Hospital

Responsiveness To

Family Violence:

30 Month Follow-Up Evaluation

Summary
Family violence (FV) is a priority health issue and requires an effective and sustainable health care response. This report is one in a series evaluating health care responsiveness to FV. It presents 30 month follow-up hospital audit findings and compares them to baseline and 12 month audit findings. These quantitative data are one aspect of the overall evaluation, and are the result of applying the modified ‘Delphi’ tool during hospital site visits. They contribute to the nationwide picture of FV healthcare initiatives across Aotearoa New Zealand. The audit data answer the following two questions:

1. How are New Zealand District Health Boards (DHBs) performing in terms of institutional support for family violence prevention?

2. Is institutional change sustained over time?

Results of the 30 month follow-up audit indicate that significant progress continues to be made in programme development for responding to both partner abuse and child abuse and neglect.

The median score for partner abuse intervention programmes was 49, an increase of 151% over the 30 months since the baseline audit.

The median score for child abuse and neglect intervention programmes was 59, an increase of 62% since the baseline audit.

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*The ‘Delphi’ tool includes two sections: partner abuse and child abuse and neglect. Scores for each section as well as for domains within the sections range from 0 to 100, with higher numbers indicating greater system development.*
Partner Abuse Audit Findings

- At 30 month follow-up, the partner abuse programme score ranged from 5 to 95, with 49 being the typical (median) score.
- The median partner abuse programme score increased from 20 at baseline, to 28 at 12 month follow-up, to 49 at 30 month follow-up.
- The 30 month follow-up scores reflect a 78% increase from 12 month follow-up scores and a 151% increase from baseline.
- Five hospitals (20%) achieved the target score of 70.

Partner Abuse Programme League Table: 30 Month Follow-Up

Note: Hospitals have been randomly allocated code names from a selection of native Aotearoa New Zealand plants.
Partner Abuse Programme Domain Median Scores

Baseline | 12 Month FU | 30 Month FU
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Collaboration | 38 | 62 | 78
Intervention services | 26 | 46 | 59
Cultural environment | 27 | 31 | 59
Policies & procedures | 19 | 30 | 59
Training of staff | 11 | 32 | 59
Physical environment | 13 | 23 | 29
Documentation | 0 | 19 | 20
Evaluation activities | 0 | 0 | 0
Screening & Safety Assessments | 0 | 0 | 0

30 Month Follow-up
**Child Abuse and Neglect Findings**

- At 30 month follow-up, the child abuse programme score ranged from 18 to 97, with 59 being the typical (median) score.
- The median child abuse and neglect programme score increased from 37 at baseline, to 51 at 12 month follow-up, to 59 at 30 month follow-up.
- The 30 month follow-up scores reflect a 17% increase from 12 month follow-up scores and a 62% increase from baseline scores.
- 4 hospitals (16%) achieved the target score of 70.

**Child Abuse and Neglect Programme League**

**Table: 30 Month Follow-Up**

![Bar chart showing the scores of different locations against the target score of 70.](chart.png)
Collaboration with community agencies, staff training and intervention services are now present across the majority of hospitals for both partner abuse and child abuse and neglect.

While significant improvements have been made, scores continue to reflect intermediate stages of programme implementation. It is a concern that several hospitals have yet to begin developing a system response to family violence, indicated by low scores and the absence of a Family Violence Intervention Coordinator.

Trend analysis indicated that having a designated Family Violence Intervention Coordinator, programme maturation and time (audit round) all predicted higher family violence programme scores. With dedicated Ministry of Health and District Health Board resourcing, family violence programme process indicators are likely to continue steady improvement.
**Family Violence Project Programme Logic**

- Better outcomes
  - Appropriate services
    - Women feel more empowered & have referral options
    - Appropriate referrals for children
  - Appropriate Intervention
    - Early Identification
      - Screening questions asked of women
      - Clinical assessment and questioning about child abuse & neglect
    - Better trained and supported health professionals
      - Institutional support to sustain and implement practice guidelines
      - Development of practice guidelines
      - Provision of training

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*MOH Advisory Committee; modified from Duignan, Version 4, 16-10-02*
Hospital Responsiveness To Family Violence: 30 Month Follow-Up Evaluation Summary

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Contracted organisation
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