

# Victorian Taskforce on Violence in Nursing Implementation of Recommendations Status Report 1/2007 (Feb 2007)

The following is a status report on the implementation of the recommendations of the *Victorian Taskforce on Violence in Nursing (2005)*. It outlines work by the Department of Human Services (DHS) on implementing the recommendations commencing in March 2006. In this report, the following framework of strategies and associated recommendations is used:

**Strategy 1-Setting the framework (Incorporating Recommendations 1-4,9,10,13-16,22,26)**

**Strategy 2-Raising awareness (Incorporating Recommendations 5,8,11)**

**Strategy 3-Justice interface (Incorporating Recommendations 5,6,7,12)**

**Strategy 4- Education (Incorporating Recommendations 15-20,24,25)**

**Strategy 5- Reporting and Monitoring (Incorporating Recommendations 27,28,29)**

Note: The strategies are interdependent and recommendations may be part of more than one strategy.

## Legend:

DHS = Department of Human Services  
DoJ = Department of Justice  
NPB = Nurse Policy Branch, DHS  
OH & S = Occupational Health and Safety  
OV = Occupational Violence  
PNA = Principal Nurse Advisor, DHS

Shaded sections refer to recommendations that Victorian health services have responsibility to implement as recorded in actual recommendation.



STRATEGY ONE: SETTING THE FRAMEWORK	<i>The development of a framework that includes a policy statement, uniform definitions of bullying and violence and tools and examples to assist in local implementation</i>		
Recommendations	Respon- sibility	Status & Timeline	Progress at February 2007 Proposed activities/work plan
<p><b>Recommendation 1</b> <i>The Department of Human Services and health care facilities adopt a uniform definition of occupational violence consistent with the definition and classifications developed by the Taskforce on Violence and Aggression Subcommittee in this report.</i></p> <p><b>Recommendation 2</b> <i>That the Department of Human Services and health care facilities adopt a policy statement that has key messages including:</i></p> <ul style="list-style-type: none"> <li>• <i>Violence against nurses is unacceptable and must be proactively addressed</i></li> <li>• <i>There is not a culture of tolerance of violence in the workplace</i></li> <li>• <i>Encouraging a culture of reporting amongst nurses.</i></li> </ul> <p><b>Recommendation 3</b> <i>That the Department of Human Services develops a framework for the prevention and management of occupational violence and aggression for adoption in Victorian health care settings and that this work be primarily informed by:</i></p> <ul style="list-style-type: none"> <li>o <i>NSW Health Zero tolerance to violence in the NSW health workplace - policy framework guidelines (2003)</i></li> <li>o <i>Department of Human Services Industry occupational health and safety interim standards for preventing and managing occupational violence and aggression in Victoria's mental health services (2004).</i></li> </ul> <p><b>Recommendation 4</b> <i>That the Department of Human Services will:</i></p> <ul style="list-style-type: none"> <li>• <i>Establish a hierarchy of response guidelines for a uniform system of sanctions in response to violence and aggression against nurses. The response should include warning systems, contracts of acceptable behaviour, and the enforcement of sanctions/consequences.</i></li> <li>• <i>Develop guidelines that include the duty of care and legal responsibilities of all parties. Case study examples should be provided to highlight the issues to be considered in determining strategies and responses to occupational violence and aggression against nurses in the workplace.</i></li> </ul> <p><b>Recommendation 9</b> <i>That the Department of Human Services, in consultation with health services, adapts for broad use: The industry occupational health and safety interim standards for preventing and managing of occupational violence and aggression in Victorian mental health services (DHS 2004) for post-incident management.</i></p> <p><b>Recommendation 16</b> <i>Department of Human Services develops guidelines to ensure a minimum standard of education is provided to all nurses.</i></p> <p><b>Recommendation 25</b> <i>That the Department of Human Services develops and disseminates a state-wide 'tool kit' containing bullying prevention strategies (adapted from WorkSafe Victoria Guidance Note 2003) that:</i></p> <ul style="list-style-type: none"> <li>• <i>includes examples of policies, procedures and suggestions for culture change</i></li> <li>• <i>ensures consistency in the approach to managing bullying</i></li> <li>• <i>Provides a useful resource that contributes to quality improvement processes</i></li> <li>• <i>Includes readily accessible policies, procedures, case studies and customised</i></li> <li>• <i>Uses innovative ways to convey messages about bullying behaviours that are relevant to nursing.</i></li> </ul> <p><b>Recommendation 22</b> <i>That the Department of Human Services and health services accept an agreed definition of bullying that is aligned with the WorkSafe definition and use it consistently.</i></p>	<p>DHS</p> <p>DHS &amp; Health services</p> <p>DHS</p> <p>DHS</p> <p>DHS</p> <p>DHS &amp; Health Services</p> <p>DHS</p> <p>DHS</p> <p>DHS</p>	<p>IN PROGRESS</p> <p>Commenced June 2006.</p> <p>Estimated completion: (1) May 2007 (2) Ongoing (3) Ongoing (4) June 2008</p>	<p><i>Local implementation is driven by health services. Work being progressed in the cluster Recs 1,2,3,4,9,16,25 &amp; 22 supports work on Recommendation 16, 17 and incorporates the following activities 1-4.</i></p> <ol style="list-style-type: none"> <li>1. DHS Occupational Violence Policy document under development (to include recommendations 1,2,3 &amp; 22) and will include tools/templates related to recommendations 4, 9, 16 and 25.</li> <li>2. Minister Pike formally launched the report in March 2006 including press release. The Principal Nurse Adviser formally wrote to all CEOs and disseminated report in March 2006 and provided update in March 2007.</li> <li>3. DHS <i>Occupational Health and Safety Network</i> for health service OH&amp;S officers being used to promote and engage sector in workplan. <i>(See rec 11)</i></li> <li>4. Monitoring work of WorkSafe funded Safety Development Fund project - <i>Prevention and management of Occupational violence in the health sector</i> pilot at Melbourne Health &amp; Northeast Health.</li> </ol>

STRATEGY ONE: SETTING THE FRAMEWORK - Continued		The development of a framework that includes a policy statement, uniform definitions of bullying and violence and tools and examples to assist in local implementation		
Recommendations	Resp.	Status & Timeline	Progress as at February 2007 Proposed activities/work plan	
<p><b>Recommendation 10</b> That the Department of Human Services introduces, at the state level, a standardised Code Grey (violence and aggression emergency) &amp; Code Black response (armed threat).</p>	DHS	IN PROGRESS Commenced Nov 2006 Estimated completion: To be determined	<ul style="list-style-type: none"> <li>Currently progressing this through Standards Australia. Nurse Policy Branch has requested that Standards Australia consider incorporating the code grey into the AS 4083-1997 "Planning for Emergencies-Health care facilities to ensure national consistency.</li> <li>A contingency will be to work with the Occupational Health and Safety Officer Network for a statewide guideline.</li> </ul>	
<p><b>Recommendation 14</b> The principles of affecting behaviour through environmental design and management should be applied to all future building development and refurbishment.</p>	All	IN PROGRESS Commenced December 2006 Estimated completion TBD	<ul style="list-style-type: none"> <li>Taskforce work to be used to inform:               <ol style="list-style-type: none"> <li>Review of <i>Design Guidelines for Hospitals and Day Procedure Centres</i> (DGHDP) (DHS 2004). Capital Management Branch is undertaking the review, post implementation of Section 28 of the <i>Occupational Health and Safety Act, 2004</i> which came into effect 1 July, 2006.</li> <li>WorkSafe Victoria <i>Designing workplaces for safer handling of people</i>.</li> </ol> </li> </ul>	
<p><b>Recommendation 13</b> The Department of Human Services and health services commit resources to support:</p> <ul style="list-style-type: none"> <li>The implementation of strategies to prevent and manage violence and aggression against nurses and other health workers</li> <li>Strategies developed in areas that include design, personnel, equipment, publications and training</li> <li>The evaluation of the strategies following their implementation</li> <li>Preliminary analysis of the data set and strategies 12 months after implementation and a comprehensive evaluation of the same after 3 years.</li> </ul>	DHS & Health Service	IN PROGRESS	A process is underway to determine appropriate projects or activities. The distribution of funds will occur in 2007/2008	
<p><b>Recommendation 26</b> That the Department of Human Services:</p> <ul style="list-style-type: none"> <li>Promotes management of bullying in accordance with the WorkSafe Victoria <i>Bullying and Violence at Work Guidance Note</i> (February 2003)</li> <li>Further researches nursing culture to identify key factors that may trigger bullying behaviour by nurses, thereby enabling a more targeted approach to prevention</li> <li>Considers sponsorship of innovative strategies to prevent bullying and disseminate ideas and outcomes to health services.</li> </ul>	DHS	IN PROGRESS Commenced December 2006. Estimated completion 2008	<ul style="list-style-type: none"> <li>WorkSafe Guidance Note to be included in appendix to DHS Occupational Violence Policy (Refer to Strategy 1)</li> <li>Issue of research directions to be considered by reference group and informed by emerging work form other areas/departments.</li> </ul>	



STRATEGY 3: JUSTICE INTERFACE		Enhancing the interface between health services and the justice system		
Recommendations	Resp.	Status & Timeframes	Progress As at February 2007 Proposed activities/work plan	
<p><b>Recommendation 5</b> That the Department of Human Services develop education and awareness programs for the community, police and the judiciary, to promote a greater understanding of occupational violence in nursing.</p> <p><b>Recommendation 6</b> That the Department of Human Services requests the Department of Justice to consider the issues of occupational violence in nursing and consider legislative mechanisms and strategies that will improve the safety of nurses and other health care workers.</p> <p><b>Recommendation 7</b> That the Department of Human Services consider the development of state-wide guidelines with respect to weapons and dangerous articles within the health care setting. This may include introducing legislation or guidelines in health services that relate to the search and removal of weapons and/or dangerous articles, the storage, disposal or return of such articles, and to allow police to receive and hold such property, regardless of whether it is to be used as evidence in relation to a crime or that charges are to be laid. This matter should be considered together with other legislative issues referred to the Department of Justice.</p> <p><b>Recommendation 12</b> That the Victorian Government considers procedures for reporting to police, laying charges and prosecutions, including the potential for legislation for nurses similar to that developed for ambulance officers. (A Memorandum of Understanding, similar to that adopted between NSW Health and NSW Police, is a useful reference.)</p>	<p>DHS</p> <p>DHS &amp; DoJ</p> <p>DHS</p> <p>DHS</p>	<p>IN PROGRESS</p> <p>Commenced March 2006</p> <p>Estimated completion December 2007</p>	<ul style="list-style-type: none"> <li>Minister Pike has communicated with the Attorney General regarding recommendations related to his portfolio.</li> <li>A Justice System Interface Working Group has been established including representatives of Victoria Police and the Department of Justice. A workplan for progressing recommendations 5,6,7 and 12 has been agreed. Project scoping commenced, environmental scan has been completed and WorkSafe and Victoria Police are providing data to assist with the project deliverables.</li> </ul> <p><i>Work on promoting awareness in Vic Police and judiciary will be managed as part of this workplan and will be based on work being undertaken in Strategy 2.</i></p>	



<b>STRATEGY 4: EDUCATION - Continued</b>		<i>Ensuring that education and training for the prevention and management of bullying and violence reflects the organisational context and the needs of the employee.</i>		
<b>Recommendations</b>	<b>Resp.</b>	<b>Status &amp; Timeframes</b>	<b>Progress As at February 2007 Proposed activities/work plan</b>	
<p><b>Recommendation 20</b> That the Minister for Health requests:</p> <ul style="list-style-type: none"> <li>The Nurses Board of Victoria to require, through accreditation processes, nursing courses leading to registration to include OH&amp;S principles, particularly those that address occupational violence and bullying</li> <li>The Australian Nursing and Midwifery Council to consider the development of competency standards pertaining to OH&amp;S principles and require the inclusion of OH&amp;S components of occupational violence and bullying.</li> </ul>	DHS	COMPLETED	Nurses Board Of Victoria (NBV) have advised they are currently reviewing Standards of Course Accreditation, requiring education providers to ensure rec. 20 is incorporated in submissions for re-accreditation, and liaising with Australian Nursing & Midwifery Council regarding possibility of developing competency standards on OH&S into their workplan.	
<p><b>Recommendation 18</b> Providers of agency nurses ensure nurses receive education and training in the prevention and management of occupational violence and bullying prior to undertaking casual employment with any health care facility. This education is to include all key elements identified as a minimum educational and training requirement.</p>	Not specified	COMPLETED	Letter sent to agencies by Principal Nurse Advisor, DHS regarding Recommendation 18.	

<b>STRATEGY 5: REPORTING &amp; MONITORING</b>		<i>Develop effective reporting and monitoring systems including a standardised minimum data set that will enable health services to report, monitor and compare bullying and violence.</i>		
<p><b>Recommendation 27</b> That the Department of Human Services:</p> <ul style="list-style-type: none"> <li>Develops a state-wide minimum data set that includes key critical fields, with reference to the critical fields identified by the Reporting Tools Subcommittee</li> <li>Develops guidelines to assist health services to understand the significance of data collection related to violence and bullying and to collect critical field information</li> <li>Pilots the data set across a sample of Victorian health services prior to implementation.</li> </ul> <p><b>Recommendation 28</b> All health services submit a minimum data set to the Department of Human Services on a biannual basis.</p> <p><b>Recommendation 29</b> That the Department of Human Services makes aggregated local data results available to health services and WorkSafe Victoria to compare local prevalence and nature of events and create state-wide benchmarking.</p>	DHS  DHS & Health Services  DHS	IN PROGRESS  Commenced June 2006  Estimated Completion end 2007	<ul style="list-style-type: none"> <li>Data Working Group established and an integrated workplan for recommendations 27, 28, 29 developed: <ul style="list-style-type: none"> <li>Phase 1 – Development &amp; validation of OV. Minimum Data set (MDS) – completed</li> <li>Phase 2- Pilot of MDS &amp; data collection by health services – pending HealthSMART implementation.</li> <li>Phase 3 - Establishment of system wide reporting mechanisms.</li> </ul> </li> <li>Workplan integrated into Vic Gov HealthSmart Strategy implementation of Human Resources Management System (HMRS) module. Health services will then contribute to system wide reporting incrementally.</li> <li>Submission made to National Safety and Quality commission regarding the discussion paper related to Australian Council of Healthcare Standards (ACHS) review.</li> </ul> <p><i>Work on this cluster supports and links with Rec 17</i></p>	
<p><b>Recommendation 21</b> Higher education providers and health services create a mechanism for monitoring and evaluating the prevalence of bullying and violence experienced by students in the workplace during clinical placements.</p>	Education Providers & Health Services	Commenced June 2006	The HRMS module of HealthSMART will capture incidents occurring during clinical placements (See above). Although not mentioned in recommendation, implementation will include TAFE colleges, thus students undertaking the Certificate IV in Health (Nursing) course will be included in any reporting.	

## VICTORIAN TASKFORCE ON VIOLENCE IN NURSING IMPLEMENTATION – Organisational structure

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