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Patient aggression overstated

I read the conclusion of the article 'Patient aggression experienced by staff in a public hospital' published in the *New Zealand Medical Journal* 23 May 2014 with utter dismay. The authors' conclusion *'These results demonstrate many hospital staff, of all roles and workplaces experience aggression on a frequent basis'* seems somewhat overreaching.

The study design specifically sought to include accident and emergency and psychiatric settings where the authors acknowledge patient violence is known to be particularly high. At the same time, the study excluded surgical services and general medical services making the study unable to be generalised across a whole hospital setting.

Any attempt to use the data collected in this study to calculate rates across the whole hospital setting, or indeed the entire health workforce as the article does in the discussion of the article is unbelievable.

A non-randomised study of 227 respondents, working in selected departments in one hospital, cannot be generalised across the whole hospital. It gives an inaccurate picture of the level of aggression occurring in our hospital settings.

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Authors' reply—We thank McLeod for taking an interest in our paper, and we share her concern about the rate of such events. She is quite correct to note that the place one surveys is an important component of the reported rate of aggression, and we consider that we did discuss that this was reporting the rate among participants from a subset of district health board health workers, not all employees of the hospital.

She suggests that if we looked at surgical and medical staff we would have found a lower rate. The one survey that deliberately targeted medical surgical staff was Coverdale et al (2001) which showed that psychiatric registrars had a significantly higher rate of the same events than medical, surgical and obstetric registrars. Even if we had included medical and surgical wards and they did have lower rates of aggression our conclusion would remain the same: some hospital staff experience high rates of aggression.

We also note that this research was part of a student summer project and as such was conducted with little time and funding. Thus, the hospital areas reached and response rate were considered to be very good under the circumstances. The student was also charged with getting reliability data for our main measure, the POPAS-NZ, and this is published elsewhere (Swain & Gale, 2014). This is the third local survey with the POPAS-NZ (Swain, Gale and Greenwood, 2014, Gale et al 2009, and McKay et al 2009). Selected results from these surveys are in Table 1.

Table 1. Percent of participants reporting that such events had happened during the last year, extracted from POPAS-NZ tables

Population	Swain et al 2014 Hospital Workers	McKay et al 2009 Medical Students	Gale et al 2009 NGO Support Workers
Verbal Anger	93	67	66
Assault	39	4	30
Injury	29	4	21
Harassment	40	45	22
Litigation	26	6	24

The rates of harassment reported in this paper are very similar to the previous medical student survey, and higher than that in a survey of community based support workers: one can take some hope that the students seem to be protected by hospital staff from assault, injury and complaint, but the rate of verbal aggression remains quite high.

We unreservedly stand by our conclusion many hospital staff experience frequent aggression. We did not attempt to calculate rates across the whole hospital or across the entire workforce as this letter suggests, and we have alluded to the reasons in our response.

We suggest the writer reserve her "utter dismay" to the lack of an evidence base around interventions to prevent violence for health care workers, trained and untrained, working in hospitals and in the community. Although early work on educational interventions is promising, more work is needed (Swain and Gale, 2014). Because, looking at the broader data—and there are another three surveys of health care workers that these authors have been involved in with other methodologies – patient aggression remains a work hazard for all caregivers.

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