Submission No 1

# PHYSICAL HEALTH OF POLICE AND EMERGENCY SERVICES WORKERS IN NSW

**Organisation:** Health Services Union

**Date Received:** 28 August 2020

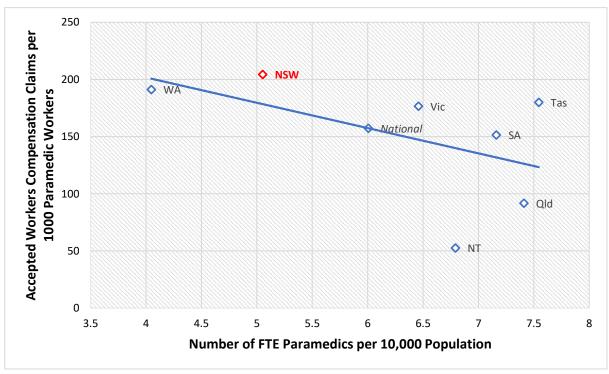


Among its 43,000 members, the Health Services Union NSW/ACT/Qld (HSU) represents some 3,000 members working in NSW Ambulance and the patient transport industry, including paramedics, control centre officers, and managers. It makes this submission on their behalf.

## a) How the physical health of emergency services workers impacts the performance of their duties

Paramedics are health professionals who provide rapid response emergency medical assessment, treatment, and care in dynamic and uncontrollable environments. The physically demanding nature of their work means that they are exposed to very high risk of workplace injury. As outlined below, paramedics experience the highest rates of serious injury for any profession in Australia. The most recent publicly available data are from a pair of mid-decade studies, and they paint a stark picture of the impacts of the job on the physical health of paramedics.

The rate of accepted Workers' Compensation injury claims for paramedics in New South Wales is 10 to 12 times that of all other occupations, at 204.3 accepted claims per 1000 workers. This significantly exceeds the already very high national rate of 157.3 accepted claims for 1000 paramedic workers. When compared against workforce data from the Productivity Commission's *Report on Government Services*, a clear relationship linking levels of staffing per population with rates of accepted workers compensation claims emerges.



<sup>\*</sup>Workers compensation data for ACT unavailable.

<sup>1</sup> Institute for Safety, Compensation and Recovery Research. 2016. Workers compensation claims among nurses and ambulance officers in Australia, 2008/09-2013/14.

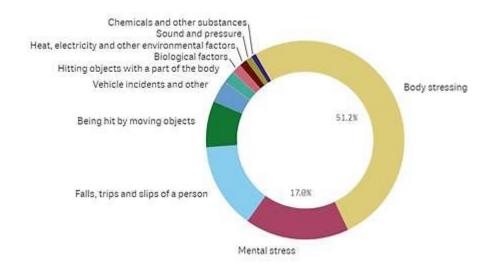
At least 60 per cent of accepted workers compensation claims among paramedics are for physical injuries, primarily related to muscular stress involved with lifting and handling objects and patients. In New South Wales, the median paid work time lost for paramedic injuries is two weeks.<sup>2</sup>

Defining serious injuries as those which resulted in at least one week of lost work time, the rate of serious injury per 1000 workers per year was 94.6 for paramedics, more than seven times the national average of 13.0 per 1000 workers. No other group of workers recorded a higher serious injury rate than that of paramedics. The highest proportion of non-fatal injuries among paramedics are associated with lifting, with muscular stress associated with lifting, carrying, or putting down objects and patients accounting for almost half of serious Workers' Compensation cases.<sup>3</sup>

The HSU also obtained more recent information on injury rates from NSW Ambulance. They demonstrate a promising trend towards declining injury rates.

Year	No. medical retirements	No. injured workers	Medical Retirements as % of Injured Workers	Medical retirements/1000 employees
2016/17	40	785	5.10%	10
2017/18	15	761	1.97%	4
2018/19	14	624	2.24%	3
2019/20*	12	434	2.76%	3
*at 31 March 2020				

In line with the studies cited above, 'body stressing' injuries (e.g. lifting, manual handling) accounted for the majority of paramedic injuries.



Injuries by type 2016/17 – 2019/20 (chart supplied by NSW Ambulance).

-

<sup>&</sup>lt;sup>2</sup> Ibid

<sup>&</sup>lt;sup>3</sup> Maguire et al. 2014. 'Occupational injury risk among Australian paramedics: an analysis of national data', *Medical Journal of Australia*, vol. 200, no. 8, pp. 477-480.

Naturally, workplace injuries impact upon the ability of paramedics to perform their duties. The average number of days lost per injury at NSW Ambulance speaks to the serious negative impact of failing to prioritise paramedic health and safety to paramedics themselves, NSW Ambulance, and, by extension, the public.

Year	Average Days Lost per Injury, NSW Ambulance	
2016/17	58	
2017/18	64	
2018/19	61	
2019/20*	26	
*at 31 March 2020		

Despite the heightened injury risk that paramedics face, preventative measures are far below where they need to be. Access to equipment which reduces the physical burden of lifting and manual handling of patients should be prioritised. Greater investment in engineering controls such as the Mangar ELK Emergency Lifting Cushion, which is currently used by NSW Ambulance to assist in lifting patients from falls, is needed. Investment in such equipment also works to further include women in the service by reducing upper body strength requirements of the job.

Another major risk factor for muscular stress injuries is the continued deployment of single responders by NSW Ambulance. Lifting and manual handling of patients is made far safer where there is more than one paramedic responding to a case. HSU's long-term opposition to sending paramedics out on cases without a partner is based on protecting the health and safety of paramedics. The risk of injury to paramedics can be significantly reduced by stamping out this practice.

Needless to say, serious injuries among paramedics have serious implications for the delivery of an essential services to communities across New South Wales. However, the impact on paramedics themselves of acquiring a workplace injury while serving their communities can have a lasting effect on their lives.

#### **CASE STUDY: Dave Sheers, Intensive Care Paramedic at NSW Ambulance**

Dave Sheers is former paramedic of more than 30 years, now living on the NSW South Coast. He is married with three adult children. He first joined the NSW Ambulance Service in 1983. In 1986, he completed training to become an Intensive Care Paramedic and was posted to Green Valley Station. Then, in 1990, he made the move to work in the regions. During his years of distinguished service, NSW Ambulance honoured him with a Commendation for his service as a paramedic attending the 2008 Tathra Wharf Tragedy.



Around 2011, when attending to a patient in cardiac arrest in the course of his duties, Dave sustained a serious back injury. Entering the Workers Compensation system, he saw various medical specialists to determine the next steps. Despite a medicolegal assessment determining that recovery from his injury was possible, his condition continued to worsen. Eventually, surgery was recommended to address the nerve damage sustained. Unfortunately, after undergoing two surgeries, Dave's prognosis is poor from a pain management point of view. He is likely to suffer chronically from moderate back and leg pain for life.

Dave spent about six months working alternative light duties, however due to issues with sitting for extended periods, these duties were unsuitable. Further, as he is based on the South Coast rather than metropolitan Sydney, options for alternative duties, such as in ambulance education, were effectively non-existent. Eventually, Dave was rated unemployable by his Workers Compensation case manager and was medically retired.

This whole process, from the time of sustaining the injury to the decision to rate Dave as unemployable, was drawn out to approximately three years. During this time, earlier medical retirement was resisted to avoid the damaging appearance of sacking an injured worker, in doing so drawing out an already stressful process.

#### b) Physical entry requirements and areas for improvement

Prospective paramedics undergo an extensive health assessment as part of NSW Ambulance's Operational Recruitment Application Process. The physical fitness standards include the ability to lift and carry equipment of up to 24 kilograms, carry patients over different terrain and up and down flights of stairs, perform CPR, squatting and kneeling to access patients, and sitting/driving over extended periods of time. Applicants are also assessed on their vision and hearing.<sup>4</sup>

Investment in engineering controls that assist with and relieve some of the physical exertion involved with lifting and transporting patients will reduce injury rates and may also facilitate greater diversity among the paramedic workforce by enabling the recruitment of more women.

The ongoing physical fitness of paramedics, beyond entry requirements, must also be considered. The health impacts of shift work are well documented, and include poor sleep and significantly increased risk of obesity and ill-health.<sup>5</sup> While there has been a reintroduction of fitness/gym equipment in ambulance stations, the high workload of cases to respond to means that paramedics often spend negligible time at the station. Shift work also impacts upon diet, as busy night shifts make it difficult to prepare healthy meals, with fast food often the only available option. To mitigate this as much as possible, access to kitchen and stovetop facilities at stations is essential.

However, access to facilities as outlined above is of little consequence when understaffing and overwork lead to paramedics frequently missing out on meal and rest breaks. Award mandated time during work hours dedicated to maintaining health and fitness would be desirable, however, as it currently stands, the wages policy makes this impossible to achieve without sacrificing on other important conditions and entitlements.

#### c) Impacts on workplace management for emergency services organisations

Workplace injuries have significant implications on workplace management for NSW Ambulance. Work days lost to injury impact upon staffing levels in a service already stretched far too thin. They also have a financial impact due to the cost of backfilling injured staff.

Redeployment constitutes an important aspect of effective and supportive workplace management of injuries. Presently, redeployment opportunities suitable for injured paramedics who cannot continue to work on the road are concentrated in metropolitan areas. This represents a great inequity.

<sup>&</sup>lt;sup>4</sup> NSW Ambulance. 2020. *Vocational Trainee Entry: Recruitment and Selection Guide*.

<sup>&</sup>lt;sup>5</sup> Victorian Trades Hall. 2015. 'Shiftwork – health effects'. Accessed 24 August 2020. URL: <a href="https://www.ohsrep.org.au/shiftwork\_-health\_effects">https://www.ohsrep.org.au/shiftwork\_-health\_effects</a>.

NSW regional populations need paramedics no less than metropolitan populations do, and yet regional paramedics are in effect disadvantaged for serving those communities. Effort must be made to improve the redeployment opportunities for injured paramedics in regional NSW. This could include a program enabling paramedics who cannot be appropriately redeployed by NSW Ambulance to be voluntarily redeployed in other NSW Health agencies operating in their region. Such a program would enable the important knowledge of highly skilled paramedicine professionals to be retained within the health system.

There are many areas for improvement in the workplace management of injuries within NSW Ambulance. They are invariably reliant on increased funding. These areas of improvement include increased staffing levels so that workloads can be maintained within a more reasonable level, and provision of training to support physical health. Importantly, the deployment of single responders to attend to cases must be completely stamped out. This would go a long way to ensuring the safety of paramedics, particularly in terms of preventing manual handling injuries.

HSU and NSW Ambulance have a shared interest in the health of the paramedic workforce in New South Wales. Transparency with unions should therefore be mandated. Ready access to data on injury and recovery rates of paramedics can enable unions to contribute more comprehensively and constructively to improving the safety and health of the paramedic workforce. Similarly, data from workers compensations insurers on the nature of accepted and rejected claims from injured emergency services workers should also be shared with the relevant unions.

#### d) Any other related matters

While this inquiry explicitly deals with issues surrounding physical health, it should be noted that mental health of emergency services workers must also be prioritised. Some 17% of injuries recorded among the NSW Ambulance workforce are attributable to mental stress.<sup>6</sup> It is unadvisable to treat mental and physical health as completely separate issues. They are intrinsically related. It should be clear that the physical stressors of work in emergency services impact upon mental health. Similarly, mental stressors, such as fatigue, can seriously impact upon the risk of physical injury in the course of the job. A holistic approach to looking after the health of emergency services workers, incorporating both physical and mental health, should be strongly encouraged.

#### **RECOMMENDATIONS**

- 1. The HSU recommends an urgent increase in funding to support the implementation of safe staffing levels.
- 2. We recommend that the practice of deploying single responders on cases be fully stamped out
- 3. We recommend that the wages policy be abolished to enable dedicated entitlements around physical health and fitness to be included into the Award without having to trade off other important conditions and entitlements.
- 4. We recommend a transparency requirement mandating that emergency service organisations must share information on workforce injury and recovery rates to unions. Similarly, data on the nature of accepted and rejected workers compensation claims should also be shared.
- 5. We recommend that further investment be made in engineering controls that assist in manual handling, helping to prevent manual handling injuries and enable recruitment processes at NSW Ambulance to become more inclusive.

-

<sup>&</sup>lt;sup>6</sup> Supplied by NSW Ambulance.

- 6. We recommend that all ambulance stations be equipped with fitness/gym equipment and adequate cooking facilities for paramedics to use while on shift, noting, however, that paramedics frequently miss breaks due to workloads.
- 7. We recommend that consideration be given to enabling injured paramedics in regional New South Wales to be voluntarily redeployed to other agencies within NSW Health where there are no suitable alternative duties available to them within NSW Ambulance.

### **CONTACT:**

Alison Goodwin
Research Officer, HSU NSW/ACT/QLD