

# Prevention of Violence and Aggression (PoVA) Strategy

2023–2025



# A message from the Chief Executive

I am pleased to introduce our Prevention of Violence and Aggression (PoVA) Strategy 2023-2025.

Incidents of violence and aggression remain unacceptably high within healthcare settings, and we recognise the profound impact they have on the health and safety of our dedicated employees and the resulting care we provide to our patients and consumers.

This comprehensive strategy and supporting action plan is based on a clinical safety and prevention model which seeks to balance prioritising the safety of our employees with meeting the complex care needs of our consumers. It provides a robust framework to equip us with the necessary tools and support systems to prevent violence and aggression before it occurs. By implementing proactive measures and fostering a culture of safety, we can create an environment where every member of our team can thrive and perform their roles.

Everyone deserves to feel safe and secure at work, and when receiving care, and tackling violence and aggression head-on is of utmost importance.

Thank you for your continued dedication and support as we strive for a violence and aggression-free health service for all employees, patients, and visitors.

**Martin Keogh, Interim Chief Executive**

## Executive Summary

In our Monash Health Strategic Plan 2023, we highlighted our commitment to consistently provide safe, high-quality and timely care and ensure a physically and psychologically safe environment. In line with our strategic priorities, we are committed to progressing our focus on prevention and promoting safety for our employees, patients, and visitors. The Prevention of Violence and Aggression (PoVA) Strategy 2023-2025 and its supporting action plan (Appendix A) set a consistent direction for planning and activity at Monash Health.

Monash Health has identified four strategic pillars for prevention:

- Predict
- Strengthen
- Provide
- Adapt

## Introduction

Violence and aggression in healthcare settings remain important issues. Behaviours of concern and aggression can impact employee health and safety, the services we provide to patients and the experience of care for consumers, carers, and employees.

The experience of Occupational Violence and Aggression (OVA) can significantly impact employees' physical and emotional wellbeing. It can influence their job satisfaction and feeling of safety within the workplace, leading to increased personal leave and poor retention. OVA represents a significant cost to the organisation, leading to worker's compensation claims, lost time injuries and increased Worker's Compensation insurance premiums.

The factors and behaviours that can contribute to aggression in healthcare are complex and require a range of approaches to respond to individual needs. The warning signs of clinical deterioration are not always identified or acted on appropriately. Many overlapping organisational and workforce factors contribute to the ability to recognise and respond to a patient presenting with cognitive or mental health-related deterioration, which can often lead to aggression.



Consumers displaying behaviours of concern or aggressive behaviour are at higher risk of adverse outcomes, such as falls, injuries and psychological distress. Treatment can be more complex leading to increased length of stay, interrupted or reduced care. These behaviours can also lead to increased use of restrictive interventions, such as physical, mechanical, and chemical restraint which can lead to injuries, trauma and harm to both consumers and employees.

Monash Health's integrated care and risk management approach to OVA has been multi-faceted for many years. It includes a range of governance, leadership, occupational health and safety, education, procedural and data/reporting strategies. Despite increased awareness and efforts to respond to aggression, there has been minimal impact or change in the number of incidences and associated harms to employees and consumers.

A revised direction is required to ensure continual improvement in influencing change, robust risk management and to make a difference in the experiences of consumers and employees. Our approach to identifying and systematically minimising the risk of aggression requires a stronger preventative and clinical focus.

## About the organisation

Monash Health is Victoria's largest public health service. We provide safe, high-quality care to one-quarter of Melbourne's population, across the entire lifespan, from pre-birth to end-of-life. We improve the health of our communities through:

- Prevention and early intervention
- Community and home-based treatment and rehabilitation
- Specialised surgical; and medical diagnosis; treatment and monitoring services
- Hospital and community-based mental health services
- Comprehensive sub-acute and aged care and palliative care programs
- Research and teaching the next generation of healthcare professionals

More than 22,000 staff members work at over 40 care locations across south-eastern Melbourne, including Monash Medical Centre, Monash Children's Hospital, Moorabbin Hospital, Dandenong Hospital, Casey Hospital, Kingston Centre, Cranbourne Centre, Victorian Heart Hospital and an extensive network of rehabilitation, aged care, community health and mental health facilities.



# Overview of Behaviour-Related Incidents and OVA

In 2022, Monash Health reported

**16,477**

**Code Grey** (Clinical Aggression) emergency calls

and

**135**

**Code Blacks** (Personal Threat)

On average, a Code Grey is called every

**30 minutes**

**4**

**employees a day** report an OHS (Occupational Health and Safety) OVA-related incident

In 2022,

**7755**

**behaviour-related incidents** were reported in Riskman (Clinical and OHS)

Approximately

**1500**

**OHS OVA-related incidents** were reported

For every OHS OVA incident reported, there are over

**4**

**behaviour-related clinical incidents** reported

**42%**

of all reported OHS incidents relate to OVA

With an average of

**128**

incidents per month

On average,

**5%**

**of OVA incidents** have resulted in a lost time injury (LTI)

and OVA accounts for

**22%**

**of all LTIs**

OVA ranks as

**2<sup>nd</sup>**

behind Manual Handling, **as the main mechanism of injury resulting in a WorkCover claim** for Monash Health employees.



## Guiding Frameworks and Legislation

The PoVA Strategic Plan and Actions are informed by a range of relevant guidance including:

- Framework for preventing and managing occupational violence and aggression (2017) DHHS Vic
- Prevention and management of violence and aggression in health services (2017) Worksafe
- 10-point plan to end violence and aggression: A guide for health services (2021) ANMF
- National Safety and Quality Health Service (NSQHS) Standards (2021)
- Occupational Health and Safety Act 2004

## Language

The strategy and action plan uses the term “Patient” to encompass any person currently receiving care at Monash Health. It includes persons referred to as consumers, clients, residents or service users. The term “Visitor” includes carers, family, significant other or preferred person.

## Vision

Monash Health Prevention of Violence and Aggression (PoVA) Strategy 2023–2025 sets the directions and priorities for Monash Health to achieve our vision:

*We will be relentless in our pursuit of a violence and aggression-free health service for all employees, patients, and visitors*



# Strategic goals for PoVA

The Strategy identifies four strategic pillars for prevention:



## Pillar 1: Predict

### Goal

We communicate, consult, and collaborate to identify violence and aggression risk and implement effective mitigation strategies.

### Objectives

- Strengthen clinician capability to assess for risk of aggression
- Embed the use of behaviour-related tools to support proactive actions and early intervention
- Embed appropriate use of Patient Safety Alerts
- Build knowledge and application of non-pharmacological, diversional, and sensory strategies
- Use data to support proactive actions and early intervention



## Pillar 2: Strengthen

### Goal

We grow the skills of our leaders and employees to prevent, identify and respond to high-risk behaviours and situations.

### Objectives

- We partner effectively with consumers to inform our practices and actions
- We have effective resources to support and upskill our workforce at all levels across the organisation
- We evaluate the effectiveness of training programs and adapt as required
- We monitor the uptake of training and take remedial action if required to achieve compliance



## Pillar 3: Provide

### Goal

We have the resources, systems, and processes to deliver a safe, secure, and supportive environment for employees, patients, and visitors.

### Objectives

- Managers and employees are supported to minimise and manage incidents of violence and aggression
- Our response to violence and aggression is evidence-based, timely and effective
- We minimise the risk of harm by embedding safe practices into all interactions
- We develop, implement and evaluate a PoVA Model of Care



## Pillar 4: Adapt

### Goal

We learn from all available sources to continuously refine and adapt our approach to minimising violence and aggression in our health service.

### Objectives

- Redesign case review process to ensure learnings are identified, implemented, evaluated and sustained
- All incidents are appropriately reported in the incident management system
- We effectively communicate key messages and learning with all stakeholders



## Our PoVA Action Plan

The 2018-2023 Occupational Violence and Aggression (OVA) Strategy was comprehensive and provided a robust foundation to support the prevention and response to violence and aggression at Monash Health. The majority of actions in this plan were implemented and embedded into our clinical and safety processes.

The PoVA Strategy 2023-2025 has been developed in consultation with stakeholders representing a range of programs, sites, disciplines, and roles across Monash Health, and builds on work to date. The Prevention of Violence and Aggression (PoVA) Committee oversee the implementation of the Action Plan arising from this Strategy.

The PoVA Committee has actively focused on developing actions for the first 15 months of this Strategy with the intent to refine and develop future actions based on review and evaluation of the plan at 12 months. We will evaluate the impact of the newly created consultant roles at this time and position the committee to ensure the second stage of the action plan is responsive to the needs of the organisation at this time.



# Appendix A - Prevention of Violence and Aggression (PoVA) Action Plan (2023-2024)

## Pillar 1: Predict

Context	Goal
<p>The factors and behaviours that can contribute to aggression in healthcare are complex and require a range of approaches to respond to individual needs.</p> <p>Clinicians at the bedside are best placed to recognise high-risk situations and early warning signs. Clinicians are supported in their practice with tools and resources to help in the identification, planning, monitoring, and delivery of patient-centred care. The aim is to improve safety for employees, consumers and visitors, and minimise risks related to behaviours of concern and aggression</p>	<p>We communicate, consult, and collaborate to identify violence and aggression risk and implement effective mitigation strategies.</p>
	Targets Year 1
	<ul style="list-style-type: none"> <li>100% of patients with Aggression Risk Checklist (ARC) Score 3 and above have preventative strategies identified and implemented.</li> <li>100% of general medical wards have implemented the delirium and dementia 'toolbox'</li> <li>All Monash Health clinical areas will use a consistent process to alert employees to patients Identified as at risk of violence or aggression</li> </ul>

#	Action	Timeframe	Responsibility	Outcome
<b>Objective: Strengthen clinician capability to assess for risk of aggression</b>				
P1	Create, review, and update recognising and responding to behaviours-related procedures ensuring they reflect best practice	Q4 2023-2024	PoVA Committee	Procedures finalised and submitted for approval
P2	Embed and evaluate the use of the Aggression Risk Checklist (ARC) screening tool in Monash Health Emergency	Q2 2023-2024	ARC Working Group	Report findings to the PoVA Committee
P3	<p>Review and improve assessment and care planning processes incorporating the patient/family/carer with all elements of the plan of care</p> <ul style="list-style-type: none"> <li>Initial Patient Assessment (risk screening/clinical alert)</li> <li>Behaviour Management Care Plan on EMR</li> <li>Develop a collaborative Behaviour Support Plan</li> </ul>	Q4 2023-2024	PoVA Committee EMR Documentation working group	Review completed Use findings to develop a comprehensive plan to address identified opportunities for improvement





	<ul style="list-style-type: none"> <li>Behaviour contracts</li> </ul>			
<b>Objective: Embed the use of behaviour-related tools to support proactive actions and early intervention</b>				
P4	Provide coaching opportunities within clinical areas to support the use of screening, assessment and management tools	Q4 2023-2024	PoVA Behaviour Support Consultants	Quarterly activity report
<b>Objective: Embed appropriate use of Patient Safety Alerts</b>				
P5	Conduct an audit of the use of the Patient Clinical Safety Alerts related to PoVA and develop an action plan to embed consistent use	Q2 2023-2024	PoVA Committee	Review and action plan developed
<b>Objective: Build knowledge and application of non-pharmacological, diversional, and sensory strategies</b>				
P6	<p>Build connections with key internal and external stakeholders to identify, collate and share resources to support clinicians in developing less restrictive behaviour management strategies</p> <ul style="list-style-type: none"> <li>delirium and dementia toolbox</li> <li>policies and procedures (Acute behavioural disturbance guideline)</li> <li>use of sensory, and calming strategies</li> <li>introduce model and principles of Safewards</li> <li>referral to appropriate clinical service</li> </ul>	Q2 2024-2025	PoVA Team	<p>Networks established Resources identified and collated Action plan developed</p>
<b>Objective: Utilise data to support proactive actions and early intervention</b>				
P7	Determine minimum data set for monitoring and design reporting	Q2 2023-2024	PoVA Committee OHS Committee	Data set endorsed
P8	Design and implement the OVA dashboard	Q4 2023 -2024	Business Intelligence	Dashboard developed
P9	Analyse and report incident trends and findings	Q2 2023-2024	PoVA Coordinator OHS Director	Analysis of identified data sets reported to PoVA
P10	Direct and monitor completion of regular OVA risk assessment to identify and mitigate environmental risk factors that may exacerbate violence and aggression risk	Q2 2023-2024	OHS Director	Reported regularly



## Pillar 2: Strengthen

<b>Context</b>	<b>Goal</b>
The factors and behaviours that can contribute to aggression in healthcare are complex and require a range of approaches to respond to individual needs. Clinicians require the skills, knowledge, and confidence to engage collaboratively with patients and their carers to identify helpful strategies and minimise risks. Building the capability of managers to lead the workforce to detect, escalate and intervene early to high-risk behaviours and situations can assist in reducing aggression, improving safety, preventing deterioration, and minimising harm.	We grow the skills of our leaders and employees to prevent, identify and respond to high-risk behaviours and situations.
	<b>Targets Year 1</b>
	<ul style="list-style-type: none"> <li>• 100% of Behaviour Support Consultants employed</li> <li>• Implement a new PoVA model of care</li> </ul>

#	Action	Timeframe	Responsibility	Outcome
<b>Objective: We partner effectively with consumers to inform our practices and actions</b>				
S1	Develop and implement a consumer engagement action plan to improve consultation and collaboration at all levels	Q4 2023-2024	PoVA Committee	Action plan developed and implemented
S2	Engage with Monash Health employees and consumers to determine what is important to them about violence and aggression, as well as feedback on our approach	Q3 2023 -2024	PoVA Committee	Consumer feedback sought on priority areas Employee feedback sought on priority areas
S3	Conduct organisational psychological safety risk assessment to identify key issues and develop prevention plan	Q2 2023-2024	OHS Director	Plan developed



<b>Objective: We have effective resources to support and upskill our workforce at all levels across the organisation</b>				
S4	Redesign existing tiered training program to tailor to employee role and context more actively	Q2 2023-2024	PoVA team	Training framework developed
S5	Incorporate managing challenging behaviours into Monash Health's induction program for new employees	Q1 2023-2024	Director of Learning and Development	The induction program includes managing challenging behaviour
S6	Revise and refresh existing training packages on LATTE <ul style="list-style-type: none"> <li>Managing Challenging Behaviours</li> <li>Communication and De-escalation</li> </ul>	Q4 2023-2024	PoVA Team	Training packages revised
S7	Introduce a suite of online resources to support learning and knowledge development <ul style="list-style-type: none"> <li>Recognising and responding to behaviours of concern</li> <li>Responding to aggression</li> <li>Reducing and safe application of restrictive practices</li> </ul>	Q3 2023-2024	PoVA Coordinator	eLearning resources developed
S8	Design and implement a new Tier 3 workshop	Q1 2023-2024	PoVA Team	Workshop implemented
S9	Create scenario-based training videos to support the practical application of skills	Q2 2024-2025	PoVA Team	Training videos completed
S10	Develop a model to support local refresher and aggression response practice sessions	Q3 2023-2024	PoVA Team	Refresher program developed and implemented
<b>Objective: We monitor the uptake of training and take remedial action if required to achieve compliance</b>				
S11	Design and implement PoVA training dashboard	Q4 2023-2024	Business intelligence	Dashboard developed
<b>Objective: We evaluate effectiveness of training programs and adapt them as required</b>				
S12	Design and implement PoVA training evaluation matrix	Q4 2023-2024	PoVA Committee	Evaluation matrix deployed



## Pillar 3: Provide

Context	Goal
<p>Early response and coordinated management of a high-risk situation can reduce the risk of aggression and escalation to violence and harm. Monash Health has emergency management systems and processes in place to support employees and maintain their safety.</p> <p>Processes and resources are designed to provide emotional and practical support to employees, patients or visitors affected by violence and aggression. These need to be individualised to the person and their preferences.</p>	<p>We have the resources, systems, and processes to deliver a safe, secure, and supportive environment for employees, patients, and visitors.</p>
	Target Year 1
	<ul style="list-style-type: none"> <li>• 90% Clinical manager completion, team post-traumatic incident training</li> <li>• 100% OVA risk assessments completed</li> <li>• Planned Code Grey model implemented</li> </ul>

#	Action	Timeframe	Responsibility	Outcome
<b>Objective: Managers and employees are supported to minimise and manage incidents of violence and aggression</b>				
PR1	Analysis of OVA-related claims to identify themes and opportunities for improvement	Q2 2023-2024	OHS Director	Report completed annually
PR2	Provide manager education on team support for post-traumatic incidents	Q4 2023-2024	OHS Director	Education developed and implemented
PR3	Review and update OVA Post Incident Support Resources	Q3 2023-2024	OHS Director	Updated Resource on the intranet
PR4	Conduct an organisational psychological safety risk assessment to identify areas of risk and develop a strategy to mitigate	Q3 2023-2024	OHS Director	Risk Assessment conducted and Strategy completed
<b>Objective: Our response to violence and aggression is evidence-based, timely and effective</b>				
PR5	Review and implement a model for Planned Code Grey	Q4 2023-2024	Code Grey Working Group	Guideline finalised Model implemented
PR6	Review and update the Code Black procedure	Q1 2023-2024	Code Black Working Group	Procedure updated
PR7	Review and update the Community Aggression Response Team (ART) procedure	Q1 2023-2024	ART Community Working Group	Procedure finalised



<b>Objective: We minimise the risk of harm by embedding safe practices into all interactions</b>				
PR8	Partner with key stakeholders to review and improve processes and practices to reduce restrictive interventions	Q2 2023-2024	PoVA Coordinator Reducing Restrictive Practices Committee/ Delirium and Dementia Subcommittee	Restrictive Intervention Action Plan
PR9	Develop a checklist to support the care planning and employee safety for patients identified as high risk	Q2 2023-2024	PoVA Team	Document completed with implementation plan
PR10	Conduct assurance activities to check annual OVA Risk Assessments are complete and actioned	Q2 2023-2024	OHS Director	Audit Schedule implemented
<b>Objective: We develop, implement and evaluate a PoVA Model of Care</b>				
PR11	Design and implement the new PoVA Model of Care	Q2 2023-2024	Model of Care Steering Group	Model of Care developed and implemented
PR12	Develop and recruit new Behaviour Support Consultant roles	Q1 2023-2024	PoVA Coordinator	New roles developed
PR13	Publicise and communicate the new Behaviour Support Consultant roles and associated Model of Care	Q2 2023-2024	PoVA Committee	Promote new roles and model of care



## Pillar 4: Adapt

<b>Context</b>	<b>Goal</b>
Data is used to support the provision of high-quality services that promote evidence-informed approaches to improve the outcomes and experiences of patients and employees. Systems are required to encourage reporting of incidents and near misses, and to learn and guide improvement activities. These expectations and learnings require dissemination to all levels within the organisation to ensure consistency and growth.	We learn from all available sources to continuously refine and adapt our approach to minimising violence and aggression in our health service.
	<b>Targets Year 1</b>
	<ul style="list-style-type: none"> <li>• 10% decrease in OVA Frequency rate in 2023</li> <li>• 20% reduction in OVA incidents where employee harm reported</li> <li>• 10% reduction in Worksafe Notifiable Incidents related to violence and aggression</li> <li>• OHS Audits to include a compliance check on OVA Risk Assessment completion and action planning</li> </ul>

#	Action	Timeframe	Responsibility	Outcome
<b>Objective: Redesign case review process to ensure learnings are identified, implemented, evaluated and sustained</b>				
A1	Develop a robust system for incident and data review for the PoVA Committee and how to disseminate learnings	Q3 2023-2024	PoVA Committee Chair	Process developed and learnings shared
A2	Collate and utilise learnings from OHS OVA risk assessments	Q3 2023-2024	OHS Director	Report completed
A4	Review and update OHS and Clinical incident review processes for greater alignment	Q3 2023-2024	OHS Director Quality Manager Clinical Outcomes	Review complete, Recommendations reported
A5	Develop a robust system for incident and data review, including: <ul style="list-style-type: none"> <li>• Dashboard for behaviour-related incidents</li> <li>• Dashboard for restrictive practices</li> </ul>	Q2 2024-2025	Business Intelligence	Dashboard developed
<b>Objective: All incidents are appropriately reported in the incident management system</b>				
A6	Identify barriers to reporting incidents related to aggression and violence	Q2 2023-2024	PoVA Committee	Barrier analysis on reporting incidents of violence and aggression



A7	Review current reporting systems and undertake a gap analysis to assess the effectiveness	Q3 2023-2024	PoVA Committee	Review complete and action plan developed
A8	Develop a plan for managers and leaders to actively encourage reporting of incidents related to aggression and violence, with a no-blame focus	Q3 2023-2024	OHS Director/ PoVA Coordinator	Report completed
A9	Develop a guide to support appropriate ratings of incidents to reflect severity accurately	Q3 2023-2024	OHS Director/ PoVA Coordinator	Rating guide completed
A10	Develop systems that support collaboration and consultation with employees during OVA investigations and ensure learnings are communicated to employees in the work area	Q4 2023-2024	OHS Director/ PoVA Coordinator	Process developed, endorsed, and implemented
<b>Objective: We effectively communicate key messages and learning with all stakeholders</b>				
A11	Develop an annual Communication Strategy including stakeholder engagement activities, PoVA key messages and learnings, and internal communications which, will inform the workforce of the PoVA action plan and outcomes	Q4 for each year of the plan for the following year	Chair PoVA Committee, Director Communication and Engagement	Annual plan developed and delivered as agreed
A12	Review and redesign signage and posters for PoVA	Q2 2023-2024	Director Communication and Engagement	Suite of signage/posters developed
A13	Create and implement a model for PoVA/OHS service engagement and visits to Programs/Units to understand and respond to local issues	Q2 2023-2024	OHS Director/ PoVA Coordinator	Service engagement model developed
A14	Utilise PoVA Committee to provide oversight and governance for PoVA engagement with clinical areas	Q2 2023-2024	Chair PoVA Committee	Process for engagement developed
A15	Annual report including progress against KPI's, future areas of focus for the following year and progress against agreed targets	Q4 for each year of the plan	Chair PoVA committee	Progress against action plan and targets reported at least annually
<b>Objective: We develop, implement and evaluate a PoVA Model of Care</b>				
A16	Finalise and release the PoVA Model of Care document	Q2 2023-2024	Chair PoVA Committee	Model of Care document published on the intranet
A17	Develop an evaluation framework to review the roll out of new positions including feedback from employees and consumers	Q2 2023-2024	PoVA Coordinator	Evaluation framework completed
A18	Create and implement a method for collating activity data for PoVA Behaviour Support Consultants	Q2 2023-2024	PoVA Coordinator	Data collection method implemented

