

Workplace Violence Prevention (WPVP) - Department self-evaluation of hazards and risk reduction plan

This assessment asks you to evaluate opportunities in your department to reduce the risk of workplace violence, identify what improvements you can make by yourselves and what risks you need specific support from other departments to reduce, including related training needs. The assessment should be completed in discussion with department employees. This pack contains three assessment forms plus a training needs form and a form for requesting specific actions. The completed pack will be passed to the Office of Human Resources for analysis and prioritizing of actions. Please make additional copies of any of these items as required.

The assessment looks at:

- Risks related to the physical environment
- Risks related to work practices, policies and procedures
- Risks related to individuals

- If your department operates in more than one building, a separate form on risks associated with the physical environment for each building should be completed and considered by department staff who work there.
- Building coordinators, assisted by the building zone mechanic and an appropriate third person if required, will conduct a building walk-through to assess risks associated with the physical environment. They will complete the first row on the risk assessment form (shaded grey and marked with a *). They will then pass this assessment to department staff groups to discuss appropriate actions, if any.
- Department staff groups will complete the rest of the risk assessment process through discussion. If there is not enough space on any part of the form to include all information required, please mark a number in the box where the information would go and write the information on a separate sheet labeled with the same number. If any box is not applicable, or there are no risks identified in a particular category, please leave blank
- The deadline for completion and return of these forms to the Office of Human Resources is: May 30th 2008
- Transfer actions your department can undertake without support onto the department action plan sheet in this pack and allocate responsibilities and deadlines to appropriate individuals for completing the actions.
- Retain copies of all forms in this pack and file them in the front of your department's Workplace Violence Prevention Manual.
- Send a copy of all forms to the Office of Human Resources for consideration by the WPVP advisory committee who will prioritize actions and disseminate good practice.
- If you have questions, would like help completing these forms, or would like help to facilitate the risk assessment discussion in your department, please contact Adrienne Collier, acollier@brockport.edu or Catriona McCarroll, cmccarro@brockport.edu

Thank you for your support in making our work environment safer for everyone.

Checklist	Date completed
Building walk-through completed and risk assessment forms passed to departments	
Remaining risk assessment elements completed in discussion with department employees	
All forms completed	
Actions to be taken by department allocated with timescale for completion	
Training needs identified	
Copies of all forms sent to Human Resources for consideration by WPVP advisory group	
All forms filed in department Workplace Violence Prevention folder	

Department:				Building/Location:			
Risks associated with the physical environment	Parking/surrounding area	Building exterior	Access/exit routes, controls and signage	Building interior design/layout	Work-space usage	Access to emergency equipment and backup	Other
Are there any unique physical concerns? If so, what are they? *	*	*	*	*	*	*	*
What do we want to change to reduce the risks?							
What can we do ourselves?							
What can we not do ourselves?	Details of help required in each category						
Notable good practice to share with other departments?							

Department:				Building/Location:			
Risks associated with work practices	Nature of the work – eg handling money	Shifts eg. out of hours working	Staffing numbers	Policies and procedures	Locations and procedures for interacting with visitors to the department	Work loads/stress levels	Other
Are there any risks? If so, what are they?							
What do we want to change to reduce the risks?							
What can we do ourselves?							
What can we not do ourselves?	Details of help required in each category						
Notable good practice to share with other departments?							

Department:		Building/Location:				
Risks associated with individuals	Nature of contact with visitors, eg angry/distressed students	Nature of interactions with colleagues outside work group	Nature of interactions with colleagues in work group	Sources of guidance and support for work and/or personal issues	Information, knowledge and skills to deal with violent or other emergency situations	Other
Are there any risks? If so, what are they?						
What do we want to change to reduce the risks?						
What can we do ourselves?						
What can we not do ourselves?	Details of help required in each category					
Notable good practice to share with other departments?						

Based on your department's self evaluation, please indicate what further specialist training is required for your employees.

Training topic	Number of employees requiring training	Please indicate whether you think this training should be mandatory (M) or optional (O) for your employees	Notes on special requirements
Workplace Violence Prevention – basic training (for those who missed the first round)			
Dealing with disruptive/aggressive students			
Personal safety			
First aid			
Practical skills for managing conflict			
Sexual harassment			
Managing stress			
Principles of diversity and social inclusion			
Understanding domestic violence			
Introduction to mental health issues relating to workplace violence			
Anger management			
Other training needs relating to Workplace Violence Prevention – please provide details:			

Workplace Violence Prevention – Request for specific support with actions your department cannot complete unaided

Details of support required	Location(s)	Name, phone number and email of individual to be contacted for further information.	Priority level - likelihood of hazard contributing to a significant incident low (highly unlikely) medium, high or urgent (extremely likely)

Workplace Violence Prevention - Department Action Plan

Action	Individual responsible	Deadline for completion	Additional resources required