



Assessment for Risk of Violence

This assessment focuses on the nature of the workplace. It takes you through a survey of your workplace's physical environment and its security measures. There are spaces for you to note the controls that are already in place, and to identify what additional controls may be suitable for your workplace.

You are not required to use all or any of the examples of controls. There may be other controls that are more suitable to the circumstances of your workplace and to controlling the risks of workplace violence that you identify.

Project Name:	Project Location:	Date:
Completed by:	Job Title:	Project Number:

Construction & Lay Down Area Violence Assessment						
Physical Environment	Yes	No	N/A	Examples of Controls	Existing Controls	Recommended Controls (identify person(s) responsible and expected completion dates, if possible)
Have there been any past occurrences or complaints regarding workplace violence at this work location or surrounding areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of previous occurrences and /or complaints to try and foresee any additional mitigation measures to be set in place to avoid reoccurrences		
Is the workplace in a high crime area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> • Consider demographics • Security guards or alarm systems 		
Do workers work with money or valuable equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> • Keeping valuables in a safe • Keep valuable material and equipment locked or inaccessible to public or unauthorized persons 		
Has the workplace location been considered? (neighbouring businesses, neighbourhood)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> • Security tours • Cameras • Secured grounds • Dense manufacturing area 		



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				<ul style="list-style-type: none"> Grounds shared by other businesses Fenced yard 		
Are workers working in remote or isolated locations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provide appropriate communications or individual security devices (telephone, two-way radio, alarm buttons, etc.) and ensure these devices will be available should a problem arise.		
Do workers work at times of increased vulnerability, such as late at night, early in the morning, or at very quiet times of day?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assess higher-risk times and the need for additional measures to protect workers, such as: <ul style="list-style-type: none"> having workers leave the building in groups arranging for security patrols joining with neighbouring businesses to coordinate security 		
Is public access to the workplace restricted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Restrict public access to the workplace by: <ul style="list-style-type: none"> providing a single entrance for clients and controlling access to other doors installing security alarms on outside doors installing door chimes or other means to notify workers when someone enters the workplace posting signs about worker-only areas using cards or keys to access 		



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				worker-only areas <ul style="list-style-type: none"> ▪ using reception desks and sign-in procedures ▪ accompanying non-workers in restricted areas ▪ using video surveillance and posting signs to inform people of it ▪ locking the public entrance and providing a bell 		
Do you have procedures for opening, closing, or securing the workplace prior to starting and at the end of shifts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and implement procedures for opening, closing, or securing the workplace prior to starting and at the end of shifts. Include procedures for responding to and dealing with unusual circumstances.		
Do you have procedures for workers to follow when dealing with aggressive or violent clients or members of the public?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and implement such procedures, which could include: <ul style="list-style-type: none"> • recommended actions and responses • when to call for assistance or go to a safe area 		
Is there a designated safe area where workers can go during a workplace violence incident?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For emergency purposes, a safe area (for example, a safe room, the business next door, etc.) should be identified. If using a safe room, it should: <ul style="list-style-type: none"> • have clear entry 		



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				<ul style="list-style-type: none"> • have a lock that can be used from the inside, but which can also be accessed by security • have a means of summoning immediate assistance 		
Are vehicles that are used by workers regularly maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refer to developed procedures to ensure vehicles used by workers are regularly maintained.		
Can workers call for immediate help when workplace violence occurs or is likely to occur while they are on the road?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Measures and procedures could include: <ul style="list-style-type: none"> ▪ providing equipment to summon assistance, such as individual or fixed alarms (sounding or silent) or cell phones (pre-programmed to call an emergency number) ▪ providing GPS tracking devices or other locating devices ▪ providing internal and external numbers for workers to call <ul style="list-style-type: none"> ○ at all hours of operations ○ posted or otherwise readily available ▪ establishing an internal code word or words to indicate that help is needed 		
Parking lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> • Adequate lighting • Motion/movement detectors • Video surveillance • Are lot entrances and exits marked clearly? 		



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				<ul style="list-style-type: none"> • Is the lot well lit? • Is access controlled? • Are company vehicles parked overnight? • Have vehicles been broken into or stolen from the lot? • 		
Are workers and supervisors trained in all relevant measures and procedures that will protect them from violence associated with the workplace's physical environment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information, instruction, or training could include: <ul style="list-style-type: none"> • risks of workplace violence arising from their job or location • other relevant measures and procedures 		
Are workers trained in safety routines for parking, leaving and returning to their vehicles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training could include: <ul style="list-style-type: none"> • being observant – look and listen • not slinging purses or bags over the shoulder or around the neck • carrying keys in hand • walking around the vehicle and the checking back seat before unlocking the vehicle • locking doors and keeping windows up • how to carry and store valuables • the dangers of reading or writing in parked vehicles • maintaining a full gas tank or filling up at well-lit and busy gas 		



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				stations <ul style="list-style-type: none"> • how to choose a safe parking spot • looking for adequate light from street lamps 		
Are the physical conditions of the yard/lay down area controlled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> • Is it well lit? • Is there a security system (cameras)? • Is access controlled by card or key? • Are businesses with higher violence risk located nearby (banks, bars)? • Is the workplace located in a dense manufacturing area? • Is the yard isolated from other buildings? • Is the entrance well lit? • Is the yard shared by other businesses? • Is the yard fenced in? 		
Are there other measures or procedures needed to protect workers from the risks of working alone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Measures and procedures will depend on the specific workplace.		



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Do you maintain regular contact with workers who are working alone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maintain regular contact with workers by: <ul style="list-style-type: none"> • providing cell phones or other communications or monitoring devices • establishing regular contact times or check-in points • designating a person to monitor contact with workers, and to follow up if contact is lost 		
Are workers trained to be aware of travel in potentially unsafe areas and of potentially violent situations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training could include: <ul style="list-style-type: none"> ▪ how workers will be informed about potentially violent people, situations, or high-risk locations ▪ areas that are remote, isolated, and/or unsafe ▪ knowing where phone systems do not work ▪ characteristics of aggressive or violent people and signs of escalation ▪ recognition of potentially violent situations, including situations of sexual violence ▪ recommended actions and reactions, including when to leave or escape 		



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Are workers and supervisors trained in all relevant measures and procedures for protecting themselves from workplace violence associated with working alone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information, instruction, or training could include: <ul style="list-style-type: none"> ▪ risks of workplace violence arising from their job or location ▪ relevant measures and procedures 		
In addition to the above, are workers and supervisors provided with information, instruction, and/or training to protect them from the risks of working alone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information, instruction, or training could include: <ul style="list-style-type: none"> ▪ risks of workplace violence arising from their job or location ▪ relevant measures and procedures 		

Follow Up - Control Measures Review

Recommendations Followed?	If Yes, When?	If No, Why?	Other Control Options?	Other Recommended Controls (identify person(s) responsible and expected completion dates, if possible)
Yes No <input type="checkbox"/> <input type="checkbox"/>				

Site Rating: High / Medium / Low	Completed by: Marco Serra	Signed:
Date: October 19th, 2020	Foreman/Supervisor: Aurelio Mota	Signed: