

Answers to questions on notice

NSW Ambulance
Mr David Dutton

PARLIAMENT OF NEW SOUTH WALES
JOINT SELECT COMMITTEE ON SYDNEY'S NIGHT TIME ECONOMY

Questions on notice – NSW Ambulance

NSW Ambulance maintains all records of callouts (incidents) attended across NSW. These records are captured by the computer aided dispatch system at the point of call and dispatch of ambulance resources and via the electronic medical record that details the clinical treatment provided by paramedics where such treatment and transport is provided. Data is therefore reliant, in part, upon information given and described by members of the public. As a result, this data has limitations.

1. What data is available regarding ambulance callouts in Sydney CBD and Kings Cross?

NSW Ambulance uses their Computer Aided Dispatch (CAD) system to record the patient's problem category based on Triple Zero (000) caller information. Call problems are defined using the international Medical Priority Dispatch System (MPDS). There is no specific 'alcohol' call problem category.

The *National Surveillance System for Alcohol and Drug Misuse and Overdose*, funded by the Commonwealth Department of Health and managed by Turning Point in Melbourne (<https://www.turningpoint.org.au>), receives Ambulance data from Australian jurisdictions to help monitor harms arising from use of alcohol and other drugs. Free text fields in the NSW Ambulance clinical records are manually reviewed and coded for one month in every three month period, enabling the involvement of alcohol and other drugs to be identified and reported. Surveillance reports for NSW are provided to NSW Ambulance.

2. If data is available, can NSW Ambulance provide the Committee with relevant statistics on the following:

- a. Call outs to Sydney CDB and Kings Cross prior to February 2014?**
- b. Call outs to Sydney CDB and Kings Cross after February 2014?**

3. Do NSW Ambulance have any available information regarding how many callouts are alcohol related for:

- a. Call outs to Sydney CDB and Kings Cross prior to February 2014?**

b. Call outs to Sydney CBD and Kings Cross after February 2014?

The best information is available from NSW Treasury report on the 'Evaluation of the Sydney CBD Entertainment Precinct Plan of Management', which is available at:

<https://www.treasury.nsw.gov.au/sites/default/files/2017-04/Sydney%20CBD%20Entertainment%20Precinct%20Plan%20of%20Management.pdf>

This report was based on a multi-agency evaluation alcohol-related injury in the Sydney entertainment precinct using multiple sources of data, including data obtained from Turning Point (as outlined in question 1), and linked data created for the purpose of the evaluation.

NSW Ambulance data cannot be used to identify alcohol related callouts.

4. What kind of support is provided to NSW Ambulance officers who work in the Sydney CBD and Kings Cross areas?

NSW Ambulance has comprehensive support services in place for staff which have been available since the mid-1980s with the establishment of the Peer Support and Employee Assistance program. This was followed by the commencement of Chaplaincy services in the mid-1990s and a Grievance Contact Program in 2008.

In 2008, NSW Ambulance commenced its Respectful Workplace program to reduce the risk and impact of bullying. Since 2012, all operational staff have been trained in how to identify the effects of stress, what action to take, what support pathways are available, and how to build resilience.

In 2017, in conjunction with the Black Dog Institute and the University of NSW, NSW Ambulance developed an online mental health literacy program and a resilience at work App to reduce stigma, encourage early help-seeking and provide practical coping skills.

In 2017-18, paramedic wellbeing and resilience initiatives were extensively enhanced by a \$48 million commitment from the Government over four years to

enhance staff mental health (\$30M) and provide a paramedic income protection scheme (\$18M).

In June 2018, the Chief Executive made a very personal and public apology to the staff of NSW Ambulance in recognition that some had been let down and that the organisation had failed to protect and support them.

Key initiatives that support the wellbeing and mental health of paramedics include:-

- The development of a 'Wellbeing Workshop' which commenced in March 2018. Since that time, over 1800 staff have attended and over the next two years all staff will complete the program. The package includes psychological coping strategies, physical health strategies, manual handling training and occupational violence prevention training.
- The Access to Fitness Passport, which recognises the important links between fitness, mental health and psychological resilience. The Passport allows NSW Ambulance staff and their families to access hundreds of gyms and swimming centres across the state at significantly reduced membership rates. To date about 1/3 of our staff and their families have signed up.
- A Significant Events Register which requires all managers to record any event that may have potentially harmful impact on attending staff and organise proactive staff support. Staff are able to be released from duty following significant events where appropriate. The Chief Executive also wrote to all managers advising them of his expectations and their responsibilities to ensure staff are actively followed up and supported.
- An internal state-wide Staff Psychology Service led by a Chief Psychologist and staffed by senior psychologists in 2018.
- The opportunity for all staff to attend up to 10 sessions with a counsellor or psychologist of their choice at no cost to them irrespective of whether the issue is work related.
- The expansion of the Peer Support and Chaplaincy Programs across the state with additional Chaplains and Peer Support Officers to be recruited later this year.

- A buddy system for staff which helps new staff or those moving to a new location with basic things such as where to get a good coffee and local services as well as more serious concerns such as workplace relations, clinical issues and career advice.
- A permanent therapy dog, 'Solly', at Sydney Control Centre who alleviates the stress of our call takers and dispatchers.
- The "Welcome to NSW Ambulance – Supporting our Families" initiative which commenced in 2017 and helps our paramedic families to more fully understand what the job entails, how to identify early warning signs that someone is not well, and what support options are available to staff and their families.
- Expanded Leadership opportunities including access to a Leadership Coach, a comprehensive management development program and tailored Mental Health and Suicide Awareness training to further assist managers to support staff.
- The establishment of NSW Ambulance Legacy in 2017 which recognises that an employee's connection does not end when they retire or leave employment. Its role is to support our former staff by providing support and enduring social connections as well as providing ongoing access to the Peer Support and Chaplaincy.
- The commencement of a Well Check Program in 2019 which is facilitated by the NSW Ambulance senior psychologists. The Well Check Program provides a proactive individual "touch-point" to promote positive mental health and wellbeing, and facilitate additional support for employees when required.
- The establishment of superstations which enable better service provision to the people of NSW, as well as improving staff rostering, crib breaks, reducing overtime and starting and finishing times through the use of the Make Ready teams who prepare and care for ambulance vehicles and equipment.

5. Does NSW Ambulance have any specific policies or strategies regarding alcohol related injury?

NSW Ambulance paramedics have a suite of protocols to deal with patients affected by alcohol, including:

- A3 – Informed consent, capacity and competency (used to determine if a patient has capacity and competency and therefore able to provide consent);
- DT1 – General approach to the poisoned patient (base protocol for all toxicology related presentations);
- DT2 –Alcohol (treating a patient affected by alcohol);
- P2 – Patient refuses paramedic recommendation (advice, assessment, transport);
- P5 –Referral decisions (self care and other referral options); and
- P6 – Incident in the Control of Another Agency (this would apply to an intoxicated person in police custody).

6. Can NSW Ambulance outline the process of how a decision is made regarding which hospital a patient is taken to?

Within specific areas (Sydney, Central Coast and the Lower Hunter area) determination of the appropriate hospital destination for a patient is managed in accordance with NSW Health's Patient Allocation Matrix (Matrix).

The Matrix operates by the attending paramedic, having conducted a clinical assessment of the patient, selecting a Clinical Allocation category and entering this into the ambulance vehicle's Mobile Data Terminal (MDT). The Matrix assesses appropriate facilities that are available options, considering matters such as:

- location (must be within a specific travel distance);
- clinical capability to manage the selected Clinical Allocation category; and
- whether the facility has received greater than their allotted threshold (based upon regularly reviewed historical workload presentations) for the past 60 minutes.

The available options are then provided to the attending paramedic for selection of the most appropriate destination. The final transport decision resides with the treating clinician.

The Matrix was introduced in 2005 with the aim to improve patient flow across clinically appropriate sites. Regular reports are internally conducted and external reviews have also been undertaken. The most recent of these was in 2016 which found that the Matrix was functioning as intended, in that:

- NSW Ambulance transports 99.6% of patients in their care to the closest most clinically appropriate hospital; and
- Patient flows are more evenly distributed across the Health system.

7. Has NSW Ambulance had to adjust its numbers of available vehicles and paramedics in the Sydney CBD and Kings Cross area post-February 2014?

Response arrangements for the Sydney CBD and Kings Cross area have not changed since 2014.

8. Do NSW Ambulance have any available information regarding instances of alcohol-related assaults on paramedics?

NSW Ambulance records self-reported incidents of assaults inflicted on paramedics. Specific information is only collected with regards to whether the assault was physical or verbal in nature. The reporting form does not allow for a specific category of an alleged offender being under the influence of alcohol.