2.			
3.			
4.			
5.			
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4. Education and Training			
Gap Identified	Action Step(s) Required	Person/Department Responsible	Review/Completion Date
1.			
2.			
3.			
4.			
5.			

5. Performance Reporting (Key Performance Indicators) and Evaluation — Proposed Action Plan							
Gap Identified	Action Step(s) Required	Person/Department Responsible	Review/Completion Date				
1.							
2.							
3.							
4.							
5.							