A 10 POINT PLAN TO END VIOLENCE AND AGGRESSION

RESPECT AND PROTECT OUR VICTORIAN HEALTHCARE WORKERS
For years we have been working to improve the safety of nurses, midwives and all healthcare staff working in our Victorian hospitals and public health care facilities.

All too often, nurses and midwives experience violent incidents in their workplaces and are regular victims of occupational violence and aggression.

Serious injuries, both physical and psychological, are both too frequent and frightening. Violence is not a part of Victorian healthcare workers’ jobs.

In a move to stop the unacceptable number of assaults, the Australian Nursing and Midwifery Federation (Victorian Branch) has developed a 10-point plan to end violence and aggression in our healthcare facilities.

The plan outlines the necessary actions required to improve security, implement proactive measures to identify and address risks as well as improving the reporting culture and the mechanisms to assist with investigation and appropriate support following violent workplace incidents.

Enough is enough. We are encouraging our political leaders to commit to ANMF’s 10-point plan, and become part of the solution.

Together we can ensure that the appropriate actions are taken to stop the unacceptable levels of violence in our healthcare facilities.

Lisa Fitzpatrick
ANMF (Vic Branch) Secretary
ANMF (Vic Branch) introduces a ‘Zero Tolerance – Occupational Violence and Aggression Policy’

EBA campaign calls for improved measures. Results in taskforce. ANMF becomes stakeholders for the safety interim standards

Victorian Taskforce on Violence in Nursing Report. 29 recommendations, including full implementation of Code Grey

Action to stop violence against nurses and midwives: a timeline.
A 10-point plan to end the culture of violence and aggression against healthcare workers

Violence is NOT a part of a healthcare worker’s job. It is NOT normal to go to work expecting to be assaulted. It is NOT acceptable to be threatened at work.

The Australian Nursing & Midwifery Federation (Vic Branch) calls upon the Victorian Government and healthcare employers to implement this 10-point plan to end violence against healthcare workers.
The Department of Health must develop adequate baseline standards for security and fund healthcare organisations to comply.

Standards must take into account:
1. specifically trained security personnel
2. access to secure areas and safe zones
3. security cameras
4. personal duress alarms
5. searching of personal belongings
6. regular security audits of healthcare facilities, including maintaining security equipment
7. monitoring systems for community clinics.
Identifying the risk of a patient or others being aggressive or violent towards staff must be part of clinical pre-admission, admission procedures and throughout the patients’ stay.

When a patient or client is admitted without notice to a healthcare facility – for example to an emergency department – a violence risk assessment must be initiated immediately.

It is critical that staff are alerted as soon as possible to the potential for a patient (or their relatives/visitors) to be violent or aggressive. Healthcare facilities must ensure violent or aggressive patient/client alert systems are part of their admissions and patient stay procedure. This allows for preventative measures – for example, placing the patient in a highly visible area, or nursing in pairs with security staff.
Patient care plans must not only take into account the clinical component of caring for a patient but also how caring for the patient may impact on staff or others. The patient’s history, presentation and risk factors must be taken into account. Where possible, care plans should involve family members to ensure clear standards of behavior are set and healthcare professionals can provide a consistent care approach.
Within health services, there is a culture of not reporting violent incidents. To change this culture, the Department of Health and health services must build trust by:

i. introducing a reporting system that allows accurate, timely and appropriate recording of information, including a quarterly report to be made public by the department
ii. investigating incidents in a consultative and collaborative manner
iii. taking clear and relevant action over incidents
iv. communicating actions taken as a result of incident reports
v. ensuring the Health Minister and Boards are provided with details of violent incidents, not just statistics, so they understand the effects of violence on healthcare workers.
vi. working with police to enable prosecution of offenders.
The principles of crime prevention through environmental design should be mandatory in designing, refurbishing, renovating and retrofitting workplaces to prevent and minimise violence.
Education and training about how to prevent and respond to aggression and violence should begin at the undergraduate level and continue throughout a health worker’s career, with: employer-specific training and education; accredited and standardised training of both health workers and security staff; and regular refresher training.
Healthcare facilities’ responses to aggression and violence such as Code Grey and Code Black must be defined consistently state-wide and apply to all situations of occupational violence and aggression.

Workplaces should also integrate their violence prevention policies with related plans such as:
   i. post incident support policies
   ii. training and education policies
   iii. security policies

Systemic policy changes and decisions about a patient’s care should take into consideration any potential for the change to increase the incidence of aggression and violence.
Ideally, there will be no violent or aggressive incidents. But in the event of violence or aggression, staff members deserve extensive and appropriate follow-up, support and care, including information about, and access to, the workers’ compensation system and the police reporting process. Incident investigations and actions taken as a result must also be reported.
All healthcare and other workers who come into contact with patients (and their patients’ families and visitors) should have uniform knowledge around the prevention and response to violence and aggression. All workers in healthcare settings should have the expectation that they will not encounter violence or aggression at their workplace.

All workers’ reports about aggressive or violent behaviour from a patient or their visitors should be taken into consideration when making decisions about the patient’s care and management. In making decisions, it is important to communicate, consult and collaborate with all staff involved in the patient’s management and care.
Management must demonstrate commitment to changing the culture of healthcare workplaces to ‘no aggression or violence’ workplaces. In workplaces where there is no expectation of aggression or violence, staff will become empowered to report incidents and believe in their right to a safe workplace.

All policies and procedures around prevention and managing violent incidents should be developed in consultation with staff.