



School District No. 73  
**Workplace Risk Assessment (WRA)**

If a student initiates a violent incident, this form is to be used by Principals/Vice Principal, in consultation with the affected staff member and a member of the Joint School Health and Safety Committee, to determine if a Safety Plan for that student is required.

*Definition: "Violence means the attempted or actual exercise by a person, other than a worker, of any physical force so as to cause injury to a worker, and includes any threatening statement or behavior which gives a worker reasonable cause to believe that he or she is at risk of injury." – Reg 4.27*



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

Name of person reporting a concern: \_\_\_\_\_

Name of student involved in concern/incident: \_\_\_\_\_

D.O.B. \_\_\_\_\_

Date of incident: \_\_\_\_\_

Nature of the concern/incident: \_\_\_\_\_

Persons investigating risk: \_\_\_\_\_

The following chart is meant to assess behavioural incidents directed toward staff ONLY.

| INTENSITY  | FREQUENCY  |
|--|--|
| If an incident has occurred, how severe was the injury?<br><b>High</b> - a severe injury requiring hospitalization<br><b>Medium</b> - moderate injury such as a sprain or fracture<br><b>Low</b> - a minor injury such as a bruise or scratch<br><b>None</b> - not applicable  | How often are incidents likely to occur?<br><b>High</b> - at least once a week up to once or more a day<br><b>Medium</b> - at least once a month up to once a week<br><b>Low</b> - at least once a year up to once a month<br><b>None</b> - not applicable   |
| The intensity of the incident(s) is:<br><input type="checkbox"/> High<br><input type="checkbox"/> Medium<br><input type="checkbox"/> Low<br><input type="checkbox"/> None <div style="border: 1px solid black; padding: 5px; margin-left: 20px;"> <i>Please check (✓)<br/>             the box that best describes the risk at school</i> </div> | The frequency of the incidents is:<br><input type="checkbox"/> High<br><input type="checkbox"/> Medium<br><input type="checkbox"/> Low<br><input type="checkbox"/> None <div style="border: 1px solid black; padding: 5px; margin-left: 20px;"> <i>Please check (✓)<br/>             the box that best describes the risk at school</i> </div> |

1)  A Safety Plan is presently in place for this student.

If a safety plan is in place for this student, do not proceed to question 2 or 3

- 2)  This student presents a risk of violence toward staff (see chart above).
- a safety plan must be written when: (1) the intensity indicator exceeds “low”; or (2) the frequency indicator exceeds “low” while the intensity indicator exceeds “none”
  - the principal or designate signature is required on this form
  - the principal or designate will contact the District Behaviour Resource Teacher immediately to confirm or arrange for a safety plan meeting
- 3)  This student does not present a risk of violence toward staff (see chart above).
- **As per the threshold instruction above (See #2)**

|   |                       |
|---|-----------------------|
| Principal (or designate Signature)                      | Date – Form Completed |
| Names of others who contributed to the risk assessment: |                       |
|   |                       |
|   |                       |
|   |                       |
|   |                       |

**File in a risk assessment file in the school office and forward a copy to the Manager of Health and Safety**