Clinical guidelines to assess the risk of violence in triage have been developed by nurse researchers at the University of Melbourne in Victoria.

The study aimed to develop a clinical practice guideline to provide an evidence-based decision-making framework for health care clinicians performing violence risk assessment at triage.

Clinical practice guidelines for violence risk assessment emphasise prevention of violence through early identification and intervention, and thereby seek to maximise the potential for safer outcomes for service-users, health care workers, and the public.

The study design was based on the National Health and Medical Research Council's methodology for the development of Clinical Practice Guidelines, outlined in; A guide to the development, implementation and evaluation of clinical practice guidelines.

The incidence of violence in Australian health care settings has increased considerably in the past ten years, and the safety of service-users, health care staff, and the general public has become a major concern. A key focus of recent literature on violence in health has also identified a critical need to reduce the adverse outcomes associated with managing violence, including staff injury, service-user injury and trauma associated with mechanical restraint and seclusion, and the high demand on resources required to manage an episode of violence.

Risk assessment of violence at point-of-entry to health services has become an important component of routine triage practice. The opportunity for early identification and prevention of violence at triage is significant, because point-of-entry assessment of risk factors and warning signs for violence can lead to care planning that includes strategies to reduce the likelihood of an incident of violence occurring. To date, consistency in violence risk assessment has been problematic at triage, as an evidence-based guideline to support decision-making has not been available.

Through an exhaustive systematic review, this project has established best evidence for risk factors pertinent to violence in health service-user populations, which are significant to assessment at triage. The findings of the study informed the development of a Clinical Practice Guideline for Violence Risk Assessment at Triage.

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To access the guideline please visit the news section of the nursing homepage at http://www.nursing.unimelb.edu.au/