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**Staff, patients and others are accountable for their actions.**

**Where incidents do occur, post incident responses are appropriate to support staff and prevent future incidents.**

Develop principles for training and core training tools

Evaluation of the Department’s guidance materials

Survey of code grey responses

Compliance monitoring

Post incident response

Patients, staff and others take responsibility for their actions and attitudes

Health services collaborate and share good practice initiatives to prevent & respond to OV

Staff are aware of their responsibility and feel supported by regular feedback processes for providing input to prevent violence in the workplace

Staff, management and the board are aware that OV is a preventable OHS hazard and OHS laws apply in relation to prevention

Staff know how to de-escalate, manage and report OV

Consistent OV education and training is provided for healthcare and security staff

Staff have guidance to support the use of risk assessments, environmental audits and risk control measures

Best practice environmental design factors are incorporated and evaluated for preventing OV and reducing the risk of OV incidents

Incidents of OV are reported, analysed and recommendations for improvement are identified and actioned

Definitions and responses to code grey are consistent across the Victorian health sector

OHS risks are identified and effective risk controls are applied to prevent violence

Integrated standards and consistent approaches to OV are applied by Victorian health services

Health services understand and apply appropriate and effective security models

Health service management understand that OV is an OHS issue and understand their OHS obligations for preventing and managing OV

**Key Performance Measures**

**Desired Outcomes**

**Learning and Feedback Loop**

**Governance & accountability**

**Stage 2 (Jan 2017 - Dec 2018)**

ANMF 10 point plan implemented

Reduction in substantiated Workcover claims related to OV

DHHS reporting in annual report

Reduction in % of staff injured from OV

100% of health services VHIMS reporting

100% of health services with post incident supports as per guidance

Improved % of staff who have undertaken de-escalation training

100% of health service security staff undertake specific healthcare training module

**Stage 1 (July – Dec 2016)**

100% of health services reporting on OV in 2015-16 annual reports

100% of health services meet Statement of Priorities actions for OV

Statewide core training is developed

Community awareness campaign implemented

Guidance on post incident response available to health services

100% of Health Service Boards receive education on OV risk

Security training module is developed

DHHS supports forum for shared learning and best practice in OV

**The culture fosters engagement and empowerment to prevent violence in healthcare.**

**Healthcare environments are safe for staff, patients and others.**

**Health Service Boards and management are informed of incidents and risks identified in their organisation and the system and have oversight and responsibility for the elimination and control of risks within their service.**

**There is an integrated system and services level approach to identifying, investigating and eliminating or controlling risks. The effectiveness of risk control measures are regularly reviewed from a system and service perspective.**

**System level leadership and governance reduces sector wide risk and holds services to account for organisational management and response to occupational violence.**

**A culture exists that does not tolerate violence against healthcare staff and supports the provision of an acceptable standard of care that ensures the health and safety of both health professionals and patients.**

**A culture of reporting, feeding back and learning is entrenched.**

**Victoria has a systems approach to the prevention of violence within health services.**

**Culture Change Process**

**Responding and Taking Action**

**Building Knowledge and Competency**

**Stakeholders**

Patients, health service staff, management and board, system manager and regulator

$20m Health Service Violence Prevention Fund

Audit of security models

Victorian Health Incident Management System project

**Initiatives**

Review of code grey standards and develop guidance

Facility design guidelines consultation

Develop investigation training and procedures including root cause analysis

Framework for organisational management and responses

Independent review of implementation and compliance with Taskforce on Violence in nursing recommendations

Forum for sharing good practice models and lessons across the health sector

Health service public reporting/statement of priorities

Public messaging campaign

**Strategic Objectives**

Health services are provided with information on OV trends

The community and health care workers are aware of the impact of OV on hospital staff, patients and the community

Staff understand how and feel empowered to report incidents of OV.

**Raising Awareness**

Healthcare facility design guidelines consider OHS risks and inform capital developments

Training for staff is guided by consistent principles

Staff know how to respond to Code Grey and Code Black

Health services proactively perform routine investigations, risk control and compliance monitoring

All healthcare staff report incidents of OV

**Challenge**

Violence in Victorian hospitals