

Conflict Management Training Needs Analysis

A sector-neutral checklist for any organisation with customer-facing, public-facing, or service-facing staff — including retail, housing associations, local authorities, healthcare, transport, hospitality, and contact centres.

How to use this checklist

This checklist is designed to be completed by a manager, HR lead, health & safety lead, or L&D lead ahead of commissioning conflict management training. It works across sectors because it focuses on the underlying drivers of workplace conflict risk — exposure, environment, existing capability, and legal duty — rather than any single sector's terminology. Where useful, sector examples are given in italics beneath a question; treat these as illustrations, not an exhaustive list.

There are no right or wrong answers. The purpose is to build an accurate picture of where conflict risk sits in your organisation, what's already in place, and what a training programme needs to cover to be genuinely useful rather than generic. Completed checklists, along with any incident data you can share, allow us to design a programme matched to your actual risk profile rather than a one-size-fits-all course.

Disclaimer: *This checklist is provided as a general starting point to help identify conflict management training needs and is not intended to be an exhaustive or definitive statement of an organisation's legal, regulatory, or health and safety obligations. It does not constitute legal advice. Legislation, guidance, and sector-specific standards referenced or implied in this document may change over time, and this checklist may not reflect the most current requirements or cover every obligation relevant to your organisation, sector, or location. Organisations should seek their own independent legal or professional advice to confirm their specific obligations and should not rely on this document as a substitute for that advice.*

1. Organisational Profile & Risk Context

Establish who your staff deal with, in what circumstances, and how often — this shapes everything that follows.

- ☐ We have identified every role in the organisation that has direct contact with customers, service users, tenants, patients, members of the public, or claimants.
- ☐ We understand which of these roles involve face-to-face contact, which are telephone/remote, and which are digital (webchat, email, social media).
- ☐ We have a rough estimate of contact volume per role (e.g. calls per day, footfall per site, visits per week).
- ☐ We know which roles are most frequently the first point of contact for a distressed, frustrated, or aggrieved individual.
- ☐ We have considered whether service users are often under stress for reasons unrelated to the immediate interaction (e.g. bereavement, financial hardship, housing insecurity, ill health, addiction, mental health crisis).
 - *Retail: shop floor and till staff, returns desks, loss prevention. Housing association: repairs line, neighbourhood officers, home visits. Council: reception, benefits/housing options, environmental health, parking enforcement. Healthcare: reception, triage, patient liaison.*
- ☐ We have identified any lone-working roles or situations (home visits, out-of-hours duty, single-staffed sites/desks).
- ☐ We have identified any roles that regularly deal with vulnerable individuals (safeguarding-relevant contact).

2. Incident Data & Reporting

You can't design training against a risk you haven't measured. This section audits what you currently know.

- ☐ We have a formal process for staff to log incidents of verbal abuse, threats, aggression, or physical violence.
- ☐ We can produce data on the number of recorded incidents over the last 12 months, broken down by role, site, or team.
- ☐ We have asked staff (not just relied on formal logs) whether they believe incidents are under-reported, and why.
- ☐ We track whether incidents are escalating, static, or reducing year on year.
- ☐ We record whether incidents resulted in sickness absence, and if so, how much.
- ☐ We record near-misses and verbal incidents, not only physical ones.
- ☐ Incident data is reviewed by someone with the authority to act on patterns it reveals (not just filed).
- ☐ We know which sites, times of day, or service types generate the most incidents.

3. Current Policies & Procedures

What's written down, and does it match what actually happens on the ground?

- ☐ We have a written policy covering violence and aggression toward staff from customers/service users/members of the public.
- ☐ Staff know this policy exists and can describe, in their own words, what it says they should do.
- ☐ We have a clear, documented escalation procedure for when a situation exceeds what a frontline member of staff should be expected to handle alone.
- ☐ We have a policy on when and how a service can be refused, suspended, or withdrawn from an abusive individual, and staff know how to invoke it.
- ☐ We have reviewed our policy within the last 12–24 months, or since any relevant change in the law.
- ☐ Our policy distinguishes between different categories of risk (verbal abuse vs threats vs physical violence vs harassment) with different required responses for each.
- ☐ We have a clear position on when police should be involved and who has authority to make that call.

4. Legal & Regulatory Obligations

Conflict management training sits partly inside a statutory duty of care, not only a service-quality choice.

- ☐ We have carried out a risk assessment that specifically considers violence and aggression toward staff, as required under the Management of Health and Safety at Work Regulations 1999.
- ☐ This risk assessment is a live document that gets reviewed, not a one-off exercise filed away.
- ☐ We can demonstrate that the training our staff have received is proportionate to the risks identified in that assessment.
- ☐ We understand our RIDDOR reporting obligations for serious incidents.
- ☐ If we are a retail employer in England or Wales, we are aware of the new standalone offence for assaulting a retail worker under the Crime and Policing Act 2026, and what it means for our incident reporting and evidence-gathering.
- ☐ We consult staff or safety representatives on violence-related risk, rather than deciding policy without their input.
- ☐ We understand our obligations, if any, under sector-specific frameworks (e.g. NHS Violence Prevention and Reduction Standard, local authority safeguarding duties, social housing regulatory standards).

Note: legislation and guidance referenced in this section is provided for general awareness only, may not be exhaustive, and may have changed since this checklist was produced. Please verify current requirements independently or seek professional legal advice specific to your organisation.

5. Existing Training Provision

Understand what training exists today, who's had it, and how well it has stuck.

- ☐ We know which staff have received any form of conflict management, de-escalation, or personal safety training, and when.
- ☐ We know which staff have received none.
- ☐ Existing training is refreshed periodically, not delivered once at induction and never revisited.
- ☐ We have asked staff whether they feel the training they've had reflects the real situations they encounter.
- ☐ New starters in customer-facing roles receive conflict-related training before, or very shortly after, they begin unsupervised contact with the public.
- ☐ Managers and team leaders have training in supporting staff after an incident, not only staff themselves being trained to prevent one.
- ☐ We have identified any roles needing training beyond generic de-escalation — e.g. lone working/personal safety, safeguarding handover, telephone-specific techniques, or de-escalating individuals in crisis.

6. Environment & Physical Safety

Some conflict risk is designed into (or out of) the physical and operational environment, independent of staff skill.

- ☐ We have assessed whether our physical layout (queuing, waiting areas, desk positioning, sightlines, exits) increases or reduces conflict risk.
- ☐ Staff in higher-risk locations have access to alarm systems, panic buttons, or a clear method to summon help.
- ☐ We have considered whether wait times, queuing, or capacity issues are a direct driver of the hostility our staff experience.
- ☐ Reception/front-of-house areas have appropriate visibility for colleagues or security to notice an escalating situation.
- ☐ Lone workers and home/site visitors have a check-in/check-out or location-tracking process.
- ☐ We have reviewed whether any recent incidents point to an environmental or process fix, rather than purely a training gap.

7. Staff Wellbeing & Support

Training that protects staff, not just customer outcomes, tends to be better received and better retained.

- ☐ Staff have access to support after a difficult or frightening incident (debrief, occupational health, EAP, peer support).
- ☐ Managers are expected, and know how, to check in with a staff member after a serious incident.
- ☐ We monitor whether teams with higher recorded hostility also show higher sickness absence or turnover.
- ☐ Staff feel confident that reporting an incident will lead to a visible response, not just a logged record.
- ☐ We give staff permission — explicitly — to disengage from or exit an interaction that has become unsafe, without fear of it counting against them.
- ☐ Wellbeing support is proactively offered rather than something a staff member has to seek out themselves.

8. Desired Outcomes & Success Measures

Be clear about what you want training to change, so the programme — and its impact — can be properly evaluated.

- ☐ We can articulate the specific problem we want training to address (e.g. reduce incident severity, reduce staff turnover, meet a compliance requirement, respond to a specific rise in hostility).
- ☐ We have agreed how success will be measured after training (e.g. incident data, staff confidence surveys, absence rates, complaint volumes).
- ☐ We know which audiences need training first if a phased rollout is required (highest-risk roles/sites vs. organisation-wide).
- ☐ We have identified whether this is a one-off intervention or the start of an ongoing programme with refreshers.
- ☐ We have budget and executive sponsorship secured, or a clear plan for securing it, so training isn't at risk of stalling after this needs analysis.
- ☐ We are clear on any format constraints (in-person, e-learning, blended, shift patterns, multi-site delivery, language needs).

9. Sign-off & Next Steps

Priority areas identified from this checklist:

Roles/teams to prioritise first:

Completed by / role:

Date:

Once complete, this checklist forms the basis of a short consultation with The Conflict Training Company, where we map your findings against our course library and, where needed, design bespoke content specific to your sector, risk profile, and existing policies.

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