# Assessment of a Client and Home Prior to a Visit

Before assigning a health care worker to a home visit, a supervisor or case manager should arrange a phone interview with the prospective client and/or a family member to complete a Pre-visit Assessment and plan time to assess the site, or area for potential violence hazards and risks. The evaluation should not only cover the physical environment, but should determine verbal patterns or behavioural cues that would indicate a risk of violent or aggressive behaviour. Under the Occupational Health and Safety Act, the supervisor has the responsibility to inform workers of any hazards identified in the workplace and to take every precaution reasonable in the circumstances to protect their health and safety.

The employer should ensure that a process is in place to conduct a pre-visit assessment and that the information gathered is given to the care provider so that safe approaches can be put into place. This process should clearly identify:

* Who will conduct the pre-visit assessment?
* Will the assessment be conducted in person or over the phone?
* Where will the information gathered be documented and maintained?
* How will this information be communicated to care providers?

Use the following pre-visit assessment tool as a guide for interviewing the client and/or family member(s) of the client*.* Read through each assessment item and answer the question with a ‘yes’ or ‘no’. A ‘yes’ response indicates an elevated risk and an appropriate control measure should be considered. Document the action you will take in the column on the right.

Refer to the [Risk Specific Guidelines and Tips](#_RISK_SPECIFIC_GUIDELINES) section in this handbook for additional hazard control solutions. Share the completed form with workers and clearly communicate risk factors and precautions to be taken.

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| Pre-Visit Assessment Tool | | | |
| *Sample questions to ask during the phone interview* | | | |
| Risk Identification | Y/N | **Notes** | **Risk-specific Tips** |
| Is the client or any other person in the home resistant to the visit? | Yes  No | Click here to enter text. | [**A1: Communicating with Potentially Violent Clients**](#_A1:_Communicating_with)  [**A2: Terminating an Interaction with an Angry Client**](#_A2:_Terminating_an)  [**A3: Guidelines for Non-verbal Behaviour and Communications**](#_A3:_Guidelines_for)  [**A4: Guidelines for Telephone Threats**](#_A4:_Guidelines_for)  [**D2: Tips for when a Weapon is Involved**](#_D2:_Tips_for)  [**E1: Point-of-care Staff Work Practice Assessment**](#_E1:_Point-of-care_Staff)  [**E2: Client Aggression Risk Factors**](#_E2:_Client_Aggression)  Click here to enter text. |
| Is there a history of violent or aggressive behaviour by the client or other persons in the home – e.g. restraining orders against anyone in the household? | Yes  No  *\*If yes, advise relevant staff and ensure Violence Assessment Tool AT is completed at first contact with client. (Refer to* [*PSHSA’s Individual Client Risk Assessment Toolkit*](http://www.pshsa.ca/workplace-violence/)*, as needed.)* | Click here to enter text. |
| Does the client have any medical conditions that may predispose them to violent or aggressive behaviour — e.g. head injury, substance abuse, or cognitive impairment? | Yes  No | Click here to enter text. |
| Is the client presenting verbal patterns or behavioural cues which may indicate a risk of violent or aggressive behaviour – e.g. confused, boisterous, uttering threats, agitated, suspicious, intoxicated, and / or making socially inappropriate comments? | Yes  No  *\*If yes, advise relevant staff and ensure VAT is completed at first contact with client. (Refer to* [*PSHSA’s Individual Client Risk Assessment Toolkit,*](http://www.pshsa.ca/workplace-violence/) *as needed.)* | Click here to enter text. |
| Is or was the violent or aggressive behaviour directed toward a specific person or group of persons? | Yes  No | Click here to enter text. |
| Will the person(s) whom the violent or aggressive behaviour is directed toward be present during the home visit? | Yes  No  *\*If yes, advise relevant staff and ensure VAT is completed at first contact with client. (Refer to* [*PSHSA’s Individual Client Risk Assessment Toolkit,*](http://www.pshsa.ca/workplace-violence/) *as needed.)* | Click here to enter text. |
| Have threats recently been made against the client? If so, who has made these threats? | Yes  No | Click here to enter text. |
| Are firearms or other dangerous weapons kept in the home? | Yes  No | Click here to enter text. |
| Are there pets or animals in the home? | Yes  No | Click here to enter text. |