

Occupational violence and aggression post-incident support

A guide for
health service staff



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.

What are the responsibilities of senior leaders, managers and staff?

Health service leaders, managers and staff are expected to treat all reports of OVA seriously.

Senior leaders

As far as is reasonably practicable, an employer must ensure that they provide and maintain a safe and healthy work environment. This includes consulting with employees and health and safety representatives, and providing guidance, information, training and supports to enable staff to perform their work in a safe manner.

A senior leader has a responsibility to:

- ensure that policy and procedures designed to protect the health and safety of all persons affected by OVA are followed as part of the immediate response
- provide guidance on the implementation of policy to managers, for example, determining whether an incident needs to be reported to the police and/or WorkSafe Victoria
- support managers and staff by listening to and hearing about the issues, including offering timely support in a respectful and thoughtful manner
- encourage an open reporting process, taking action on these reports, and ensuring consultation and communication to staff about these issues and subsequent actions
- ensure that all incidents are investigated, risk control measures are reviewed, and actions for improvement are implemented
- review data on OVA incidents, identifying any trends and taking appropriate action to prevent future occurrences.

Managers

Immediate response

When notified of 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 and others who have experienced or have been exposed to the incident (for example, patients or visitors).

Further responsibilities

A manager also has a responsibility to ensure that:

- ongoing practical and emotional support is provided to affected staff
- assistance is provided to staff to engage with support services, counsellors or other mental health professionals, 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 internally in line with local protocols (for example, to senior manager and local health and safety representative)
- 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
- information about return to work and WorkCover claims is provided, if 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.

Staff

Staff members have a responsibility to:

- comply with local policies and procedures for managing and responding to incidents of OVA
- report any incident of OVA in accordance with local protocols
- be aware of available sources of information and support, including opportunities for education and training
- take reasonable care of their own health and safety at work, including the health and safety of others who may be affected by their actions
- communicate your concerns to your manager, senior leader, or another trusted senior staff member. You may also wish to raise any occupational health and safety concerns with your OHS representative.

Common reactions

Immediately after experiencing an incident of OVA, people can experience a range of psychological reactions that can be quite intense and frightening.

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. Structured psychological interventions, such as psychological debriefing are usually not recommended in the first few weeks following an incident.

Whilst most people do recover, OVA can have a significant impact on the psychological wellbeing of some staff. If this has happened to you, then you may experience a range of emotional and physical reactions.

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 you're dealing with other stressful experiences in your life.

These reactions can be quite strong and are often at their worst in the first week. In most cases, they will diminish in the weeks following the incident, although you may experience them from time to time for a longer period.

Common reactions can include the following

Feelings

- irritable or 'on edge'
- fearful, sad or angry
- overwhelmed

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
 - loss of sense of purpose at work
 - increased use of medication, alcohol, or illicit substances
-

Psychological First Aid

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

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.

There is no set formula for how PFA is delivered. People receiving PFA should be supported to use the strategies and resources that suit them and are available.

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 post-incident response.



Taking care of yourself following an incident of occupational violence and aggression

If you've been affected by an incident of OVA, try to do some of the things suggested below. This may help you recover after the incident and cope with any distress.

Recognise that you have had a very stressful experience and it is normal to have an emotional reaction. Give yourself permission to feel upset, but also remember your strengths.

Take care of yourself by getting plenty of rest (even if you are having sleep difficulties) and regular exercise. Try to eat regular, well-balanced meals.

Try to avoid using drugs or alcohol to cope as they can lead to more problems down the track.

Make time for relaxing and enjoyable activities such as listening to music, going for a walk, or whatever safe activity you enjoy doing. It might be helpful to learn a relaxation technique like breathing exercises, progressive muscle relaxation, meditation or yoga.

Get back to your usual routine as soon as possible, but take it easy. Don't throw yourself into activities or work too hard. Tackle the things that need to be done a little bit at a time, and count each success.





Try not to bottle up your feelings

or block them out. Talk about how you're feeling to someone who will understand, if you feel able to do so. Talking about things can be part of the normal healing process and will help you to accept what has happened.

Write about your feelings if you feel unable to talk about them.

Avoid making major life decisions

such as changing jobs in the days and weeks after the incident. On the other hand, make as many smaller, daily decisions as possible, such as what you want to eat or what film you'd like to see. This can help you to feel more in control of your life.

Spend time with people you care

about, even if you don't want to talk about your experience. Sometimes you will want to be alone, and that's OK too, but try not to become isolated.

Know when to ask for help. If you feel you are not coping or your distress is getting worse, ask for help. It is best to get help early. More advice about when and how to ask for help is provided later in this booklet.

Talking to your manager

If possible, keep your manager informed about what's going on for you.

There may be some personal details about your circumstances that you would prefer not to tell your manager. However, it is generally helpful to provide your manager with enough information to enable them to best help you. Your manager can assist you with reporting requirements and making contact with additional sources of information and support.

Ask your manager about the boundaries of confidentiality and information sharing if you have concerns about this or other issues.

You can also liaise with your organisation's Human Resources Department or Employee Assistance Program for further information about privacy issues.



What if I'm not coping?

Following an incident of OVA, some people may experience more persistent distress.

Significant and persistent distress may be an indication of a mental health problem such as depression, posttraumatic stress disorder, excessive use of alcohol or other substances. There are evidence-based psychological and medical treatments available for these issues. Some signs that you may need to speak to a professional include:

- you don't feel like your 'usual self'
- your problems seem quite severe
- your emotional reactions are not improving
- it is difficult for you to undertake day-to-day work or other activities, or to get along with colleagues, patients, family or friends.

Talk to someone you trust if you have concerns about how you're coping. A trusted family member, friend or colleague can often be a good place to start.

How do I help others?

These are some tips for talking to a colleague you're concerned about following an incident

- Speak to your colleague in a confidential environment.
- Try to put yourself in the person's shoes; listen carefully to what they are telling you.
- Don't worry about saying 'the right thing'; remind yourself that what's most important is listening and showing genuine concern.
- If the person is distressed, don't feel that you have to make their distress go away.
- Acknowledge the person's distress by saying something like, 'It's really tough to go through something like this'.
- Don't pressure the person to tell you what happened to them.
- 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.

As a general rule, it is a good idea to encourage a person to seek professional help if they think that they are not coping or would benefit from speaking to a health professional.

Further information and advice

- Your manager and colleagues
- Your Employee Assistance Program (EAP)
- Your local GP
- Your local human resources and health and safety representatives and occupational health and safety manager
- 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)





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