



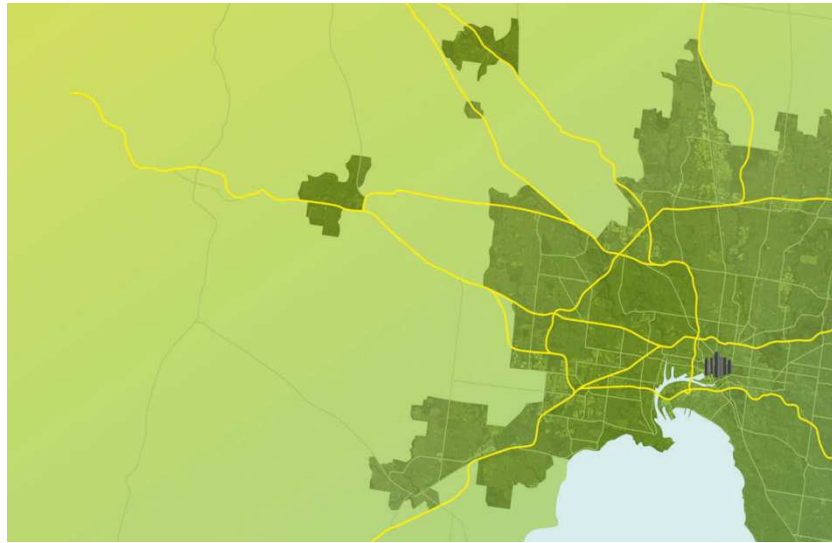
Occupational Violence Forum

Western Health

One Size Doesn't Fit All!

Using a risk calculator to assess training needs in the prevention and remediation of occupational violence in the workplace.

Who are we?



Footer Text





What was the issue and what did we do?



- Training was available for all nursing staff (based on unit of competence and delivered via RTO - 1 full day)
- Training was not mandatory and attendance had fallen
- No clear overview of what was happening with other staff e.g. security and reception staff
- Limited resources and time for face to face training





Methodology

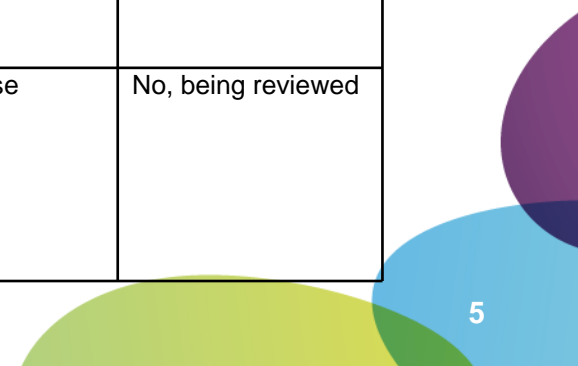
In the initial phase of the project, a survey was formulated and dispersed electronically to Managers in 22 departments. There were 19 responses. The survey asked for the identification of:


- 1.The level and type of OV that occurs in individual areas.
- 2.The type of training staff had currently attended.
- 3.Recommendations for future OV training needs.



Initial Benchmarking (2009)

	Type of training	To whom	How often	Duration	Is it mandatory?
Frankston Health	Safe Aggression Free Environments	Clinical and Non-clinical staff	Every 2 years with a refresher in between	2 day	
Northern Health	Assessment & Prediction of Aggression	Clinical and non-clinical staff	No refresher is offered	4 hours	Mandatory every 3 years
Melbourne Health	Management of clinical aggression	Clinical and non-clinical staff	Annually	1 day	Yes for mental health staff
Austin Health	Management of Aggression	Non-clinical staff	Annually	3 hour course	No
Alfred Health	Management of Aggression	Clinical and non-clinical	Refresher for Psych staff	2 day course	Yes for Psych staff,
Bairnsdale Health	Professional assault response training	Clinical and non-clinical	Every 2 years	2 day course	No, being reviewed





Riskman data was analysed to identify areas of high risk based on code greys and reported instances of occupational violence.

The high risk areas were identified as follows:

- Emergency Sunshine
- Psych A, B and C
- Outpatients Sunshine
- Secure Gem
- Emergency Footscray
- ICU
- Outpatients (Footscray)
- Day Procedure Unit

Recommendation 1: Tiered Approach to Education and Training

Will ensure the right people get the right training, based on the identified risk of exposure to incidents, and their roles, responsibilities and expectations within the organisation.

Programs should help staff understand:

- Risk factors for aggression and violence
- Clinical and non-clinical causes
- Signs of escalation and imminent violence
- Communication strategies
- Prevention measures
- Workplace policies and procedures
- Emergency and post-incident responses, an
- The right to withdraw to safety at any time



Recommendation 2: RISK CALCULATOR

The risk calculator was developed based on both the risk data and anecdotal reports. Once the data was analysed the Risk Calculator was applied and tested across the organisation within the areas deemed to be of higher risk for OV.

The purpose of the calculator is to:

- Identify the level of exposure to OV.
- Identify the severity of OV.
- Identify the frequency of OV.
- Identify and align a training framework, which reflects individual and or areas needs based on levels of exposure and or risk.

Table 1: OV Risk Calculator

			Level of Aggression				
			Level 1	Level 2	Level 3	Level 4	Level 5
			Verbal e.g. Heated Disagreement, Raised Voices	Non Physical e.g. Non Specific Threats, Abuse, Swearing	Physical e.g. Pushing, Biting, Grabbing, Scratching	Severe e.g. Physical Attack, Kicking, Punching, Specific Threats	Extreme e.g. Attack with a Weapon
Exposure	A Almost Certain <i>(weekly)</i>	5	5	10	15	20	25
	B Likely <i>(monthly)</i>	4	4	8	12	16	20
	C Moderate <i>(twice yearly)</i>	3	3	6	9	12	15
	D Unlikely <i>(yearly)</i>	2	2	4	6	8	10
	E Rare <i>(5 yearly)</i>	1	1	2	3	4	5

Risk colour code



Level 1 Training (Low Risk)

should include a selection of the following:

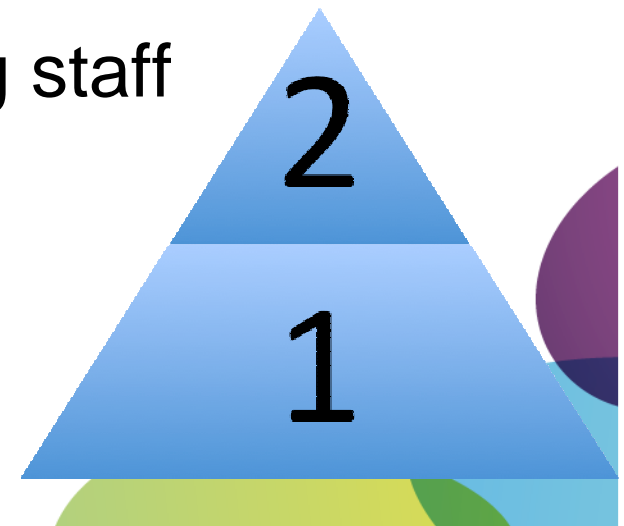
- OH&S rights, responsibilities and duties for employees/employers
- How to create a non-violent culture, including Bullying and Harassment
- Emergency codes
- Reporting of incidents and near misses + Riskman
- Introduction to organisational policy framework
- Staff support systems
- Customer service
- Managing difficult people



Level 2 Training (Moderate Risk)

Level 1 +

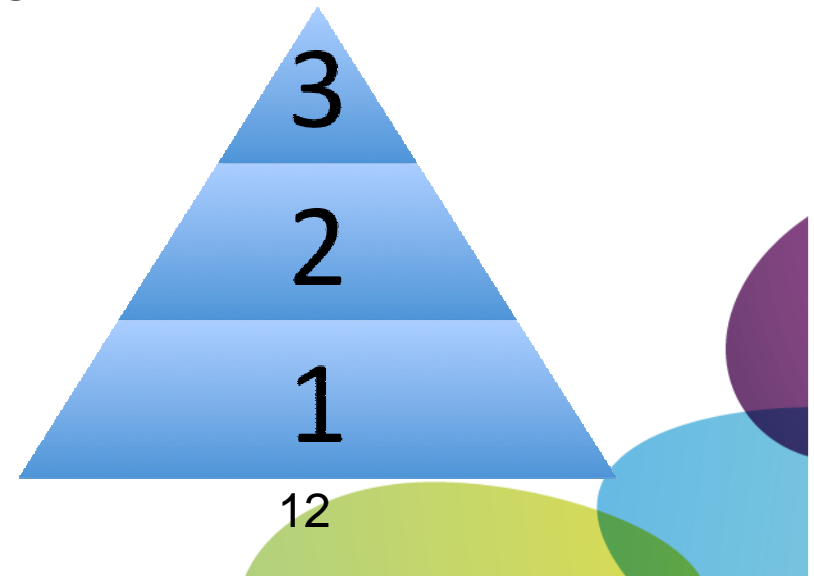
- Risk assessments
- Triggers to aggression and violence
- Escalating aggressive behaviour
- Non-physical techniques
- Diffusion/de-escalation of incidents and Conflict resolution
- Management of Aggression
- Post incident management, including staff support



Level 3 Training (High)

Level 2 +

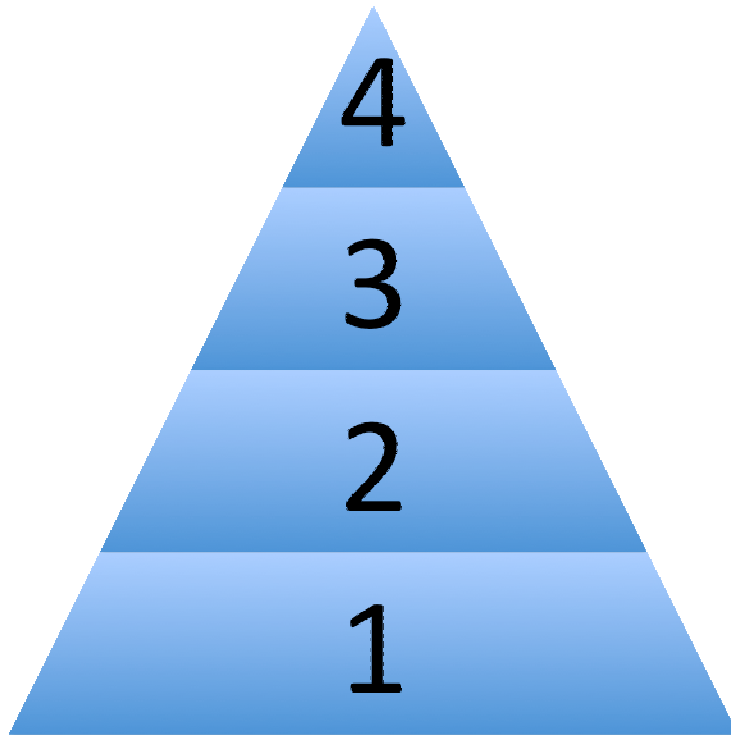
- Management of an aggressive/violent situation
- Location of emergency equipment, communication methods and procedures
- Retreat, escape and self-protection
- Evasive self defence, including use of reasonable force
- Restraint training
- Risk of restraint to the client



Level 4 Training (Extreme)

Level 3 +

- Roles and responsibilities of response team members, including team leadership.





Training for Managers- the following topic areas were also recommended:

- understand the adverse impacts of occupational violence on their staff, patients and the workplace
- understand the obligations of the employer to provide a safe workplace for employees and clients
- understand and manage their own behaviours, including the capacity to shape behaviour of others through role modelling, setting clear standards and effectively managing incidents
- understand their role in facilitating, supervising and supporting the implementation of organisational policies and procedures
- implement the organisations staff support processes during any recovery phase of an incident
- are able to undertake systemic investigations following an incident

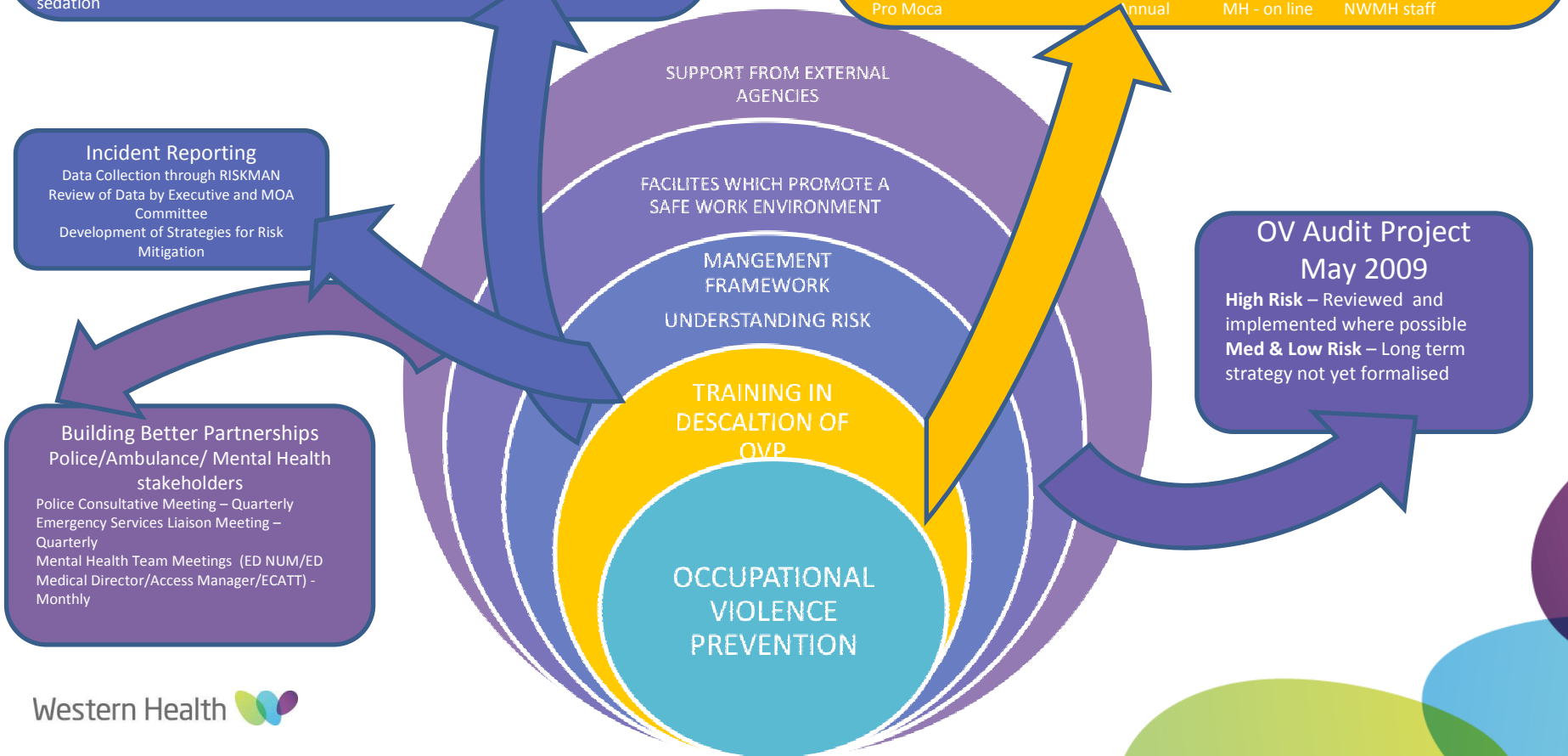
What Happened Next?

- Improved communication and connectedness within WH
- Revised training packages and delivery- delivered more localised and tailored training
- Refreshed committee (management of aggression committee)
- Participated in MOCA- REDI program (DH and UoM)
- Delivered customer service training program and ramped up positive behaviours in the workplace programs
- Entered into a dialogue with NWMH and MH and maintained network developed from MOCA – REDI – now looking at how to share resources (e-learn)
- Targeted training for security staff and ERT
- 2 years on we've re- thought initial recommendations for training

WESTERN HEALTH OCCUPATIONAL VIOLENCE PREVENTION MANAGEMENT FRAMEWORK 2011

Policy	Number	Date last Reviewed
Code Grey and Planned Seclusion - NWMH		
Occupational Health and Safety Procedures for home Visits	OP-SE 1.4.4	Sep-09
Management of Aggressive and Violent Behaviour	OP-SE 1.1.2	Reviewing
Critical Incident Stress Management (CISM)	OP-HR5.1.1	Jan-09
Physical Restraint, Assessment and Application	OP - SE1.3.1	Sep-09
Patient Specialising	OP-CC2.1.36	May-08
Weapons Management Procedure	New	Draft
Management of Patients in Seclusion Rooms	New	Draft
Clinical Practice Guidelines for management of delirium		
Clinical Practice Guidelines for management of acute sedation		

Course	Freq	Trainer	Who	No. trained per year
CISM Training	TBC	EAP Manager	Managers	
Middle Manager Training	TBC	Centre of ED	Managers	
Management of Aggression - 1 day	Adhoc	Centre of ED	All Staff	167
ERT Training - 1 Day	Induction	Security	All ERT Staff	52
MOCA-REDI – 1 hrs	One - off	Centre of ED	ED Nursing's	
Bullying and Harassment - 1hr	In Service (on request)	Centre of ED	All	
Communication Skills	TBC	Centre of ED	All	
Pro Moca	Annual	MH - on line	NWMH staff	



Incident Reporting
 Data Collection through RISKMAN
 Review of Data by Executive and MOA Committee
 Development of Strategies for Risk Mitigation

Building Better Partnerships
 Police/Ambulance/ Mental Health stakeholders
 Police Consultative Meeting – Quarterly
 Emergency Services Liaison Meeting – Quarterly
 Mental Health Team Meetings (ED NUM/ED Medical Director/Access Manager/ECATT) - Monthly

OV Audit Project May 2009
 High Risk – Reviewed and implemented where possible
 Med & Low Risk – Long term strategy not yet formalised

Table 2: OVP Training Matrix



Risk Rating →	Low	Moderate	High	Extreme	Extreme +
Time Period ↓					
Induction	1 HR INTRO TO OCCUPATIONAL VIOLENCE	1 HR INTRO TO OCCUPATIONAL VIOLENCE	1 DAY MOCA	1 DAY MOCA	1 DAY MOCA
					2 DAY PHYSICAL RESTRAINT
					1-2 DAYS USE OF EQUIPMENT TO SUPPORT RESTRAINTS
6 monthly				3 HR REFRESHER MOCA	3 HR REFRESHER MOCA
					1 DAY PHYSICAL RESTRAINT AND SAFE USE OF EQUIPMENT REFRESHER (Security only)
Annually	1 HR REFRESHER OCCUPATIONAL VIOLENCE	1 HR REFRESHER OCCUPATIONAL VIOLENCE	3 HR REFRESHER MOCA	3 HR REFRESHER MOCA	3 HR REFRESHER MOCA
					1 DAY PHYSICAL RESTRAINT AND SAFE USE OF EQUIPMENT REFRESHER

Recommended mandatory training and method of delivery



Training Type	Delivery Method	Content
1 HR INTRO TO OCCUPATIONAL VIOLENCE	ONLINE: E-LEARN	To be developed and managed by Centre for Education
1 DAY MOCA	CLASSROOM	To be sourced from Melbourne Health and conducted by Centre for Education and Security Services – must be reviewed to complement physical restraint training
1 DAY PHYSICAL RESTRAINT	CLASSROOM/SIMULATION	To be developed and delivered by an external industry leader in Security training
1-2 DAYS USE OF EQUIPMENT TO SUPPORT RESTRAINTS	CLASSROOM/SIMULATION	To be developed and delivered by an external industry leader in Security training (Participants awarded national competency qualification)
3 HR REFRESHER MOCA	CLASSROOM	To be sourced from Melbourne Health and conducted by Centre for Education and Security Services
1 DAY REFRESHER PHYSICAL RESTRAINT AND SAFE USE OF EQUIPMENT	CLASSROOM/SIMULATION	To be developed and delivered by an external industry leader in Security training
1 HR REFRESHER OCCUPATIONAL VIOLENCE	ONLINE: E-LEARN	To be developed and managed by Centre for Education

What's next?

- Ultimate aim- continued reduction in episodes of OV in the workplace, we've some particularly difficult and specific challenges to overcome
- Continued collaboration and sharing
- Redesign training framework
- Train more trainers (champions)

