

# Violence Risk Assessment

A violence risk assessment must be conducted in any workplace where there is potential for violence.

<b>Clinic name:</b>			
<b>Completed by (name, position):</b>		<b>Assessment date:</b>	
<b>Employer review (signature):</b>		<b>Date reviewed:</b>	

## About violence risk assessment

The violence risk assessment should evaluate the likelihood of violent incidents in the clinic and the potential physical or psychological harm that could result. To ensure a thorough evaluation, it is crucial to:

- Gather input from all staff regarding their experiences with workplace violence and their perceptions of the risk.
- Consider the number and type of past incidents over the past 3 years to evaluate the likelihood and nature of violence, as well as known violent incidents at similar or nearby businesses (e.g., medical clinics, pharmacy).
- Update the risk assessment when there is a change in operations such as a renovation of the workspace, moving to a new location, and change in patient population (e.g., walk-in/episodic vs. longitudinal care).

### Step 1: Severity potential

Assess the potential severity of violent incidents in your clinic. Consider the possible physical or psychological consequences and their impact on the affected person. Evaluate both what could reasonably happen and the actual outcomes of any past incidents that occurred.

Severity rating	Description
High	Serious physical injury or death. Severe psychological injury (e.g., post-traumatic stress disorder).
Medium	Physical or psychological injury requiring treatment beyond first aid.
Low	Minimal physical or psychological injuries.

### Step 2: Probability

Determine the likelihood of a violent incident occurring in your clinic. Factors contributing to the risk of violence in healthcare workplaces include patient/client characteristics, worker interactions, workplace layout, processes, and systems. Look at the descriptions to the right and choose the most suitable.

Probability rating	Description
High	Likely to be experienced more than once a year.
Medium	May be experienced once every three to five years.
Low	May occur once during a working lifetime.

### Step 3: Workplace violence risk rating matrix

Select the correct row (horizontal), then select the correct column (vertical). Circle where the two cross. That is your risk rating.

**NOTE:** The numbering classification in the risk matrix is used to prioritize the levels of risk (see table below). The higher the level of risk, the sooner action is required to address the issue.

Severity	Probability		
	High	Medium	Low
High	9	8	6
Medium	7	5	3
Low	4	2	1

**Step 4: Corrective Actions**

Once the level of risk has been identified, use the chart on the side to determine the priority levels and the suggested time frame for implementing the corrective actions.

Risk level	Score	Description
High	8 to 9	Task involves significant risk for workplace violence.
Medium	3 to 7	Task poses some risk for workplace violence.
Low	1 to 2	Task is generally safe, with minimal risk of workplace violence.

Corrective Actions	High (without delay)	Medium (in a timely manner)	Low (no urgency)
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**Examples of tasks that have the potential for workplace violence**

Assessing	Mobilizing
Meeting patients in person for the first time	Assisting patients
Taking vital signs	Turning or boosting patients
Triaging patients	Transferring patients from chair to exam table
Questioning patients regarding harmful objects or weapons	Supporting patients from sitting to standing
Conducting patient intake interview and initial history	Direct contact
Assessing patients with communication challenges	Providing dressing assistance
Providing mental health assessment	Enforcing clinic policies
Treating	Calling for assistance
Physical examination of patient	Responding to a violent incident without formal procedure
Providing wound care	Calling police to respond to a violent incident
Providing medical treatment	Working alone or in isolation
Enforcing clinic policies	Working outside of regular clinic hours
Treating patients with communication challenges	Working outside the clinic
Providing mental health certification for patients	Interacting with family
Medications	Providing directions to family members, or sharing information about a patient's condition, or delivering other sensitive information, with:
Engaging with patients requesting medication	<ul style="list-style-type: none"> <li>No patient present</li> <li>Patient present</li> <li>Family members present during patient care</li> <li>Infant/child present</li> </ul>
Delivering medications to a patient	
Administering medications (injections)	
Engaging with patients about medication limits	
Other:	



### Violence Risk Assessment

TASK	CONTEXT OF RISK	NUMERICAL RISK RATING	EXISTING CONTROLS	RECOMMENDED ADDITIONAL CONTROLS	REVISED RISK RATING
<b>Instructions</b>					
Add each task at risk to be assessed	What about the task that presents a risk of violence?	Risk rating before controls (use matrix)	What is currently in place to mitigate the risk of violence?	What is needed to reduce risk?	Risk rating after controls (use matrix)
<b>Example</b>					
<i>Non-patient seeking a family doctor</i>	<i>Person may become frustrated or aggressive if the doctor's patient panel is full</i>	<b>5 (Medium)</b>	<i>Clearly communicating patient intake policy</i>	<i>A) Training staff in de-escalation techniques B) Refer other clinics we know are accepting new patients</i>	<b>2 (Low)</b>
<b>1.</b>					
<b>2.</b>					
<b>3.</b>					
<b>4.</b>					

**CONTINUE**

### Violence Risk Assessment (continued)

5.					
6.					
7.					
8.					
9.					
10.					

SAVE / PRINT