

Occupational violence and aggression post-incident support

A guide for
health service managers

Occupational violence and aggression in healthcare settings

Occupational violence and aggression (OVA) involves incidents in which a person is abused, threatened or assaulted in circumstances relating to their work.

Examples of OVA include, but are not limited to:

- biting, spitting, scratching, hitting, kicking
- pushing, shoving, tripping, grabbing
- throwing objects, damaging property
- verbal abuse and threats
- using or threatening to use a weapon
- sexual harassment or assault.

All forms of OVA require action under occupational health and safety legislation and some incidents should be reported to police.



Who is this guide for?

This guide is intended for any person working in a Victorian healthcare setting who has responsibility for the health and safety of other staff. This may include directors, managers, team leaders and supervisors.

Post-incident responsibilities of managers

Health service managers are expected to treat all reports of OVA seriously and identify ways to reduce the risk of the incident re-occurring.

Immediate response

When notified about an incident, a manager should ensure that:

- everyone involved in the incident is safe
- medical attention is provided when necessary
- immediate emotional and practical support is provided to affected staff, patients or visitors
- accurate details about what has happened are obtained from a reliable source to assist with coordinating a response
- an incident report is completed (by the staff member involved). It may be necessary to provide the staff member with assistance, or complete the report on their behalf, where physical or psychological issues are present
- when appropriate, provide affected staff members with a copy of the *Occupational violence and aggression post-incident support: A guide for staff*.



Further response

A manager also has a responsibility to ensure that:

- ongoing practical and emotional support is provided to affected staff – the principles of Psychological First Aid may be a helpful starting point (see page six)
- staff are assisted to engage with support services, counsellors, or other health and mental health providers, if required
- an investigation of the incident is undertaken, existing controls and risk management processes are reviewed to reduce the risk of further incidents, and new controls are implemented
- the incident is reported in line with local protocols (for example, to senior manager and local health and safety representative) and reported to WorkSafe Victoria, if required
- leave or other alterations to work are in place, if required
- information about return to work and/or WorkCover claims is provided where relevant
- staff are supported to report the matter to police, and if necessary with any subsequent legal processes (for example, giving evidence in court)
- records of incidents are maintained, trends are analysed, and appropriate interventions and feedback to staff are provided
- when appropriate provide affected staff members with a copy of the *Occupational violence and aggression post-incident support: A guide for staff* (if they have not already been provided a copy).

Common reactions

Immediately after experiencing an incident of OVA, some people will experience psychological reactions that can be quite intense and distressing.

Typically these are relatively short-term reactions to a very stressful situation. It is important to remember that most people will recover after exposure to OVA, and often with the practical and emotional support from others.

For some staff, OVA can have a more significant impact on their psychological wellbeing.

These reactions can vary in severity depending on a range of factors including:

- pre-existing health or mental health issues
- prior exposure to incidents of OVA or experience of psychological trauma
- the severity of the threat
- the extent to which the person is dealing with other stressful experiences in their life.

Common reactions can include the following

Feelings

- irritable or 'on edge'
 - fearful, sad or angry
 - overwhelmed
 - hopelessness or worthlessness
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Thoughts

- difficulty with attention and concentration
 - difficulty making plans
 - worrying more than you usually do
 - unwanted memories or bad dreams related to the event
 - constant questioning such as 'What if others or I had done something different?' and 'What will happen now?'
-

Behaviours

- sleep problems
 - feeling detached or withdrawn from others
 - increased use of alcohol or drugs
 - loss of sense of purpose at work
 - reduced productivity
 - increased use of medication, alcohol or illicit substances
-

These reactions can be quite strong and are often more pronounced in the initial few weeks. In most cases, they will diminish in the weeks following the incident. Some people may experience such reactions for a longer period.

Importantly, following exposure to OVA, some people may develop a mental health problem such as depression, post traumatic stress disorder, excessive use of alcohol or other substances. It's important to remember that effective psychological and medical treatments are available for these problems.

As a general rule, you should encourage a person to seek professional help if they (or others) think that they are having difficulty recovering or would benefit from speaking to a health professional.

Some signs that a person may need to speak to a professional include:

- the person doesn't seem to be their 'usual self'
- their problems seem quite severe
- their emotional reactions are not improving
- it is difficult for the person to undertake day-to-day work or other activities
- it is difficult for the person to get along with others, such as colleagues, parents, family or friends.





Psychological First Aid

Most experts in posttraumatic mental health recommend Psychological First Aid (PFA) as the preferred approach for providing early practical and emotional support to people who have experienced a very stressful or traumatic event.

Psychological First Aid is a framework that can help you provide early support to staff affected by OVA.

This approach seeks to:

- reduce initial distress
- address basic needs (for example, comfort, information, practical and emotional needs)
- promote adaptive coping (for example, assist with problem-solving)
- encourage engagement with existing social and professional supports.

The available research evidence indicates that structured psychological interventions, such as psychological debriefing (which encourages individuals to recount the traumatic event and their responses in some detail), should not be offered on a routine basis in the first few weeks following a traumatic event. Psychological debriefing as an early intervention after trauma is not effective in preventing mental health problems, and may be counterproductive for some people.

Operational debriefing involves reviewing the organisational processes and systems following an incident and forms part of a postincident response.

There is no set formula for providing PFA to a person following a very stressful or traumatic experience. The person should be supported in using strategies and resources that suit them and that are readily available.

Managers will need to reflect on:

- whether you are the most suitable person to provide support to others if you were also involved in the incident of OVA
- your relationship with the person to whom you may be needing to provide support.

In cases where you are not the most suitable person to provide PFA, consider who else may be able to assist staff.



Consistent with the PFA approach, you can be guided by the following five principles: sense of safety, calming, self-efficacy, connectedness and hope.

Sense of safety

Promoting a sense of safety is particularly relevant following an incident of OVA. It is important that you:

- respect privacy and prevent exposure to additional stressful experiences (for example, do not ask a person to continue to look after a patient who has just assaulted them)
- be realistic (for example, 'The situation is under control and we're safe here') rather than provide vague and potentially inaccurate reassurances (for example, 'I think we will all be OK now')
- provide practical assistance to meet the person's basic needs such as food, comfort, transport, and contact with loved ones
- repeat information as often as needed, particularly to an acutely distressed person, to help them understand the information provided.

Calming

Contact with staff in the hours and days following an incident of OVA provides an opportunity for you to promote calm. You can help address strong anxiety or other emotions that can undermine confidence and active coping. There are a number of helpful actions you can take including:

- provide reassurance that short-term distress is understandable given the circumstances
- encourage sufficient rest, exercise and a healthy diet
- encourage use of slow breathing or other simple calming strategies to manage anxiety
- promote enjoyable and relaxing activities as well as limiting unhelpful coping strategies such as excessive substance use.



Self-efficacy

Self-efficacy is the belief in one's ability to influence important aspects of one's life. Following an incident, a person may feel overwhelmed and have difficulty with prioritising needs. For example, staff may be concerned about caring for their patients, completing an incident form or, how they will be perceived by work colleagues.

When promoting a sense of self-efficacy with a staff member, you can:

- highlight those aspects of the situation that the person has some control over
- explore past experiences of successfully coping with stressful situations
- encourage the person to actively address problems and try to solve one problem at a time
- assist the person to temporarily lower their expectations of themselves.

Connectedness

Support from family, friends and colleagues is a strong protective factor and can enhance recovery following a very stressful or traumatic experience. There are different forms of social support (for example, emotional support, material and physical assistance, a sense of belonging).

You can:

- explain the known benefits of social support
- encourage the person to identify opportunities to spend time with family and friends
- tell the person that they may find talking to others helpful and to do so when they feel ready
- direct and refer the person to appropriate support services.



Hope

In the initial weeks following an incident of OVA, some staff may have difficulties envisaging a positive vocational outlook for themselves, and may feel defeated by their recent experience.

You can promote hope that the person will make a successful recovery by conveying that:

- most people recover with time by using helpful coping strategies and with the support of others
- for many people, distressing reactions are short-lived
- the person has strengths, such as their ability to cope under stress or their available social supports
- reassure staff that practical actions and strategies have been implemented since the OVA incident, to reduce the risk of future incidents.

Ongoing monitoring and manager self-care

Given the variability in how people respond following a very stressful or traumatic experience, some level of 'checking in' and providing ongoing support to staff is usually required

This can include listening to the person, assisting with adjustments to work duties, and helping the person to engage with local or community-based supports including mental health professionals, if required.

Providing support to staff in the aftermath of an incident of occupational violence can place significant demands on you as a manager.

For example, you may have dealings with a number of staff with distressing experiences, and in some cases you may have been directly affected by an incident. It is therefore important that you look after your own wellbeing using strategies that help to keep you resilient, including those that you encourage others to use. This includes making contact with available supports such as a trusted colleague, supervisor, or professional services such as an Employee Assistance Program (EAP) or your local GP.



Tips to help you speak with staff

These are some tips that can help you to speak with staff following an incident

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- Ask yourself: am I best placed to speak with staff? For example, you may have been directly affected by the incident. Consider who else may be able to provide support to staff.
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- Speak with staff in a confidential environment.
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- Try to get accurate details about what happened (preferably from someone not directly affected) before you offer support to staff.
-
- Try to allow enough time to speak with the person so they don't feel rushed.
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- Consider the person's perspective and listen carefully... see if you can summarise what they've said in your own words to show you've been listening.
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- Don't worry about saying 'the right thing'; remind yourself that what is most important is listening and showing genuine concern.
-
- Maintain a calm and caring approach even in difficult circumstances.
-
- If the person is distressed, don't feel like you have to make their distress go away; you could say something like, 'It's really tough to go through something like this'.
-
- Don't pressure the person to tell you what happened to them; instead focus on how you can support the person.
-
- Try not to give simplistic reassurances such as, 'I know how you feel', 'You shouldn't feel that way' or 'You'll be fine in no time'.
-
- Don't talk about your own or someone else's troubles.
-
- Avoid using humour that may be interpreted as making light of the situation.
-

Helpful things to say

You could try some of these helpful things to say to someone

Sense of safety

'The area is well controlled, you're safe now.'

'Is there anyone you would like to have with you who would help you feel safer?'

'Let's work out a plan to get you home safely from work, how does that sound?'

Calming

'Those distressing reactions you describe are not uncommon; most people will have a stress reaction after something like you went through.'

'I can see you're very upset right now and that's quite understandable given what happened.'

'What helps you to feel calm and take your mind off things? Is there something that you could do to distract you?'

'Looking after yourself, and spending some relaxing time with family or friends can be quite helpful during this tough time.'



Self-efficacy

'I understand that you feel overwhelmed. Can you think of at least a couple of things that you do have some control over at the moment?'

'What has helped in the past when you've had to deal with a lot of stress? What hasn't worked so well for you?'

'I can see that there are competing demands at the moment. Let's work together to see what we prioritise and what we can come back to later'

'I can see that you're wanting everything to return to normal as soon as possible. But you may want to pace yourself for a while. And it's often a good idea to try to not make any major decisions or changes for a while.'

Connectedness

'It's helpful to have people around who you know you can rely on, and who you enjoy spending time with. I know you are working night shift this week, but is there any chance over the next few days when you could catch up with your friends or family?'

'Would you like the opportunity to talk this through with a counsellor? It can often be helpful to speak to someone on a confidential basis about what's happened and how you're going.'

'I understand that you don't feel comfortable receiving professional assistance just now. But it's there if you do change your mind.'

'Have you thought about seeing your GP or using the EAP? It might be good to touch base with someone neutral who has some expertise to assist you.'

Hope

'The incident will be investigated and changes will be made, your safety is a priority.'

'Let's catch up again to see how you're going, but I really hope that things will start to settle down for you pretty soon.'

'You are doing such a great job of managing things considering how tough this has been.'

'I've got a few ideas about helping you get back to work in the near future; what do you say we make a time to meet with Human Resources or Return to Work Coordinator to have a chat about that?'

'A thorough investigation into the incident will be conducted so that changes can be made to reduce the risk of an incident like this happening again.'

Promote awareness of post-incident responses

As a manager, you can plan and implement simple and achievable activities that promote awareness of mental health issues and reduce stigma in the workplace, improve how staff respond after an incident, and provide staff with ready access to additional professional supports.

- Talk to your staff about the stress of working in a healthcare setting, and about the support that is available to help with work-related stress.
- Talk to staff about the risk of OVA, preventative strategies that are in place or being put in place, the importance of staff reporting incidents, local policies and procedures, and what support and actions will occur if staff are exposed to OVA.
- Invite senior organisational leaders to engage with staff to hear about their experiences and inform them about what the organisation is doing to prevent OVA. You may also wish to invite representatives from local peer programs or professional support organisations to educate staff about their roles and what they can offer following an incident of OVA.
- Download or order 'It's never OK' campaign materials to display in staff areas:
www.worksafe.vic.gov.au/campaigns/itsneverok
- Distribute and display information about local peer, EAP and other professional supports, as well as mental health professionals and services in the community including the Better Access initiative and Lifeline.
- Show support for mental health awareness initiatives such as R U OK? and by using beyondblue's *Developing a workplace mental health strategy* (which can be found on the beyondblue website). Consider developing or contributing to a health service-specific mental health strategy.



Further information and advice

- Your peers and more senior colleagues
- Your local human resources, health and safety representatives and occupational health and safety manager
- Your local Employee Assistance Program (EAP)
- Your union or professional association
- Department of Health and Human Services:
www2.health.vic.gov.au/health-workforce/worker-health-wellbeing/occupational-violence-aggression
- WorkSafe Victoria:
www.worksafe.vic.gov.au
- Phoenix Australia - Centre for Posttraumatic Mental Health:
www.phoenixaustralia.org
- Commonwealth Government Department of Health 'Better Access' initiative:
www.health.gov.au/mentalhealth-betteraccess
- beyondblue:
www.beyondblue.org.au

In an emergency, call: 000

In a mental health crisis, call:

Lifeline
13 11 14

MensLine Australia
1300 789 978

Suicide Call Back Service
1300 659 467

Kids Helpline
1800 551 800

beyondblue
1300 22 4636

DirectLine
1800 888 236

(confidential alcohol and drug counselling and referral in Victoria)



Guide to providing early and effective support

The following checklist can be used as a prompt to guide post-incident support following an incident of occupational violence or aggression. It is important to determine the relevance of each based on the details of the incident.

A staff member’s response can be related to the incident itself, pre-existing factors, and how they feel they have been supported by the organisation, including the actions taken by their manager. Reactions may arise following a single event or in response to exposure to multiple events over a period of time.

Immediate support

	Completed?	Yes	No	N/A
• Ensure that everyone involved in the incident is safe.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Call appropriate hospital codes (e.g. Code Grey or Code Black) and emergency services if necessary (police, fire or ambulance).		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Ensure that medical attention is provided when necessary and contact a staff member’s family where appropriate.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Provide immediate emotional and practical support to those who witnessed or were involved in the incident.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Consider the staff member’s physical and psychological ability to continue with their shift. If required, seek replacement staff and make arrangements to assist the staff member (such as transportation to a location where they can be supported by family or friends).		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• At an appropriate time, provide support to assist the staff member to submit an incident report, or complete on their behalf if they are unable to due to their physical or psychological state.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Ensure that the risks and management strategies are handed over and documented in the patient’s medical record.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

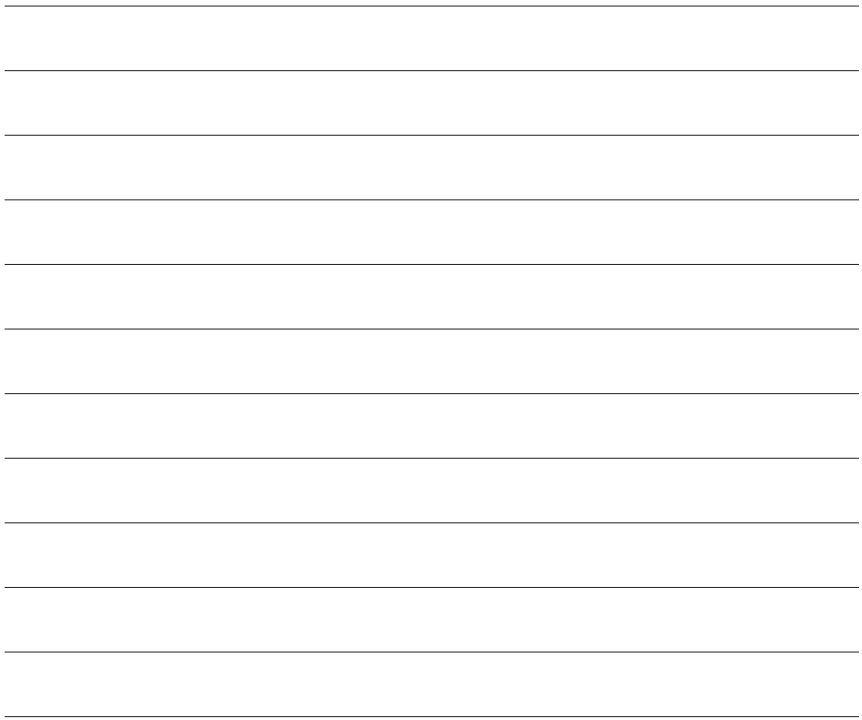
Further response

	Completed?	Yes	No	N/A
<ul style="list-style-type: none"> Determine who in the organisation is best placed to contact the affected staff member on a regular basis, as required. Consider the nature of the injury and who the staff member feels comfortable with. 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Ensure that ongoing practical and emotional support is provided to affected staff regarding effective self-care. 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Provide assistance to engage with support services, employee assistance programs, peer support programs, counsellors or other health and mental health professionals, if required. 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Undertake an investigation of the incident, review existing controls and risk management processes, and implement appropriate controls to reduce the risk of further incidents. 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Make sure that the incident is reported in line with local protocols (e.g. to senior manager and local health and safety representative) and to WorkSafe Victoria, if required. 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Leave or other alterations to work are in place (e.g. flexible rostering arrangements and modified duties) and that information regarding return to work is provided if relevant. 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Information about return to work and WorkCover claims is provided, if relevant. 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Together with staff, identify and put in place appropriate preventative strategies (e.g. alerts, behavioural contracts). 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Provide information about police reporting processes and ensure that staff are supported with reporting and legal processes (e.g. giving evidence in court). 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> Records of incidents need to be maintained, trends analysed, and appropriate interventions and feedback provided to staff including the implementation of planned actions and documenting completed actions. 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Things to remember

After reading this guide, you may find it useful to write down some strategies you would like to remember







**To receive this publication in an accessible format
email Worker Health and Wellbeing <whwb@dhhs.vic.gov.au>**

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