**Aggression in the workplace:   
  
Risk management toolkit**

All employers should carry out regular checks of the workplace in consultation with health and safety representatives and employees to identify if there are signs that aggression in the workplace is happening or could happen (risk identification) and take steps to implement solutions to control risks. The following tools will assist your organisation with identifying risks and implementing risk controls for aggression in the workplace.

# Risk assessment tool

This risk assessment tool is designed to help employers meet their legal obligations to manage risks associated with aggression in the workplace. This tool is not exhaustive. You may need to consider other risk factors which are unique to your organisation. Add these factors to the *‘Additional Factors’* section of this checklist. More information on aggression in the workplace can be found in the publication, *Code of Practice: Violence, Aggression, and Bullying at Work (2010)*.

To start using this tool simply read the statements and provide your answer by circling either Yes or No. Make any relevant comments which should be considered as part of the risk assessment process. You may have to examine workplace data or consult with employees before you provide your answer. A risk rating table (Figure 1) has been provided to assist you in assessing the risk. When determining the risk rating of an identified risk factor you will need to consider the likelihood of the injury occurring against the severity of the consequences if the injury occurs.

*Figure 1.Risk Rating Table*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Likelihood of injury or harm to health*** | ***Consequences of any injury or harm to health*** | | | | ***Existing systems*** |
| *Insignificant* | *Moderate* | *Major* | *Catastrophic* | *How do the existing controls and systems impact on the risk rating?*    *(increase/decrease?)* |
| *Very Likely* | *High* | *Extreme* | *Extreme* | *Extreme* |  |
| *Likely* | *Moderate* | *High* | *Extreme* | *Extreme* |
| *Moderate* | *Low* | *High* | *Extreme* | *Extreme* |
| *Unlikely* | *Low* | *Moderate* | *High* | *Extreme* |
| *High Unlikely (rare)* | *Low* | *Moderate* | *High* | *High* |

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| --- | --- |
| Completed by: | Position/s: |
| Date of risk assessment: | **Review** **date/s:** |
| Location / group: |  |

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| Incident/ injury records | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. There have been no incidents of aggression in the workplace in the last 12 months. | Yes | No |  |  |
| 1. Employees have not been threatened or assaulted in the past 12 months. | Yes | No |  |  |
| 1. Violence or aggression in the workplace is not frequent. | Yes | No |  |  |
| 1. Violence or aggression incidents have not resulted in serious injury or harm to health. (i.e. Employee off work for more than 10 days or has resulted in a psychological condition such as depression, anxiety, Post-Traumatic Stress Disorder) | Yes | No |  |  |

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| Work environment | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. The building has multiple access points which are secure or visitor access is controlled. | Yes | No |  |  |
| 1. Access to alarms is easy and unobstructed. | Yes | No |  |  |
| 1. The locations of alarms are not obvious. | Yes | No |  |  |
| 1. The environment is comfortable for clients (e.g. temperature, seating, noise). | Yes | No |  |  |
| 1. The physical layout provides privacy for clients. | Yes | No |  |  |
| 1. Access to employees by clients or members of the public is controlled. | Yes | No |  |  |
| 1. Employees are able to move to a safe place if in danger. | Yes | No |  |  |
| 1. Employees are able to communicate their need for assistance when threatened (i.e. access to mobile telephone, duress alarm). | Yes | No |  |  |
| 1. Visibility of the working environment from the outside is adequate. | Yes | No |  |  |
| 1. External lighting is adequate. | Yes | No |  |  |
| 1. Money/valuables/drugs are not kept at the workplace. | Yes | No |  |  |

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| Work practices | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. Any service delays are communicated to the client. | Yes | No |  |  |
| 1. Clients are unlikely to become frustrated. | Yes | No |  |  |
| 1. Staffing numbers are sufficient at demand times. | Yes | No |  |  |
| 1. Employees do not provide community outreach / at home services. | Yes | No |  |  |
| 1. Employees do not work in isolated locations. | Yes | No |  |  |
| 1. The workplace has security and emergency procedures. | Yes | No |  |  |
| 1. The workplace regularly tests the security and emergency procedures. | Yes | No |  |  |
| 1. The workplace has a clear process for managing conflict and aggression. | Yes | No |  |  |
| 1. The workplace has procedures to deal with aggression and violence during and after an event. | Yes | No |  |  |

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| Behavioural factors | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. Clients/ service users are unlikely to be distressed or aggressive. | Yes | No |  |  |
| 1. The behaviour of clients is predictable. | Yes | No |  |  |
| 1. People are not likely to be affected by alcohol or other drugs. | Yes | No |  |  |
| 1. People or service users are not likely to be physically or mentally ill. | Yes | No |  |  |
| 1. Customers are not likely to be angry or disgruntled. | Yes | No |  |  |
| 1. The aggressor is not likely to have a weapon or access to things that could be used as a weapon. | Yes | No |  |  |
| 1. It is likely to be only one aggressor. | Yes | No |  |  |

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| Employee factors | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. Employees are unlikely to become violent. | Yes | No |  |  |
| 1. Employees do not work alone. | Yes | No |  |  |
| 1. Employees do not work at night. | Yes | No |  |  |
| 1. Only experienced employees deal with customers or work in front line positions. | Yes | No |  |  |
| 1. Employees are unlikely to be bored, stressed, and/or unhappy at work. | Yes | No |  |  |
| 1. Employer-employee relationships are not strained. | Yes | No |  |  |
| 1. Employee relationships are not stressed or tense. | Yes | No |  |  |

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| Training | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. Employees have received adequate training to manage aggression and / or challenging behaviours. | Yes | No |  |  |
| 1. Employees have the appropriate knowledge or skills to deal with clients. | Yes | No |  |  |
| 1. There are safe procedures for violent and aggressive situations. | Yes | No |  |  |
| 1. Employees are aware and/or understand aggression and management procedures. | Yes | No |  |  |
| 1. Employees have received training to report violent and aggressive incidents. | Yes | No |  |  |

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| Identify, assess and control | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. Workplace aggression and violence reports are analysed. | Yes | No |  |  |
| 1. Potentially violent people are identified. | Yes | No |  |  |
| 1. Employees are asked about risks of aggression and violence. | Yes | No |  |  |
| 1. Causes of potential violence are identified. | Yes | No |  |  |
| 1. Risks of injury or harm have been assessed. | Yes | No |  |  |
| 1. There are controls for averting violence. | Yes | No |  |  |
| 1. Current controls were demonstrated to be successful. | Yes | No |  |  |
| 1. Employees are happy with the controls. | Yes | No |  |  |

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| Consultation and co-operation | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. The safety and health committee are involved. | Yes | No |  |  |
| 1. The safety and health representative/s are consulted about hazards. | Yes | No |  |  |
| 1. There is a procedure for reporting incidents. | Yes | No |  |  |
| 1. All changes are discussed with employees. | Yes | No |  |  |
| 1. Employees are asked opinions on aggression and violence. | Yes | No |  |  |
| 1. Employees’ perceptions of safety are considered. | Yes | No |  |  |
| 1. The safety of the public and service users is considered. | Yes | No |  |  |

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| Aggression and violence management plan | Answer  (Each NO answer indicates a risk control is needed | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
| 1. My workplace has a violence and aggression management plan. | Yes | No |  |  |
| 1. The plan was drawn up in consultation with employees. | Yes | No |  |  |
| 1. The plan identifies, assesses, and controls hazards. | Yes | No |  |  |
| 1. The plan covers induction and training. | Yes | No |  |  |
| 1. Safe procedures for hazardous tasks have been developed. | Yes | No |  |  |
| 1. There is an action plan for aggressive and violent situations. | Yes | No |  |  |
| 1. First aid and medical support is included. | Yes | No |  |  |
| 1. Backup from police, emergency services are included. | Yes | No |  |  |
| 1. Prompt de-briefing and counselling is included. | Yes | No |  |  |
| 1. A rehabilitation service is provided. | Yes | No |  |  |
| 1. The plan is reviewed after each aggressive situation. | Yes | No |  |  |

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| Additional factors | Answer  (Each NO answer indicates a risk control is needed) | | Risk rating  (N/A, Low, Moderate, High or Extreme) | Comments  (Make notes on reasons for your assessment .For example, why have you provided this answer and what could be done to prevent it.) |
|  | Yes | No |  |  |
|  | Yes | No |  |  |
|  | Yes | No |  |  |
|  | Yes | No |  |  |
|  | Yes | No |  |  |

# Risk management plan

If you tick NO to any of the statements in the risk assessment checklist, you will need to identify and implement risk control solutions.

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| Location / group : | | Risk factor: | | | |
| Short term ( up to four weeks) | | | | | |
| Action required | **Person responsible** | | **Completion date** | **Review date** | **Comments on review** |
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| Medium term ( four weeks to six months) | | | | | |
| Action required | **Person responsible** | | **Completion date** | **Review date** | **Comments on review** |
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| Long term (more than six months) | | | | | |
| Action required | **Person responsible** | | **Completion date** | **Review date** | **Comments on review** |
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