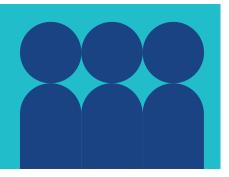
# The System Audit Family Violence Evaluation (SAFE) Project Executive Summary

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The State Government of Victoria has made a significant investment to support public hospitals and health services implement the Strengthening Hospital Responses to Family Violence (SHRFV) program, which provides a whole-of-organisation approach. This SHRFV model, implementing system change to address family violence, is the major part of current family violence program of work in health services.

There has been minimal funding for evaluation of the SHRFV program. There is also a need to develop an evidence base for how change is occurring in health settings to inform policy and practice across Victoria and Australia. The System Audit Family Violence Evaluation (SAFE) Project addresses this gap by implementing a research initiative using a purpose designed System Audit Tool (SAFE Tool) administered at eighteen Victorian health services to evaluate the impact of the SHRFV program.

### **Method**

- > The SAFE Project was launched at the Royal Women's Hospital's International Women's Day Breakfast in March 2019.
- > The eighteen diverse health services administered the system audit SAFE Tool in three stages from November 2019 to April 2021.

### The SAFE Tool

The SAFE Tool provides an Overall Score derived from individual scores weighted across ten domains:

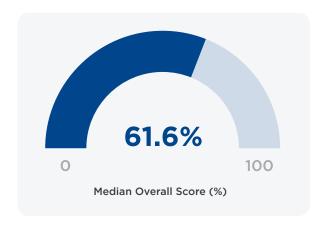
- one Patient Domain focussed on identification and response to patients (13 indicators)
- ➤ two Staff Domains focussed on staff support and training to undertake the work (13 indicators)
- > seven Organisational Domains focussed on system factors needed to support staff including: policies, procedures and guidelines; governance and leadership; intersectionality and diversity; collaboration; infrastructure; culture; and quality improvement (45 indicators).

The SAFE Tool and participating in the SAFE Project has provided a detailed picture of where the health service has made positive progress, in addition to [highlighting] areas for further improvement.

(SAFE Site Survey participant)

# **Findings in context**

## **Overall Scores**

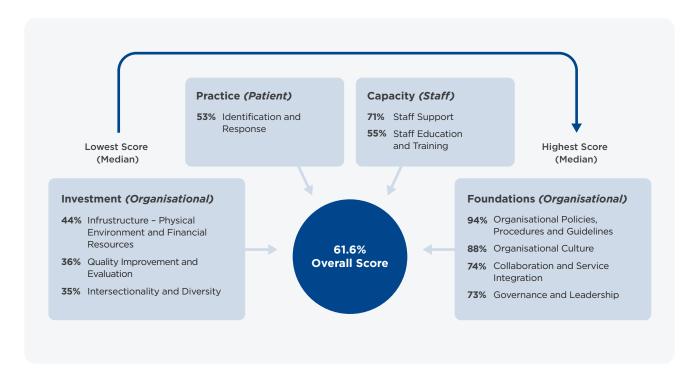


- ➤ Overall Scores ranged between 50.8% and 79.6%. The median (middle) was 61.6%.
- > There was general consistency across the SAFE Sites three sites scored very well, none were outstanding, neither was any site significantly lower than the rest.
- Results suggest that while the health services have systems in place to respond to family violence, there continues to be a need for further resourcing and improvement in a range of domains at all participating sites.

### Findings in context (cont.)

### **Domain Scores**

Ranking of SAFE Domains based on median (middle) scores from lowest to highest scores



The pattern formed by this ranking of domain performance (based on median (middle) scores) largely aligned with SHRFV program key directions, strategies and resources. Reflective of the SHRFV model the foundations have been laid, staff capacity has started to be built, but it hasn't necessarily translated completely into practice or integrated investment by the health service.

- > The four highest performing domains covered the organisational foundations crucial in realising a whole-of-organisation response to family violence.
- > Next were the two Staff Domains important in building internal capacity and capability, a necessary step before the practice of patient-centred care could be appropriately undertaken by staff who are supported both professionally and personally in this work.
- > The lower ranking of the only Patient Domain indicated the important patient facing work remains an area for development and improvement.
- > The three lowest scoring domains covered organisational investment which would help embed the family violence program of work within the health service and facilitate a sustainable and effective family violence program.

The SHRFV program has had a focus on laying the foundations and building capacity for family violence identification and response work through implementing organisational policies and procedures, fostering strong organisational culture, governance and leadership, collaboration and staff support and training. This has been supported through SHRFV resources which are accessible to all. Health services now need to bolster the patient facing components of the work, particularly for diverse populations, and invest in the overall family violence program of work moving forward.

These performance audit rankings highlight where sites are doing well and provides a structure for future work and recommendations at the practice level and government level to improve outcomes.

Great initiative and would be great to be involved in a SAFE audit in the future.

(SAFE Site Survey participant)

# Family violence practice in health services

Recommendations for family violence practice cover the three domain areas in the SAFE Tool (patient, staff and organisational) and mirror the areas needing more attention found by the SAFE Tool.



### **Greater Investment**

- Develop strategies to improve inclusivity and accessibility of the family violence program for diverse groups
- > Undertake the SAFE Tool annually to provide quality assurance and feedback mechanisms
- > Create safe confidential spaces and strategies across the health service and at home for community teams or telehealth services
- > Commit to funding of a family violence role within the health service to ensure the program is sustained



# **Strengthen Practice**

- > Develop effective strategies to undertake family violence antenatal screening
- > Implement identification, risk assessment and safety planning across all services where patients/clients are at high risk of family violence and ensure this is effectively documented, and information shared with other services
- ➤ Develop response to patients/clients who are perpetrators of family violence and a system to support this work



# **Build Capacity**

- > Develop strategies to implement and sustain Family Violence Clinical Champions (who support staff responding to family violence) and Contact Officers (who support staff who have experienced family violence) programs along with an evaluation plan
- > Continue to build capacity through staff education/training including:
  - increasing reach and exploring options for expanding mandated family violence training where appropriate
  - providing opportunities for ongoing training and developing a mechanism for updating training



### **Maintain Foundations**

- > Strong 'Governance and Leadership' and 'Organisational Policies, Procedures and Guidelines'
- > Activities that promote strong 'Organisational Culture' concerning family violence and gender equity
- > Ensure ongoing 'Collaboration and Service Integration'



# **Develop Actions**

> Development of a family violence program Action Plan from the SAFE Audit results to strengthen the strategic and continuous monitoring of the health service's response to family violence and inform system change

### Government

In recognition of the role government has in ensuring health services maintain and/or improve responses to family violence, the SAFE Project provides recommendations for government directed at both state and national levels.



#### **Victoria**

- > Fund annual implementation of the SAFE Tool at health services through the University of Melbourne and with associated health service and survivor governance
- Produce annual state-wide reports based on the SAFE Tool results
- > Undertake an annual review, by the University of Melbourne, of the family violence Action Plans of each health service (in line with MARAM and Information Sharing)
- Review and change (where appropriate) the SAFE Tool *Indicators* (and corresponding *Measurement notes*) every three years to ensure alignment with policy directions and legislation



### **Nationally**

- > Adapt the SAFE Tool for national use
- > Implement the national SAFE Tool and process across Australia
- > Establish national standards for responding to family violence in health services
- Include family violence in The National Safety and Quality Health Service (NSQHS) Standards

### **Conclusion**

The SAFE Tool, a System Audit Tool, has been successfully implemented across eighteen Victorian health services by the Royal Women's Hospital and the University of Melbourne. We know that auditing and feedback are powerful mechanisms to change behaviour individually and across organisations. The SAFE Project shows where sites are progressing system change within their organisations to address family violence, and highlights the investment needed and the work still to be done to ensure women and families are on a pathway to safety and well-being across Victoria and nationally.

Thanks to support from the Collier Charitable Fund, we now have a validated audit tool which provides a method to achieve change across health systems in the context of family violence.

(SAFE Research Team)

The SAFE Project was funded by the Collier Charitable Fund, for which we are very grateful. Collier Charitable Fund



