

Occupational based violence in primary health care

**Department of General Practice
Department of Social Work
Ambulance and Paramedic Studies**

SECTION A.

This section asks about your experience of verbal abuse *associated with work*. The definition of verbal abuse is a patient/client, their friend/s, family member/s, other professional/s or work colleague/s using offensive language, yelling or screaming with the intent of offending or frightening you. It can include threats or abuse over the phone, but excludes sexual harassment and sexual assault (see pages 5 & 6). Please answer by circling the number that matches your answer.

1. Have you been subjected to verbal abuse in the last 12 months?

- 1. No Go to Question 11
- 2. Yes

2. In the last 12 months, how frequently has verbal abuse happened to you? Please circle only one response.

Once	A few times	About once a month	About once a week	About daily
1	2	3	4	5

3. In the last 12 months, when has the verbal abuse occurred? Please circle all that apply.

- 1. During my working day
- 2. During my working night
- 3. When not working (day time)
- 4. When not working (night time)

4. In the last 12 months, where has the verbal abuse occurred? Please circle all that apply.

- 1. Usual work location (eg. office, waiting room, ambulance branch, vehicle)
- 2. Public place (eg. hospital, sporting facility)
Please specify _____
- 3. Private Residence
- 4. Other
Please specify _____

5. Briefly describe the incident of verbal abuse (in the last 12 months) that worried you most, and why.

Thinking of this particular incident, please answer questions 6 to 10.

6. Who were the main perpetrators of the verbal abuse? Please circle all that apply.

- 1. Patient/client
- 2. Patient's/client's families, relatives, companions or friends
- 3. Other professional or work colleague
- 4. Bystander
- 5. Other

Please specify _____

7. What was the gender of the perpetrator? Please circle all that apply, and indicate number.

- 1. Male _____
- 2. Female _____

8. Do you think there were any underlying factors that precipitated this incident? (eg., alcohol intoxication, psychosis, service dissatisfaction etc). If yes, please explain.

9. What was your immediate response to the verbal abuse? (eg., did nothing, called security/police, yelled for help). Please explain.

10. What was your level of fear during the incident? Please circle only one response.

None	Mildly apprehensive	Quite Apprehensive	Frightened	Very frightened
1	2	3	4	5

This section asks about your experience of property damage or theft *associated with work*. The definition of this is a patient/client, their friend/s, family member/s, other professional/s or work colleague/s, causing damage to, or stealing property belonging to you, your family or your workplace. It includes damage to or theft of a vehicle, personal effects, home contents, office equipment, and supplies, or office furnishings. *Attempted* theft of the above items is also included. Please answer by circling the number that matches your answer.

11. Have you been subjected to property damage or theft in the last 12 months?

1. No Go to Question 21
2. Yes

12. In the last 12 months, how frequently has property damage or theft happened to you? Please circle only one response.

Once	A few times	About once a month	About once a week	About daily
1	2	3	4	5

13. In the last 12 months, when has the property damage or theft occurred? Please circle all that apply.

1. During my working day
2. During my working night
3. When not working (day time)
4. When not working (night time)

14. In the last 12 months, where has the property damage or theft occurred? Please circle all that apply.

1. Usual work location (eg. office, waiting room, ambulance branch, vehicle)
2. Public place (eg. hospital, sporting facility)
Please specify _____
3. Private Residence
4. Other
Please specify _____

15. Briefly describe the incident of property damage or theft (in the last 12 months) that worried you most, and why.

Thinking of this particular incident, please answer questions 16 to 20.

16. Who were the main perpetrators of the property damage or theft? Please circle all that apply.

1. Patient/client
2. Patient's/client's families, relatives, companions or friends
3. Other professional or work colleague
4. Bystander
5. Other

Please specify _____

17. What was the gender of the perpetrator? Please circle all that apply, and indicate number.

1. Male _____
2. Female _____

18. Do you think there were any underlying factors that precipitated this incident? (eg., alcohol intoxication, psychosis, service dissatisfaction etc). If yes, please explain.

19. What was your immediate response to the property damage or theft? (eg., did nothing, called security/police, yelled for help). Please explain.

20. What was your level of fear during the incident? Please circle only one response.

None	Mildly apprehensive	Quite Apprehensive	Frightened	Very frightened
1	2	3	4	5

This section asks about your experience of intimidation *associated with work*. The definition of intimidation is a patient/client, their friend/s, family member/s, other professional/s or work colleague/s purposely threatening, following you, using gestures to purposely offend or frighten you. Please answer by circling the number that matches your answer.

21. Have you been subjected to intimidation in the last 12 months?

1. No Go to Question 31
2. Yes

22. In the last 12 months, how frequently intimidation happened to you?

Please circle only one response.

- | | | | | |
|------|-------------|--------------|--------------|-------------|
| Once | A few times | About once a | About once a | About daily |
| | | month | week | |
| 1 | 2 | 3 | 4 | 5 |

23. In the last 12 months, when has the intimidation occurred? Please circle all that apply.

1. During my working day
2. During my working night
3. When not working (day time)
4. When not working (night time)

24. In the last 12 months, where has the intimidation occurred? Please circle all that apply.

1. Usual work location (eg. office, waiting room, ambulance branch, vehicle)
2. Public place (eg. hospital, sporting facility)
Please specify _____
3. Private Residence
4. Other
Please specify _____

25. Briefly describe the incident of intimidation (in the last 12 months) that worried you most, and why.

Thinking of this particular incident, please answer questions 26 to 30.

26. Who were the main perpetrators of the intimidation? Please circle all that apply.

1. Patient/client
2. Patient's/client's families, relatives, companions or friends
3. Other professional or work colleague
4. Bystander
5. Other

Please specify _____

27. What was the gender of the perpetrator? Please circle all that apply, and indicate number.

1. Male _____
2. Female _____

28. Do you think there were any underlying factors that precipitated this incident? (eg., alcohol intoxication, psychosis, service dissatisfaction etc). If yes, please explain.

29. What was your immediate response to the intimidation? (eg., did nothing, called security/police, yelled for help). Please explain.

30. What was your level of fear during the incident? Please circle only one response.

- | | | | | |
|------|---------------------|--------------------|------------|-----------------|
| None | Mildly apprehensive | Quite Apprehensive | Frightened | Very frightened |
| 1 | 2 | 3 | 4 | 5 |

This section asks about your experience of physical abuse *associated with work*. The definition of physical abuse is a patient/client, their friend/s, family member/s, other professional/s or work colleague/s physically attacking you, or *attempting* to attack you. It includes behaviours such as punching, slapping, kicking or using a weapon or other object with the intent of causing bodily harm. Please answer by circling the number that matches your answer.

31. Have you been subjected to physical abuse in the last **12 months**?

1. No Go to Question 41
2. Yes

32. In the last **12 months**, how frequently has physical abuse happened to you? Please circle only one response.

- | | | | | |
|------|-------------|-----------------------|----------------------|-------------|
| Once | A few times | About once a
month | About once a
week | About daily |
| 1 | 2 | 3 | 4 | 5 |

33. In the last **12 months**, when has the physical abuse occurred? Please circle all that apply.

1. During my working day
2. During my working night
3. When not working (day time)
4. When not working (night time)

34. In the last **12 months**, where has the physical abuse occurred? Please circle all that apply.

1. Usual work location (eg. office, waiting room, ambulance branch, vehicle)
2. Public place (eg. hospital, sporting facility)
Please specify _____
3. Private Residence
4. Other
Please specify _____

35. Briefly describe the incident of physical abuse (in the last 12 months) that worried you most, and why.

Thinking of this particular incident, please answer questions 36 to 40.

36. Who were the main perpetrators of the physical abuse? Please circle all that apply.

1. Patient/client
2. Patient's/client's families, relatives, companions or friends
3. Other professional or work colleague
4. Bystander
5. Other

Please specify _____

37. What was the gender of the perpetrator? Please circle all that apply, and indicate number.

1. Male _____
2. Female _____

38. Do you think there were any underlying factors that precipitated this incident? (eg., alcohol intoxication, psychosis, service dissatisfaction etc). If yes, please explain.

39. What was your immediate response to the physical abuse? (eg., did nothing, called security/police, yelled for help). Please explain.

40. What was your level of fear during the incident? Please circle only one response.

- | | | | | |
|------|------------------------|-----------------------|------------|--------------------|
| None | Mildly
apprehensive | Quite
Apprehensive | Frightened | Very
frightened |
| 1 | 2 | 3 | 4 | 5 |

This section asks about your experience of sexual harassment *associated with work*. The definition of this is any form of sexual propositioning or unwelcome sexual attention from a patient/client, their friend/s, family member/s, other professional/s or work colleague/s. It includes behaviours such as humiliating or offensive jokes and remarks with sexual overtones, suggestive looks or physical gestures, inappropriate gifts or requests for inappropriate physical examinations, pressure for dates, and brushing, touching or grabbing *excluding* sexual touching (eg., the genital or breast area). Please answer by circling the number that matches your answer.

41. Have you been subjected to sexual harassment in the last 12 months?

1. No Go to Question 51
2. Yes

42. In the last 12 months, how frequently has sexual harassment happened to you? Please circle only one response.

- | | | | | |
|------|-------------|-----------------------|----------------------|-------------|
| Once | A few times | About once a
month | About once a
week | About daily |
| 1 | 2 | 3 | 4 | 5 |

43. In the last 12 months, when has the sexual harassment occurred? Please circle all that apply.

1. During my working day
2. During my working night
3. When not working (day time)
4. When not working (night time)

44. In the last 12 months, where has the sexual harassment occurred? Please circle all that apply.

1. Usual work location (eg. office, waiting room, ambulance branch, vehicle)
2. Public place (eg. hospital, sporting facility)
Please specify _____
3. Private Residence
4. Other
Please specify _____

45. Briefly describe the incident of sexual harassment (in the last 12 months) that worried you most, and why.

Thinking of this particular incident, please answer questions 46 to 50.

46. Who were the main perpetrators of the sexual harassment? Please circle all that apply.

1. Patient/client
2. Patient's/client's families, relatives, companions or friends
3. Other professional or work colleague
4. Bystander
5. Other
Please specify _____

47. What was the gender of the perpetrator? Please circle all that apply, and indicate number.

1. Male _____
2. Female _____

48. Do you think there were any underlying factors that precipitated this incident? (eg., alcohol intoxication, psychosis, service dissatisfaction etc). If yes, please explain.

49. What was your immediate response to the sexual harassment? (eg., did nothing, called security/police, yelled for help). Please explain.

50. What was your level of fear during the incident? Please circle only one response.

- | | | | | |
|------|------------------------|-----------------------|------------|--------------------|
| None | Mildly
apprehensive | Quite
Apprehensive | Frightened | Very
frightened |
| 1 | 2 | 3 | 4 | 5 |

This section asks about your experience of sexual assault *associated with work*. The definition of sexual assault is any forced sexual act, rape or indecent assault perpetrated by a patient/client, their friend/s, family member/s, other professional/s or work colleague/s. It includes brushing, touching or grabbing of the genitals or breast. It also includes *attempted* sexual assault. Please answer by circling the number that matches your answer.

51. Have you been subjected to sexual assault in the last 12 months?

1. No Go to Question 61
2. Yes

52. In the last 12 months, how frequently has sexual assault happened to you? Please circle only one response.

- | | | | | |
|------|-------------|-----------------------|----------------------|-------------|
| Once | A few times | About once a
month | About once a
week | About daily |
| 1 | 2 | 3 | 4 | 5 |

53. In the last 12 months, when has the sexual assault occurred? Please circle all that apply.

1. During my working day
2. During my working night
3. When not working (day time)
4. When not working (night time)

54. In the last 12 months, where has the sexual assault occurred? Please circle all that apply.

1. Usual work location (eg. office, waiting room, ambulance branch, vehicle)
2. Public place (eg. hospital, sporting facility)
Please specify _____
3. Private Residence
4. Other
Please specify _____

55. Briefly describe the incident of sexual assault (in the last 12 months) that worried you most, and why.

Thinking of this particular incident, please answer questions 56 to 60.

56. Who were the main perpetrators of the sexual assault? Please circle all that apply.

1. Patient/client
2. Patient's/client's families, relatives, companions or friends
3. Other professional or work colleague
4. Bystander
5. Other

Please specify _____

57. What was the gender of the perpetrator? Please circle all that apply, and indicate number.

1. Male _____
2. Female _____

58. Do you think there were any underlying factors that precipitated this incident? (eg., alcohol intoxication, psychosis, service dissatisfaction etc). If yes, please explain.

59. What was your immediate response to the sexual assault? (eg., did nothing, called security/police, yelled for help). Please explain.

60. What was your level of fear during the incident? Please circle only one response.

- | | | | | |
|------|------------------------|-----------------------|------------|--------------------|
| None | Mildly
apprehensive | Quite
Apprehensive | Frightened | Very
frightened |
| 1 | 2 | 3 | 4 | 5 |

SECTION B.

In the last section you described your experience of violence *associated with work*. If you have experienced violence associated with work please complete Sections B-E. If you have not experienced violence associated with work, please go to Section D and Section E.

61. Thinking of *the most significant* episode of violence that you have experienced, please describe the impact it has had on you **personally**.

62. Thinking of *the most significant* episode of violence that you have experienced, please describe the impact it has had on your **personal relationships**.

63. Thinking of *the most significant* episode of violence that you have experienced, please describe the impact it has had on your **work**.

SECTION C.

This section asks you questions about how you responded to violence (associated with work) *after* it occurred. Please answer by circling the number that best matches your answer.

	Never	Once	Sometimes	Often	Always
64. Did nothing	1	2	3	4	5
65. Discussed with friends and/or family	1	2	3	4	5
66. Discussed with colleagues	1	2	3	4	5
67. Discussed with supervisor/mentor	1	2	3	4	5
68. Received professional debriefing/counselling	1	2	3	4	5
69. Completed an incident report	1	2	3	4	5
70. Took days off work	1	2	3	4	5
71. Took on a different role	1	2	3	4	5
72. Sought medical attention	1	2	3	4	5

73. Other

Please specify _____

SECTION D.

Below is a list of comments made by people after stressful life events. Using the following scale, please indicate how frequently each of these comments were true for you DURING THE PAST SEVEN DAYS.

	Not at all	Rarely	Sometimes	Often
74. I thought about it when I didn't mean to	1	2	3	4
75. I avoided letting myself get upset when I thought about it or was reminded of it	1	2	3	4
76. I tried to remove it from memory	1	2	3	4
77. I had trouble falling asleep or staying asleep because of pictures or thoughts about it that came into my mind	1	2	3	4
78. I had waves of strong feelings about it	1	2	3	4
79. I had dreams about it	1	2	3	4
80. I stayed away from reminders of it	1	2	3	4
81. I felt as if it hadn't happened or wasn't real	1	2	3	4
82. I tried not to talk about it	1	2	3	4
83. Pictures about it popped into my mind	1	2	3	4
84. Other things kept making me think about it	1	2	3	4
85. I was aware that I still had a lot of feelings about it, but I didn't deal with them	1	2	3	4
86. I tried not to think about it	1	2	3	4
87. Any reminder brought back feelings about it	1	2	3	4
88. My feelings about it were kind of numb	1	2	3	4

(Source: Horowitz, M., Wilner, M., & Alvarez, W. (1979). Impact of Event Scale: A measure of subjective stress. *Psychosomatic Medicine*, 41, 209-218).

	Not at all	Rarely	Sometimes	Often
89. I found it harder to help people	1	2	3	4
90. I felt helpless	1	2	3	4

Section E.

This section asks you for general demographic information.

91. Gender

1. Male
2. Female

92. Age _____ years

93. Average hours per week in service _____ hours

94. Number of hours per week spent in direct client/patient contact
_____ hours

95. Years as paramedic _____ years

96. Qualifications _____

97. Do you usually respond to a call as a

1. Single responder
2. Two person crew
3. More than one 2 person crew

98. Station location

1. Capital city
2. Other metropolitan centres (urban centre population >100,000)
3. Large rural centres with population 25,000-99,000
4. Small rural centres with population 10,000-24,999
5. Other rural centres with population < 10,000
6. Remote centres with population > 5000
7. Other remote centres with population < 5000

Thank you for your assistance. Please return this questionnaire using the reply paid envelope provided.