

APA (NSW) Response to Supplementary Question- Select Committee on Remote, Rural and Regional Health

Are mental health supports for the NSW Ambulance workforce currently adequate?

Unfortunately, very little has changed on this topic since we made submissions to the Legislative Council Inquiry into emergency services agencies (2017) and the Federal Senate Inquiry into the mental health conditions experienced by first responders in (2018).

To our knowledge there is limited vicarious trauma specific training, counselling, or other specific support in relation to managing exposure to vicarious trauma. It goes without saying that the job of members extends well beyond exposure to vicarious trauma. Our members have direct exposure traumatic events and scenes every day. While the support that is provided is better than in years before, our view is that it is still wholly inadequate considering the nature of work and daily exposure to traumatic events.

The support options currently available to our members include:

Staff Psychology Service (SPS)

- Employee Assistance and Psychological Services (EAPS)
- NSW Ambulance Mental Health Support Program
- Mental Health Care Plan
- Workers Compensation

Staff Psychology Service (SPS)

In 2016 NSWA Paramedics had significant changes to their Death and Disability ('D&D') Award entitlements. Previously staff had contributed a portion of their salary into a pool of Treasury Funds to pay for their entitlements under the previous D&D Award. After negotiation of a new D&D there were residual funds (30 million) left in the pool, these funds from Paramedic salaries were used to rollout wellbeing measures for Paramedics. One of these measures was the Staff Psychologist Service. This service was introduced in consultation with the unions advocating on behalf of staff.

The Service is very well received by staff, and members report that it is in an invaluable service for them to have access to. The largest concerns with the Service centre around the fact that it has insufficient resourcing, meaning that it is unable to be more than a band-aid. Members cannot speak more highly of the psychologists who staff it and especially their understanding of, and experience with first responders.

The Service is hugely under resourced for the size of the workforce and prevalence of psychological distress and injury. There is one only psychologist for each Sector of NSW Ambulance when fully staffed, and at various times there have been issues with staffing, meaning other Sectors psychologist have had to try their best to pick up the slack.

Employee Assistance and Psychological Services (EAPS)

As we said in our submissions to the Senate Inquiry referenced above:

"Mental health conditions in paramedics are largely focussed around the trauma, violence and exceptional levels of stress they are exposed to daily. It is vital that the professionals who are employed to aid are suitably qualified and specialised in mental health and more specifically trauma."

The problem with programs of this type is that the professionals lack requisite experience of first responders.

Over many years we have received feedback from many members regarding these programs not being fit for purpose. The feedback has remained largely the same:

- the unsuitability of the professionals who are providing advice to emergency services.
- members report that they get no value out of the counselling sessions, and
- that in many cases they left the sessions feeling they had actually traumatised the counsellors, and
- feeling worse off themselves after the sessions.

NSW Ambulance Mental Health Support Program

This is a program in which employees can receive up to a maximum of ten (10) sessions with mental health services during their career which Ambulance will pay for.

Some of the issues with this program are self-evident including:

- For a paramedic with 20+ years' experience that is one session every two years at best.
- 10 sessions is a band-aid solution generally considering the nature of the work of our members.

Other feedback in relation to the program has included that some psychologists are reluctant to participate in it due to issues with receiving payment. Conversely, our members are reluctant to use it as they do not want a record that they accessed this service due to stigmatisation.

Mental Health Care Plan

Given that this is available to everyone in NSW we do not intend to comment on it specifically for the purpose of addressing this issue.

Workers Compensation Support:

The experience of workers compensation for our members was recently highlighted in reporting by the Sydney Morning Herald earlier this month. We do not seek to traverse all the issues in addressing this question however three points that we believe are worthy of addressing:

- The reporting in the Herald was the tip of the iceberg so far as what we see our members experiencing while on workers' compensation.
- 2. Our members are hugely resistant to making workers' compensation claims due to the experience of other members who are managed on these claims.
- We have had numerous reports over the past five years of health professionals not wanting to provide treatment to our members because of how difficult the various parties are to deal with.

Vicarious Trauma Training

Our advice is that there is currently an online Vicarious Trauma module on HETI which is 20 minutes in length. We are unaware of any other training program.