Violence Prevention Clinic Inspection

Clinic name:				
Clinic address:				
Area inspected:	Office	Clinic rooms	Date:	DD / MM / YYYY
nicu inspecteur	Outside areas including grounds and parkings lot(s)	Storage and staff areas	Time:	HH:MM

PART A – INSPECTION

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 for 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).			
The reception area is set up to allow for good visibility of people arriving and exiting.			
Counters and desks provide an adequate barrier against threatening behaviour in the reception area.			
Access to exam and treatment 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 a 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.			
A clinic protocol exists to direct team response if violence occurs.			
Duress systems, if available, are routinely tested to ensure operational.			







PART A – INSPECTION CONTINUED

Security and safety measures continued	Yes	No	N/A
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 labeled.			
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
Staff who work alone or in isolation have a system in place to call for assistance if needed.			
The system in place to call for assistance is routinely tested.			
The intervals for checking staff member's 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.			
Washrooms	Yes	No	N/A
Staff washrooms are secured with locked doors.			
Public access to washrooms is controlled or visually monitored.			
Process and procedures		Yes	No
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 involved in violent incidents receive prompt post-incident support.			
Staff know how to report a violent incident in the clinic.			
Criteria for reporting violence (injury, near miss, threatening statements or gestures, abusive behaviours) is unders by staff.	tood		
Violence prevention policies, safe work practices, and universal precautions are included in the orientation process new and returning employees.	for		
A Violence Risk Assessment has been completed/or reviewed within the last three years.			

Comments:

PART B – RECOMMENDATIONS

Item	Corrective action	Assigned to	Status

PART C – SIGN OFF Inspected by:

Full name (please print):	Signature:	Date:
		DD / MM / YYYY
		DD / MM / YYYY

Employer review:

Full name (please print):	Signature:	Date:
		DD / MM / YYYY

The clinic will maintain a copy of this inspection for three (3) years. Physician employers must determine the appropriate time interval necessary to prevent the development of unsafe working conditions. In some clinics this could be monthly, or quarterly for others. Workers must report any unsafe conditions or acts to the person-in-charge as soon as possible. Unsafe conditions and acts must be investigated by the employer and remedied without delay. If a worker representative or joint occupational health and safety committee is required, the violence prevention workplace inspection should include these individuals.

This will require asking workers questions, observing techniques, and watching the use of equipment and materials. Do not try to imitate acts or conditions.