

# HEALTH AND SAFETY SURVEY OF AGGRESSION AGAINST STAFF IN THE HEALTH CARE SECTOR

This survey is in order to compile information related to the history of aggression against staff so that an effective violence prevention program can be put in place. Please take the time to respond to the questions. If you require any assistance please contact your risk assessment team.

Check off the box next to your response or fill in the blanks as required. If more than one response is applicable, then check off as many boxes as required.

Violence under **section 4.27** of the Industrial Health and Safety Regulations is defined as follows:

*4.27 Violence means the attempt or actual exercise by a person, other than a worker, of any physical force so as to cause injury to a worker, and includes any threatening statement or behaviour which gives a worker reasonable cause to believe that the worker is at risk of injury.*

## Section 1:

1. Have you ever been subjected to an act of violence in your workplace? Yes  No
2. How many times have you been subjected to an actual incident of violence in the last:  
week \_\_\_\_\_ month \_\_\_\_\_ year \_\_\_\_\_
3. What was the nature of the aggression? were you:  
 struck  kicked  
 bitten  clawed  
 tripped  pushed  
 cut  slapped  
 grabbed  
 sexually assaulted  
 subjected to verbal aggression  
 other (specify) \_\_\_\_\_
4. Were you exposed to blood or body fluids? Yes  No
5. Does the employer have post exposure protocols in place? Yes  No
6. If you were subjected to verbal aggression, were the threats to:  
 injure you  
 kill you or a family member  
 damage or destroy personal property  
 other (specify) \_\_\_\_\_
7. Were others close enough to provide assistance?  
 no, I was alone  
 yes, other staff  
 yes, police
8. Prior to the incident, did you suspect that a violent situation might arise?  
 No  
 Yes, warning from chart, files, reports  
 Yes, warning from co-workers  
 Yes, warning from other professionals  
 Yes, warning from supervisor  
 Yes, previous warning from client  
 Yes, escalation of a client/ resident's behaviour
9. Would you say that the incident was related to lack of sufficient staffing? Yes  No
10. Would you say that this incident occurred as a result of facilities closing? Yes  No
11. Would you say that this incident occurred because of downsizing? Yes  No
12. Is a process in place to seek assistance from co-workers? If yes, what? No  Yes   
(specify) \_\_\_\_\_  
\_\_\_\_\_
13. Does this process work? Yes  No
14. Does the employer have a process in place for reporting incidents? Yes  No
15. Did you report this incident? Yes  No
16. Did you file a Workers' Compensation report? Yes  No
17. Did the health and safety committee receive a copy of the report? Yes  No
18. Was an investigation conducted by the health and safety committee? Yes  No
19. Was any action taken after the incident?  
No  Yes   
 client/resident assigned to other worker  
 client/resident discharged or transferred  
 changed work policy/procedure  
 implemented a violence training pkg  
 increased security  
 client/patient was convicted or charges were laid  
 other (specify) \_\_\_\_\_
20. Where did the incident(s) of violence occur?  
(Please list) \_\_\_\_\_
21. What time did the violence occur?  
 day shift  afternoon shift  night shift
22. Did the act of aggression result in having to take

**time off work?** Yes  No   
How long? \_\_\_\_\_

I never request assistance

**23. Is there a process or mechanism in place to assess clients and their potential to abuse?** Yes  No

**24. Does the Employer have a policy regarding violence?** Yes  No

**25. Are there policies and procedures in place?** Yes  No

**26. Have you received training in the recognition of the potential for abuse?** Yes  No

**27. Have you been trained in diffusion techniques?** Yes  No

**28. Do you feel that violence in your job is increasing?** Yes  No

**29. Does the employer have debriefing or counselling available to staff?** Yes  No

**30. Are you ever alone during working hours (for example, no other staff present)?**

- Always
- Over 75% of the time
- 50 & 75% of the time
- 25 & 50% of the time
- Under 25% of the time
- Don't know if I'm alone

**31. When you are working alone, do you notify anyone when you are finished working?**

- I never work alone
- Yes, always
- Yes, sometimes
- No, never

**Section 2:** In this section, we are interested in your understanding of current workplace policies, procedures and practices which are related to minimizing on-the-job risks and dealing with "aggressive acts".

**32. Does your workplace have a written policy about the following? (check as many as apply)**

- How to handle a violent client/patient/resident
- When & how to request the assistance of a co-worker
- When & how to request the assistance of the police
- What to do about a threat of violence
- How to report "aggressive acts or incidents"
- What to do about harassment
- There are no written policies

**33. When dealing with a potentially violent person or situation, if you request that a second person assist or accompany you, is the request automatically granted every time?**

- Yes
- No
- Sometimes

**34. During the past two years have you or your co-workers raised any of the following issues about violence with management?**

- Working alone
- Levels of staffing
- Alarm systems
- Training
- Other (specify) \_\_\_\_\_

**Section 3:** This section deals with any training that you may have received which would help you deal with aggressive incidents in the workplace.

**35. Have you received specific training about how to recognize and deal with potentially violent persons or situations?**

- No training received
- Yes, during college or university studies
- Yes, during orientation period in present job
- Yes, during in-services workshops
- Yes, during courses given by outside institutions/agencies
- Yes, during course(s) given by the Union
- No specific training, but have received relevant information from supervisor

**Section 4:** In this section, we have a few questions about your workplace and what measures, if any, could be usefully implemented to minimize possible risks from aggression.

**36. I believe that current policies, guidelines and security measures of my workplace are adequate in addressing potentially violent situations.**

- Strongly agree
- Agree
- No opinion
- Disagree
- Strongly disagree

**37. I frequently worry about my personal safety on the job.**

- Strongly agree
- Agree
- No opinion
- Disagree
- Strongly disagree

**38. I believe that staffing levels or workload levels contribute to actual or potential violence in my workplace.**

- Strongly agree
- Agree
- No opinion
- Disagree
- Strongly disagree