



Workplace Violence Prevention - Employee Perception Survey

This survey is provided as a tool that can be completed by every employee in the workplace in order to get an idea of the perception of workplace violence in your organization. The survey is a means to gauge how employees understand the potential hazard risk of violence and the available controls that exist in the workplace to prevent injury.

Before distributing this survey, Employers should add an introduction that outlines the purpose of the survey, how the results of the survey will be reported, with whom the results will be shared, and how it will be used. The survey should be anonymous.

Please check off the box that best describes your role in the workplace:

- Employee
- Supervisor
- Management
- Other

Employee: This group refers to employees who do not have any permanent supervisory duties or authority over other employees at the jobsite. Titles may be: worker, staff, front-line employee, crew member, operator, assistant, clerk, support staff, customer service rep, journeyman, labourer, team member, associate, etc.

Supervisor: This group refers to employees with supervisory responsibility and authority over specific groups within specific departments, divisions, or shifts of a workplace; and who directly supervise employees on a regular basis. Titles may be: supervisor, department manager, foreman, leadhand, crew chief, shift supervisor, area supervisor, team leader, project supervisor or manager, coordinator, etc.

Management: This group refers to the management groups within a workplace that have authority over supervisors and departments, and who are responsible and accountable for managing the operations and personnel of the organization. Titles may be: owner, employer, chief executive or operating officer, president, vice-president, executive director, divisional head, director, department head, general manager, administrator, etc.

Other: "Other" is if you do not fit any of the above descriptions or are not a regular employee of the workplace, (i.e. chairperson, board member, student intern, volunteer, contract worker, cooperative work placement, work placement through an external agency, etc.).

Please answer all of the following questions:

1.	What does the term 'Workplace Violence' mean to you?
2.	In the last 2 years, have you been directly involved in an incident(s) of workplace violence within this organization? (please circle the appropriate answer) 2.1 Yes 2.2 No If yes , please provide examples of incident(s).
3.	In your experience, identify the type of violence that typically occurs in your organization. (please circle the appropriate answer) 3.1 Worker-to-Resident 3.2 Worker-to-Visitor (resident family member) 3.3 Worker-to-Worker 3.4 Worker-to-Domestic Violence): The perpetrator usually has a personal / domestic relationship with an employee, e.g., domestic violence in the workplace 3.5 Worker-to-external (violence committed by someone who has no connection or relationship to the workplace such as a robbery at the workplace
4.	Do you report all incidents of workplace violence? Including those incidents directed at a co-worker. (please circle appropriate answer) 4.1 Yes 4.2 No 4.3 N/A

	<p>If 'no' to question, please explain why.</p>
<p>5.</p>	<p>Did your Supervisor or Manager investigate the incident(s) of workplace violence you reported? (please circle appropriate answer)</p> <p>5.1 Yes</p> <p>5.2 No</p> <p>5.3 N/A</p> <p>If yes, was corrective action taken?</p> <p>5.4 Yes</p> <p>5.5 No</p> <p>5.6 Unsure</p>
<p>6.</p>	<p>Were you made aware of any supports available to help you if you were directly or indirectly affected by workplace violence? (please circle appropriate answer)</p> <p>6.1 Yes</p> <p>6.2 No</p> <p>If yes, did you access the supports? If no, please explain why.</p>
<p>7.</p>	<p>Have you participated in workplace violence prevention training or education at your workplace? (please circle appropriate answer)</p> <p>7.1 Yes</p> <p>7.2 No</p>

	If yes , what training did you participate in? If no , why not?
8.	Do you think you are prepared to handle an incident of workplace violence? (please circle the appropriate answer) 8.1 Yes 8.2 No If no , please explain why.
9.	Have incidents of workplace violence increased or decreased during that time you have worked at this organization? (please circle the appropriate answer) 9.1 Increased 9.2 Decreased 9.3 No Change
10.	Have you experienced instances of bullying/harassment within this organization? (please circle the appropriate answer) 10.1 Yes 10.2 No If yes , please provide examples of the incident(s).
11.	Have you experienced instances of domestic violence within this organization? (please circle the appropriate answer) 11.1 Yes 11.2 No

	<p>If yes, please provide examples of the incident(s).</p>
12.	<p>Please provide any suggestions you feel would help to prevent workplace violence in your organization.</p>