

# WORKPLACE VIOLENCE PREVENTION ENVIRONMENTAL HAZARD ASSESSMENT & CONTROL CHECKLIST

This example checklist is for workplace violence prevention and intended to evaluate the work environment and operations (job tasks) to identify conditions that may place employees at risk. The list is not specific to a single industry or occupation, but with modification can be used for most workplaces. This example list is **not** comprehensive and **not** every question will apply to every workplace, therefore, write "N/A" in the NOTES column when not applicable and add questions as necessary.

## 1. RISK FACTORS FOR WORKPLACE VIOLENCE

Cal/OSHA and NIOSH identified the following risk factors that may contribute to violence in the workplace. If one or more of these risk factors is identified in the workplace, there may be a potential for violence.

Yes	No	Question	Notes & Follow-up Action
		Do employees have contact with the public?	
		Do employees exchange money with the public?	
		Do they work with, guard, or transport valuable items like money, jewelry, or other property?	
		Do employees work alone?	
		Do employees work late at night or during early morning hours?	
		Is the workplace often understaffed?	
		Is the workplace located in an area with a high crime rate?	
		Do employees enter (travel to) areas with a high crime rate?	
		Do they have a mobile workplace (vehicle, work truck, van, etc.?)	
		Do employees deliver passengers or goods?	
		Do employees perform public safety functions that might put them in conflict with others?	
		Do employees ever perform duties that could upset people (deny benefits, turn off utilities, collect debts, confiscate property, terminate child custody, etc.?)	
		Do employees deal with people known or suspected to have a history of violence?	
		Do any employees or supervisors have a history of assault, verbal abuse, harassment, or other threatening behavior?	

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Other risk factors (please describe):

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## 2. INSPECTING WORK AREAS

- Who is responsible for building security? \_\_\_\_\_
- Are employees made aware who is responsible for security?       Yes       No

The workplace violence prevention representative or committee should conduct "walk around" inspections to identify potential security hazards. This inspection can identify hazards already well controlled, and what control measures need to be added. Not all of the following questions can be answered through simple observation. You may also need to talk to employees or investigate in other ways.

<i>All Areas</i>	<i>Some Areas</i>	<i>Few Areas</i>	<i>No Areas</i>	<i>Question</i>	<i>Notes/Follow up Action</i>
				Are nametags, ID badges or cards required for employees?	
				Are employees notified of past violent acts in the workplace?	
				Are there trained security personnel, accessible to employees in a timely Manner?	
				Do security personnel have sufficient authority to take all necessary action to ensure employee safety?	
				Is there an established liaison with local law enforcement?	
				Are bullet resistant windows or similar barriers used when money is exchanged with the public?	
				Is a limited amount of cash kept on hand, with appropriate signs posted?	

## WORKPLACE VIOLENCE PREVENTION ENVIRONMENTAL HAZARD ASSESSMENT & CONTROL CHECKLIST

				Are areas where money is exchanged visible to others who could help in an emergency? (For example, you can see cash register areas from outside)?	
				Could someone hear an employee who called for help?	
				Can employees observe patients or clients in waiting areas?	
				Do areas used for patient or client interviews allow co- employees to observe any problems?	
				Are waiting areas and work areas free of objects that could be used as weapons?	
				Are chairs and furniture secured to prevent use as weapons?	
				Is furniture in waiting areas and work areas arranged to prevent entrapment of employees?	
				Is patient or client waiting areas designed to maximize comfort and minimize stress?	
				Are patients or clients in waiting areas clearly informed how to use the department's services so the will not become frustrated?	
				Are waiting times for patient or client services kept short to prevent frustration?	
				Are private, locked restrooms available for employees?	
				Is there a secure place for employees to store personal belongings?	

### 3. INSPECTING EXTERIOR BUILDING AREAS

Yes	No	Question	Notes/Follow-up Action
		Do employees feel safe walking to and from the workplace?	
		Are the entrances to the building clearly visible from the street?	

## WORKPLACE VIOLENCE PREVENTION ENVIRONMENTAL HAZARD ASSESSMENT & CONTROL CHECKLIST

		Is the area surrounding the building free of bushes or other hiding places?	
		Are security personnel provided outside the building?	
		Is video surveillance provided outside the building?	
		Is there enough lighting to see clearly outside the building?	
		Are all exterior walkways visible to security personnel?	

### 4. INSPECTING PARKING AREAS

Yes	No	Question	Notes/Follow-up Action
		Is there a nearby parking lot reserved exclusively for employees?	
		Is the parking lot attended or otherwise secured?	
		Is the parking lot free of blind spots and is landscaping trimmed back to prevent hiding places?	
		Is there enough lighting to see clearly in the parking lot and when walking to the building?	
		Are security escorts available to employees walking to and from the parking lot?	

### 5. SECURITY MEASURES

In-Place	Should Add	Doesn't Apply	Question: Does the workplace have	Notes/Follow-up Action
			Physical barriers (Plexiglas partitions, bullet resistant customer windows, etc.)?	
			Security cameras or closed circuit TV in high-risk areas?	
			Panic buttons?	
			Alarm systems?	
			Metal detectors?	
			X-ray machines?	
			Door locks?	

## WORKPLACE VIOLENCE PREVENTION ENVIRONMENTAL HAZARD ASSESSMENT & CONTROL CHECKLIST

			Internal telephone system to activate emergency assistance?	
			Telephones with an outside line programmed for 911?	
			Two-way radios, pagers, or cellular telephones?	
			Security mirrors (e.g. convex mirrors)?	
			Secured entry (e.g. "buzzers")?	
			Personal alarm devices?	
			"Drop safes" to limit amount of cash on hand?	
			Broken windows repaired promptly?	
			Security systems, locks, etc. tested on a regular basis and repaired promptly when necessary?	

### 6. COMMENTS

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Checklist completed by: \_\_\_\_\_

Date: \_\_\_\_\_

Department/Workgroup: \_\_\_\_\_

Phone #: \_\_\_\_\_