

**Submission  
No 5**

**PHYSICAL HEALTH OF POLICE AND EMERGENCY SERVICES WORKERS  
IN NSW**

**Organisation:** NSW Government

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# NSW Government Submission

NSW Legislative Assembly Committee on Law and  
Safety – Inquiry on physical health of police and  
emergency services workers in NSW

September 2020

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NSW Health submission

# Inquiry into the physical health of police and emergency services workers in NSW



Health



Health

## How the physical health of police and emergency service workers impacts the performance of their duties

A paramedic is a mobile healthcare worker who specialises in managing clinical emergencies and acute health issues in the community. They provide the first medical contact in a health crisis, a task which requires them to possess the knowledge and skills to manage a diverse range of health problems outside of the hospital environment. NSW Ambulance operates services 24 hours a day, seven days a week, across the state. Paramedics must be prepared for a wide range of unpredictable and sometimes adverse environments and situations, which may include physical violence.

A study has shown that workers in ambulance services experienced more health problems than the general working population and workers in other health occupations<sup>1</sup>.

NSW Ambulance recognises that physical health is an important characteristic to deliver the best care possible to patients of NSW. If a paramedic's health and physical fitness is compromised, risks may arise to the paramedic themselves, their partner, patients, and the general public. The likelihood and severity of sustaining a physical injury is also reduced when paramedics are in good physical health.

There are three main facets to the paramedic role that may be impacted by a paramedic's physical health:

### 1. Driving

On average, a paramedic drives over 4,000km per year in various road conditions during the day and at night; in accordance with normal road rules or at speed with lights and sirens in an emergency situation.

Paramedic drivers must interact with both the vehicle and the external and internal environments at the same time. The driver's attention needs to be split between the changing road and traffic conditions, audio and visual communications equipment, and their partner in the rear of the vehicle providing patient care.

Failing to operate an emergency service vehicle safely carries significant risk.

Physically when driving an ambulance, a paramedic requires sound vision and hearing, sufficient musculoskeletal strength, alertness, endurance, range of movement, coordination and dexterity to be able to:

- enter and leave the ambulance speedily on uncertain terrain; and
- operate all vehicle equipment, including those designed for operation by hands and feet, without losing control of the vehicle.

### 2. Location

Following arrival at a scene, a paramedic is required to quickly gain access to the patient. This can involve unfamiliar outdoor or indoor environments with diverse challenges including: poor visibility, adverse weather, steep or rough terrain and stairs, as well as background noise exceeding 85 decibels in setting such as

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<sup>1</sup> Sterud T, Oivind E, Hem E. Health Status in the ambulance services: a systematic review. BMS Health Services Research. 2006;6(82):10.

concerts and public events. The patient may also be difficult to reach in confined spaces such as vehicles, narrow corridors or toilet cubicles.

To deliver immediate clinical care, paramedics also take clinical equipment to patients. The equipment can weigh up to 36kg and may need to be carried to the patient who may be at some distance from the vehicle or up several flights of stairs.

Various types of lifting equipment and stretchers are available to assist the paramedic to extricate a patient. The choice of stretcher depends on the type of injuries and ergonomics arising from the location. Stretchers may require careful manoeuvring over rough and sloping terrain, up and down stairs and into confined spaces such as elevators.

A paramedic's ability to access and extricate a patient in a timely manner may be diminished by impaired senses, musculoskeletal impairment or poor aerobic capacity. In addition, a paramedic may incur musculoskeletal injuries, particularly to their lower back and shoulders.

### 3. Clinical

Paramedics are required to learn and recall a large volume of information, and to apply it appropriately to any given situation. Clinical activities also demand good pattern recognition, problem solving skills, rapid decision making and communication skills. Paramedics also need to be able to cope with the stress of managing urgent medical conditions in often unfamiliar environments whilst communicating with distressed people, including relatives.

Clinical treatment requires deft manual dexterity in both hands, particularly for use of oxygen cylinder tap, face mask application, intubation, preparing and administering medications, and intravenous cannulation.

Many of the clinical skills a paramedic uses involve physical strength and endurance, such as performing cardiopulmonary resuscitation (CPR).

### What the physical entry requirements for police and emergency services workers are and identifying areas for improvement

The work that paramedics do is both physically and psychologically demanding and there is a need to ensure paramedics are mentally and physically capable of performing their duties.

NSW Ambulance uses the Paramedic Health Standard to help define the level of health and fitness required to perform the inherent requirements of the paramedic role. The Paramedic Health Standard was developed in partnership with Project Health, who have extensive experience in developing national and state medical standards for safety critical workers, including those in emergency services agencies.

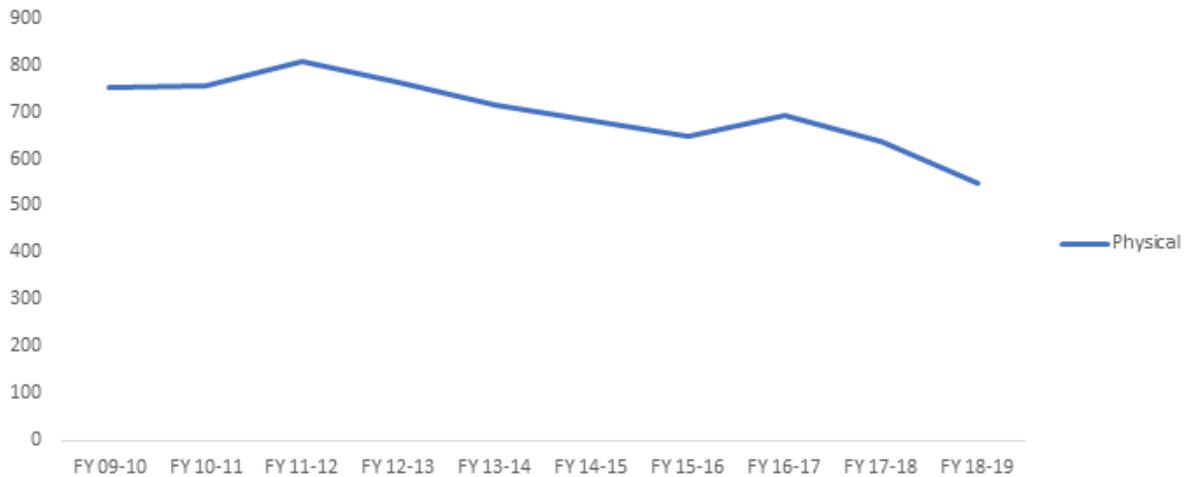
The following table summarises the physical health attributes for paramedics to enable them to perform their duties. Medical assessments, for example at the pre-employment stage, are directed to establishing that these requirements are met:

Health attribute	Paramedic requirement
Vision	Good acuity for near and far vision, full visual fields and colour vision.
Hearing	Ability to hear speech and stethoscope sounds in noise > 85 decibels.
Cognition and absence of risk of collapse	The paramedic is required not to be affected by any conditions or impairments to the extent that such conditions/impairments are predictably capable of affecting the paramedic's capacity to deliver service through cognitive impairment or collapse, e.g. blackouts, cardiovascular disease, diabetes, neurological conditions (including dementia, epilepsy, vestibular and other neurological), psychiatric conditions, sleep disorders and substance misuse, or drug or alcohol impairment.
Musculoskeletal	Musculoskeletal strength, endurance, range of movement, coordination and dexterity is required to: <ul style="list-style-type: none"> <li>- walk to the patient over rough, slippery or sloping terrain and up flights of stairs</li> <li>- lift equipment up to 12kg in weight from head height with one arm</li> <li>- assemble, stabilise and utilise lifting aids such as carry chairs and stretchers</li> <li>- lift loads including equipment weighing 24kg if a dual responder or 36kg if a solo responder</li> <li>- lift patients using equipment and assistance regularly up to 50kg and occasionally up to 60kg</li> <li>- perform CPR</li> <li>- use tools and equipment with a strong and controlled grip in each hand.</li> </ul>
Aerobic capacity	The paramedic is required to be able to carry equipment weighing 24kg if a dual responder or 36kg if a solo responder, including upstairs.

## Any impacts on workplace management for police and emergency services organisations

Where a paramedic is physically injured at work and is unable to perform their normal duties, their role needs to be performed by another paramedic. There are financial costs involved in replacing injured staff.

The number of physical injuries resulting in a worker's compensation claim for NSW Ambulance employees is depicted in the following graph:



## Any other related matters

NSW Ambulance has a number of initiatives to support, educate and assist employees in recognizing the need for paramedics to increase and maintain good physical health.

### Health and Fitness Program

The NSW Ambulance Health and Fitness Program encourages employees to be more aware of how lifestyle choices can have a direct impact on their overall health and wellbeing.

The Program includes:

- Health coaching to employees on any physical health or lifestyle related issue that may be impacting on their health or performance. The program is voluntary and covers areas of health including exercise, nutrition and dietary behaviours, weight management and motivation. Health coaching uses principles of behaviour change to encourage goal setting and self-management.
- Injury Prevention Specialists (IPS) to help reduce the risk of musculoskeletal body stressing injuries, including manual handling risks. Employees can contact the IPS to complete a movement screen, for a tailored exercise program, manual handling training, workstation setups and ergonomic equipment reviews.
- Fitness Passport is a corporate health and fitness program that allows members to access a wide range of local gyms and aquatic centres at a discounted rate. The program is available for employees and their families. As at 1 April 2020, 4,443 memberships are active (1,986 employee and 3,642 family member).
- Medic Fit, which began as a research initiative investigating how to support health and fitness of NSW Ambulance paramedics, is being rolled out statewide and will see exercise equipment delivered to every NSW Ambulance workplace by the end of 2020. The equipment will enable employees to participate in low-intensity, job specific functional exercises that have been developed by the NSW Ambulance Health and Fitness team to help reduce the risk of physical injury.

## Wellbeing Workshop

In March 2018, NSW Ambulance commenced *Wellbeing Workshop* training. The training is mandatory for all staff. As of January 2020, over half the NSW Ambulance work force have completed the training.

The Workshop provides tailored advice on nutrition and exercise to support employees to manage their health as emergency service workers. This includes information on healthy eating, sleep, physical activity and preparation for shift work. Safe at Work includes manual handling training to help mitigate the risks that paramedics may be exposed to as part of the physical requirements for their role. This includes education on proper lifting techniques, fatigue, conducting dynamic risk assessments and functional exercises that can be done to increase strength and physical fitness.

## Safety and Recovery

The NSW Ambulance Safety and Recovery team manages staff who have been injured at work, including managing workers compensation claims and finding suitable duties for staff temporarily or permanently unable to return to their substantive duties. Their functions also include:

- Sourcing injury prevention equipment such as the carry chair track, ELK (assists with lifting), and the single responder kit.
- Violence prevention.
- Recently, the Body Worn Camera (BWC) trial was commenced and has seen a good uptake from paramedic staff. The purpose of the BWC is firstly to prevent occupational violence, and secondly, if violence does occur, footage is provided to the NSW Police Force as evidence for court proceedings. NSW Ambulance has zero tolerance for violence against its staff.
- Prevention of violence is supported by the Safe at Work component of the Wellbeing Workshop training.

## Conclusion

The NSW Ambulance leadership team promotes a strong people-focused culture where staff safety, wellbeing and resilience are paramount. Good physical and mental health are equally important for paramedics to sustainably care for patients. NSW Ambulance has a number of strategies in place to promote and sustain staff physical and mental health, to ensure staff are supported at work, are able to return to work following a period of absence and are able to support their colleagues safely while treating patients.



# **NSW Police Force Submission**

**Legislative Assembly Committee on Law and Safety**

**Inquiry into Physical Health of police and emergency services  
workers in NSW**

**August 2020**

## Chapter 1 - Introduction and context

### 1.1 Purpose of this submission

The NSW Police Force welcomes the opportunity to contribute to the Legislative Assembly Committee on Law and Safety Inquiry into the Physical Health of police and emergency services workers in NSW.

This submission addresses the Committee's Terms of Reference including:

- a) how the physical health of police and emergency services workers impacts the performance of their duties
- b) what the physical entry requirements for police and emergency services workers are and identifying areas for improvement
- c) any impacts on workplace management for police and emergency services organisations; and
- d) any other related matters

### 1.2 Context

The health and safety of our police officers is paramount. Our police officers are out there on the frontline, 24 hours a day, seven days a week, protecting our community.

The NSW Police Force is spending \$4 million in the 2020/21 financial year (\$16.6 million over four years) to continue preventative health and wellbeing initiatives for police officers as part of the Workplace Improvement Program.

The comprehensive Workforce Improvement Program includes initiatives to promote wellbeing, prevent injury and support injured police officers.

The Program looks at more innovative ways of managing police injuries, and at the same time, is making sure that the NSW Police Force has appropriate support services in place. This includes the Employee Assistance Program line that is available 24/7 and information for individual officers so that they know what to do if they face an injury right through to the NSW Police Force's RECON centres where full time physiotherapists and strength and conditioning coaches provide rehabilitative services to injured officers.. Further details on the RECON Program are highlighted in section 4 of this Submission.

The NSW Police Force Wellbeing Support Services brochure outlines the broad range of services available to employees and their families (see Attachment A).

The NSW Police Force is committed to preventing psychological and physical injury, and to ensure injured officers, former officers and their families are getting access to rehabilitation and support, including their financial entitlements. This includes providing assistance to police officers and non-sworn employees who have been impacted by the ongoing bushfires.

## Chapter 2 – How the physical health of police and emergency services workers impacts the performance of their duties

### Key Points

Improving and maintaining physical health is a critical challenge for the future of policing, as poor physical health has been shown to negatively impact:

- Job performance
- Ability to safely perform inherent physical requirements
- Maintain public safety
- Deployment and operational readiness
- Physical stress and mental stress levels
- Increase risk of lifestyle and cardiovascular diseases
- Excessive use of force situations
- Increase injury risk due to an inferior body composition/ poor movement functionality

Policing is a safety-critical occupation. A sufficient level of physical capability is necessary to safely and effectively perform police work. The inability to perform physical aspects of police work may endanger the safety of officers and the general public.

Research shows physical and mental health is essential to maximising performance of police officers<sup>1</sup>. Physical health of police officers has been found to deteriorate with age and length of service<sup>2</sup>. Increased physical activity has been linked to reduction of injury risk and decreased prevalence of mental illness<sup>3</sup>.

Police officers can experience decreased physical health throughout their career due to the often-challenging nature of policing. Factors such as physical stress, mental stress, unhealthy diet, excessive alcohol consumption, shift work, and unstructured physical activity have been shown to negatively impact on the health of police officers. Any loss in fitness can have severe consequences on the safety of the officer, colleagues and the general public, if an officer is unable to use appropriate tactical options when required.

Evidence suggests that the physiological requirements for the police officer performing daily tasks can range dramatically. As such, police officers require the physiological ability to maintain a given

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<sup>1</sup> Sandvik, A. M., Gjevestad, E., Aabrekk, E., Øhman, P., Kjendlie, P. L., Hystad, S. W., ... & Johnsen, B. H. (2019). Physical fitness and psychological hardiness as predictors of parasympathetic control in response to stress: a Norwegian police simulator training study. *Journal of Police and Criminal Psychology*, 1-14.

<sup>2</sup> Orr, R., Dawes, J., Pope, R. & Terry, J. (2017). Assessing differences in anthropometric and fitness characteristics between police academy cadets and incumbent officers, *Journal of Strength and Conditioning Research*, doi: 10.1519/JSC.0000000000002328

<sup>3</sup> Tomes, C., Schram, B., Pope, R., & Orr, R. (2020). What is the impact of fitness on injury risk during police academy training? A retrospective cohort study. *BMC sports science, medicine and rehabilitation*, 12(1), 1-8.

task at a low intensity over a period of time as well as performing high intensity tasks for short durations.

## 2.1 Musculoskeletal and Metabolic Health

Physical health can be split between Musculoskeletal and Metabolic Health.

### 1. Musculoskeletal health issues can be exacerbated in police by:

- **Load carriage**

All police are required to carry at a minimum their firearm, handcuffs, OC spray and extendible baton. General duties police officers will carry between 8 and 12 kg depending on their activities, not including any additional load from a load-bearing vest (LBV) or integrated light armour vest (ILAV).

Specialist policing units, such as Public Order Riot Squad or Tactical Operations Unit officers can carry loads in excess of 23 kg. The positioning of appointments on an appointment belt can, over time, lead to imbalances which can increase the likelihood of injury. Thigh holsters and other alternate-loading equipment can exacerbate these imbalances.

Police are required to carry a greater number of accessories (such as body-worn video, MobiPol, taser) but with these comes additional load to be borne by the officer. Some officers can carry loads in excess of 20% of their body weight.

- **Poor general health that leads to weakness/imbalance and an increased likelihood of physical injury**

Shift work has been shown to be a large detractor for people to engage in regular physical activity<sup>45</sup>. This is due, in part, to the constant disruption to an officer's circadian rhythm<sup>6</sup>. This also extends to an increase in poor dietary choices while at work (quick take-away meals usually consisting of high fat and/or high sugar).

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<sup>4</sup> Atkinson, G., Fullick, S., Grindley, C., Maclaren, D., and Waterhouse, J. 2008. Exercise, energy balance and the shift worker. *Sports Medicine*, 38(8), 671-685.

<sup>5</sup> Härmä, M. (1996). Ageing, physical fitness and shiftwork tolerance. *Applied Ergonomics*, 27(1), 25-29.

<sup>6</sup> Åkerstedt, T. (2003). Shift work and disturbed sleep/wakefulness. *Occupational Medicine*, 53(2), 89-94.

This can lead to an increase in body weight and/or body shape which can affect an officer's biomechanics (more load to the front of the body, thus leading to potential weakness and tightness in muscles causing pain and discomfort).

The main musculoskeletal injury sites seen in police are **lower back, knee, shoulder, and neck**. These sites are based upon injury claim data as well as internal NSWPF Functional Movement Screen (FMS) testing. The FMS assesses seven (7) movement patterns and generates a score from 0 to 3 for each movement (0 when someone feels pain, 3 when someone can complete the movement perfectly). It has been shown to identify individuals at risk of injury by highlighting poor movement patterns or movement imbalances.

More than 10,200 screenings have been completed by Physical Training Instructors around the State and have shown that over 65% score either a 1 or a 0, meaning they either cannot properly perform a movement or feel pain during a movement.

2. Metabolic health issues (such as excessive weight gain, diabetes, lifestyle cancers etc) can be exacerbated in police over time by:
- Shift work
  - Poor eating and alcohol consumption
  - Irregular nature of police work (predominantly sedentary interspersed with irregular short periods of high physical demand)

## Chapter 3 - What the physical entry requirements for police and emergency services workers are and identifying areas for improvement

The physical entry requirements for recruitment to the NSW Police Force are:

- Handgrip 30 kg in each hand
- Push-up 25 repetitions
- Prone bridge 90 seconds
- Vertical jump > 30 cm
- Illinois Agility < 20 seconds
- Multi-stage Fitness Test Level 7-1

These physical entry requirements are related to the 26-week training program delivered at the NSW Police Force Academy, Goulburn.

Recruits will spend an initial 10-week period learning police powers, defensive tactics and participating in physical training sessions before embarking on a two-week student police officer placement. The final 14-weeks of training also includes firearms and drill prior to attestation and recruits becoming Probationary Constables.

## Chapter 4 - Any impacts on workplace management for police and emergency services organisations

### Key Points

- Escalating claim rates; and
- NSWPF has several projects underway to look at the best way to manage the deployability of injured workers

### 4.1 Escalating claim rates

Since 2009, the majority of workplace injury incidents have been physical – almost 91.66% of all incidents. Psychological injuries accounted for approximately 8.34% of incidents. Of these reported incidents, the 35 to 40-year age range incurred the highest rate of costs and almost 90% of total costs are attributable to police officers with more than five years of service.

The data below shows that the claim frequency rate for physical injuries accounted for the majority of workplace injury incidents. The overall claim rate for the 2018/19 financial year shows an increase of 3.5% from 2014/15 financial year.

#### Claim frequency rate by mechanism of injury

Mechanism of injury	2014-15	2015-16	2016-17	2017-18	2018-19	Difference 2017-18 and 2018-19
Being hit by moving objects	2.15	2.06	2.05	2.30	2.41	0.11
Biological factors	1.48	1.18	1.12	1.48	1.54	0.05
Body stressing	5.59	5.53	5.47	5.32	6.47	1.15
Chemicals and other substances	0.44	0.30	0.32	0.29	0.29	0.00
Falls, trips and slips of a person	1.51	1.76	2.01	2.08	2.21	0.13
Heat, electricity and other environmental factors	0.07	0.12	0.06	0.05	0.07	0.02
Hitting objects with a part of the body	0.68	0.66	0.82	0.84	0.74	-0.11
Mental stress	2.60	2.68	2.68	2.84	3.72	0.87
Sound and pressure	0.05	0.05	0.06	0.08	0.08	0.00
Vehicle incidents and other	0.77	1.08	1.30	1.48	1.41	-0.07
<b>Total</b>	<b>15.34</b>	<b>15.40</b>	<b>15.90</b>	<b>16.77</b>	<b>18.93</b>	<b>2.16</b>

Source: Treasury Managed Fund Data Warehouse, current at 31 July 2019

Note: Claims include all claims reported to the NSW Police Force insurer by sworn and non-sworn employees covered by the *Workers Compensation Act 1987*. Claims are reported per 100 full time equivalent employees (FTE). These FTE figures were obtained from the December 2018 wage declaration. Claim numbers are subject to minor revision in subsequent years as details of individual claims are updated. The mechanism of injury categories are based on the Types of Occurrence Classification System Version 3.1.

## 4.2 Maximum Medical Improvement

481 police officers are classified as having reached maximum medical improvement, where their medical capacity is now stable or unlikely to change in the foreseeable future (12 months).

In response to these deployment challenges, the NSW Police Force has commenced a Maximum Medical Improvement Steering Committee to look at the best way forward to manage injured police officers, while considering the operational capacity of commands and how deployable are those officers.

Those officers in the poor range for physical health will be more prone to absenteeism, lower productivity and higher rates of mental health issues. Police are often required to physically restrain people which can be a significant cause of injury. These factors all negatively impact on the overall workforce and the number of available staff to respond to jobs in the field.

Those officers who are unfit or have poor health measures may struggle in these situations or will prematurely escalate their tactical options when a stronger, healthier officer could appropriately manage these situations in a more measured way. This was shown in a police recruit cohort where recruits with higher grip strength scores were more successful at completing an occupational task assessment compared to those with lower grip strength <sup>7</sup>.

Anecdotally, poor physical health can lead to an increase in mental health issues. Police often respond to distressing incidents that can adversely affect them over time. Healthier, fitter police officers will be able to better deal with these situations. These situations elicit release of adrenaline and the stress hormone cortisol that can have harmful effects over time such as an increase in mood disorders. Engaging in regular exercise reduces these levels in the body, but also stimulates the production of endorphins which are the body's natural painkillers and mood elevators.

Analysis of **Your Health Check** data for medically discharged officers between January 2018 and June 2020 shows that these officers are in a poorer state of physical health compared to the organisation average given 95% of medical discharges during this period were due (solely or in part) to psychological injury. The Your Health Check program is a 15-minute, confidential health assessment that assesses officers' blood pressure, waist circumference, cholesterol and blood glucose, and diabetes risk score.

The NSW Police Force has implemented the **RECONNECT** program which aims to assist officers with psychological injuries or those at risk of injury with individualised fitness programs from strength and conditioning coaches as well as wellbeing support from the program psychologist. Officers who have participated in this program have shown increased sleep quality, mood state, and fitness levels over 12-weeks.

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<sup>7</sup> Orr, R., Pope, R., Stierli, M., and Hinton, B. 2017. Grip strength and its relationship to police recruit task performance and injury risk: a retrospective cohort study. *International Journal of Environmental Research and Public Health*, 14(8), 941.

## 4.3 Support for the NSW Police Force officers

### **Mental Wellbeing Strategy**

#### **Key Points**

- As the NSW Police Force Mental Wellbeing Strategy 2020-2025 evolves from its initial focus on mental health, it will in future link physical health and mental health to form an overall health framework

The NSW Police Force is committed to strengthening its approach to managing post-traumatic mental health responses. The organisation aims to develop an evidence-based, best practice approach to mental health management which maintains consistency across Australian Police jurisdictions whilst being responsive to the unique needs of the NSW Police Force Workforce.

A one-page brochure has been developed to highlight all wellbeing support services currently available to NSW Police Force employees and families of employees (see **Appendix A**).

The NSW Police Force will shortly be launching the inaugural NSW Police Force ***Mental Wellbeing Strategy 2020 - 2025***. The strategy has been developed in collaboration with Phoenix Australia-Centre for Post-traumatic Mental Health.

This document sets out the strategic direction that will guide the management of the mental wellbeing program of works over the period 2020 to 2025. The strategy sets out the NSW Police Force's commitment to safeguarding and improving the mental health of all employees. It marks mental health and wellbeing as a strategic priority and part of a wider commitment to improving health and safety of all employees.

The central graphic developed for the Strategy represents the lifecycle of a police officer. It includes six priorities and the four pillars for employee health and wellbeing, namely:

- Prevention
- Awareness
- Recovery
- Transition

The Strategy uses a 'shared responsibility' approach whereby both the NSW Police Force and the employee collaborate in the overall health and wellbeing of the NSW Police Force. This brochure has been sent as a poster to all commands and is available on the internet and intranet for easy access with additional information on these support services.

The initial program of works related to the Strategy rollout is being referred to as ***Healthy Workplaces***. The first iteration is provided in **Appendix B**.

Significant work has been undertaken to improve the ***Mental Wellbeing Strategy*** and this will remain a concerted focus during 2020 and beyond.

## **RECON Program**

The NSW Police Force has a range of internal support services to assist all employees with their physical health. One of the initiatives under the NSW Police Force's Workforce Improvement Program is the RECON Program.

RECON was developed to offer specialist rehabilitative and preventative health programs for all NSW Police Force employees. The program employs physiotherapists and strength and conditioning coaches across three clinics; two in the Sydney metro area and a clinic in the Newcastle area. The program has expanded to three sites located at the Sydney Police Centre, and covert premises in Moorebank and Newcastle. The program currently operates with nine staff: a physiotherapist and strength and conditioning coach at each site, plus a psychologist, administrative support, and a manager.

The aim of the program is to provide specialist treatment to participants and educate them on their injury or health issue to expedite their return to work or improve their level of health. Overall, the RECON program has assisted over 1,600 employees since 2015. The program has seen excellent results with 80% of officers treated under RECON returning to pre-injury duties.

The RECON program was established as a proof-of-concept in an attempt to improve rehabilitative services for on duty physical injuries. This was done by combining targeted physiotherapy combined with strength and conditioning programs that looked at the officer as a whole rather than just the injured area.

Preliminary results from Employers Mutual Ltd (EML) from June 2017 showed a positive return on investment, very high quality of life measures, decreased likelihood of re-injury, and increased employee engagement and satisfaction for those who participated in the program.

The program now consists of two main streams:

- RECONDITIONING for those employees who are injured (both work and non-work related); and
- RESTART, a preventative health stream focusing on musculoskeletal, metabolic, and mental health. RESTART focuses on those employees who are not injured but demonstrate an increased likelihood of injury or ill health.

**Appendix C** attached demonstrates the referral pathways for each stream.

Employees can self-refer into each stream. However, the main referral pathway for the RECONDITIONING stream are Injury Management Advisors and case managers from the employee's workers compensation insurer (usually EML).

The referral pathways for the RESTART stream correspond to the assessment employees complete. For the physical sub stream, employees will complete the Functional Movement Screen. For the metabolic sub stream, employees will have participated in a Your Health Check assessment.

Employees are assessed and given a treatment plan by the RECON team specific to their situation. Baseline measures are then compared to final measures to check success.

### **Your Health Check**

Your Health Check is a voluntary health screening program. The Program is a 15-minute confidential health assessment conducted by the NSW Police Force Occupational Health Nurses who undertake assessment involving diabetes risk, cholesterol and blood glucose, waist measurement and blood pressure. Nurses are able to conduct these in all police stations across NSW.

Since its inception in 2014, the program has completed 11,070 assessments on 7,720 individual police officers. To date, it has conducted over 14,500 assessments across the organisation.

When necessary, the nursing staff refer employees to their General Practitioner (GP) but also will look to internally refer to RECON or Physical Training Instructor Programs for ongoing assistance. The nursing team will always follow up with employees who have been referred to their GP for further support to ensure compliance. To date, 17.8% of all assessments have been referred to the employee's GP for additional clinical assistance. The main reasons for referral are (in order) for elevated cholesterol, blood glucose, blood pressure, or a combination of these.

The current nursing staff complete the assessments in addition to their normal squad and Probationary Constable medicals.

### **Physical Training Instructor (PTI) program**

This program has a cohort of 300 PTIs (predominantly police officers) across the state who are a local resource for health and fitness-related issues in addition to their normal roles. The program is coordinated by a Sergeant attached to the Health Performance Unit, Workforce Safety.

PTIs have industry standard qualifications and they are able to conduct Functional Movement Screening to assess employees' movement patterns and provide an individualised exercise program to address any identified areas of concern. PTIs can also conduct pre-exercise screening, fitness testing for specialist accreditation and inductions for police fitness rooms in police stations. PTIs provide regular check-ins with new Probationary Constables during their first year of service to attempt to smooth the transition from Academy to working life and ensure they remain on track to pass their medical and physical requirements for confirmation. PTIs must complete annual training to maintain their accreditation.

PTIs are typically police officers who hold minimum Certificate III in Fitness qualifications and have completed internal training to gain accreditation. PTIs are able to assist employees by conducting FMS screening to assess for injury risk, pre-exercise screening and fitness testing for specialist unit accreditation, developing fitness programs, and being a local resource for Commands on health and fitness initiatives.

## 4.4 Conclusion

All of the above programs are in addition to other wellbeing support services offered by the NSW Police Force, such as gym and pool access via Fitness Passport, and access to remote fitness and injury prevention programs. The aim is to assist NSWPF employees to maintain or improve their overall health in order to better protect the people of NSW.

The NSW Police Force will continue to provide support to injured officers and assist their recovery, such as trauma response, peer support officers, an Employee Assistance Program and Chaplaincy.



NSW Police Force

Appendix A

# NSWPF Wellbeing Support Services



NSW Police Force



## SUPPORT SERVICES FOR NSW POLICE FORCE EMPLOYEES



### Peer Support

NSWPF employees who are volunteers who are there to help their colleagues

email #PSO



**Functional Movement Screening**  
Involves 7 simple movement-based assessments that test your mobility, flexibility and stability to identify any weakness in the way you move

email #PTI



**RECON**  
In house rehabilitative and preventative health centres for NSWPF officers

email #PTIRECON



**Equip App**  
A free wellbeing app providing tools to help boost your mood, mind, physical and social wellbeing  
Search "Equip" in the App/Google Play stores



**Your Health First**  
A psychological health and suicide prevention training program

email #WELLBEING



**WellCheck**  
A monitoring service provided by psychologists to employees in high risk duty types

email #WELLCHECK



**Eat Smart**  
Practical information to inspire you to eat a healthy diet and make positive changes to your lifestyle



**Your Health Check**  
A 15 minute health and fitness assessment that can help you manage your health

email #YOURHEALTHCHECK



**Welfare Support Program**  
Designed to ensure supervisors and managers provide timely and effective support to employees suffering an injury or illness



**Police Psychologists**  
Provide advice or psychoeducation on specific topics to address issues or concerns

email #PSYCHOLOGY



**Incident Support**  
Psychological first aid available 24/7 to all employees for any deemed critical or other incident that may cause undue distress

email #PSYCHOLOGY



**Physical Training Instructors**  
Qualified fitness instructors providing health and fitness expertise to employees

email #PTI

## SUPPORT SERVICES FOR NSW POLICE FORCE EMPLOYEES, FRIENDS & FAMILIES



**Family Support Coordinator**  
Assistance for families of ill and injured employees, including the coordination of support services

email #FAMILYSUPPORT



**Career Transition**  
Online resource with easy to read information on what to expect, managing your finances, support services and real-life stories for those who are going through or considering career transition



**Family Connect**  
FAMILYConnect events are held by Commands to welcome Probationary Constables and their families to the 'policing family'



**Employee Assistance Program**  
Short term counselling service for NSWPF employees and their families

Phone 1300-667-197



**Chaplaincy**  
Assistance during critical incidents and/or traumatic events, family problems, support during illness as well as special events



**Fitness Passport**  
NSWPF employees and their families can gain access to over 500 gyms and swimming pools for a discounted rate

email #FITNESSPASSPORT



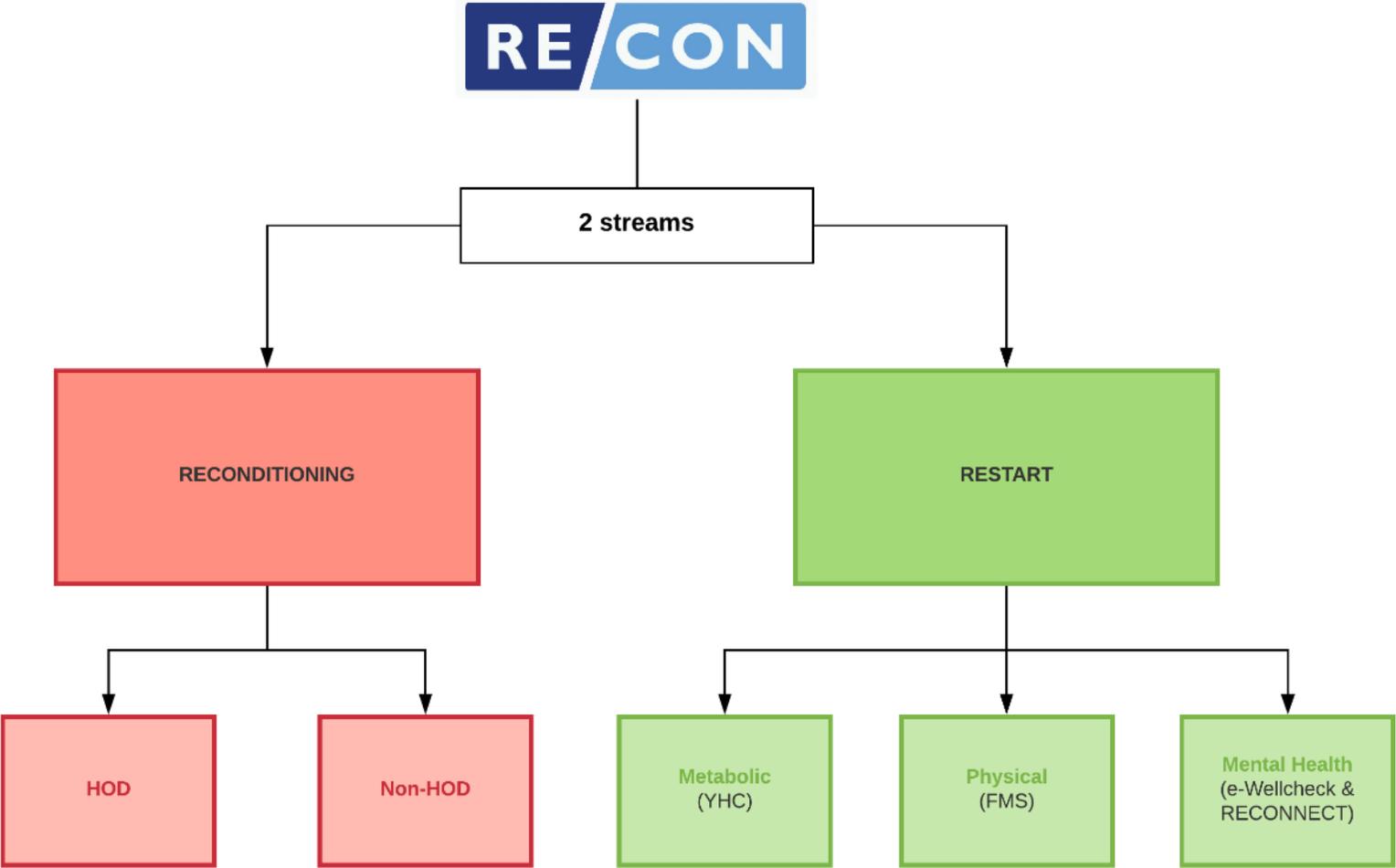
**Backup for Life**  
Supporting former officers' transition into a civilian life

Phone 1800-4-BACKUP  
or email backup@policegacynsw.org.au

## Appendix B

 <b>Supporting the NSW Police Force Mental Wellbeing Strategy 2020-2025 Stage 1 - 2020 to 2021</b> 					
<b>Authentic Leadership</b>	<b>A Resilience Building Culture</b>	<b>Person-Centred Support</b>	<b>Flexible &amp; Meaningful Services</b>	<b>Understanding the Workforce</b>	<b>Ensuring Quality</b>
1. Launch the NSW Police Force Mental Wellbeing Strategy	4. Develop a Psychosocial Risk Management Framework	7. Pilot the Command Resilience & Health Officer Program	10. Pilot a regional RECON model	13. Launch the eWellcheck Program	16. Develop a Command Mental Wellbeing Manual
2. Develop a Leadership Mental Wellbeing Training Package	5. Develop a Mental Wellbeing Education Framework	8. Develop a Mental Wellbeing Information Portal	11. Develop PTE Management Guidelines	14. Launch a workforce attitudinal survey on the services provided by NSWPF	17. Upgrade the mental wellbeing digital platforms
3. Develop mental wellbeing performance measure for our leaders	6. Increase mental wellbeing training across the organisation	9. Develop and implement Enhanced Career Transition Package	12. Develop the Suitable Employment for Injured Officers Framework	15. Develop a Mental Wellbeing Reporting & Analytics Framework	18. Develop a Mental Wellbeing Engagement Framework

Appendix C





Fire and Rescue NSW Submission  
Legislative Assembly Inquiry into the Physical Health of  
Police and Emergency Services Workers

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

Firefighting is a demanding occupation, both physically and psychologically. Fire and Rescue NSW (FRNSW) believes that the health and fitness of all emergency services workers (specifically firefighters) is critical to the safe and effective performance of their duties. This extends beyond their personal safety to the effective provision of emergency services to the community and their colleagues who rely heavily on each other in a team environment. FRNSW policies and program implementation reflect these principles across the firefighter career cycle, commencing at pre-employment and aiming to support those transitioning into retirement.

The importance of proactive approaches to address the above principles has been subject to recommendations of two reports prepared by the NSW Auditor General, namely: *'Fitness of Firefighters'*<sup>1</sup>; and *'Preventing and managing worker injuries for the NSW Police Force and Fire and Rescue NSW'*<sup>2</sup>.

### **Distinction between Health and Fitness**

While interrelated, health and fitness are distinct concepts and do not always occur hand in hand. FRNSW considers fitness in a firefighting context, to relate to the capacity to meet inherent physical and physiological requirements of the work required by firefighters. That is, can the firefighter complete an inherent task successfully while wearing requisite personal protective equipment and clothing

Health on the other hand is considered by FRNSW to relate to how the presence of a health condition interacts with the inherent requirements of firefighting e.g. the degree of risk of sudden impairment or incapacity. This risk may relate to firefighters being rendered unconscious or immobilised in safety critical scenarios or need consideration as to how the inherent requirements of firefighting may accelerate an individual's degenerative conditions.

The impact of physical health on firefighting duties is a complex area. FRNSW has taken a first principles approach to define and assess this risk area within pre-employment; and periodic and triggered health assessments. This has culminated in the development of the FRNSW Health Standard for firefighters which covers the following systems of significance for firefighting:

- Blackouts
- Cardiovascular Disorders
- Diabetes
- Hearing
- Vision and Eye
- Musculoskeletal Disorders
- Neurological Disorders

- Psychiatric Disorders
- Renal Disorders
- Respiratory Disorders
- Sleep Disorders
- Substance Misuse.

Certifications arising from both Health and Fitness assessment processes aim to meet FRNSW's obligations to mitigate, as far as reasonably practicable, work health and safety risk while avoiding unlawful discrimination via reasonable accommodation if/where possible. This includes exploring how an individual's health status or physical aptitude may be accommodated following consideration of relevant standards and any localised considerations pertaining to the inherent requirement.

While the focus of this inquiry clearly focuses on physical health, FRNSW also views psychological health and fitness as a relevant parameter. This aligns with our whole person approach to both prevention programs and injury management. Quite often deficits in one area of health and or fitness are masking (intentionally or unintentionally) the true barrier to performance and/or recovery of the emergency services worker. FRNSW believes that it is critical that processes and systems aiming to prepare and support emergency services workers acknowledge and address these highly interrelated parameters.

## b) What the physical entry requirements for police and emergency services workers are and identifying areas for improvement:

### **Physical entry requirements for FRNSW Firefighters**

As part of its pre-employment recruitment processes, FRNSW requires all applicants applying for firefighting positions within the organisation to complete the Physical Aptitude Test (**PAT**) and Pre-employment Health Assessment (**PHA**).

The below sections provide an overview of the FRNSW PAT and PHA protocols, and the development of the respective standards. Further information and videos of the PAT can be viewed on the FRNSW website<sup>3</sup>.

#### **PAT Stage 1 (Time: not timed)**

- Simulated Room Search
- Ladder Simulation

#### **PAT Stage 2 (Time: all tasks must be completed competently in under 15 minutes)**

- Hazardous materials – unilateral load carriage (distance 195m (6.5x30m) / 26kg).
- Team carry up staircase – unilateral load carriage up staircase (36 steps (26cm) / 17.5kg)
- Motor vehicle accident rescue – static hold of simulated rescue tool (19.5kg / 3 x 40 second holds)
- Hose advance / bushfire – charged hose drag (300m (10 x 30m shuttles, 5 loaded and 5 unloaded recovery walks)), resistive load equivalent to 30m of 38mm charged firefighting hose (265N (horizontal) + 11kg hose (vertical)).

#### **PAT Stage 3 (Time: all tasks must be completed competently in under 2 minutes)**

- Structural firefighting – fire attack crawling position (height restriction 1.25m: distance 60m)

(2 x 30m shuttles, 1 loaded and 1 unloaded recovery walk), resistive load as per hose advance task

- Firefighter rescue (height restriction 1.55m: distance 10m), resistive load equivalent to rescuing a 82kg firefighter wearing 20kg of personal protective equipment (550N (horizontal) + 30kg (vertical)).

### **FRNSW Physical Aptitude Test – overview of rationale and research**

The Supreme Court of Canada's 1999 *Meorin Decision*<sup>4</sup> set a precedence for fire services to have 'bona fide' and legally defensible physical standard for their workforce. The 'unified test' of discriminatory standards addresses several criteria for physical employment standard development, including:

- Was it adopted for a purpose rationally connected to performance of the job?
- Was it adopted in an honest and good faith that it is necessary to the fulfilment of the legitimate work-related purpose?
- Is it least discriminatory and reasonably necessary to the accomplishment of that legitimate work-related purpose?

Since 1998, several research articles have been published in regard to firefighter injuries using FRNSW workers compensation claims data. This research, undertaken by the University of Wollongong (UoW), contributed to establishing a 'bona fide, legally defensible entry standard' i.e. a standard reflective of the inherent physical requirements of firefighters operating within FRNSW's response profile.

FRNSW has partnered with UoW's Centre for Human and Applied Physiology in the area of developing physiological employment standards for the purposes of research and development of the PAT. The project was underpinned by the following '*framework (steps) for establishing a bona fide standard*':

1. Justification of need for establishing standards
2. Establish a Project Management Team
3. Trade familiarisation of research team
4. Trade analysis by research team
5. Identifying essential physically demanding tasks
6. Characterisation of essential physically demanding tasks
7. Development of physical aptitude tests
8. Standardisation of physical aptitude tests
9. Evaluation of scientific accuracy of physical aptitude tests
10. Developing performance standards
11. Implementing screening and re-evaluation
12. Continuously review this process and its outcomes.

### **FRNSW PAT – Review Considerations**

The above research steps 1 through 10 were successfully undertaken and the PAT was implemented agency-wide in 2014. Steps 11 and 12 – the requirement for continuous evaluation and review, describe activities undertaken in the last five years or currently underway. This included discussions with the original researcher and reviews of FRNSW injury data.

FRNSW's emergency response profile also continues to change in line with the agency's response

capabilities, including the advancements in equipment/technologies used. This has led to scoping of additional review work with researchers to refine existing tasks, equipment or PAT protocols.

The main 'review considerations' for the PAT fall in line with relevant changes initiated by FRNSW or observed/researched in the last five years. These include:

- *Changes in Personal Protective Equipment/Clothing (PPE and PPC)* - jet-style structural firefighting helmets change the way firefighters manoeuvre objects overhead. Changes in the Australian Standard for structural firefighting tunics result in clothing that is more protective from fire, however more strenuous on metabolism (heavier and hotter).
- *Equipment changes* - extension ladder or rescue tool specifications and stowage requirements on newer appliances.
- *Reviewing the job's inherent requirements (agency response profile) too frequently (e.g. annually)* - is impractical and potentially irrelevant in ensuring the physical entry standard remains bona fide. FRNSW notes the data contributing the PAT in its current form (implemented since 2014) is approximately a decade old.
- *Review cycle* - the PAT was designed to be portable and can be reliably replicated, using technologies current at the time of its research and development. Technological advances in the last ten years should be considered as part of the review cycle.

#### **FRNSW Pre-employment Health Assessments**

All applicants for FRNSW firefighting positions undertake the PHA, conducted by or assessed by the FRNSW Occupational Physician. The Physician then provides advice on applicant's medical suitability for employment as a firefighter.

The PHA includes:

- Health Questionnaire – including the collection of relevant medical history
- Pathology Assessment
- Resting ECG
- Audiometry
- Spirometry
- Other medical investigations or assessment.

#### **FRNSW Health Standard for firefighters**

The FRNSW Health Standard is used to guide assessment during the PHA and adopts a risk management approach using contemporary evidence based medical knowledge. It has been developed as a result of extensive research and input from industry and medical stakeholders.

Medical literature and doctrine relating to firefighters and other emergency services personnel have been sourced to inform development of the Health Standard. Where evidence is lacking, expert opinion from members of specialist medical colleges and other health professional organisations provides the basis of the Health Standard.

Key input into the development of this Health Standard include:

- the medical standards for licensing of commercial vehicle drivers contained in *Assessing fitness to drive* (Austroads)
- the standards for medical fitness for duty of rail safety workers contained in the *National health assessment standard for rail safety workers* (National Transport Commission).

The Health Standard keeps pace with advances in medical knowledge and understanding of the impact of certain health conditions and firefighting. Contemporary antidiscrimination and privacy principles now legislated in New South Wales have also been taken into account.

### c) Any impacts on workplace management for police and emergency services organisations

FRNSW's key focus for workplace management is the health, safety and wellbeing of our employees. FRNSW continues to work hard to ensure its operational capability can be maintained and further enhanced, while meeting this commitment.

On an international scale, cardiac events continue to be the largest cause of death for firefighters on duty. Since 1991, seven of FRNSW's 12 on duty fatalities have been cardiac related which is reflective of this international trend.

The implementation of a mandatory Health and Fitness Program for firefighters remains a key deliverable under the FRNSW Safety Strategy. On 20 December 2017, the full bench of the NSW Industrial Relations Commission enacted the Crown Employees (Fire and Rescue NSW Firefighting Staff Death and Disability) Award 2017 (the 'Award'). The Health Check and Fitness Drill Programs have been developed in accordance with Annexure A of the Award.

FRNSW's Health and Fitness Program consists of two components and represent a real shift within the agency towards a more proactive culture of maintaining optimal health and fitness:

- **Annual Fitness Drill**

The aim of the Fitness Drill is to support firefighters gain an annual self-benchmark of their fitness. Improved firefighter fitness enhances operational readiness, capability and safety.

- **Periodic Health Check**

Health Checks are undertaken to proactively identify and address the risk of sudden incapacity in the firefighting environment. They are undertaken periodically according to an age-based schedule and include baseline health questionnaire, ECG, pathology testing and consultation with a medical practitioner nominated by the firefighter.

This baseline information is overseen by an Independent Occupational Physician (IOP), with further referral/ assessment initiated as required. The IOP provides a Fitness For Duty certification to the firefighter and FRNSW at the completion of the Health Check.

FRNSW has implemented a holistic injury management program, consistent with research showing prolonged recovery from physical conditions is usually caused by psycho-social issues. A review of claims from 2015 has shown 88% of current open claims had high levels of psycho-social stress compared to control. The approach undertaken by FRNSW has seen over 25% of firefighters with physical injury access secondary treatment, including personal and family counselling, financial counselling, nutritional advice or home assistance.

FRNSW has also developed alternative duties options, including training, desensitisation and station-based duties. This has resulted in FRNSW having claim durations 45% lower than other Emergency Services measured by the Australian Government Actuary Department.

In some regional areas, recruiting Retained Firefighters who have health and fitness attributes compatible with the safety critical work of firefighting does present challenges. The recruitment

processes for Retained Firefighters reveal a higher proportion of applicants not progressing to employment based on medical conditions and/or physical abilities that are incompatible with safety critical firefighting work.

As a state-wide organisation, FRNSW is therefore required to place significant resources into attracting, recruiting and retaining suitable Retained Firefighter applicants. FRNSW acknowledges that substantial evidence exists to support the return on investment arising from programs that promote a healthier and fitter workforce. Embedding these programs within organisations requires investment and significant support from leadership and FRNSW is well positioned in this regard.



NSW RURAL FIRE SERVICE

# LEGISLATIVE ASSEMBLY COMMITTEE ON LAW AND SAFETY - PHYSICAL HEALTH OF POLICE AND EMERGENCY SERVICES WORKERS

NSW Rural Fire Service Submission

## Introduction

The NSW Rural Fire Service (NSW RFS) in this submission will provide comments on 'the physical health of police and emergency services workers in NSW', in relation to the four key areas stated in the Legislative Assembly Committee on Law and Safety Terms of Reference for Physical Health of Police and Emergency Services Workers as listed below:

- a) How the physical health of police and emergency services workers impacts the performance of their duties
- b) What the physical entry requirements for police and emergency services workers are and identifying areas for improvement
- c) Any impacts on workplace management for police and emergency services organisations; and
- d) Any other related matters

## Background / Context

The NSW RFS is established under the *Rural Fires Act 1997* as the lead combat agency for bush fires in NSW and all fires within designated Rural Fire Districts. The NSW RFS also has further statutory responsibilities, such as the issue of public warnings about bush fires and bush fire threats, and the provision of advisory services relating to fire fighting. The agency also operates under the *State Emergency and Rescue Management Act 1989*. The NSW RFS is widely acknowledged as the largest volunteer fire service in the world. Our agency strives to provide a world standard of excellence in the provision of a community based fire and emergency services through training, community education, prevention and operational capability which is underpinned by strong focus on health and safety and wellbeing of members and others.

The NSW RFS is predominantly a volunteer based organisation with over 71,000 volunteer members supported by approximately 965 salaried staff (as at 30 June 2019). Roles in the organisation range from office based support and operational roles through to frontline emergency roles including bush and structure firefighting, Remote Area firefighting, aviation rescue, road crash rescue, Community First Responders, Trail Bike Operations, and Mitigation Services. With such varied roles there are a range of physical and mental attributes depending on roles or tasks performed.

The NSW RFS (together with Fire and Rescue NSW) were the subject of the Fitness of Firefighter Audit with a report released April 2014 by the NSW Auditor-General. The RFS responded to each of these audit recommendations.

The NSW RFS has a Strategic Direction Plan 2019 - 2024 with a vision '*To provide a world standard of excellence in the provision of a volunteer-based community fire and emergency service*'. One of the pillars of this Plan, *Vibrant and Sustainable Membership*, has the component '*Safe and inclusive workplace where members can be at their best*'. A strategy underpins this with '*Embed a culture of safe and inclusive practices for member health and wellbeing*'.

The NSW RFS has a well-established Health and Wellbeing Program called 'Your Health Matters (YHM)' that commenced in 2016 with a documented 5 year plan (2016 – 2021) and framework. This Plan defines outcomes supporting and promoting the health and fitness of members, to enhance their own wellbeing and the capability of the NSW RFS to provide fire and emergency services to the community. Key components of the YHM Program implemented include member health checks, integrated Mental Health Plan, development of system tools (including IMSAFER, which is discussed later in this submission)

integrated into induction and firefighter training courses, task analysis, health challenges / competitions, catering procedures and food guides, health promotion items (pedometers, timers, food cooler storage bags, outdoor dry bags to encourage outdoor and physical activities) and quarterly communications via YHM Packs (health promotion posters, guides, skin check tools, and injury prevention smart cards). The YHM Program utilises the skills, knowledge and experience of our health provider Vitality Works with a full time Vitality Works staff member (Exercise Physiologist and Nutritionist) based at RFS Headquarters coordinating the program and this allows the RFS access to professional services including medical practitioners, dieticians, exercise physiologists and other health professionals.

The NSW RFS has a duty of care to ensure its members tasked to undertake specialist functions are medically and physically capable to undertake the tasks allocated.

The roles of Operational Officers (OpO) have specialist functions and applicants undertake a medical assessment prior to commencing those roles.

The NSW RFS has identified a number of specialist functions that require members to undertake regular medical and/or physical assessments. Specialist functions include:

- Arduous firefighting
- Remote Area and Rapid Aerial Response Firefighting
- Trail bike operations
- Helicopter search and rescue (Aviation Rescue Crew)
- Overseas deployments
- Breathing apparatus operations
- Mitigation field roles (salaried staff)

## **Medical Assessments**

A medical assessment is used to assess suitability to undertake the role and the physical assessment requirements for specialist functions.

All members are required to undertake an initial medical on entry to a specialist function at the NSW RFS. Some roles such as Mitigation field roles, require annual medical and physical assessments as a condition of employment. The frequency for members to undertake the specialist medical is based on age for some roles (Breathing Apparatus Operators).

The specialist medical assessment has been developed based on the analysis of the functional capacity (Role Profile) to undertake specialist tasks within the NSW RFS.

For example, mitigation work can be strenuous and undertaken in difficult terrain, and those workers are expected to maintain a level of physical fitness appropriate for remote area bush firefighting or similar intense and sustained physical activity in adverse environmental conditions over extended periods of time. The medical and physical requirements of Mitigation field roles are contained within their role descriptions and employment requirements.

## **Physical Assessments**

Immediately prior to undertaking any physical assessment, a Physical Aptitude Readiness Questionnaire (PAR-Q) is completed by the member. An injury, illness or impairment could occur to a member during the period between medicals. The PAR-Q ensures the member has not suffered any significant change

in capability between medicals and identifies that members are medically capable of undertaking the physical assessment.

Members undertaking specialist functions within the NSW RFS are expected to participate in fieldwork requiring above-average endurance, superior conditioning, high energy bursts of strength and/or extraordinary strenuous activities in emergencies under adverse environmental conditions.

A series of physical assessments have been developed based on specialist functional requirements for members to perform the role(s).

Members should not complete any physical assessment unless they have a current medical and have completed a PAR-Q. The assessment facilitator ensures that each member has completed a PAR-Q prior to attempting a physical assessment.

Physical assessments are to be conducted annually for specialist roles.

Physical assessments have been designed to test the strength, endurance and/or performance of members to best replicate the impact and forces on the body relevant to operational requirements.

Members are provided with a training guide so that preparation for a physical assessment is structured in a methodical way to build physical capacity in a manner that minimises risk of injury.

The Arduous Pack Test is a test recognised by Australian and International fire services. The test involves walking 4.83 kilometres carrying a 20.4 kilogram weighted pack or weight vest in 45 minutes. This test is the Physical Assessment required for:

- Arduous firefighting
- Remote Area and Rapid Aerial Response Firefighting
- Trail bike operations
- Helicopter Search and Rescue (Aviation Rescue Crew)
- Mitigation field roles

There may be differing requirements for Overseas Deployment dependent on duty type and requirements of the requesting agency. However, requirements may include:

- Light walk Test, walking 1.6 kilometres in 16 minutes
- Moderate Pack Test, walking 3.2 kilometres, carrying an 11 kilogram weighted pack or weight vest pack in 30 minutes
- Arduous Pack Test, walking 4.83 kilometres, carrying a 20.4 kilogram weighted pack or weight vest in 45 minutes

Mitigation field roles are also required to complete prior to starting a period of temporary employment a Kinetic Assessment. A Kinetic Assessment is repeated prior to each new temporary employment period for each Mitigation Services field staff member. A medical assessment (the same medical that is required prior to an Arduous Pack Test) is required prior to a Kinetic Assessment. The Kinetic Assessment comprises 12 tasks that are scored by the assessor for each applicant. Examples of these tasks are (i) Climbing in and out of Category 1 Tanker (ii) Ladder climb (iii) Jerry can lift (iv) Bowl out and roll up hose (v) Push / Pull simulation.

## **Entry to Volunteer Members – firefighter roles**

The initial membership application process to join the NSW RFS as a firefighter requires an applicant to complete a Medical Information declaration stating if the applicant has any medical condition(s) that could

affect their ability or affect the safety of others in performing the role. If applicant answers 'Yes', then further details must be provided which is then considered by the NSW RFS before any probationary membership is allowed together with other clearance requirements.

## **NSW RFS responses to the Terms of reference - Legislative Assembly Committee on Law and Safety Physical Health of Police and Emergency Services Workers**

Before addressing the four sections detailed in the Terms of Reference, physical health needs to be defined. WHO defines '*Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity*'. This submission relates to physical (body) health. Fitness relates to the ability of a person to meet the demands of the environment. Health and fitness are linked but also are separate parameters.

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

The NSW RFS acknowledges how essential physical health is for the safety, effectiveness and capacity of emergency services workers.

The fitness levels of emergency services workers are interrelated with their health, but is not in scope for this Legislative Assembly Committee submission.

There are known risks within the NSW RFS and amongst other police and emergency services with the criticality of sudden acute incapacity or a level of impairment arising from health conditions known or unknown to a worker. The NSW RFS has historically had very low numbers of members (ranging from zero to two cases annually) that have suffered sudden cardiac arrest or stroke leading to death whilst on duty that relate to underlying health conditions.

Within the YHM Program the NSW RFS has voluntary health checks that consider Cardiovascular Disease Risk and Type 2 Diabetes Risk through inputs of waist circumference, blood pressure, blood glucose, cholesterol ratio, physical activity, smoking, and nutrition. During the period of 2017 – 2019 a total of 1,329 members participated in health checks conducted by health specialists. Where significant health risk was observed, a health specialist would make a referral to a medical practitioner for prompt intervention. Members are provided with their health check results as well as information and advice to change their health outcomes through behavioural change.

Diseases like cardiovascular disease (CVD) can have acute and chronic health effects impacting performance and endurance levels. Members can reduce CVD risks by making healthy foods choices, stopping smoking, being physically active, seeking treatment for conditions including high cholesterol, high blood pressure, diabetes and depression, and maintaining a healthy weight range.

As described in the background of this submission, the NSW RFS utilises the following risk controls to ensure as reasonably practicable the health of RFS members:

- Staff Member
  - Mitigation field roles (medical and physical assessments)
  - Operational Officer Program (OpO) – Pre-employment medical
- Volunteer Members

- All new member applications are required to complete Medical Information declaration
- Specialised roles undertake regular medical and physical assessments including:
  - Arduous firefighting
  - Remote Area and Rapid Aerial Respones Firefighting
  - Trail bike operations
  - Helicopter search and rescue (Aviation Rescue Crew)
  - Overseas deployment
  - Breathing apparatus operations
  - Mitigation field role
- All members are required to apply IMSAFER before considering undertaking NSW RFS duties as a staff or volunteer member. Crew Leaders, Supervisors and Managers apply IMSAFER principles to their workers (Illness or Injury, **M**edication, **S**tress, **A**lcohol or Drugs, **F**atigue, **E**xpertise, **R**eview).
- Return to Work activities following illness or injury of members is conducted in accordance with NSW RFS policy (staff) and service standard (volunteer members). It is paramount that once physical health conditions are known that Return to Work is conducted in accordance with medical advice particularly with identified specialist roles described in the background of this submission.
- The correlation between knowledge and awareness of physical health and positive behavioural change is known by NSW RFS members through regular YHM packs released quarterly to all members (including health promotion posters, guides and injury prevention smart cards).
- Task Analysis has been undertaken for a range of NSW RFS roles, functional role profiles and musculoskeletal risk profiles.
- The NSW RFS in collaboration with insurer iCare NSW and Employers Mutual Limited (EML) has commenced roll out of SafeSpine™ SafeMind Program to Mitigation Services field roles and following this will consider broader implementation to other NSW RFS staff and volunteer roles including firefighters. SafeSpine™ SafeMind builds the foundations of safe work practices, and psychological wellbeing by drawing the workforce's attention to unsafe physical and mental behaviours, and equipping workers with mechanisms to overcome them.

The NSW RFS is continually reviewing reported injuries, illness, near miss and property damage incidents, and hazards to identify trends and improvement opportunities that will progress physical health outcomes of our members. The latest NSW RFS Report of Injury/Illness/Exposure form template (released October 2019) has a new question 'Did a pre-existing injury/illness contribute to the incident?' to further identify contributing factors that include physical health factors.

## **b) What the physical entry requirements for police and emergency services workers are and identifying areas for improvement**

As described in the background of this submission, the NSW RFS utilises a range of medical and physical assessments as pre-entry for member roles. This includes:

- Staff roles

- Mitigation Services field roles – pre-employment medical assessment and physical assessment (PAR-Q, Arduous Pack Test and Kinetic Testing)
- Operational Officers (OpO) – pre-employment medical assessment
- Volunteer roles
  - A medical information declaration is completed by each applicant, but there are no specific physical entry requirements for volunteers. Such requirements are targeted at specialised roles as a member gains knowledge, skills and experience and seeks to undertake more advanced and physically challenging roles listed below.
    - Arduous Firefighter (Arduous medical assessment, PAR-Q and Arduous Pack Test)
    - Remote Area and Rapid Aerial Response Firefighter (Arduous medical assessment, PAR-Q and Arduous Pack Test)
    - Trail bike teams (Arduous Medical Assessment, PAR-Q and Arduous Pack Test)
    - Helicopter search and rescue - Aviation Rescue Crew (Arduous Medical Assessment, PAR-Q, Arduous Pack Test, ARC Swim Test)
    - Overseas deployment (Medical Assessment Applicable to Deployment Roles)
    - Breathing apparatus operations (BAO Medical Assessment).

The NSW RFS is currently reviewing system tools used by the NSW RFS for medical and physical assessment. The review involves considering tools for improvement, confirming they are evidence based for each role and aim to reduce physical health risks to NSW RFS members undertaking these specialist roles at the NSW RFS and that the tools are cost effective (particularly when members undertake multiple specialist roles). The NSW RFS has already been in consultation with several universities regarding this program of work and is currently defining a scope of work, determining capability and capacity to undertake the review, and to recommend and develop medical and physical assessment tools.

The NSW RFS is continually reviewing reported injuries, illness, near miss and property damage incidents, and hazards to identify trends and improvement opportunities that will progress the physical health outcomes of our members. The latest NSW RFS Report of Injury/Illness/Exposure form template (released October 2019) has a new question 'Did a pre-existing injury/illness contribute to the incident?' to identify contributing factors that include physical health factors.

### **c) Any impacts on workplace management for police and emergency services organisations**

The NSW RFS is continually reviewing reported injuries, illness, near miss and property damage incidents, and hazards to identify trends and improvement opportunities that will progress the physical health outcomes of our members. The latest NSW RFS Report of Injury/Illness/Exposure form template (released October 2019) has a new question 'Did a pre-existing injury/illness contribute to the incident?' to further look at contributing factors that include physical health factors.

Within the YHM Program the NSW RFS has voluntary health checks that consider Cardiovascular Disease Risk and Type 2 Diabetes Risk through inputs of waist circumference, blood pressure, blood glucose, cholesterol ratio, physical activity, smoking, and nutrition. During the period 2017 – 2019, a total of 1,329 members participated in health checks conducted by health specialists. Where significant health risk was observed a health specialist would make a referral to a medical practitioner for prompt intervention. Members are provided with their health check results and information and advice to change their health outcomes through behavioural change.

The NSW RFS has not identified any existing trends associated with physical health of members impacting workplace management.

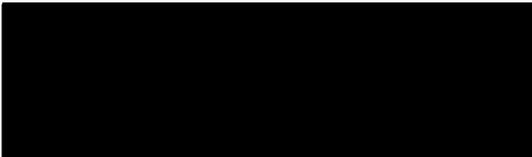
Conducting medical and physical testing of members for specialised roles does delay recruitment for these roles and adds significant upfront costs, however this is offset by early identification of applicants or existing members preventing sudden acute incapacity or a level of impairment arising from health conditions known or unknown to a worker.

The NSW RFS has not identified any emerging risks associated with physical health that are impacting workplace management of the NSW RFS as an emergency services organisation. This however, will continue to be monitored closely as the NSW RFS considers a review of workforce planning and the roles undertaken by staff and volunteers and the physical and mental attributes associated with roles or specific tasks. Given the median age of volunteers is 52 years, the NSW RFS may need to consider additional reviews and/or measures if the median age continues to increase.

#### **d) Any other related matters**

The NSW RFS has no further general comments in this submission but will provide further submissions where the Committee ( Legislative Assembly Committee on Law and Safety - Physical Health of Police and Emergency Services Workers) requires specific details from Police and Emergency Services Organisations such as the NSW RFS.

I thank you for this opportunity to provide this submission from the NSW RFS on the Physical Health of Police and Emergency Services Workers.



Rob Rogers AFSM  
**Commissioner**

18 AUG 2020

# NSW State Emergency Service

Legislative Assembly Committee on Law  
and Safety – Physical Health of Police  
and Emergency Services Workers

## Introduction

In this submission, the NSW State Emergency Service (NSW SES) will provide information to assist the Legislative Committee on Law and Safety to understand:

- how the physical health of SES members impacts the performance of their duties,
- the physical entry requirements for SES members and areas for improvement, and
- any impacts on workplace management for the NSW SES.

The areas outlined above align broadly with the terms of reference for the Inquiry into the Physical Health of Police and Emergency Services Workers that is being conducted by the Legislative Committee on Law and Safety.

## Background

The NSW SES serves the community of NSW as the lead agency for flood, storm and tsunami as specified by the *State Emergency Service Act 1989* (NSW) (SES Act). NSW SES volunteers are highly skilled, experienced and well-trained in the wide variety of roles they perform. Each Unit is as unique and varied as the community they serve due to the vast mix of risks faced and roles required in the diverse locations and communities across the State.

In addition to flood, storm and tsunami, the NSW SES provides specialist capabilities including general land rescue, vertical rescue, road crash rescue, and alpine and remote area search and rescue. NSW SES frequently assists other emergency services in a variety of roles, such as supporting NSW Police in searches for evidence and missing persons and Ambulance Service of NSW as Community First Responders in rural locations.

The NSW SES is predominantly a volunteer based organisation of approximately 10,500 volunteers. Volunteers are supported by approximately 328 salaried staff. The NSW SES refers to both volunteers and staff as members.

The NSW SES mission is to save lives and protect communities. One of the key strategic anchors of the NSW SES Strategic Plan 2016-2021 is capability. That is, ensuring that our people are equipped with the tools, knowledge, systems and skills they need to deliver an effective capability to our communities. The NSW SES is also committed to safety and building an improved safety culture through continued training and critical risk management as well as continued support to assist with the health and wellbeing of members.

## Physical health of members and impact on performance of duties

The physical health of NSW SES members is essential to the safe and effective delivery of services to the community. For a number of specialist roles within the Service, NSW SES members are required to be fit-for-task.

A person applying to become a volunteer of the NSW SES is required to declare health related information including any long-term medical conditions, disability or impairment.

The NSW SES Unit Member Procedure outlines that one of the criteria for volunteer membership is that a person is a fit and proper person. The functions and roles of the NSW SES are taken into

account when making this assessment. The factors that relate to health include being able to perform duties that are physically and mentally demanding, performing activities that can be dangerous and acting in a way which created an avoidable risk to safety.

The Unit Member Procedure requires that, at interview, the health and disability status of new volunteer members should be discussed at the interview to determine a likely suitable role. The Unit Member Procedure recognises that an individual's health or disability status need not stop them making a valuable contribution to the NSW SES, but a member's role in the unit must be matched to their capabilities. A person is deemed less likely to be a fit and proper person where a reasonable belief is formed that the person lacks the physical or mental capacity to safely fulfil assigned duties. This could include where a person has a severe and chronic health condition or otherwise poor health and fitness, develops a severe disability or has a mental health issue that substantially impairs their capacity to make sound decisions.

For spontaneous volunteers, they are required to disclose any medical conditions that could affect their safety or the safety of others while participating in NSW SES activities.

Upon entry to the Service, NSW SES salaried staff are required to complete a health declaration form. This form requires a potential employee to list all pre-existing health conditions. The health declaration requirement recognises that NSW SES has a statutory responsibility to provide and maintain a safe and healthy working environment. The information on the health declaration form assists the NSW SES in providing a safe working environment and identifying any pre-existing conditions which may be aggravated from exposure to hazards or conditions in the working environment.

The NSW SES also provides support for mental health and wellbeing for members through a Mental Health Strategy and action plan which incorporates a range of programs to support the approach to critical incident management, health and wellbeing. The NSW SES Health and Wellbeing Framework is a holistic approach to wellbeing and includes Peer Support, Chaplaincy, Employee Assistance Program, Incident Response Team and a robust Injury Management Program.

## **Physical entry requirements for NSW SES members and areas for improvement**

A number of specialist operational roles within the NSW SES require fit-for-task assessment to determine the suitability of a member for a role. For all assessments, these are recorded and tracked in SAP against the relevant member profile.

### ***Land Search Operations***

Members participating in Land Search Operations are required to maintain a high level of physical fitness. There are minimum levels of training and fitness requirements for each search capability role. These requirements include hikes that must meet a certain distance or time and include a specified weighted pack.

### ***Flood Rescue Operators and Boat Operators***

Members undertaking roles as Flood Rescue Operators and Boat Operators are required to successfully complete both a swim test and a fitness test. Prior to undertaking these tests, members are required to do a self-assessment (IMSAFE) of their capability considering any

conditions known to the member. The NSW SES swim test and fitness assessment needs to be conducted once every three (3) years to maintain currency.

### ***Vertical Rescue***

Members undertaking Vertical Rescue roles are required to maintain a level of fitness to meet the fit-for-task requirements of Vertical Rescue. This includes ongoing Vertical rescue training every 12 months involving a range of skills, a pack test and a timed rope ascent.

### ***Areas for Improvement***

The national AFAC Fit-For-Task Project will provide consistent guidelines for all fitness level requirements across all emergency service functions. However, the project is behind schedule and has been delayed. The NSW SES arrangements will be reviewed once the national system is adopted.

## **Impacts on workplace management**

The NSW SES undertakes regular reviews of its Safehold system (where injuries, near misses, incidents are recorded) and identifies trends and improvement opportunities.

The NSW SES also continues to scope and review fit for task requirements and will welcome the finalisation of the national AFAC Fit-For-Task project so that consistent guidelines for all fitness level requirements across all emergency services functions can be applied.