

Background

This tool was originally developed for hospitals as part of the Workplace Violence Prevention in Health Care Leadership Table. It has been adapted for long-term care homes to address the needs of the sector.

Long-term care homes are an environment where residents often feel vulnerable and anxious. This can include, for example, aging residents and their caregivers/care partners, individuals experiencing a physical or mental health crisis, those needing addiction support, and residents who have unmet needs they are unable to express. According to the Canadian Institute of Health Information (CIHI) (2015-16), fifty percent of residents with dementia in long-term care exhibit responsive behaviours. Some examples of responsive behaviours include: verbal or physical aggression (striking, self-harm), exit seeking, resistance to personal care, refusal to eat/take medication, etc. These behaviours may be due to a number of factors including an unmet need (e.g. pain, environment (hot/cold), feeling hemmed in, influences of other residents/staff and social history). Despite the fact that an aggressive action stemming from a responsive behaviour may be due to dementia or an unmet need, if it leads to an aggressive action against a worker in a workplace and meets the definition of workplace violence under the *Occupational Health and Safety Act*, (OHSA), it is considered workplace violence (herein referred to as workplace violence). Workplace violence in long-term care homes can originate from a number of sources, including from residents and their families and friends or other external people and/or from any employee associated or formerly associated with the workplace.

In order to prevent workplace violence, employers must implement workplace violence policies, measures, procedures and programs, conduct risk assessments and re-assessments for the risks of workplace violence, establish measures and procedures for: summoning immediate assistance when violence occurs or is likely to occur, reporting violent incidents and investigating incidents and complaints of violence, and providing information, education and training to workers so they may recognize and be protected from workplace violence. Employers, typically represented by senior management, hold the greatest responsibility with respect to worker health and safety within health care workplaces such as long term care homes.

CCSA and PSHSA License Agreement

CCSA has adapted these violence and aggression prevention tools and resources and we acknowledge the hard work he PSHSA has done in the development and sharing of these valuable resources for our members in the Alberta Continuing Care Industry. Accessing the PSHSA violence prevention materials for use in the Province of Alberta is with the agreement that the terms and conditions will be met under the license agreement between PSHSA and the CCSA.

These documents and resources may have references to the Ontario context and legislative requirements specific to the Province of Ontario. Though the CCSA has adapted these for use in Alberta, users of these resources are still advised to reference the Alberta OHS legislation.

Background



Pre-Risk Assessment Survey

Orga	nization	Name:
Click	here to	enter text

Purpose of this Survey

To be completed in conjunction with the Risk Assessment for Violence Assessment, this survey is conducted with workers to better understand their concerns and perceptions of workplace violence. The survey results assist the Employer in determining the measures and procedures, controls and training that are required in the workplace to reduce the hazards related to violence and eliminate the risks of workplace violence. There are opportunities in this survey for workers to provide suggestions to reduce hazards and eliminate risks of workplace violence.

General Information

1.	What Role are you in?
	☐ Clerical/Administrative
	☐ Allied Health
	\square Unregulated health care worker as a role
	☐ Nursing
	☐ Physician
	☐ Manager/Supervisor
	☐ Facilities
	\square Other (Please Specify) Click here to enter text
2.	How long have you worked at your facility?
	□ < 1 year
	☐ 1-4 years
	☐ 5-10 years
	☐ 11-15 years
	\square 16 years or longer



Personal Experiences of Workplace Violence

3.	Have you personally witnessed the following at your facility/workplace? (Click all that apply)
	☐ Assault
	☐ Harassment
	□ Near Miss
	☐ Physical attack
	☐ Sexual Abuse
	☐ Threat
	☐ Verbal Abuse
	\square I have not witnessed the above
4.	Have you personally experienced the following at your facility/ workplace? (Click all that apply)
	☐ Assault
	☐ Harassment
	□ Near Miss
	☐ Physical attack
	☐ Sexual Abuse
	☐ Threat
	☐ Verbal Abuse
	\square I have not witnessed the above
5.	If you have experienced or been witness to the above have you sought medical attention?
	□ Yes
	□ No
	☐ Not Applicable



6.	If you have experienced or been witness to the above have you lost time at work as a result?
	Lost time is any time away from work with or without pay. (e.g. time away from usual duties to seek medical attention)
	□ Yes
	\square No
	☐ Not Applicable
7.	Do you feel physically safe at your facaility/workplace?
	☐ All the time
	☐ Most of the time
	\square Some of the time
	□ Never
	☐ Not sure
	If not please explain
	Click here to enter text.
8.	In the last two (2) years how many times (approximately) have you been in situations where you were concerned for your personal safety due to resident or visitor violence?
	\square zero (0) times
	\square less than three (3) times
	\Box three (3) to six (6) times
	\square seven (7) to ten (10) times
	\square more than ten (10) times



9.	Do you feel prepared to handle and protect yourself in a violent situation, threat or be able to de-escalate a responsive behaviour exhibited by residents while at work?
	☐ All the time
	☐ Most of the time
	\square Some of the time
	□ Never
	□ Not sure
	If you answered "all the time" or "most of the time", please explain what has made you prepared
	Click here to enter text.
	If you answered "some of the time" please explain
	If you answered never please explain why you feel unprotected or not adequately prepared.
	Click here to enter text.
10.	Do you feel prepared to handle and protect yourself in a violent situation, threat or be able to de-escalate behaviours from a visitor while at work?
	☐ All the time
	☐ Most of the time
	\square Some of the time
	□ Never
	□ Not sure
	If you answered "all the time" or "most of the time", please explain what has made you prepared
	Click here to enter text.
	If you answered "some of the time" please explain
	If you answered "never" please explain why you feel unprotected or not adequately prepared.
	Click here to enter text.



11.	If you have experienced or witnessed violence, threats (including verbal assault), or aggression, who initiated the incidents (check all that apply)
	☐ Resident
	☐ Visitor
	☐ Family
	□ Staff
	☐ Physician
	□ Volunteer
	☐ Contractor
	☐ I have not experienced/witnessed the above
12.	In the last two (2) years (approximately) how many times have you witnessed occurrences of resident to staff aggression/violence?
	\square zero (0) times
	\square less than three (3) times
	☐ three (3) to six (6) times
	\square seven (7) to ten (10) times
	\square eleven (11) to twenty (20) times
	\square more than twenty (20) times
13.	In the last two (2) years (approximately) how many times have you witnessed occurrences of resident to resident aggression/violence?
	□ zero (0) times
	\square less than three (3) times
	\Box three (3) to six (6) times
	\square seven (7) to ten (10) times
	\square eleven (11) to twenty (20) times
	\square more than twenty (20) times



14.	In the last two (2) years (approximately) how many times have you witnessed occurrences of domestic violence that has entered the workplace or had incidents directly shared with you by a co-worker? Indicators: threatening/disturbing phone calls, texts or emails to co-workers while at work, partners showing up at work to confront family members, stalking.
	□ zero (0) times
	☐ less than three (3) times
	\Box three (3) to six (6) times
	\square seven (7) to ten (10) times
	\square more than ten (10) times
Re	porting Violent Incidents and Hazards
15.	Do you know how, when and to whom to report any incidents of violence, hazard of violence, threats, or aggression?
	□ Yes
	□ No
	□ Not formally
16.	Are you required at your facility/ workplace to report threats, violence and aggression?
	☐ Threats
	□ Violence
	☐ Aggression
	☐ Harassment
17.	Are you required at at your facility/ workplace to report any hazards related to workplace violence?
	□ Yes
	□ No



18.	Are you aware that the <i>Occupational Health and Safety</i> Act places a legal obligation on a worker to report the existence of hazards related to Workplace violence?
	⊠ Yes
	⊠No
19.	If yes, do you feel that you can report the existence of hazards related to work place violence without the fear of being punished or meeting with resistance after reporting the safety concern?
	□ Yes
	\square No
	☐ Not Applicable
20.	Are you aware that when an incident of workplace violence has resulted in you seeking medical attention or being unable to perform usual duties, your employer is legislatively required to report the incident to the Joint Health and Safety Committee or Health and Safety Representative (in workplaces with 6 -19 workers), trade union (if applicable) and the WCB?
	□ Yes
	□ No
	truction (Verbal and Written) on Control Measures, licies and Procedures on Workplace Violence Prevention
21.	Have you read your facility/ workplace's Workplace Violence Prevention Policy?
	□ Yes
	□ No
22.	Do you know where to find your facility/ workplace's Violence Prevention Policy? ☐ Yes ☐ No



23.	Has your employer trained you on all of the measures and procedures contained in the workplace violence program?
	□ Yes
	\square No
24.	If yes, did you find the program information easy to understand?
	☐ Yes
	\square No
25.	Do you feel that your employer has provided you with the necessary supports, policies, control measures and procedures to protect your safety at work?
	☐ All the time
	☐ Most of the time
	\square Some of the time
	□ Never
	□ Not Sure
	If no, do you have any suggestions for improvement?
	Click here to enter text.
26.	How would you rate the employer's communication of its workplace violence policies and procedures and control measures to its workers?
	□ Poor
	☐ Adequate
	☐ Exceptional
	□ Unsure
27.	What other control measures, procedures, training, or processes (health and safety or otherwise) do you think are required to help better protect you from violence?
	\square I can't think of any
	☐ Unsure based on my role



My suggestions are: Click here to enter text.

28.	Are there any improvements required in the long-term care home that would make your workplace safe and address violence? Select all that apply
	☐ Lighting
	☐ Secure restrooms
	☐ Secure parking lots
	☐ Secured staff room/kitchen
	☐ Restricted public access to your work area on your unit
	☐ Secured stairwells
	☐ Cameras/mirrors to eliminate hidden or blind spots in the home
	☐ Hallway clutter (could be used as weapon)
	\square Communication of care plan, including triggers and behaviours
	☐ Flagging of violent residents
	\square Discussion with physicians when least restraint procedure is not appropriate
	☐ Full-time geriatric physician support
	☐ More programs to keep residents occupied
	☐ Staffing
	□ Security
	☐ Training on workplace violence control measures and procedures
	\square Crisis intervention and self-protection skills and physical intervention training
	☐ Personal Safety Response System Devices e.g. personal panic alarms
	☐ Code White procedures
	☐ Training in understanding dementia and responsive behaviours and how to respond and de-escalate these behaviours?
	☐ Other suggestions: Click here to enter text.



Training on Workplace Violence Prevention (Including De-escalation and Crisis Intervention)

29.	How would you rate the quality and training specifically on workplace violence prevention policies, control measures and procedures for its workers?
	☐ Excellent
	☐ Very Good
	□ Good
	□ Poor
	☐ Very Poor
30.	This question is for workers with two (2) years or less service at enter the name of the long term care home here When you think back to your initial orientation at enter the name of the long term care home here, do you feel workplace violence risk, safety and your protection was adequately addressed to prepare you to handle workplace violence incidents?
	□ Yes
	□ No
	\square Not applicable to me
31.	Please list (as many as you can recall) the violence prevention policies, control measures and procedures you have been trained on? (insert text box) as a min list those in # 28 above. Click here to enter text.
32.	How would you rate your ability to verbally de-escalate an agitated or escalated resident or visitor?
	□ Extremely high
	☐ High
	☐ Moderate
	Low
	□ Extremely low
	☐ Not applicable to my role



33.	Do you feel it is part of your job responsibilities to physically intervene with aggressive or violent residents where there is a clear and imminent risk of harm to self or others?
	□ Yes
	□ No
	☐ Not applicable to my role
34.	Have you had to physically intervene with aggressive or violent residents where there is a clear and imminent risk of harm to self or others?
	☐ Yes
	\square No
	☐ Not applicable to my role
35.	How would you rate your level of competence to intervene physically and effectively manage an aggressive or violent resident or visitor?
	☐ Extremely high
	□ High
	☐ Moderate
	□ Low
	☐ Extremely low
	☐ Not applicable to my role
36.	How would you rate your level of competence to protect yourself if being attacked?
	☐ Extremely high
	□ High
	☐ Moderate
	□ Low



37.	Do you feel you should be provided with additional training to adequately protect yourself against being attacked?
	□ Yes
	□ No
	□ Unsure
38	Have you received any crisis intervention training to assist you in dealing with
50.	hostile, abusive, violent, aggressive residents and visitors?
	□ Yes
	\square No, I should have received training, but it never occurred
	□ No, it's not applicable to my role
39.	If you have received crisis intervention training approximately when was your last training session?
	☐ Within the last six months
	\square Within the last seven (7) to twelve (12) months
	☐ Twelve (12) to twenty four (24) months ago
	☐ It's been more than twenty four (24) months
40.	Was this training delivered on-line, in classroom or a combination of both?
	☐ On-line
	□ Classroom
	☐ Combination
41.	What do you believe is the most effective method of delivering this training?
	☐ On-line
	☐ Classroom
	☐ Combination



42.	What is your understanding of how often this initial and subsequent (refresher) crisis intervention training is to occur?
	☐ Annually
	☐ Every two (2) years
	☐ Every three (3) years
	☐ Unsure
43.	Are these refresher trainings occurring?
	□ Yes
	□ No
	☐ Unsure
44.	How would you rate your retention of physical self-protection skills and physical intervention techniques learned from the training?
	☐ Extremely low
	☐ Moderate
	□ High
	☐ Extremely high
	\square Not applicable to my role
45.	How would you rate your retention of the verbal skills learned from the training?
	☐ Extremely low
	☐ Moderate
	□ High
	☐ Extremely high
	\square Not applicable to my role



46.	When was the last time (approximately) you participated in a mock drill for a violent/aggressive resident or visitor?
	□ Never
	☐ 1-3 months ago
	☐ 4-6 months ago
	☐ 7-12 months ago
	☐ It's been more than 12 months
	☐ Not applicable to my role
47.	Other than formal training, when was the last time you were provided time to practice physical self-protection skills and physical intervention techniques?
	□ Never
	☐ 1-3 months ago
	☐ 4-6 months ago
	☐ 7-12 months ago
	☐ It's been more than 12 months
	☐ Not applicable to my role
48.	Please describe the current crisis intervention training in terms of providing you with the necessary skills to prevent and manage crisis intervention situations.
	☐ Exceptional
	☐ Adequate
	□ Inadequate
	☐ Not applicable to my role
49.	When thinking about the current crisis intervention training how would you describe the effectiveness of the prevention concepts and verbal de-escalation strategies?
	☐ Extremely effective
	☐ Somewhat effective
	☐ Ineffective



Pre-risk Assessment Survey		
		Not applicable to my role
50.		nen thinking about the current crisis intervention training how would you describe the effectiveness of physical self-protection skills
		Extremely effective
		Somewhat effective
		Ineffective
		Not applicable to my role
51.		e there any training skills you feel you need that you have not been taught that would better prepare u to safely perform your job and or react to a violent or aggressive situation?
		Unsure
		Not applicable
	Му	suggestions are: Click here to enter text.
52.	wo	re planning incorporates least restraint policies and this policy needs to be balanced with ensuing rkers safety. Please pick the answer that best describes how you feel about <i>your facility / workplace's</i> straint Policy (sometimes referred to as Least Restraint).
		The policy has a positive impact on my safety because the residents feel safe and know what to expect
		The policy has a negative impact on my safety because restraints sometimes don't happen when they should
		The policy does not accurately reflect the realities of the resident population
		I feel that my safety is not as important as the resident's safety
		I'm unsure how I feel about the policy



Summoning Immediate Assistance

53.	How would you rate your ability to assess when a potentially violent situation requires an elevated response such as Code White?
	☐ Extremely Low
	□ Low
	☐ Moderate
	☐ High
	☐ Extremely High
	☐ Not applicable in my role
54.	Do you have a means of summoning immediate assistance (e.g. personal panic alarm or panic button) when you feel you are at imminent risk of harm e.g. physical assault? ☐ Yes
	☐ No, I should have but I don't
	☐ Not applicable to my role
55.	If you are working alone (where no one could hear you if you called for help) is there another system in place that will summon immediate assistance when violence occurs and/or is likely to occur?
	□ Yes
	□ No
	☐ Not applicable to my role
56.	How would you rate the effectiveness of the implementation and monitoring of Code Whites and/or the personal alarms or panic button policy, measures, and procedures to summon immediate assistance at your facility / workplace?
	☐ Excellent
	☐ Very Good
	\square Good
	□ Poor
	☐ Very Poor



57.	How would you rate reliability of devices provided (e.g. personal alarms or panic buttons) in summoning immediate assistance?
	□ Excellent
	□ Very Good
	□ Good
	□ Poor
	□ Very Poor
58.	How do you feel about the effectiveness of your facility/ workplace's code white procedures.
	☐ Excellent
	□ Very Good
	□ Good
	□ Poor
	☐ Very Poor
59.	Are there any changes or improvements to the procedure that can be made to better protect your safety?
	Click here to enter text.
60	How would you rate Code White response times on your unit/home area?
00.	□ Poor
	☐ Adequate
	□ Exceptional
	□ Unsure
	☐ Not applicable to my role



61.	When a Code White is called, are there adequate number of staff available to assist to effectively and safely manage the situation?
	☐ Yes, always
	☐ No, more staff are required
	☐ Sometimes yes; sometimes no
62.	Do you have security personnel in your long-term care home to respond when summoning immediate assistance?
	□ Yes
	□ No
63.	If you answered yes to the above question then how would you describe the response time when security personnel respond to crisis?
	□ Poor
	☐ Adequate
	☐ Exceptional
	□ Unsure
	☐ Not applicable to my role
64.	If you answered yes to the above question then how would you rate the quality of the security response in taking control during a violent assault or other crisis situation that you feel you cannot safely control?
	□ Poor
	☐ Adequate
	☐ Exceptional
	☐ Unsure
	□ Not applicable to my role
65.	If you answered yes to the above question do you feel there are enough security personnel on each shift to effectively respond to Code Whites and security assists when required?
	$\ \square$ Yes, I feel we have enough security to address the number and acuity of residents
	$\ \square$ No, the number of security personnel does not reflect the number and acuity of residents
Pre	-Risk Assessment Survey

© Public Services Health and Safety Association



Post Incident Response

66.	opi	the event that you have witnessed or experienced workplace violence, were you offered the portunity to express your thoughts about the incident and learn about normal stress reactions and ailable services through debriefing or counselling?	
		Yes	
		No	
		Not Applicable	
67.		w would you rate the level of support and debriefing from management following traumatic or crisis sodes?	
		Poor	
		Adequate	
		Exceptional	
		Unsure	
		Not applicable to my role	
68.	In the event that you have witnessed or experienced workplace violence, please describe the statement that best reflects the debriefing and support you received from management.		
		The debriefing focused primarily on how the incident impacted me and other workers. I was given the opportunity to express my thoughts openly and was provided with information and access to available internal and external services/supports.	
		The debriefing focused primarily on strategies to prevent a similar situation from occurring. It felt more like a review of the incident, with less emphasis on how well I and the other worker were coping.	
		The debriefing was a balance of ensuring workers were emotionally okay and were afforded the opportunity to vent, as well as discussing strategies and system issues that may help prevent a similar occurrence. Internal and external supports/services were discussed and made available.	
		I was not offered any support or debriefing after experiencing or witnessing workplace violence	
		Not applicable to my role	



69.	How would you rate the level of support and debriefing from co-workers following a traumatic or crisis episode?		
	□ Poor		
	☐ Adequate		
	☐ Exceptional		
	□ Unsure		
	☐ Not applicable to my role		



70. Have any of the following safety supports been offered to you by your employer or supervisor when you have raised concern for your safety and/or as part of a post incident plan? Check all that apply

	Offered after raising a safety concern	Offered as part of a post- incident plan		
The assistance of a buddy to escort you on or off property				
The assistance of security to escort you on or off property				
The assistance of security to assist with managing an aggressive resident				
A device (personal alarm) to summon immediate assistance when needed				
Additional workers in the long- term care home to manage a surge in resident population or acuity				
EAP support for workers directly or indirectly involved in the event of workplace violence				
□ No supports offerred				
Other (please specify)				
Click here to enter text.	lick here to enter text.			



71.	Are you aware that the facility/workplace can work with you to develop a plan to ensure your personal safety at work should there be a potential for domestic violence to occur at the workplace?
	□ Yes
	□ No
Su	pervisor Competency in Adhering to the OHS legislation
72.	Does your direct manager/supervisor (supervisor may be referred to as manager where applicable) promote open communication and a culture of safety regarding workplace violence that allows you to feel comfortable bringing safety issues, concerns, or hazards to his/her attention?
	\square Yes, all of the time
	☐ Most of the time
	☐ Sometimes – it's inconsistent
	□ Rarely
	□ Not at all
	☐ Not applicable
73.	Does the manager/supervisor (supervisor may be referred to as manager where applicable) on the unit investigate violent incidents, safety concerns, issues and hazards regarding workplace violence without delay?
	\square All the time
	☐ Most of the time
	□ Never
	□ Not sure



74.	Does the manager/supervisor (supervisor may be referred to as manager where applicable) take immediate and appropriate corrective action including control measures and procedures to protect workers without delay?
	☐ All the time
	☐ Most of the time
	□ Never
	☐ Not sure
	Please explain:
	Click here to enter text.
75.	How engaged is your manager/supervisor (supervisor may be referred to as manager where applicable) in identifying violence hazards and alerting you to those hazards?
	☐ Very engaged
	☐ Somewhat engaged
	☐ It rarely happens
	☐ Not at all
	☐ Not applicable to my role
76.	Does your manager/supervisor (supervisor may be referred to as manager where applicable) reassess the risk to you and others of violence when there is a staffing shortage or, an increase in resident population and/or acuity?
	\square All of the time
	\square Most of the time
	☐ Sometimes – it's inconsistent
	□ Rarely
	□ Never
	☐ Not applicable to my role



77.	Has there ever been an occasion(s) when you did not bring workplace violence safety concerns, issues, hazards to your manager/supervisor (supervisor may be referred to as manager where applicable) when you should have?			
	□ Yes			
	\square No			
	☐ Not applicable			
78.	If you answered yes to the previous question, then what would you consider to be the primary reason for not informing your manager/supervisor (supervisor may be referred to as manager where applicable) of the concern?			
	☐ I didn't feel the issue was serious			
	☐ I felt that nothing would change despite brining the issue forward			
	☐ I feared reprisal if I was to bring the issue to my manager/supervisor (supervisor may be referred to as manager where applicable)			
	☐ I didn't want to appear like I was complaining			
	☐ Other (please explain): Click here to enter text.			
No	tification of Risk and a History of Violent Behaviour			
79.	Is a resident's previous history of violence or behavioural issues consistently documented in the resident's care plan or safety plan?			
	\square All the time			
	☐ Most of the time			
	\square some of the time			
	□ Never			
	□ Not sure			
80.	Are you or your co-workers briefed about a violent incident during shift change report or before dealing with a previous violent resident?			
	. □ All the time			
	☐ Most of the time			
	□ some of the time			
	□ Never			
	□ Not sure			



81.	How often are you adequately informed when having direct contact with residents or visitors with a previous history, or potential for violence?			
	□ Never			
	☐ Rarely			
	\square some of the time			
	\square Most of the time			
	☐ Always			
	□ Not applicable to my role			
82.	Has the use of the identification of residents at risk for violence on admission and flagging in home areas (e.g. bracelets, signage, etc.) and the Violence Risk Assessment and Identification of Residents at Risk for Violence (Flagging) procedure improved your awareness and responsiveness to residents?			
	□ Yes			
	\square No			
	☐ We don't have a flagging procedure			
83.	Once informed that a resident or visitor has a history of, or potential for violence do you know what steps to take to obtain more specific information?			
	\square Yes, I know exactly what to do			
	\square No, the process is unclear to me			
	☐ Not applicable to my role			
84.	Once adequately informed does <i>does your facility/workplace</i> , provide adequate measures to protect your safety?			
	☐ Yes, all the time			
	☐ Most of the time			
	□ Rarely			
	□ Never			
	☐ Not applicable to my role			



Suggestions for Workplace Violence Prevention

85.	Have you noticed a pattern for increased violence in your unit? E.g. Time of year, time of day, type of activity?				
	Clic	ck here to enter text.			
86.	Does you unit have specific measures and procedures related to the prevention or management of workplace violence that are working well and could be used as a best practice across the long term care home?				
	□ Yes				
	□ No				
	If s	o what are they?			
	Click here to enter text.				
87.		When you think about the risk of violence at your workplace, what causes your concern (please click all that apply).			
		Resident population seem to be getting more violent			
		Training is not keeping up with resident acuity			
		(Insert name of the employer here) violence prevention and management policies and procedures need to be more protective and updated			
		I don't feel supported by my manager/supervisor (supervisor may be referred to as manager where applicable)			
		Staffing resources do not match resident acuity			
		The physical environment is unsafe			
		Equipment and systems to keep me safe are not adequate (e.g. panic alarms/buttons, personal protective equipment)			
		I don't feel supported by my peers			
		There is no security to protect me			
		There is not enough security to protect me			
		Physician's orders often risk my safety			
	Oth	ner:			
	Click here to enter text.				



88. Do you have any recommendations or suggestions that can make your workplace safer?

Click here to enter text.

89. Please feel free to provide additional comments, thoughts, or suggestions? Click here to enter text.

Acknowledgements: This tool was developed based on Safe Management Group's Pre-Risk Assessment Survey developed for the Centre for Addiction and Mental Health



Acknowledgements

PSHSA acknowledges and appreciates the time and expertise of the many healthcare workers, organizations, frontline staff and labour unions that participated in the guidance and development of this resource. This document has been endorsed by the PSHSA Violence, Aggression and Responsive Behaviour (VARB) Steering Committee and was developed by the (Long term Care/ Hospital/ Home Care) Research and Development Group under Phase Two of the Workplace Violence Prevention in Healthcare Leadership Table (Leadership Table). Reporting to the Leadership Table Secretariat, the Research and Development Groups were established to develop products aiming to strengthen workplace violence prevention activities.

The information contained in this document is as accurate, complete and current as possible at the time of publication. This resource is copyrighted by the Public Services Health & Safety Association (PSHSA). The content of this document, in whole or in part, may be reproduced without permission for non-commercial use only and provided that appropriate credit is given to PSHSA.