

**THE MANAGEMENT AND OPERATIONS OF THE NSW
AMBULANCE SERVICE**

Name: Suppressed

Date received: 25/06/2008

Partially Confidential

Regarding Inquiry into Management of ASNSW

To Whom It May Concern:

I am writing as an ambulance officer who has left ASNSW, but wish to contribute as much as I can recall from my experiences. I apologise for the informal format of my submission. I only found out about the Inquiry a few days prior to the cut off date for submissions as I now reside interstate.

I would like to request confidentiality of my submission due to the very personal nature of much of it's content.

The key issues I would like to address are:

- Poor handling of complaints, particularly made by junior officers in metropolitan as well as rural settings
- Rural education and training needing improvement.

I joined ASNSW in _____, and worked at _____ Station for my probation – a 12 month period. During this time I was fortunate to be mentored by appropriately qualified officers and a station officer who looked out for probationers.

My training at Rozelle consisted of many scenarios where imagination was required. Towards the end of my probation I worked with a qualified officer who had a reputation of not working well with officers junior to his qualification and/or female officers. Due to my knowledge and confidence built from the ground up by other colleagues in my abilities, I was not concerned that being rostered with this officer would affect me adversely. I was rostered to work with him for 6 weeks.

After the third day of being rostered with this officer, he stopped talking to me for no apparent reason. I tolerated this for a few days, then confronted him. He stated he had no problem with me and did not know what I was referring to.

Approximately one week after this I spoke with my station officer at _____ about the officer not speaking to me, at all, unless he required equipment at a job. I told him questions I asked to further my knowledge and understanding were met with stone silence, that I had attempted to address the problem myself with no acknowledgement of a problem by my training officer. My station officer told me not to worry about it, it was just my turn to work with him, and it was only six weeks.

I continued on for five and a half more weeks. My confidence in myself and my work related abilities dropped lower than my first day on road. I sought reassurance from previous training officers that I was at a level to pass my impending exams, with little confidence or self esteem left to believe their response after sitting in a car for 10 – 14 hours a day with no input to my training or general conversation. I also continually told my station officer and several area managers that the situation was unchanged and was reassured that it was only six weeks.

During this time I witnessed the officer assault a patient, clinically backed up by _____ minutes after the assault which could not be justified as provoked. I was shocked when my concerns over my training officers actions again fell on deaf ears.

During my last week with the officer, I was so depressed and my confidence destroyed. We returned to station from an ordinary job, and I just walked through the plant room of the station and sought out the area manager and told him I was going

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home sick, I could not continue due to my training officer's approach to me, and that I would be resigning from the ASNSW as despite my initial confidence, I did not feel I was capable of being an ambulance officer. This was not a dramatic scene I was trying to create, I did not feel I was intelligent or skilled to do the job.

followed me into the station and asked me what he had done to me. I replied nothing, other than the way I had been treated the whole time I was working with him. I just couldn't cope for one more shift. responded "I was hoping he might have assaulted you or something. Then we would have something on him". He then told me he would put me on another car for the night, still at the same station, and put another female probationer to work with my training officer. The issue was never addressed again after the shifts I was rostered with him finished. I did not submit my resignation, and within days of changing training officers, I began to regain believe in myself and accepting the affirmation of colleagues about my abilities.

I am at a loss to suggest a solution to this situation other than to follow the grievance procedures in existence.

After my probation, I requested to be transferred to a country station. Something I believe is an imperative part of any ambulance officers' professional development due to the limitations and resourcefulness expected of rural ambulance work. I was stationed at from

Again I felt fortunate to work with experienced and supportive rural ambulance officers. Our station and vehicles were second rate to say the least. It was obvious to me the station officer had done his best to maintain equipment to the best of his ability.

Feeling quite isolated myself, I attempted to reach out to other officers in my region, some of whom I had not even met, by telephoning one station every week. My purpose in doing this was to build up rapport with colleagues and decrease the feeling of isolation and discuss clinical issues and jobs due to the potential long duration between jobs to maintain confidence and knowledge. My station officer and were angry and disapproving of my initiative.

One of the other officers ("K") had some extenuating personal circumstances that required her family to move out of town for better family support and closer to medical treatment for a family member. Over an extended period of attempting to relocate closer to her husband and small children, I observed "K" to

- he belittled by the station officer in front of me and other members of the public for her attempts to leave town. I attempted to address the station officer about his treatment of "K" and he told me it was none of my business and she needed to sort herself and her situation out.
- he continually rejected for applications for compassionate transfers to stations closer to her family, while being told by management of the in they were doing everything they could to help her situation
- become increasingly depressed, loose confidence in her ability and experience after working with the station officer

After approximately six months, "K" left and it took her another two years to be an hours travelling time to her family's home. Once "K" left I noticed the station officer's aggression and belittling began to focus on me.

During my time in _____, I spoke to several other junior officers who experienced belittling comments from other staff and station officers regarding attempts at furthering studies as well as attempts to relocate. I would like to commend the efforts of the education unit in _____ namely the efforts of _____ who often went out of his way to ensure officers were feeling competent and confident in their skills. However, he was limited by the resources available to him in a great expanse of distance.

Soon after "K" left, my partner at the time told me he had been diagnosed with terminal cancer, and needed to go to Sydney for treatment. I wanted to be there for him, understandably during his treatment. I was concerned about the likelihood of getting a transfer due to "K's" experience and the high incidence of false applications for compassionate transfers that come out of the _____ region. My partner told me his doctor had sent a letter to the Area Director stating his condition after I gave him details.

I felt very fortunate that only three days later, my transfer was approved and I was rostered to a station in Sydney close to my partner's treatment hospital. Tragically, I soon discovered my partner had made the whole thing up and was left dumfounded as to how my application for compassionate transfer had been approved with no initial documentation or follow up, while "K's" genuine request fell on deaf ears. I felt indescribably embarrassed by my situation, both personally and through my employer's actions.

My ASNSW experience ended at _____ in the _____ Sector. My first day at this station was met with my station officer commenting as I reversed down the long driveway to the station "Oh you can reverse can you? Most female officers can't. They have to get out of the car and I have to reverse for them". Needless to say I was shocked by such a sexist, inappropriate comment, and informed my station officer it was part of my job description to be able to reverse a vehicle. This was the start of yet another extended period of harassment. My station officer almost hourly berated me with comments about my lack of skill compared to hers, other officers appointed to the station prior to me who weren't tough enough to cope with rural life, constant reference to the expected short duration of my position at the station - which I refuted with my intention to settle in the town.

There were too many incidents with my station officer to mention. My attempts to address her comments and complaints of me fell on deaf ears. I approached the area management who advised me "that's just who she is" and to accept it.

A period of time later, officers from another station who had been relieving at _____ informed me that the station officer had recording devices on the station computer, and had recorded telephone conversations made from the station telephone. Due to the nature of this allegation, I reported it to Professional Standards and Conduct Unit and sector management. I am unsure if the issue was ever resolved or investigated. I had a mediation session with my station officer after 2 years of inappropriate comments. There was some resolve of the situation, personalities taken into consideration.

I acknowledge, in particular the lack of support experienced by many station officers in rural areas, as well as the high turnover of staff which must wear away at their patience and enthusiasm.

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I also wish to make comment on the individuals who make up an organisation. There are productive and not so productive employees in all organisations. For the most part, my experience gained with ASNSW was filled with enthusiastic, well educated, self motivated, patient and persistent people who knew they had to work together to achieve a common goal. Those who did not meet these norms were usually disgruntled by management decisions counterproductive to their personal effort applied to ASNSW.

I have moved interstate to an ambulance service in a more dire state of low morale and lack of guidance than the one I left. I have tried to forget a lot of the individual details of the experiences mentioned. I'm sure there were more, that I can't recall. I really hope this Inquiry makes a difference for my hard working colleagues, and renews their enthusiasm to work together again for the greater good.

Recommendations

- Modern training facilities and equipment representative of the value placed on the lives of people in NSW. Without proper training and equipment, how can ambulance officers be expected to become world's best standard
- More vigilant support and education from management and psychological services to rural and remote ambulance officers. This will encourage officers, particularly junior officers, that they have not been forgotten and are more than just a "bum on a seat"
- Compassionate and appropriate granting of extenuating circumstance transfers supported by documentation between stations and areas. I feel there is an honest approach by ASNSW as to posting newly qualified officers to vacancies around the state. I am not sure if the transfer system and application process has progressed to a fair and equitable one.

I wish the Committee all the best in their endeavours, and thank you for your time.

Regards,