



Project DOVE

Decreasing Occupational Violence in the Emergency Department: A Multi-Level Intervention Trial

Presenter: Mrs Donna Ward

**Director of Allied Health & Service Partnerships
Caboolture and Kilcoy Hospitals, Metro North HHS**

**HRT1615 Patient Safety Improvement Group
Melbourne 19 October 2016**

Project Sponsors:

Mr Ken Whelan, Chief Executive Metro North HHS; Dr Lance Le Ray, Executive Director and A/Director Medical Services Caboolture & Kilcoy Hospitals.

Caboolture Hospital Acknowledgments:

Mr Bevan Marks, Director of Corporate Services; Mr Phil Flaherty, Protective Services Coordinator; Dr Sean Clark, Clinical Director, Emergency Department; Ms Nerys Brackman, NUM Emergency Department; Mr Adam Kent, Director Service Improvement Unit;

Dr Roxanne Machen and Dr Bradley Partridge, Research Development Unit; Dr Anand Choudhary, Deputy Director Medical Services;
Sharon Ragau, Nurse Educator.





Key Problem

1. Minimal data

- Lack of meaningful data on profile and frequency of occupational violence within the Caboolture Hospital (CH) to allow predictive analytics and measurable improvements .

2. Occupational Violence Hospital in the HHS and within the Hospital

- Emergency Department accounted for 7 of the top 15 locations within the Caboolture Hospital for for ‘alarm duress’, ‘patient aggressive’ and ‘assault’ incidents at Caboolture Hospital according to the protective services ReportExec360.
- June 2016 ED Staff Feedback Survey - among the 79 respondents, 80% reported experiencing verbal abuse or harassment and almost one-third had been physically assaulted within the past 6 months.
- Caboolture Hospital has relatively high rate of OV incidents in the HHS due to severe level of community socio-economic disadvantage.

3. Poor perceived safety & support

- Despite a range of efforts, more than half of the ED nursing staff surveyed for Project DOVE reported that they “never”, or “only sometimes” feel safe at work. **How do our patients feel then?**



Aims of this innovation

- Reduce frequency of OV incidents in ED, particularly in known ‘hotspots’.
- Profile frequency and pattern of occupational violence.
- Apply statistical modelling to plan a long term, multi-pronged and systematic Occupational Violence Prevention (OVP) program.
- Improve staff and patient experience/perception of safety and management support in the ED.
- Increase perceived comfort and customer service of patients in the ED to de-escalate tension.
- Establish community engagement and partnerships to build pro-social attitudes toward healthcare workers in the Caboolture ED.



Baseline Data

- **June 2016** - Analysis of 131 violent case reports from protective services database, with some surprising results.
 - In 40% of ED incidents, the perpetrator was female.
 - In 2/3 incidents, the perpetrator was 35 years or older.
 - Wednesdays and Fridays most common. All times of day at risk.
- **July 2016** - Internal survey with 79 Caboolture Hospital ED staff members.
 - Almost the same proportion of medical staff and nursing staff had been physically assaulted in the last six months (37%).
 - More male ED staff (43%) than female ED staff (26%) had been assaulted.
 - More than 50% of ED nurses “never” or only “sometimes” felt safe.
 - 81% of male staff “mostly/always” felt safe; only 54% of female staff said the same.



Key Changes Implemented

1. Environmental Modification

- CC-TV Security Screen behind ED Triage Desk and linked to the CH Protective Services CC-TV network
- Immediate visual feedback to assist patients and visitors to self-regulate behaviour

2. Security Enhancement

- On-site Emergency Department Security Officer (7 day presence)
- Provide immediate first response and conduct CH ED patient screen and collaborative risk management using the Brøset Violence Screening Checklist

3. Community Engagement

- Queensland REDS - Rugby Union Team “Don’t See Red” Campaign
- ED Waiting Room Volunteer Program
- Caboolture Health Care Alliance

4. Educational Approach

- Initial comparison study – MNHHS & CH ED incident reporting analysis
- CH ED ReportExec 360 & Brøset analysis (pre and post project implementation)

Staff Feedback Survey

The Caboolture Hospital Executive Team is seeking your feedback on Occupational Violence within the Caboolture Hospital Emergency Department. All information collected will be used to understand and support Occupational Violence Prevention (OVP) within our Emergency Department (ED).

Staff Details

Age _____ Gender Female Male Other

Employment Status Full Time Part Time Casual

How many years have you worked in:

Your Profession _____ ED's _____ Caboolture ED _____

ROLE:

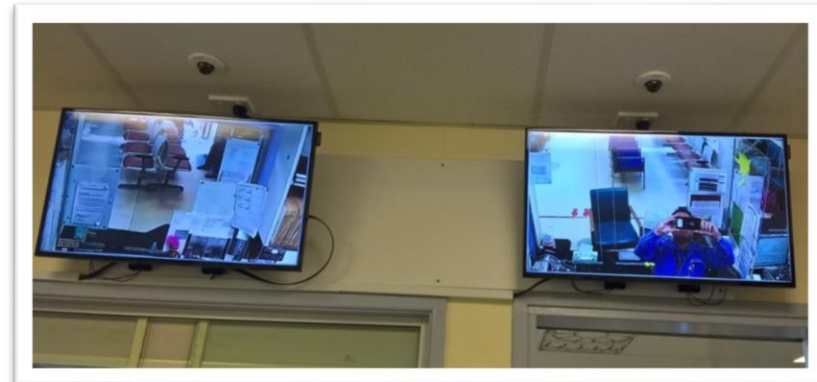
Medical Specialist Registrar PHO SHO
 JHO Intern Medical Student

Nursing RN EN Triage Nurse CN/CNC
 NUM Nurse Educator Nurse Practitioner

Allied Health Social Work Physiotherapy Other: _____
 Administration Operational

For the purposes of this survey Occupational Violence refers to any incident where an employee is abused, threatened or assaulted in circumstances arising out of, or in the course of their employment.

- I think that Caboolture Hospital Management care about my personal safety at work.
 Completely Disagree Disagree Neutral Agree Completely Agree
- I feel safe as a staff member working in the Caboolture Hospital Emergency Department.
 Never Sometimes Most of the time Always
- Security officers respond in a timely matter to Occupational Violence in the Emergency Department.
 Completely Disagree Disagree Neutral Agree Completely Agree
- Security Officers are a visible presence within the Emergency Department.
 Never Sometimes Most of the time Always
- The Security Officers at Caboolture Hospital are helpful in de-escalating potentially violent situations in the Emergency Department before they become violent.
 Completely Disagree Disagree Neutral Agree Completely Agree





Outcomes so far

- First two interventions introduced (Screens and On-site Security Presence) and has been well received.
- Preliminary analysis indicates significant reduction of daily OV incidents since introduction of screens and on-site security presence.
- “Don’t see RED” Campaign and ED volunteer Program in design phase.
- Occupational violence profiling and multi-d interventions accepted as a critical to finding a long term solution to our OV problem.
- Management has improved level of engagement with ED and staff perception survey to be re-administered in coming weeks – Stay Tuned!!
- Data Analysis and repeated measures will continue over 12 months as each intervention level is introduced.
- Submissions for formal project grants and research grants are in progress through Metro North HHS and the Emergency Medicine Foundation.
- Aim is to publish and scale up the intervention program across Metro North HHS in 2017.



Lessons Learned

- Multi-disciplinary and “whole of community” approach is required beyond Security Responses ... ***Reducing violence in our ED is everyone’s responsibility!***
- Balance the environmental deterrents and security presence with community campaigns, pro-social attitude change and patient centred care culture.
- Appropriate integration of data collection sources and profiling of incidence rates, locations – localise the data and custom make the solutions.
- Build a strong foundation for sophisticated risk analytics and multi level programs that can be generalised to other clinical settings within the Caboolture Hospital and more broadly in Metro North HHS.



Contact

For more information please contact:

Donna Ward

Director Allied Health and Service Partnerships
Caboolture and Kilcoy Hospitals
donna.ward2@health.qld.gov.au

Ph. (07) 5433 8150

