The implementation of this tool is not mandatory. The tool contains recommendations to support workplace violence prevention and regulatory compliance. The information presented can be adopted in whole, in part, or not at all.

revision: 1.0, date: 2021-06-02

Home Visit Risk Assessment Form

A template for k-12 public education - compliance

## Terms of use

By accessing or using these BCPSEA posted resource materials, you agree to be bound by these terms and conditions.

Content: Although BCPSEA endeavors to ensure that the information provided within these resource materials is as accurate, complete and current as possible, BCPSEA makes no representations or warranties about the information, including in respect of its accuracy, completeness or currency. BCPSEA assumes no responsibility for any loss or damage to you or any other person, howsoever caused, that is in any way related to the information found within these resource materials or your use of it.

Intent: The content within these resource materials is provided for educational and general informational purposes. It should not be considered as solicitation, endorsement, suggestion, advice or recommendation to use, rely on, exploit or otherwise apply such information or services.

Complete this form prior to requesting a home visit with the home team. Discuss the results with your supervisor.

1. What do we already know?

|  |  |
| --- | --- |
| **What do we know about the student?** | |
| Is there an Individual Safe Work Instruction for this student? | Yes,  No |
| Is there recent or known potential for behaviors that could impact worker safety? | Yes,  No,  Unknown |
| **Do any of the following apply to the home situation?** | |
| Verbal abuse or threatening language by the family to a worker. | Yes,  No,  Unknown |
| Violence by the family to a worker. | Yes,  No,  Unknown |
| False allegations by a family member about a worker. | Yes,  No,  Unknown |
| Knowledge of dangerous animals at the home. | Yes,  No,  Unknown |
| Knowledge of weapons at the home. | Yes,  No,  Unknown |
| **Do any of the following apply to the local environment?** | |
| Poor visibility/street lighting. | Yes,  No,  Unknown |
| Isolated area. | Yes,  No,  Unknown |
| Limited nearby parking. | Yes,  No,  Unknown |
| Multi family unit/low-rise walk up or high-rise apartment. | Yes,  No,  Unknown |
| Area impacted by civil unrest/protest. | Yes,  No,  Unknown |
| Ministerial emergency orders restricting various services.\* | Yes,  No,  Unknown |
| Other location based risk factors in the area. | Yes,  No,  Unknown |
| **What processes are in place?** |  |
| Is there a working alone or in isolation procedure that will be followed? | Yes,  No,  Unknown |

\* For example: Pandemic restrictions.

1. Assessing the Risk

|  |
| --- |
| From section 1 “What do we already know?”   * If “No” was selected for all items proceed to section 3 “Visit Details” and book the appointment. * If a “Yes” and/or “Unknown” was selected for any of the items, discuss the home visit with your supervisor or school based team. Proceed to answer the following questions:   What is the nature of the visit?  For items check “Yes” or “Unknown”, is that information relevant to the context of this visit? Give details:    What are the alternate methods to connect with this student/family?  **DECISION:** Must the work proceed as intended at the home site?  Yes,  No  If “No”, carry out the alternate method to connect with the student/family.  If “Yes”, fill out an (or update the) ***Individual Safe Work Instruction*** for the home visit and book the appointment with the family. Procedure to section 3 “Visit Details” |

### Visit Details

|  |  |
| --- | --- |
| **Name(s) of worker(s) conducting the home visit** | **Worker(s) cell phone #(s)** |
| **Home/Site visiting address** | **Date and time of planned visit**  Date:       from:       to: |
| **Check in protocol:**  **Method:**   Phone call  Text mgs  Email  Other  **Interval:**  Upon arrival and prior to entry  Every        minutes  hours  Upon departure | **Worker conducting the home visit will contact:**  **Name:**  **Phone number:**  **Email:**  **Other:** |

### Point of Contact

* Review and use the Person Employee Environment and Task (PEET) cue card before and during the site visit.
* Complete check-in protocol.
* Be prepared to follow the response plan as written in the individual safe work instruction as necessary.
* Immediately leave the area if there is imminent risk to your safety.
* Contact your supervisor.
* Call 911 - if necessary.