

**Submission
No 162**

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

Name: Ms Jodie Adams

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I have been with the Ambulance Service for going on sixteen years. I held the rank of District Officer for almost ten years. As a single parent in this role I have tried to provide the best service, to the community and to the staff. I feel that as a female I was unfairly treated in relation to getting offers of higher duties, carers responsibilities and furthermore after being off on post traumatic stress, my Divisional Manager Allan Loudfoot made life so hard for me that I reluctantly dropped rank. I put many offers to management prior to dropping rank and my service appeared to be of no value to senior management. I made this decision also after contacting Mike Willis explaining my intention, unless he could offer me assistance, and stop the intimidation that I was receiving from . I also contacted our equity officer. No offers were made.

I have never been subject to performance interventions, in fact was twice nominated for Australian of the year for work that I did within the Newcastle community. This was never recognised by the service. I am more than willing to go into details and have many a horror story about how staff have been treated.

Mr Loudfoot would always say that I was 'too soft' as a manager, he was not willing to accept it when I would warn him of how stressed our officers are. I even brought this to the attention of Mr Rochford earlier in 2008. I explained to him that the services debriefing was entirely inappropriate for the work that our officers do. He strongly disagreed and told me I 'was too passionate about the job'.

I have alerted many media units in our area about the high rate of suicide in the service, which is extraordinary considering the amount of staff we have in the state. I personally have had an officer attempt suicide because leave would not be granted and he was too emotional to just take sick leave. He did not want staff to know that he 'sick'. When I told senior management the the officer had threatened self harm, I was told 'he is responsible for his own actions'. Another officer told me that he 'had a case sheet written out and all that we had to do was write his name on it', after he had committed suicide. Thankfully I was able to help him, with the aid of his local doctor.

Other officers, due to their stress, either drink too much, have family breakups or simply resign. However these are good officers, who with proper help could have longevity in this career.

As I said I am more than willing to talk about what I have seen and welcome this inquiry.

Focus areas were the service need to improve and things that can be done are:

- Break down the culture of bullying and harassment
- Listen to the staff
- Be flexible with Long Service Leave to help retain staff also job share and part time
- must have 'roving'-full time psychologists to assist staff. These people must be trained in 'civilian combat', and be able to deal with the unthinkable things that officers come across
- managers must be made accountable for their actions, and be on contracts that will be terminated in the event of lack of performance

I am available to expand on any of this at any time