

## **DHB Board Office**

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Dear

Re: Official Information Act request - Assaults

Thank you for your Official Information Act request, received 22 February 2019 concerning details of staff who have been assaulted, harassed or injured from 2016 – 2019. Waitematā DHB contacted you on 26 February requesting that due to the amount of work that would be required, you refine the scope of your request. Agreement was received on 27 February that the information provided would be data/numbers/figures of all incidents involving any DHB staff member being harassed, assaulted, hurt, injured, threatened, maimed or implicated in an altercation with any patient from any ward/area under the DHB's jurisdiction over the last three years to date (i.e. from 1 January 2016 to 31 December 2018).

Before responding to your questions, some contextual information about our population and our services may be useful and assist your understanding of the information provided.

Waitemata DHB serves the largest population of any district health board in New Zealand, currently standing at more than 630,000 people. There is a direct link between the size of our population and the significant scale of services we provide and the opportunity for aggression towards our staff.

Waitemata DHB has a workforce of more than 7500 staff spread across more than 80 sites. In addition to caring for our own population, we are also the metropolitan Auckland provider of forensic psychiatry, child disability services, child community dental services and community alcohol and drug services.

Ultimately, our employees deal with a broad cross-section of the community in their day-to-day work and this often involves reaching out to people when they are at their most vulnerable and anxious, including those with mental health conditions, which can result in unpredictable behaviours. Caution is, therefore, advised in comparing raw event numbers between different district health boards unless it is clear the breadth of service delivery and clinical caseload is of similar complexity.

Please be aware that Waitemata DHB changed our staff incident reporting system in March 2018. This improved the capture of security incident-related data.

Caution is advised in the interpretation of 2018 data provided in this response and in any attempt to compare this information with data provided by other healthcare providers. This is due to the implementation of a new reporting model at Waitemata DHB from March 2018 which better-captures incidents that have been reported as security events relating to patients and staff.

Waitemata DHB encourages the reporting of assault and promotes a policy of ensuring that the safety and security of staff and patients is approached in line with our organisational values as follows:

### **Everyone Matters**

We have a responsibility to be welcoming and respectful and to listen, while maintaining the personal safety of our staff. We will equip staff with strategies to manage care where behaviour is a concern, whether it is their own or the behaviour of others.

Our approach will be professional and consistent wherever care is delivered, be it in hospital, a community facility or at home.

We all have a responsibility to report risks and incidents and to take care of ourselves and others - to not walk by.

# With Compassion

Safety and security initiatives will protect personal dignity and will be as unobtrusive as possible. If someone's behaviour compromises the safety of others, we will ensure a fair and balanced response. We will be attentive to people's individual circumstances and provide an opportunity for people to modify behaviour before using security measures.

## Connected

All safety and security initiatives will link with our Engagement Strategy to make sure we stay connected to our community and colleagues. We will have clear boundaries for behaviour which are documented in straightforward terms and readily available to staff and the community. Security risks will be clearly communicated across services to enable team work and promote staff safety.

# Better, Best, Brilliant

Security measures contribute to a safe, secure and supportive environment for everybody. We will continue to look for innovative ways to improve services and provide a positive experience for everyone.

Our responses to your questions are provided below.

As per the agreement noted above, we have reported the period from 1 January 2016 to 31 December 2018.

# Physical assault

Division	2016	2017
CORPORATE	0	0
ACUTE and EMERGENCY MEDICINE	88	96
CHILD WOMEN and FAMILY	3	2
HOSPITAL OPERATIONS	3	6
HOSPITAL SERVICES (Patient Care and Access)	0	0
SPECIALTY MEDICINE and HEALTH OF OLDER PEOPLE	60	108
SPECIALIST MENTAL HEALTH and ADDICTION	226	248
SURGICAL and AMBULATORY	6	13
Grand Total	386	473

A new reporting system was implemented in 2018. Data from the new system cannot be compared with data from past years. The number of physical assaults under the new system in 2018 was 866. This is made up of Corporate Services (3), Acute and Emergency Medicine Services (270), Child Women and Family Services (15), Hospital Operations (31), Hospital Services (2), Specialty Medicine and Health of Older People Services (237), Specialist Mental Health and Addiction Services (271) and Surgical and Ambulatory Services (37).

### Verbal Assault

DIVISION	2016	2017
CORPORATE	0	0
ACUTE and EMERGENCY MEDICINE	68	103
CHILD WOMEN and FAMILY	22	32
HOSPITAL OPERATIONS	5	7
HOSPITAL SERVICES (Patient Care and Access)	0	3
SPECIALTY MEDICINE and HEALTH OF OLDER PEOPLE	41	54
SPECIALIST MENTAL HEALTH and ADDICTION	258	184
SURGICAL and AMBULATORY	17	12
Grand Total	411	395

A new reporting system was implemented in 2018. Data from the new system cannot be compared with data from past years. The number of verbal assaults under the new system in 2018 was 846. This is made up of Corporate Services (3), Acute and Emergency Medicine Services (262), Child Women and Family Services (74), Hospital Operations (53), Hospital Services (3), Specialty Medicine and Health of Older People Services (116), Specialist Mental Health and Addiction Services (281) and Surgical and Ambulatory Services (54).

# Harassment

DIVISION	2016	2017	2018
CORPORATE	0	0	0
ACUTE and EMERGENCY MEDICINE	1	0	0
CHILD WOMEN and FAMILY	1	1	0
HOSPITAL OPERATIONS	0	0	0
HOSPITAL SERVICES (Patient Care and Access)	0	0	0
SPECIALTY MEDICINE and HEALTH OF OLDER PEOPLE	3	2	0
SPECIALIST MENTAL HEALTH and ADDICTION	0	2	6
SURGICAL and AMBULATORY	0	1	1
Grand Total	5	6	7

Waitemata DHB, like other agencies across the state sector, supports the open disclosure of information to assist the public's understanding of how we are delivering publicly-funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released.

If you feel that there are good reasons why your response should not be made publicly available, we will be happy to consider this.

We hope this reply satisfies your request.

Yours sincerely

Fiona McCarthy

Director Human Resources

Waitemata District Health Board