SUBMISSION

Victoria Parliament Drugs and Crime Prevention Committee Inquiry Into Violence and Security Arrangement in Victorian Hospitals

Introduction
Ballarat Health Services welcomes the opportunity to make a submission to the Drugs and Crime Prevention Committee: Inquiry into Violence and Security Arrangements in Victorian Hospitals. This submission includes a brief description of Ballarat Health Services, an outline of the keys issues in relation to violence and security and recommendations for improving the current prevention and management strategies.

Overview
Ballarat Health Services is the largest regional hospital in the Grampians Region, and as such, is the principal referral hospital for the entire Region, which extends from Bacchus Marsh to the South Australian border, an area of 48,000 square kilometres. More than 224,000 people, or 4.4 per cent of the population of Victoria, live in the Grampians Region. Ballarat Health Services employs approximately 3500 staff and aims to ensure optimum care is provided for all patients, families and visitors. Ballarat Health Services is a total health care provider. This means we care for patients and the community with a comprehensive range of general and specialist care, across key medical and healthcare discipline.

Acute Care
Sub-Acute Care
Residential Care
Community Care
Mental Health Services
Rehabilitation Services

The key services are based at two sites, the Base Hospital site and the Queen Elizabeth Centre site. Each site is located close to the central business district, with the remaining residential, day centres and community sites located throughout Ballarat.

Violence and Aggression at Ballarat Health Services
Violence, aggression and difficult behaviours are experienced in many areas of Ballarat Health Services including residents with behavioural and psychological symptoms of dementia, patients with brain acquired head injuries, people presenting with substance or alcohol abuse as well as people who have a mental illness and/or having a psychotic episode. Both the Emergency Department (ED) and Mental Health Services experience the largest number of severe cases of violence and aggression. In the past 3 years there has been a 34% increase in presentations to the Emergency Department and a 60% increase in Code Grey incidents for the same period. There has also been a significant increase in the presentation of patients with mental health issues to the ED.

Many instances of violence and aggression that occur in ED are not reported. This is due to either the time critical nature of the environment, staff still believing it is ‘part of the job’ or due to the onerous requirements of the current incident reporting database (VHIMS-RiskMan).

Although the instances of exposure to violence and aggression are not reported in every case, the impacts can be significant for the individual, the organisation and the health care industry as a whole. The impacts include:

- Increased stress levels,
- Negative impacts of stress,
Increased levels of anxiety and depression,
Effect on personal life,
Reduced productivity,
Increased clinical errors,
Significant numbers of nursing staff considering leaving their employer,
Significant numbers of nursing staff considering leaving the nursing profession,
Anecdotal evidence indicates that clerical staff in these environments are also exposed to aspects of violence and aggression and have or will seek to leave that department in the future if the situation does not improve.

**Current strategies used in the prevention and management of violent and aggressive behaviours**
Ballarat Health Services has implemented a range of initiatives over the past five years to prevent and manage staff exposure to incidents of violence and aggression. Many of the interventions are based on The WorkSafe Victoria’s handbook “Prevention and Management of Aggression in Health Services” (2008) and the 29 recommendations identified in the “Victorian Taskforce on Violence in Nursing” (Nurse Policy Branch, Victorian Government Department of Human Services, 2005).
These initiatives include; policies and protocols, security officers and a duress response team, security cameras, signage at all main entrances (in line with the Ballarat Health Services Zero Tolerance to Violence and Aggression Policy), and Online and workshop based training. More recent interventions include a “Pre-Code” system that identifies individuals with a potential for difficult behaviours who are scheduled to attend the hospital, the relocation of the Security office to the Emergency Department and ‘tagging’ violent or aggressive individuals on their electronic Triage notes. Recent renovations of the ED have incorporated ‘Crime Prevention Through Environment Design’ concepts to reduce the consequences of exposure to violent and aggressive behaviours.
Ballarat Health Services has a Violence and Aggression Prevention Committee that meets monthly to review incidents of violence and aggression, discuss future management and prevention strategies and make recommendations for implementation of new initiatives.

**Recommendations**
Ballarat Health Services welcomes the Victorian Governments offer of funding for increased security presence in Emergency Departments but does not believe that armed Protective Service Officers would best suit these environments. Support and funding to complement the organisations existing security arrangements would ensure greater security coverage for staff, patients and visitors at Ballarat Health Services and reduce the potential for violence against health services staff.

To better manage instances of violence and aggression, staff need to be trained and provided with relevant knowledge and skills. Training not only assists staff to prevent the escalation of an incident but also reduces the potential risk of a physical or psychological injury. The WorkSafe Guidance document recommends a tiered approach to violence and aggression training. This model would ensure that staff receive training based upon their risk of exposure to aggressive incidents and difficult behaviours. This model has been introduced to some degree at BHS. All health services would benefit from a government program to fund training for nurses, especially in high risk areas like ED’s.

Long waiting periods in ED’s can contribute to the escalation of violence and aggression in these environments. Funding support for increased nursing resources in ED’s would reduce the long waiting periods and therefore limit the potential for violence and aggression towards staff from patients and their relatives.

The Department of Health requires public health services to report all incidents of violence and aggression towards nurses on the VHIMS database. The current Incident Management System (VHIMS) does not
support a quick and efficient method of reporting instances of violence and aggression. BHS recommends changes are made to the database to facilitate improved reporting.

BHS recommends the committee consider the development of a recognized training course and qualification for specific security training in health care industries. There will be a need for further resources for the ongoing up-skilling of these workers and compulsory regular refresher training.

**Conclusion**

Ballarat Health Services would like to thank the Drugs and Crime Prevention Committee for inviting the organisation to meet with the committee members and provide a written submission to the Inquiry into Violence and Security Arrangements in Victorian Hospitals. Ballarat Health Services values its employees and their contribution to high quality health care services in the region. Any opportunity to support and improve existing safety and security measures to reduce exposure to violence and aggression is welcomed.

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