

# Violence Prevention Inspection Checklist

This checklist helps the clinic prevent workplace violence by identifying areas that may need further action.

| General information         |                             |   |  |
|-----------------------------|-----------------------------|---|--|
| Clinic name:                |                             |   |  |
| Clinic address:             |                             |   |  |
| Inspection date:            |                             |   |  |
| Clinic locations inspected: | Reception and waiting areas | Offices, exam, and treatment rooms                |  |
|                             | Washrooms and staff areas   | Outside areas, including grounds and parking lots |  |

## PART A – WORKPLACE INSPECTION

Items marked \* are mandatory as per the British Columbia Occupational Health and Safety Regulation.

| Access and Controls  | Yes | No | N/A |
|--|-----|----|-----|
| Access to work areas is controlled (e.g., locked doors, buzzers) and restricted after hours.   |     |    |     |
| The clinic is laid out to clearly separate staff work areas from patient/public areas.   |     |    |     |
| The work area allows staff to quickly remove themselves from situations if they are being targeted or threatened (i.e., secure offices, safe room with locking door, access/egress clear). |     |    |     |
| Counters and desks provide an adequate barrier against threatening behaviour in the reception area.  |     |    |     |
| Access to staff-only rooms is controlled by locked doors.  |     |    |     |
| Exam and treatment rooms are equipped to ensure assistance can be obtained if needed (e.g., duress alarm system, phones, or control panel to alert co-workers of a violent incident).      |     |    |     |
| Exam and treatment rooms are arranged with furniture positioned to ensure visibility and enhance staff safety.   |     |    |     |
| Counter/desk provides an adequate barrier between staff and the public in exam and treatment rooms.  |     |    |     |
| There is an emergency exit door available for use in case of emergencies.  |     |    |     |
| Worksite Environment   | Yes | No | N/A |
| Lighting is appropriate for all indoor areas, facility grounds, and parking lots.  |     |    |     |
| The immediate outside area is free from signs of vandalism, drug paraphernalia, alcohol, and cannabis establishments.  |     |    |     |

| Security and Safety Measures   | Yes | No | N/A |
|--|-----|----|-----|
| Emergency response phone numbers are posted by the phone.  |     |    |     |
| Staff wear identification where appropriate.   |     |    |     |
| Staff are instructed on the appropriate response to incidents of violence at the clinic.   |     |    |     |
| Duress systems, if available, are routinely tested to ensure operational.  |     |    |     |
| Potentially dangerous materials, equipment, and sharps are out of sight or secured.  |     |    |     |
| Violence prevention signage is appropriately placed in the clinic.   |     |    |     |
| Restricted access areas are clearly labelled.  |     |    |     |
| Staff-only rooms have a peephole or another method to view the area outside the door.  |     |    |     |
| Unoccupied rooms have their doors shut and/or locked.  |     |    |     |
| Working Alone  | Yes | No | N/A |
| *The intervals for checking staff members' wellbeing are developed in consultation with the staff assigned to work alone.                      |     |    |     |
| *Working Alone procedures include a procedure to follow if staff cannot be contacted.  |     |    |     |
| Staff who work alone or in isolation have a system in place to get immediate assistance if needed.   |     |    |     |
| The system in place to get immediate assistance is routinely tested.   |     |    |     |
| Washrooms  | Yes | No | N/A |
| Staff washrooms are secured with locked doors.   |     |    |     |
| Access to public washrooms is controlled or visually monitored.  |     |    |     |
| Process and Procedures   | Yes | No | N/A |
| *Violence prevention safe work procedures are in written form and available to staff.  |     |    |     |
| *Violent incident investigations are completed without delay and minimize risks for further incidents.   |     |    |     |
| *Staff receive appropriate violence prevention training, and training is tracked by the employer.  |     |    |     |
| *Staff know how to report a violent incident in the clinic.  |     |    |     |
| *Criteria for reporting violence incidents (injury, near miss, threatening statements or gestures, abusive behaviours) is understood by staff. |     |    |     |


 CONTINUE

|  |  |  |  |
|--|--|--|--|
| *Violence prevention policies, safe work practices, and universal precautions are included in the orientation process for new and returning employees. |  |  |  |
| *A Violence Risk Assessment and Working Alone Procedures have been completed/or reviewed within the last year.   |  |  |  |
| Staff involved in violent incidents receive prompt post-incident support.  |  |  |  |

| Additional comments |
|---------------------|
|                     |

**PART B – RECOMMENDATIONS**

| Item # | Corrective action | Assigned to | Completion date |
|--------|-------------------|-------------|-----------------|
|        |                   |             |                 |
|        |                   |             |                 |
|        |                   |             |                 |
|        |                   |             |                 |
|        |                   |             |                 |
|        |                   |             |                 |
|        |                   |             |                 |

CONTINUE

**PART B – SIGN OFF****Inspection completion:**

|                                   |  |                 |
|-----------------------------------|--|-----------------|
| Inspected by:<br>(name, position) |  |                 |
| Signature:                        |  | Date completed: |
| Inspected by:<br>(name, position) |  |                 |
| Signature:                        |  | Date completed: |

**Employer review:**

|                                  |  |                |
|----------------------------------|--|----------------|
| Reviewed by:<br>(name, position) |  |                |
| Signature:                       |  | Date reviewed: |

In community physician practices, inspections are typically conducted by the office manager (employer representative). If the clinic has a worker representative or a joint occupational health and safety committee, they should also participate.

After Parts A (Inspection) and B (Recommendations) are completed, inspector(s) sign Part C and submit it to the employer. The employer reviews findings and tracks corrective actions.