

Policy Applies to:

- All Mercy Hospital staff who are in contact with patients.
- Compliance by Credentialed Specialists, contractors, visitors, and patients will be supported by Mercy Hospital staff.

Related Standard:

- New Zealand Standard 8006:2006 Screening, Risk assessment and Intervention for Family Violence including Child Abuse and Neglect.
- Nga paerewa Health and disability services standard 8134:2021 (specifically section 1 patients' rights).
- Crimes Act 1961
- Crimes Amendment Act (No.4) 2011
- Crimes Amendment Act (No. 8) 2012
- EQuIP – Clinical Standard 1.1.1 Assessment ensures current and ongoing needs of the consumer / patient are identified.
- EQuIP – Support Standard 2.1.2 the integrated organisation-wide risk management framework ensures that corporate and clinical risks are identified, minimised, and managed.

Rationale:

Mercy Hospital is committed to ensuring that patients who suffer from any form of family violence are identified through routine inquiry, and as appropriate, are offered referral to relevant agencies.

Mercy Hospital has followed the Ministry of Health's recommendation that hospital settings adapt the 'Family Violence Assessment and Intervention Guideline (2016)' for the identification, assessment and referral of persons experiencing Family Violence of any kind.

Cultural considerations:

Services are provided in a way that upholds patients' rights. Service provision is underpinned by Pacific, Māori and other people's world views. Care is provided in a manner that empowers and enables patients, and that the patient deems as being culturally safe.

Definitions:

Whānau / Family violence covers a broad range of controlling and harmful behaviours commonly of a physical, sexual, and/or psychological nature which typically involve fear, intimidation, and emotional deprivation. Violence includes spouse/partner violence, dating violence, child abuse and neglect, abuse of teenagers by parents, elder abuse and neglect, sibling abuse, and abuse committed by another family member or person with whom there is a close personal or domestic relationship.

Routine Screening is a verbal enquiry, by healthcare providers of patients about their personal history of partner abuse, child abuse or neglect. This means routine questioning of all females, over the age of 16 about abuse, in person, without any other person present. This can be asked in the presence of a child, if the child that is too young to understand

Risk assessment is a process allowing for a full examination of circumstances and interactions to begin to form an opinion about a person's risk of harm either to themselves or others.

Safety planning and intervention is a process for identifying and planning to minimise harm and maximise safety.

Section 195A

Section 195A - 'Failure to protect child or vulnerable adult'. This section renders it an offence to fail to protect a child or vulnerable adult from risk of death, grievous bodily harm, or sexual assault. A person is liable if that person is a member of the same household or is a staff member of a hospital, institution, or residence where the child / vulnerable adult resides; and fails to take reasonable steps to protect the child or vulnerable adult from the actions / omissions of a third party.

Objectives:

Clinical Staff are aware of

- The need to screen all female patients aged 16 and over.
- Risk assessments required to identify, evaluate, monitor, and document level of risk.
- Where to find information relating to Violence Intervention, how to keep up to date and where to find more information
- Where to find the information relating to appropriate personnel & agencies.

Nonclinical staff are aware of

- The extent of family violence in NZ
- Potential signs to look out for
- The procedure to follow to ensure appropriate referral to clinical staff when there are any concerns.

Implementation:

Access to relevant reading material/signage for patients/visitors in waiting areas and throughout the hospital.

Policy appendices are available through drop down boxes in TRAK to ensure timely access to information.

- **Police Vetting**
Pre- employment screening of all new staff includes police vetting.
Staff who care for children overnight have up to date police vetting.
- **Declaration**
Credentialing Policy includes declaration concerning Vulnerable Children
- **Patient Assessment**
Face to Face nursing assessment of patients is completed in area of admission and will include screening for family violence as prompted in TRAK.
If the screening **is not completed in DSU**, the DSU nurse will complete the assessment with unsure/unknown status in TRAK, the 'VIP' TRAK icon will automatically appear in the patients record and will remain until nursing staff in in-patients has completed the assessment in TRAK.
- **Staff Training – Clinical**
During the first 6 weeks of employment, all clinical staff will complete a healthLearn module via Tautoko Clinical Orientation or Senior Nurse on Call assignment rule.
Registered Nurse, Enrolled Nurse, Anaesthetic Technician & Senior Nurse on Call 'Violence intervention Programme Pre-Training Module' RGCH008.
Allied Health Assistant & Health Care Assistant 'Violence Intervention Orientation' RGOR002
- **In Patient & Day Stay Facility Managers** work with Clinical Learning and Development Co-ordinator to ensure at least one violence intervention representative per area. Release time will be provided for representatives to attend the VIP workshop and subsequent updates (annually). They will facilitate representatives having time to be involved in awareness training

sessions, to update area staff and to orientate new staff to the policy and procedures relating to Patient Family Violence in their area.

- **Clinical area representatives** will be given release to attend 8-hour training day and subsequent annual updates (2hours). Proactively arrange with their area manager to ensure information is cascaded to staff in areas via appropriate forums e.g. huddles or ward meetings or through other time allocated to provide updates. Updates will include, but are not limited to, staff awareness of the extent of violence against women in NZ, how to access help through use of policy appendix, how to get more information, use of shielded websites, Mercy plans for white ribbon day. Area representatives will proactively seek out new members of the team and orientate them to policy (specifically appendix 1 & 5), TRAK assessment, and area specific lines of communication relating to Patient Family Violence.
Area representatives will orientate new & existing nursing staff to the process in TRAK.
- **Support staff** education programme will include.
 - Awareness training annual update on White Ribbon Day
 - Context and identification of abuse
 - Acknowledging disclosure of abuse
 - Referral to a clinical member of staff
 - Knowledge of Mercy Hospital's staff support program.
 - Evaluation of education program

Evaluation

- All staff have received education and training appropriate to their role in the identification, assessment and management of family violence including partner and child abuse.
- That the identification, assessment, and management have been carried out and are evident in clinical records.
- Working relationships are developed and maintained between referral agencies, Health NZ I Te Whatu Ora Family Violence/Child Protection support team and Mercy Hospital.
- If needed Staff are aware of how to access the Staff Support Programme.
- Planned regular updates of staff by area teams coordinated with CNM, area representatives & Clinical Learning & Development Coordinator
- Area representatives have attended the 8-hour workshop in Health NZ I Te Whatu Ora Southern
- CLT have a plan in place for updates annually.
- Senior Nurse on Call have completed healthLearn course.

External Resources:

- MOH Family Violence Assessment and Intervention Guidelines: Child abuse and intimate partner violence (2016)
- MOH Family Violence Intervention Guidelines: Elder Abuse and Neglect (2007)
- MOH 'Child Abuse Assessment and Response' Flow chart
- MOH 'Partner Abuse Assessment and Response Flowchart'
- Public Health Family violence intervention agency register
- SDHB Family violence safety plan
- National Child Protection Alert System Memorandum of Agreement with the Ministry of Health and New Zealand Pediatric Society, 2012.

Associated Legislation:

- Care of Children Act 2004

- The Children's Act 2014
- Children, Young Persons, and Their Families (Oranga Tamariki) Legislation Act 2017
- Family Violence Act 2018
- Family Violence Regulations 2019
- Health Information Privacy Code (1994)
- Crimes Act (1961)
- Crimes Amendment Act 2005
- Crimes Amendment Act (No. 3) 2011
- Child, Youth and Family "Working together to keep children and young people safe".
- The Privacy Act
- Summary of associated legislation found in Family Violence Assessment and Intervention Guideline Child Abuse and Intimate Partner Violence 2016 - Appendix H & I

Internal

- Appendix 1 – Guidelines for identifying victims of abuse.
- Appendix 2 - Child abuse and neglect Intervention flowchart
- Appendix 3 - Intimate partner violence intervention flowchart
- Appendix 4 – Elder Abuse or Neglect; assessment and response flowchart
- Appendix 5 - Public Health Family violence intervention agency registers
- Patient assessment policy
- Report of concern to Oranga Tamariki – Ministry for Children
- Family violence intervention register.