

WORKPLACE VIOLENCE PREVENTION PLAN

HAZARD INSPECTION CHECKLIST – EXHIBIT E

Date: _____

Facility / Operation / Department: _____

STAFFING / SECURITY

HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Lack of designated security personnel, including chief of security / safety	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Designate personnel responsible for security	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Failure to communicate contact information for security personnel to all employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Communicate contact information for security personnel to all employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Emergency telephone numbers for law enforcement, fire and medical services not accessibly posted	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Post emergency telephone numbers for law enforcement, fire and medical services where employees can access it	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Security not posted / located in vulnerable areas (e.g. parking lot, reception area, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Post / locate security staff in vulnerable locations.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Staff not available to escort employees upon request or as needed (e.g. to the parking lot, etc.) and a contact number provided	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Staff identified and available to escort employees on request or as needed and a contact number provided	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
OTHER	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

WORKPLACE VIOLENCE PREVENTION PLAN

TRAINING

HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Required training not done on schedule in accordance with the Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Perform training in accordance with the Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not trained on the Plan and topics required by the Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	All employees trained on the Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees [or specific employees] not trained to respond to violent incidents	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Employees trained to respond to violent incidents	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees [or specific employees] not trained to recognize the potential for violence, factors contributing to the escalation of violence and how to counteract them, and when and how to seek assistance to prevent or respond to violence. violence, and strategies to avoid physical harm.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Employees trained to recognize the potential for violence, factors contributing to the escalation of violence and how to counteract them, and when and how to seek assistance to prevent or respond to violence. violence, and strategies to avoid physical harm.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
OTHER	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

WORKPLACE VIOLENCE PREVENTION PLAN

ENGINEERING / FACILITIES

HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
No fences, gates, walls or other barriers around workplace	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install fences, gates, walls or other barriers around workplace	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Entrances not visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Make entrances visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Workplace attractive to thieves	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Make workplace unattractive to thieves	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
No employee only parking area	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide employee only parking area	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Landscape and areas around workplace and parking lots not maintained to minimize hiding places	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Maintain landscape and area around workplace and parking lots to minimize hiding places	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Inadequate lighting in the parking areas and approaches to workplace	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install adequate lighting in the parking areas and approaches to the workplace	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Access to the facility/department/operation and freedom of movement within it not controlled, consistent with business necessity.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Access to the workplace and freedom of movement within it controlled, consistent with business necessity.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

WORKPLACE VIOLENCE PREVENTION PLAN

HAZARD		PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
	No controlled / Escorted access in certain situations (e.g. discharged employee, concerns regarding an employee)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Procedures to control and/or escort employees in certain situations (e.g. discharged employee, concerns regarding an employee)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the workplace lack:					
	Secured entry (e.g. fobs, buzzers)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Secured entry system	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Physical barriers (Plexiglass, elevated counters, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Installed appropriate barriers	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Locks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install locks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Alarms	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install alarms	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Panic alarms / buttons (portable or fixed)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install or provide panic alarms	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Screening devices (e.g. metal detectors, x-ray machines)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install screening devices	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Line of sight between employees in work areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide line of sight between employees in work areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

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HAZARD		PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Surveillance lacking:		<input type="checkbox"/> Yes <input type="checkbox"/> No	Using surveillance, such as cameras or mirrors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Mirrors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install mirrors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Cameras – interior and exterior	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install cameras	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Other surveillance	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install other surveillance	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lack of signs that there is limited cash on premises		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Post signs that limited cash is kept on the premises	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Insufficient available employee escape routes		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Establish / designate employee routes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Exit doors					
	Opened from inside or outside	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Exit doors are only able to be opened from the inside	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Opened from the direction of exit travel with tools or special knowledge or effort	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Exit doors are opened from the direction of exit travel without tools or special knowledge or effort	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Spaces configured so that access to doors and/or alarm systems is impeded		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Configure space so that access to doors and/or alarm systems is not impeded	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

WORKPLACE VIOLENCE PREVENTION PLAN

HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Furniture not secured to floor	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Secure furniture to floor	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
OTHER	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Secure furniture to floor	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

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WORK PRACTICE CONTROLS

HAZARD		PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Public access not restricted consistent with business necessity		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Restrict public access consistent with business necessity	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not provided with maps and/or clear directions to their workspaces and entrances and exits		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide employees with maps and/or clear direction to their workspaces and entrances and exits	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lack of posted floor plans showing entrances, exits and the location of security, visible only to authorized personnel		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Post floor plans posted showing entrances, exits and the location of security, visible only to authorized personnel	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lack of appropriate security measures for employees working in special situations					
	Working late at night	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Institute appropriate security measures for employees working late at night	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Handling money	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Institute appropriate security measures for employees handling money	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Working by themselves	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Institute appropriate security measures for employees working by themselves	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Visitors or clients not escorted when on premises		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Escort all visitors and clients when on premises	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

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Employees, visitors and clients not required to wear badges or other identification	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Require all employees, visitors and clients to wear badges or other identification	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees without access to a telephone	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide employees access to a telephone in case of an emergency	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
No procedures to report suspicious persons or activities	<input type="checkbox"/> Yes <input type="checkbox"/> No	Employees have access to contact information for security and law enforcement and are instructed how to report suspicious persons and activities	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Workplace Violence Prevention Plan not communicated and/or provided to all employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Workplace Violence Prevention Plan provided to all employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not trained on recognizing and responding to violence, including active shooter	<input type="checkbox"/> Yes <input type="checkbox"/> No	Employees trained on response to violence, including active shooter	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
No communication procedures for employees to report workplace violence concerns, including threats, physical violence and property damage, without fear of reprisal	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Implement communication procedures for employees to report workplace violence concerns	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

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No communication procedures between employees and between shifts, facilities, operations and/or departments regarding conditions that may increase potential for workplace violence	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Implement communication procedures between employees and between shifts, facilities, operations and/or departments regarding conditions that may increase potential for workplace violence	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Cash on hand not stored in safes on premises	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Cash on hand limited and time access safes used	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Valuables present on site or during exchange (e.g. cashier, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Limit the amount of valuables on site and keep only small bills in a cash register; use time access safes and deposit large bills as they are received; use only one cash register after dark and keep its drawer empty and open	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees work alone or isolated.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Employees use a “buddy system” or a check in system	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lack of appropriate discipline procedures for employees who commit workplace violence, including threats	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide appropriate procedures for employees who commit workplace violence, including threats	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employee Assistance Program or other counseling not available to employees who exhibit behaviors or signs of strain that may lead to workplace violence	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide an Employee Assistance Program or other counseling to employees who exhibit behaviors or signs of strain that may lead to workplace violence	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

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HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
OTHER	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	[Describe correction action taken]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	