Supplementary Submission No 135a

INQUIRY INTO EMERGENCY SERVICES AGENCIES

Name: Name suppressed

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NSW Legislative Council

Portfolio Committee No. 4 - Legal Affairs

Inquiry into emergency services agencies

Submission in respect of Fire and Rescue New South Wales

FRNSW's handling of my grievance

Time to act and resolve

There were NSWFB and FRNSW policies and procedures in place to deal with workplace complaints which were intended to resolve disputes in a timely manner. A grievance capable of quick and simple resolution was allowed to fester and expand due to the reluctance of the Zone Commander to support action by (newer) Duty Commanders keen to restore harmony in the workplace.

Raising a minor complaint about the bias of a Station Officer was a threat to the chain of command. The Regulation effectively allows Officers to bully, abuse, intimidate and harass lower ranks under the guise of control and command; Officers must be respected by lower ranks, and obeyed without question. Pity help the firefighter who dares to challenge the decision of a higher rank.

Accuracy of FRNSW reports

The information within reports was selective in favour of FRNSW. Alternative scenarios were not examined. Supporting evidence was dismissed without investigation. Factual errors were repeated in future reports.

Reports within Workplace Standards Branch were poorly drafted, contained errors of fact and outcomes, and changed as they moved up the line dependent on the recipient. They emphasised opinions as fact and failed to examine all the available evidence which warranted investigation. There appears to have been little scrutiny of their content where critical analysis would have revealed valid alternatives to the 'official' line. The very objective for establishing that Branch appeared to be discarded whenever criticism of FRNSW arose. Rather than pursue the main point of allegations, there was emphasis given to correction of lesser issues where that correction could be shown as the Branch being on top of their game whilst avoiding embarrassment in exposing unpalatable truths.

Files within FRNSW have suffered from poor administrative practices; files often remain incomplete and missing important documents. Information can be held personally without the knowledge of the central system. Critical information is suppressed where unfavourable to FRNSW. It is difficult to access for analysis.

Applications under *Government Information (Public Access) Act* normally have a tumaround of six (6) weeks; disclosures are often incomplete with no or inadequate information why parts of the application are not addressed. The progressive extraction of information through GIPA is slow and time consuming.

Disclosures indicate that investigations by Workplace Standards were restricted to what was recorded on file; and what other selected information officers were prepared to advance. Reports changed as they progressed up the chain of command.

Failure to inform

From acknowledgement and response to correspondence, there is an obligation to keep employees informed of progress of matters. GIPA is always post-event. FRNSW failed repeatedly to keep me abreast of progress with grievances, reviews and investigations; or advise of resolutions, outcomes or proposed act ion.

In respect of medical treatment and assessment FRNSW were complicit with their insurers in denying access to medical reports and treatment; deferred and excessively withheld medical assessments; delayed authorisation for the payment of services; professed an obligation to ensure my wellbeing whilst actively seeking detrimental advice from unqualified practitioners.

...protocols and procedures in place to manage and resolve complaints of bullying and harassment within Fire & Rescue New South Wales

As a firefighter I was required to have knowledge of the policies within FRNSW directed to preventing and managing workplace bullying and resolving workplace complaints. I was required to maintain and refresh my knowledge of those policies and procedures consistent with upgrades and directions given by the Commissioner through In Orders and training.

Senior management requires all firefighters to have a full knowledge of FRNSW policies and procedures. I expected other firefighters to apply those policies and procedures fairly, respectfully and confidentially consistent with the Code of Conduct as they are required to do. I believed that every firefighter had the right to be treated without fear or favour irrespective of rank or position.

Supervisors and managers are required to be fully aware of their responsibilities and to competently address complaints by managing them impartially to produce fair and realistic outcomes. I did not expect a minor complaint capable of prompt resolution to be discussed openly with other staff and to be allowed to escalate beyond the local level by continued inaction.

Once escalated, the same principles of impartiality need to apply rather than prejudge the issue and predetermine the result to comply with the 'company line', or to match directions and expectations of Senior Officers for results contrary to the evidence.

Support services available to Fire & Rescue New South Wales employees to assist with mental health issues

There can be a readiness for FRNSW to place operational staff onto Workers Compensation leave to remove them from workplace stress. It is also a means of reducing interpersonal conflict at the workplace where that is the cause of the stress.

Once a claim is opened, the employee is subject to examination by the insurer. If accepted, the insurer is expected to act in the health interest of the employee. Human Resources staff are available to assist with health issues mainly directed to a return to work.

Inevitably extended leave requires psychological assessment of the employee. I found that the insurer deferred and denied treatment prescribed by my treating doctors. FRNSW appeared to be silent on the insurer's actions. FRNSW should have had a greater interest in my health and safety.

Case conferences are intended to settle any differences in progressing to a return to work. Case conferences involve the employee, treating doctors, FRNSW managers, Return to Work officers, and insurance company representatives and case workers. The members have competing agendas.

Some are keen to have the employee appropriately treated and possibly return to work. The insurer is keen to close the claim and restrict its costs.

The insurer repeatedly denied me access to medical reports to which I was entitled; impeded ongoing treatments; and found excuses to avoid payments for authorised treatment. I had a battle to maintain my treatments, further impacting on my mental wellbeing.

Additionally, the insurer required numerous assessments of my mental health by practitioners of doubtful reputation and remotely located. I experienced the full range of 'doctor shopping'. Their reports were held from me. FRNSW seemed uninterested in forcing release to me.

Overall the process produces an avalanche of forms and returns prioritised by junior clerks, and it can be an unreasonable demand to keep abreast of it. It can be a stress stimulant during difficult periods. The process overwhelms rather than assists.

When FRNSW made employment-related decisions on my grievances and requests for reviews, the documents offered contacts for counselling services at the same time as I was being restricted from the correct treatment. This was a further stress factor.

Whereas I found individual Human Resources and Health Services officers sympathetic and helpful, they appeared to be constrained by Operational demands. Uniformed officers appeared to dominate decision making when medical considerations should have been the primary concern.

The listing of support services available to FRNSW employees suffering stress and hardship is promoted as an expression of care for the welfare of its employees. It is seen by many as a disclaimer merely to cover FRNSW's obligations of duty of care should those offered services be avoided by employees. I did not avail myself of those services. I did not see those services as capable of providing care and support when the agency offering them was the same agency attacking my wellbeing and whose officers doubted my word and preferred erroneous and conflicting advice.