



Government of Western Australia
Department of Commerce

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
	<i>Insignificant</i>	<i>Moderate</i>	<i>Major</i>	<i>Catastrophic</i>	<i>How do the existing controls and systems impact on the risk rating? (increase/decrease?)</i>
<i>Very Likely</i>	High	Extreme	Extreme	Extreme	
<i>Likely</i>	Moderate	High	Extreme	Extreme	
<i>Moderate</i>	Low	High	Extreme	Extreme	
<i>Unlikely</i>	Low	Moderate	High	Extreme	
<i>High Unlikely (rare)</i>	Low	Moderate	High	High	

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

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		
2. Employees have not been threatened or assaulted in the past 12 months.	Yes	No		
3. Violence or aggression in the workplace is not frequent.	Yes	No		
4. 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		

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.)
5. The building has multiple access points which are secure or visitor access is controlled.	Yes	No		
6. Access to alarms is easy and unobstructed.	Yes	No		
7. The locations of alarms are not obvious.	Yes	No		
8. The environment is comfortable for clients (e.g. temperature, seating, noise).	Yes	No		
9. The physical layout provides privacy for clients.	Yes	No		
10. Access to employees by clients or members of the public is controlled.	Yes	No		
11. Employees are able to move to a safe place if in danger.	Yes	No		
12. Employees are able to communicate their need for assistance when threatened (i.e. access to mobile telephone, duress alarm).	Yes	No		
13. Visibility of the working environment from the outside is adequate.	Yes	No		
14. External lighting is adequate.	Yes	No		
15. Money/valuables/drugs are not kept at the workplace.	Yes	No		

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.)
16. Any service delays are communicated to the client.	Yes	No		
17. Clients are unlikely to become frustrated.	Yes	No		
18. Staffing numbers are sufficient at demand times.	Yes	No		
19. Employees do not provide community outreach / at home services.	Yes	No		
20. Employees do not work in isolated locations.	Yes	No		
21. The workplace has security and emergency procedures.	Yes	No		
22. The workplace regularly tests the security and emergency procedures.	Yes	No		
23. The workplace has a clear process for managing conflict and aggression.	Yes	No		
24. The workplace has procedures to deal with aggression and violence during and after an event.	Yes	No		

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.)
25. Clients/ service users are unlikely to be distressed or aggressive.	Yes	No		
26. The behaviour of clients is predictable.	Yes	No		
27. People are not likely to be affected by alcohol or other drugs.	Yes	No		
28. People or service users are not likely to be physically or mentally ill.	Yes	No		
29. Customers are not likely to be angry or disgruntled.	Yes	No		
30. The aggressor is not likely to have a weapon or access to things that could be used as a weapon.	Yes	No		
31. It is likely to be only one aggressor.	Yes	No		

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.)
32. Employees are unlikely to become violent.	Yes	No		
33. Employees do not work alone.	Yes	No		
34. Employees do not work at night.	Yes	No		
35. Only experienced employees deal with customers or work in front line positions.	Yes	No		
36. Employees are unlikely to be bored, stressed, and/or unhappy at work.	Yes	No		
37. Employer-employee relationships are not strained.	Yes	No		
38. Employee relationships are not stressed or tense.	Yes	No		

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.)
39. Employees have received adequate training to manage aggression and / or challenging behaviours.	Yes	No		
40. Employees have the appropriate knowledge or skills to deal with clients.	Yes	No		
41. There are safe procedures for violent and aggressive situations.	Yes	No		
42. Employees are aware and/or understand aggression and management procedures.	Yes	No		
43. Employees have received training to report violent and aggressive incidents.	Yes	No		

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.)
44. Workplace aggression and violence reports are analysed.	Yes	No		
45. Potentially violent people are identified.	Yes	No		
46. Employees are asked about risks of aggression and violence.	Yes	No		
47. Causes of potential violence are identified.	Yes	No		
48. Risks of injury or harm have been assessed.	Yes	No		
49. There are controls for averting violence.	Yes	No		
50. Current controls were demonstrated to be successful.	Yes	No		
51. Employees are happy with the controls.	Yes	No		

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.)
52. The safety and health committee are involved.	Yes	No		
53. The safety and health representative/s are consulted about hazards.	Yes	No		
54. There is a procedure for reporting incidents.	Yes	No		
55. All changes are discussed with employees.	Yes	No		
56. Employees are asked opinions on aggression and violence.	Yes	No		
57. Employees' perceptions of safety are considered.	Yes	No		
58. The safety of the public and service users is considered.	Yes	No		

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.)
59. My workplace has a violence and aggression management plan.	Yes	No		
60. The plan was drawn up in consultation with employees.	Yes	No		
61. The plan identifies, assesses, and controls hazards.	Yes	No		
62. The plan covers induction and training.	Yes	No		
63. Safe procedures for hazardous tasks have been developed.	Yes	No		
64. There is an action plan for aggressive and violent situations.	Yes	No		
65. First aid and medical support is included.	Yes	No		
66. Backup from police, emergency services are included.	Yes	No		
67. Prompt de-briefing and counselling is included.	Yes	No		
68. A rehabilitation service is provided.	Yes	No		
69. The plan is reviewed after each aggressive situation.	Yes	No		

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.)
70.	Yes	No		
71.	Yes	No		
72.	Yes	No		
73.	Yes	No		
74.	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.

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

Long term (more than six months)				
Action required	Person responsible	Completion date	Review date	Comments on review

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