Submission No 112

## THE MANAGEMENT AND OPERATIONS OF THE NSW AMBULANCE SERVICE

Name:

Mr Matthew O'Reilly

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## Robyn Parker MP

## 24/06/08

My name is Matthew O'Reilly. I was Ambulance Officer in nsw for 18 years. I first joined the asnsw on my 19th birthday.

My employment was terminated in October 2006. My carreer was not chequered. I held many positions of responsibility.

I was an Advanced Life Support Officer, I was a Station Officer and Acting Station Officer frequently. I worked in city and and country locations, I was a Coordination Officer. I am an Enrolled Nurse, I have a science degree and had almost finished a degree in Paramedical Clinical Practice when I was sacked.

I worked hard to be good in all these roles.

In March 2006 I was visited by my sector manager while I was stationed at . I was told that from that point forward I would not be working at because a protected disclosure had been made against me which alledged threatening and intimidating behaviour by me towards the officer in charge of my workplace. I was told to leave the ambulance station immediately and that it would be determined on a day to day basis where I would be working from.

I was told that I was not to communicate anything about my predicament to any other employee of the ambulance service. I was extreamly distressed by my removal from the station and my subsequent work arrangements. I did work for a few more days at locations including and I was also directed to travel to on one occassion.

I became extreamly depressed and anxious about my situation and felt unable to continue to work in the cicumstances. Initially I went off on sick leave and was treated by a local GP for acute reactional deression and anxiety.

I soon lodged a workers compensation claim which was subsequently rejected on the grounds that my condition was not a work related injury.

I spent the next 9 mounths exhausting my sick leave, annual leave and long service leave whilst the proffessional standards and conduct unit conducted a protracted and in my view biased investigation into the allegations against me.

If a protected disclosure is meant to protect the identity of the compailtant it failed. If a protected disclosure is meant to physically protect the complaitant it failed. I was depressed, extreamly anxious, subjected 9 months of cruel and heartless treatment and I live 800 meters from the complaintant. If a protected disclosure was meant to protect me it failed. During the entire investigation I was in possession of the ambulance station keys and had access to the considerable supply of narcotics held there. I'm embaressed to say that toward the end of the investigation I seriously considered dressing in my uniform and using these drugs to end my life at the station in the knowledge that I would be discovered by my accusser.

If a protected disclosure is meant to protect the complaintant from reasonable and appropriate scrutiny it was a compleate success.

If a protected disclosure is meant to absolve managers of their reponsiblity to manage it was a complete sucess. Responsibility was handed to the professional standards and conduct unit while the management turned a blind eye to what was happening.

The officer in charge of ambulance station physically assulted me. He slapped each side of my face 3 times.

That was the secound time during my time with the ambulance service I was physically assulted by a senior officer.

I was making complaints about the clinical and opperational readiness of the Ambulance station when I was complained about. For example, the narcotics supply was not able to be secured (It could liteally be picked up and carried away). Paediatric intubation could not be undertaken because equipement was mismatched and unchecked. Satellite comunications equipement was rendered useless by misuse. Children could not be safely transported in the ambulances because they lacked the required restraints. The station officer could not be relied upon to respond to emergency calls. These cicumstances were simulateous.

Some of the behaviour I witnessed at was nothing short of corrupt. I was transporting a deceased patient to the morgue with the station officer at . On arriving in town (with the deceased still in the ambulance) I was instructed to get into the back of the ambulance so that we could pick up the station officers wife from her job

and drive her home. I was instruted to obscure his wife's view of the body and not tell her it was there because she wouldn't be happy about it.

Frequently the interests of patients were put below the interests of some officers. I have seen the on call system abused for the direct financial benefit of staff. I witnessed one staff member phone an intellectually disabled man from the phone at the ambulance station in an effort to get him to initiate a call for him to attend.

An acting station officer at coaxed an angry and emotional psychiatric patient into making a fallacious and baseless complaint of sexual misconduct against me. The same officer was found on a number of occassions opening mail adressed to me marked "PRIVATE AND CONFIDENTIAL". This was done so that the officer could stay abreast of the investigation he had initiated against me. Surely this is harassment and intimidation. I was profoundly affect by these incidents. They are widely known to others.

During a period of about 18 months at staffing levels were inadequate. During this time we worked excessively long periods without time off. I think my record was 38 days (that is 24 hours per day), a colleauge at bragged of 42 days (that's 24 hours per day). That's mismanagement. That's dangerous.

While I was the Acting Station Officer at a staff member was involved in a fatal collision in an ambulance. A nurse at was killed. She was a workmate of my wife. This incident drew some critisism of the ambulance service locally. I deflected and diffused what I could. Nobody from outside Ambulance (i.e amblance management) ever visited, rang or wrote to the staff here to find out if there had been an impact on us.

In 2005 I was awarded my National Service Medal for more than 15 years of Service. True to form, when it arrived the ambulance service had gotten my name wrong. I sent it back for correction and have subsequently been sacked. I was told that my medal would be replaced but 3 years later I don't have it despited numerous requests. The (last was 4 weeks ago)

I read with interest about an alledged murder/suicide involving a suspened Ambulance Officer recently. I know nothing about why he was suspended but I identify stongly with the pressure he must have felt. The process is not fit for anyone regardless of guilt or innocence.

I personally knew 2 Ambulance Officers who have ended their lives in the last 12 months. I was almost the 3rd. Thse statistics just don't sound right to me.

I feel that I have been throw bound and gagged from a moving ambulance. I was stripped of my identity and it hurts.

I can't possibly include all that I have to contribute in this email. Please feel free to contact me if you wish to.

You are free to make public any information I have included.

Regards