Inquiry into Mental Health

Introduction –

It is widely recognised through anecdotal evidence and multiple research projects, that there are current serving and former police officers who are nursing debilitating psychological injuries incurred in the line of duty. Apart from the significant pain of the illness itself, there is the isolation and stigma which often accompanies diagnosis.

Depression, anxiety and PTSD are the “popular” mental health issues - but there are many other conditions that fall within the category of mental health. While some psychological injuries are the result of one or more traumatic episodes, often the illness is incremental and can have deleterious impacts upon not only the officer but also upon the officer’s family.
Research on the social and emotional well-being of police officers conducted in the UK, Canada and now Australia, indicates that a combination of not only police work, but also organisational and managerial cultures in which policing is carried out contributes to psychological injury.

Observed in similar policing jurisdictions overseas as well as in Australia, stresses within the police workplace include:

- consistent exposure to trauma;
- inadequate staffing levels and a lack of resources;
- police are the last agency of resort (e.g., transport of prisoners and guarding and transport of mental health patients);
- hypervigilance;
- fear of reporting mental health injuries to the system;
- bureaucratic management styles;
- perceived lack of leadership;
- perceived lack of support from politicians and senior management;
- perceived unfair decision-making by managers;
- bureaucratic complaint management processes;
- multiple layers of oversight bodies;
- various inquiry bodies, including coronial inquiries;
- perceived insensitivity to personal distress;
- ever increasing workload;
- pressure to achieve fast response times;
- pressure on clear up rates;
- changing nature of crime;
- organised crime;
- terrorism;
- cybercrime;
- often unreal community expectations and demands;
- police try to be all things to all people and it’s not possible;
• intense public criticism post event;
• media/social media;
• police on camera all the time;
• instant information, whether it’s factual or not;
• constant news cycle;
• priorities constantly shifting and dictated by ‘flavor of the month’ issues;
• massive changes in the way police do their work but the judicial system slow to keep pace;
• economic factors within the workplace;
• budget constraints; and
• shift work.

All the issues listed above have been found to have an impact on members’ mental health and wellbeing.

Policing is historically seen as a male-dominated culture that encourages brute endurance and denial of mental trauma, leading to a fear amongst police that acknowledging distress will result in damage to their careers. This has been reaffirmed within the findings of numerous reviews into police mental health and wellbeing, that also cite that officers reported an inability to recognise the symptoms of mental trauma as another factor. The issue of early intervention and destigmatising mental health amongst police is one of our biggest challenges.

**Beyond Blue Answering the call national survey** –

The recent Beyond Blue Answering the call national survey, National Mental Health and Wellbeing Study of Police and Emergency Services Final Report (2018) supported all of the observations raised above.

The Report (2018) found that employees in the police and emergency services sector had substantially higher rates of psychological distress and probable PTSD, compared to the
Australian population and workers in other industries, including the Australian Defence Force, with police highest amongst all the emergency services.

A synopsis of the survey report shows that –

- One in three employees in the emergency services sector experience high or very high psychological distress; much higher than the national average;
- More than one in 2.5 employees in the emergency services sector report having been diagnosed with a mental health condition in their life compared to one in five of all adults in Australia;
- They report having suicidal thoughts over two times higher than adults in the general population and are three times more likely to have a suicide plan;
- More than half of all employees indicated that they had experienced a traumatic event that had deeply affected them during the course of their work;
- Poor workplace practices and culture were found to be as damaging to mental health as occupational trauma;
- Those who had worked more than 10 years were almost twice as likely to experience psychological distress and were six times more likely to experience symptoms of PTSD;
- Three in four found that their current workers compensation process to be detrimental to their recovery; and
- One in four surveyed former employees experienced probable PTSD (compared to one in 10 current employees) and one in five experienced very high psychological distress.

The above paints a very distressing picture of the state of mental health and wellbeing of Australia’s police and other emergency services personnel.
**Australia’s police** -

The Police Federation of Australia (PFA) represents the professional and industrial interests of Australia’s more than 63,000 police. It is the only entity that can legitimately speak on behalf of police officers from a national perspective, hence its title as the ‘National Voice of Policing’.

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<th>PFA Membership Numbers as at 31 December 2018</th>
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Policing predominantly falls under state authority and whilst there are various entities that have a national focus on policing/law enforcement/national security, the responsibility for the mental health of police officers has traditionally rested with police agencies and their respective governments.

The Victoria Police Mental Health Review, 2016 (*The Review*)\(^1\) found that low rates of help seeking and access to a variety of supports outside the organisation means it is difficult to obtain an accurate assessment of psychological needs. It was noted that with improved awareness of mental health and reduction of stigma, help seeking, and reporting of mental health is likely to increase.

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The Review also found there is a need for more specialised care for certain mental health conditions such as Post Traumatic Stress Disorder (PTSD). Service gaps have been identified where police are unable to access appropriate care in a timely manner which is a serious risk and frustration for members. There was a stated objective in the Review of the establishment of an external network of specialist mental health providers.

The findings of these studies are indicative of the challenges faced by police and emergency service organisations nationally. Historically, effective strategies implemented in a single jurisdiction have been able to be amended and tailored to associate agencies to achieve successful outcomes.

It is acknowledged that across all police agencies, resources have been committed to ensure that members feel confident that they have effective treatment options available to address the presenting condition.

It is not the intention of this submission to summarise the key findings of the numerous reports/reviews that have been conducted across the various police jurisdictions into mental health and member well-being issues, nor will it be offering an evaluation of the various initiatives currently being undertaken across the various policing jurisdictions.

With this in mind, we will endeavour to identify issues that we believe will have a significant positive impact, not only on our sector, but also the wider community.

While the issues identified in the Productivity Commissions’ Issues paper are complex, multi-layered and more focussed on a community wide response to mental health issues, the PFA welcomes its interest in such an important issue, that significantly impacts on Australia’s police.

Our submission, whilst it will pick up on a range of matters identified within the Commissions’ paper, will have a specific focus on police and other first responders and argue why we believe your Report should not only shine a spotlight on issues within the
wider community, but also on policing and other emergency services. This is because of the significant interaction police have with the wider community, both as support services for people suffering from mental illnesses, but also because of the increased propensity of our members to be sufferers themselves.

**Senate Education and Employment Committee’s Inquiry into the role of Commonwealth, state and territory Governments in addressing the high rates of mental health conditions experienced by first responders, emergency service workers and volunteers –**

The PFA, on behalf of its state, territory and federal branches, made a submission and appeared before the above inquiry in 2018. Amongst our proposals to that committee, we recommended the use of COAG to provide a national holistic approach to the issue of the mental wellbeing of first responders.

We argued that one of the key issues confronting police and other first responders from accessing and obtaining urgent treatment, was the adversarial workers compensation arrangements.

We proposed the reversing of the onus of proof in such matters, by the introduction of presumptive legislation and/or the provisional acceptance of claims, so that the employer/insurer must show that that the mental health injury was not caused by work. We argued that this would reduce the stress and anxiety already felt by emergency services workers and enable earlier treatment so they make a speedier recovery and return to work sooner. The harmonising of such legislation across every jurisdiction, using COAG as the conduit, was one of our key recommendations.

It was pleasing to note that the Committee in its final report in February 2019, recommended the establishment of a national stakeholder working group, reporting to the COAG Council of Attorneys General to investigate the benefits of a coordinated national approach to presumptive legislation covering PTSD and other psychological injuries in first responders.
Both within our submission to the Senate inquiry and other submissions and reports to various inquiries and committees, we have raised a number of other issues that we argue are pertinent to the Commission’s current Inquiry. These include –

**Police oath of office**

Police officers swear an oath of office. That oath makes them very different from other government workers. This oath of office, while giving police enormous powers, also places upon them great responsibility.

The oath of office obliges the officer to place him or herself into situations of physical or psychological danger where it is necessary to keep the peace or to protect the lives and property of members of the public. A police officer’s obligation to the law places everything else in a secondary position.

The oath obliges the officer to be on duty effectively twenty-four hours a day, seven days a week making the officer obliged to intervene in any situation where they perceive an offence is being committed, regardless of whether they are on rostered duty. His/her office is one that is independently exercised and subject to no one’s direction. Even though the powers of the constable are significant (including the power to take both liberty and life), the consequent obligations are heavy and under constant oversight. These obligations flow also to the officer’s private life. Officers may lose their employment and their career for behaviour that in all other occupations would be considered private. In many ways, the police officer “sells” more than just his or her labour when taking the oath of office.

**Police workers compensation**

The Beyond Blue report identified that three in four first responders found the current workers compensation process to be detrimental to their recovery.

Our own research indicates that one of the biggest issues faced by police is the adversarial worker’s compensation process; with the arduous and unhelpful process of making a claim, often standing in the way of many members getting quick access to effective treatment.
Recommending the establishment of a national stakeholder working group, reporting to the COAG Council of Attorneys General to investigate the benefits of a coordinated national approach to presumptive legislation covering PTSD and other psychological injuries in first responders as we have done to the Senate Inquiry, is a very positive step.


Research shows that people who seek compensation for PTSD are more likely to have a poorer prognosis, more severe symptoms and longer recovery time than those who haven’t sought compensation [https://www.ptsd.va.gov/professional/newsletters/research-quarterly/V18N4.pdf](https://www.ptsd.va.gov/professional/newsletters/research-quarterly/V18N4.pdf)

According to findings, there are plausible reasons for this pattern including:

- people seeking compensation are doing so because their psychological injury is more severe; and
- the claims process is prolonged, triggers further stress and exacerbates symptoms or otherwise hinders recovery.

Issues brought to the PFA’s attention during the compilation of our Senate Inquiry submission into the mental health of our first responders, impacting on members seeking support during the processing of claims include:

- the process involved in many workers compensation claims have actively prevented members from returning to good health;
• have prevented members from returning to work; and
• when member have returned to work, often times treatment is taken away thus making it difficult for members to remain at work.

It has also been suggested that in some jurisdictions, key performance indicators had been imposed on those agents tasked with processing claims, as well as performance-based bonuses to agents.

In respect of presumptive legislation, we suggested that the recognition of PTSD as an occupational illness for Emergency Services Workers would:

• Recognise the value and risks associated with the work performed by emergency Services Workers;
• Acknowledge the psychological toll that repeated exposure to trauma has on our Emergency Services Workers;
• Remove barriers to obtaining treatment by providing our Emergency Services Workers suffering PTSD with fair access to worker’s compensation benefits by reversing the onus of proof so that the employer must show that PTSD was not caused by work; and
• Remove the adversarial approach to PTSD claims that will reduce the stress and anxiety already felt by emergency Services Workers and enable earlier treatment so they make a speedier recovery and return to work sooner.

The Canadian Police Association, together with their local and provincial police associations have effectively lobbied some provinces for presumptive legislation to reverse the burden of proof for those who have been diagnosed with PTSD. Victoria and Tasmania have also gone down this path and have presumptive legislation.

We argue that the provisional acceptance of claims could be introduced in tandem with presumptive legislation. Such a move would go a long way to reducing the trauma on
officers during the difficult process of making a workers’ compensation claim for psychological injury.

Provisional acceptance of claims would allow police to access services immediately following an incident and maintain that support throughout any subsequent proceedings.

This would take some of the immediate stress away from the injured worker and their family by ensuring that the insurer commences the immediate payment of any claim, including medical expenses, but also protects the insurer by allowing them not to admit liability at this early stage.

Accepting provisional liability allows the insurer time to make a more informed decision on liability and at the same time allows the injured worker to provide more information/evidence that might be required, whilst being paid the provisional claim.

**The creation of a dedicated national independent service provider network**

In the April 2019 Budget announcement, the ‘BlueHub’ support network was announced by the Government with a $2.5 million grant to the PFA to work with the Police Association Victoria (TPA) and the Australian Federal Police Association (AFPA) to develop a ‘BlueHub’ support network. This network would be a dedicated independent service provider network, which would provide clear pathways for those seeking assistance, with an emphasis on early intervention, accurate diagnosis and treatment, as earlier mentioned in the Victoria Police Mental Health Review.

The funding will establish a centre of excellence to be complemented by satellite support services provided and funded by each state and territory: creating a national framework to provide the right, evidence-based services to the people who serve our community in high stress environments.

Given the geographical coverage required to meet the needs of our members, a national approach and funding is the best option. Such a service will ultimately be available in every
jurisdiction to allow for specialist psychiatric and alternative therapy services, including when members are acutely psychiatrically unwell or potentially suicidal.

The ‘BlueHub’ initiative will focus on the delivery of evidence-based treatments to members, in a timely manner that is both cost effective and has a strong clinical governance.

The concept has been developed as acknowledgement that there is a current service delivery gap nationally where members present for treatment that is outside of the internally provided agency based psychological services or employee assistance programs. Members are reluctant to engage with the public health system due in part to the delays in accessing accurate and reliable treatment options in a timely manner and the stigma around being forced to use the same facilities as members of the public that they may interact with in a professional capacity. Significantly, of the members accessing PTSD treatments through the workers compensation system in Victoria, only 25% are receiving the recommended evidence-based treatment.

The current model of treatment seeking in most jurisdictions is heavily reliant on internal service provision and the use of Employee Assistance Programs (EAP), which have been identified as having significant shortcomings.

The ‘BlueHub’ concept will create a centralized Hub with satellite sites operating, initially in Victoria and the ACT, and ultimately nationwide. The key ‘BlueHub’ facility would provide a best-practice clinical assessment framework at a dedicated site for police officers. The facility would provide a research, training and development component as a resource for practitioners in satellite locations. A quality assurance framework will be developed to ensure that all mental health practitioners aligned to the ‘BlueHub’ program, receive the appropriate training and support to provide evidence-based treatment to members. This oversight role performed by the ‘BlueHub’ concept addresses several key issues raised in various organizational reviews.
Once established, ‘BlueHub’ services may be able to be made available to retired and former emergency service workers at a national level. By maintaining a central management oversight structure, clinical standards can be maintained, continuous improvement strategies can be implemented, and research opportunities can be identified and explored.

**The benefits of flexible working arrangements for work life balance**

In 2017, the PFA conducted a Flexible Work Arrangements (FWA) survey across Australia and New Zealand, which was undertaken by 11,418 police officers, 16.5% of the two countries total police workforces.

Outcomes of that survey indicate that the benefits of FWAs are significant and access to them is appreciated by officers and their families. At that time there was a reported 5,530 police officers working FWAs, equating to 9% of the two countries surveyed, police workforce.

Evidence from the survey suggests that FWAs can mitigate many of the work stress factors affecting police officers. Almost all measures of job satisfaction collected show better outcomes for those working FWAs than for regular full-timers. Qualitative data strongly suggests that FWAs allow retention of staff who would otherwise leave the police force, and that for many respondents their commitment to a policing career is increased as a result.

**Stress and work life balance –**

Data for those on FWAs was compared to aggregated data for all police.

There were few differences in the proportions of police on FWAs taking time off for illness and all police taking time off for illness. However, a significantly smaller percentage of police on FWAs took time off for both injury and stress, compared with the percentage of the total police population taking time off.
Rates of absenteeism in general were very high - more than a third of police had at least a day off due to illness in the preceding month, and over a fifth had at least a day off due to stress. These patterns support comments made by many police about high levels of sick leave and stress leave and the negative impact this has on rostering generally. The results are consistent with a minimum of around 10 days off a year per officer on stress leave – about three times the national average.

The generally lower rates of time off for stress for those on FWAs is an important finding. Factors that may possibly contribute are: the overall younger age of those working FWAs, the fact that their rosters allow them more down time to recover from work stress, and the duty types which are undertaken by those on FWAs.

Further research however is needed to clarify this result, and to investigate linkages between roster and duty types and stress.2

The most frequently identified factor in workplace stress, by nearly 50 percent of police, is lack of support from management, which has been strongly supported in the Beyond Blue Answering the call national survey outcome. Workload and resourcing issues are rated as significant factors by about 40 percent of police. Across the board, those on FWAs rate these factors as less important than other police, which suggests that being on a FWA can mitigate many elements of work-related stress.

Only two factors were identified as being more significant by those on FWAs than by all police. High self-expectations are the most frequently identified factor by those working FWAs. Based on themes from the qualitative data, we suggest that this pattern may relate to the fact that those on FWAs feel they need to try harder, perform better, and achieve more in their role than other officers.

Other officers also experience high self-expectations as stressful, to a significant degree, but it is not the main factor they identify. Attitudes of fellow officers makes the least

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contribution to stress for all police officers, at 15 percent, but for those on FWAs it is slightly more important.\textsuperscript{3}

Another important finding in the study was that more than half all police officers agree that police officers will be more satisfied if greater flexibility is introduced in their workplaces, leading to better policing outcomes.\textsuperscript{4}

\textit{Burnout, fatigue, and transitioning to retirement –}

Respondents also talked about stress, burnout and increasing fatigue at work, often saying how many years they have done shift work and commenting on the toll taken on their health and family life. Specifically, some are still doing frontline roles as they come into their fifties and feel the long-term consequences of this.

Transition to retirement is an uncommon reason for FWAs at present, with less than two percent of the total number of current FWAs for this reason, and most of these are for males over 50. However, around 13 percent of future requests for FWAs are likely to relate to transition to retirement.

Over 750 requests for transition to retirement FWAs from male police officers aged over 50 are projected, based on survey responses, with very few requests coming from women. Although very small in number, the data suggests that requests from women aged over 50 for FWAs due to transition to retirement could also increase as a proportion of all requests from women officers in the over 50 age bracket over the next five years\textsuperscript{5}.

\begin{itemize}
\item \textsuperscript{3} Cole, M and Sanderson, C. Flexible Working Arrangements for Police in Australia and New Zealand Summary Report Nov 2017 pg 26
\item \textsuperscript{4} Cole, M and Sanderson, C. Flexible Working Arrangements for Police in Australia and New Zealand Summary Report Nov 2017 pg 71
\item \textsuperscript{5} Cole, M and Sanderson, C. Flexible Working Arrangements for Police in Australia and New Zealand Summary Report Nov 2017 pg 94
\end{itemize}
Long commutes are also mentioned by some respondents as impacting upon work life balance. The 2016 census data reveals that in NSW 17% of all police service staff travel 50klm and over to work. In Victoria that is 10% and Queensland 7%. This is particularly an issue for those members working in major metropolitan centres.

**Equipt app**

The ‘equipt’ app [https://appadvice.com/app/equipt/1150185029](https://appadvice.com/app/equipt/1150185029) was officially launched in September 2016 and has been downloaded over 15,000 times through the App Store and Google Play to date.

Developed by the Police Association Victoria (TPAV) in conjunction with Victoria Police, with specialist input from Phoenix Australia - Centre for Post Traumatic Mental Health, the app is designed for current and former sworn officers, police employees and their families and provides tools that can help users strengthen their physical and mental wellbeing and manage their mood and mindset to help control stress levels. Meanwhile Apple is working with the developers to continually enhance the functionality and experience that can be offered on iOS devices.

The _equipt_ app has been successfully adapted to every police jurisdiction in Australia and New Zealand, with each jurisdiction having their own personalised look and feel with support services listed as relevant to their user-base.

Version 3.0 of equipt introduces a rostering and sleep hygiene function where members can enter their rostered shifts in advance, and then receive notifications around ideal sleep, caffeine and light exposures relating to their rostered shifts. This functionality is an important step towards mitigating the lifestyle harm experienced by shift workers, as identified in various published research findings.

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The next update of *equipt*, V4.0, will include an upgrade to the GPS rostering with the addition of an improved manual entry function, to ensure rosters can be entered ahead of time and relevant notifications are prompted through geolocation at each rostered shift commencement time. The need for this was identified through user feedback. The following update, *equipt* V5.0 will comprise a transition of the Hybrid version that Android users still operate on, to a native Android platform to provide the same functionality as Apple users currently experience. These upgrades are both expected to be completed in 2019.

The app has now also drawn interest from the international police community with the *equipt* project team making a presentation to the International Council of Police Representative Associations* (ICPRA) biennial conference in September 2018 in Canberra.

As a result, Canada is now introducing the app and Scotland is likewise evaluating its introduction into that country.

**National Awareness Campaign on Police Officer Mental Wellbeing**

In 2017, the PFA secured a $1 million-dollar grant from the Proceeds of Crime Account (POCA) (Section 298) to fund a National Awareness Campaign on Police Officer Mental Wellbeing.

Two key elements of the campaign, a song *Graduation Day*, by acclaimed Australian recording artist John Schumann and a telemovie *Dark Blue*, are due for release in early April and May 2019, respectively.

The major thrust of the campaign is to break down the stigma attached to emotional illness and for officers to feel comfortable to say that they are doing it tough. The PFA hopes this campaign will be the beginning of educational and support activities funded by the federal government, with scope to include a web portal for members to access vital help and information in the future, dependent on federal government support.

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7 ICPRA is the international network of police unions has in excess of 1.5 million members affiliated through national police associations and federations with unions from four continents speaking over 30 languages.
The broad outcomes of the multifaceted and integrated program are anticipated to include:

- Increased awareness of social and emotional well-being/mental health issues - including, but not limited to, psychological injuries incurred by members;
- An established and accepted connection between social and emotional well-being/mental health issues and personal and professional safety;
- Development and implementation of strategies to help preserve members’ social and emotional well-being/mental health;
- Development of culturally relevant and accessible collateral, materials, avenues and pathways to information and help with regard to social and emotional well-being/mental health;
- Encourage early help seeking; and
- Point to pathways for help.

Research to inform the campaign, including the tele movie, has included interviewing officers across the country; which has proven that police, regardless of the jurisdiction in which they work, are subject to the same stresses, which can have the same detrimental impact upon their mental and emotional well-being no matter which part of the country they are from.

As the two key elements of Phase I of the POCA funding are about to be rolled out, the Government has announced a further $750,000 in funding to the National Police Memorial Co. (NPM), supported by the PFA to build on the success of Phase I and to continue to educate and build resilience in state, territory and federal police officers in areas of social, emotional and psychological health.

There are numerous activities currently being undertaken by state governments, state and territory police departments, police associations/unions and the Police Federation of Australia – all seeking to advance the mental health and social/emotional well-being of police officers.
Outside the police arena, there is also a range of external agencies and other bodies, national and international, addressing the mental health and well-being of police and other first responders. These activities include but are not limited to mental health and well-being programs, the production of educational/promotional collateral, data collection and analysis and academic research.

Notwithstanding all the good work being done, there is a clear lack of coordination regarding these efforts. Over and above this lack of coordination, much of the work lacks cultural context and a robust sense of reality. This is understandable given the nature and the sensitivities of bureaucratic/management structures.

Ultimately, however, the PFA and the NPM are seeking to prosecute a major cultural shift and it is the NPM Co and the PFA and its branches which, unhampered by politics and departmental sensitivities, can engage in truthful, fact-based dialogue with the members and their families.

By using the PFA and NPM, it also gives officers some comfort that their interactions “online” will not be available to their respective police departments. This has often been raised as a reason some members do not seek assistance – it is the fear of what it might mean to their careers.

Both the NPM and the PFA are seen as independent enablers.

As earlier indicated, Phase II funding it designed to build upon the work and the collateral developed during POCA Phase I.

It is envisaged that POCA Phase II would continue to educate and build resilience in police officers in the areas of social, emotional and psychological health associated with policing as well as outlining how to recognise early warning signs and identify the services available to support them. The continued aim of the project is to promote early intervention so that
officers can return to work as soon as practicable to support their role of preventing crime and implementing law enforcement measures.

By achieving that aim we will also destigmatise the issue of mental health amongst police and encourage early help seeking.

The Phase II project will be specifically focussed on the delivery of –

- Self-help strategies;
- Pathways to help;
- Self-help/interactive capabilities; and
- Family engagement.

We will do this by the provision of a web portal as a central repository/one-stop shop to provide guidance, advice and resources for police in need of mental-health/psychological support. This central repository would be a permanent/ongoing platform – the definitive source for effective, culturally contextual resources as well as specialist advice for first responders, their families and colleagues.

By utilising the NPM we are potentially able to expand these services to former police and perhaps the wider first responder/emergency services community.

**Police Blue Card similar to the Department of Veteran Affairs, Veteran Health Card**

Giving police access to a card similar to the Veteran’s Health Cards is often raised within policing. We have raised this issue in a recent submission to all major political parties calling for the introduction of a ‘Blue Card’ for police.

We believe the ‘BlueHub’ concept reported on above has a strong synergy to the ‘Blue Card’ proposal.
Unlike defence force personnel, retired police officers who are suffering from ill health and who have moved jurisdictions post retirement, struggle to access worker’s compensation funded treatment due to not being located in their home jurisdiction. The Veteran’s Health Cards, currently issued through the Department of Veteran’s Affairs (DVA), makes card holders eligible for treatment and care at DVA expense, regardless of where they are.

Calls for the card to be extended to officers who have served on overseas missions, particularly alongside defense force personnel, has been a long-standing request to government by the PFA. However, with the greater focus on police officer mental health and well-being, now would be a good time to introduce such an arrangement on a national basis for all police.

The benefits of such a card for police should correspond to those available to defence force veterans and include the different levels of support available through various levels, including medical and allied services.

Often there are fewer services available for former officers. Such a card, and the benefits attached, would complement and expand on any support that is currently available to former police officers. It would also ensure that there were no gaps in services provided for their mental health needs.

Coronial and other inquiries

A further issue raised in our Senate submission related to police involvement in coronial and other forms of inquiry.

We used the coronial inquiry into the Lindt Café siege in December 2014 as a clear example of how police can become the focus of such an inquiry when all they have done is placed their lives in jeopardy to try to save innocent victims.

That coronial inquiry commenced some 18 months after the incident and gained both national and international scrutiny.
Instead of just scrutinizing their actions on the day, police officers were subjected to what can only be described as a media circus. Instead of a sober inquisitorial process it descended into an adversarial attack and instead of a search for the truth it became a taxpayer funded lawyers frolic, cross-examining police officers as if they were on trial.

For some lawyers, the focus appeared to be not just to attribute blame but moral culpability, twisting words to belittle experienced officers. Is it any wonder that many officers involved in that incident have suffered significant welfare issues post this inquiry?

The Lindt Café coronial inquiry was the exception rather than the norm, however, since that inquiry, we have witnessed inquiries in other states that appear also to have had little concern for the welfare of police appearing before them. In doing so, they have caused major stress for officers involved and their families even when it was evident that none of the officers had acted inappropriately.

In the “Review of the investigative process following a death associated with police contact” by Michael Strong, then Director, Police Integrity, to the Victorian Government, a number of principles that underpin the optimal framework for such a process were recommended.

The report recognised that any death associated with police contact is a tragedy, not only for the family and friends of the deceased, but also for the police involved.

The Review established several working groups, one of which was – “Improving Current Processes”.

Under the heading “Next of Kin Involvement” it states, “The group will focus on improving the experience and treatment of affected parties in the investigative process, and access to welfare and legal representation. While it is recognised that police involved in police related deaths are affected by these incidents, the focus of this group will be on the family (and network) of the deceased”.


Whilst the report mentions the welfare of police, it is critical of police leaders who might demonstrate some public support for the welfare of police involved in such deaths as it could be perceived to pre-empt the outcome of any investigation and invite the perception of bias.

And, on 15 June 2018, almost 14 years after the Palm Island riot and subsequent coronial inquiry, the Federal Court handed down its decision regarding the outstanding matter of a court ordered apology by police. One only wonders what has been the impact on the emotional well-being of the police involved in the events on Palm Island, due to the delay of the inquiry, bearing in mind no police were convicted of any criminal offences in relation to the matter?

As a result, we made a number of recommendations underpinning principles that should apply to future coronial inquiries, particularly as they relate to counter terrorism incidents. They are -

- the inquiry should commence as soon as practicable after the incident so that lessons can be learnt while they are still relevant, bearing in mind the changing nature of counter terrorism incidents;
- the inquiry should be dispassionate and not force members to reveal operational methodologies publicly;
- that there should be a presumption of the suppression of details of police involved in the incident;
- that such inquiries be inquisitorial and not adversarial; and
- that the cross examination of witnesses should be focused on finding the facts not looking for concessions or who is at fault.

**Complaints handling**

Another factor that causes significant stress to police is the time it takes to resolve complaints against them.
A number of jurisdictions have recently reviewed or amended their complaints handling mechanisms, including most recently in SA, NSW and Queensland. There is also currently a Parliamentary Inquiry into the Independent Broad-Based Anti-Corruption Commission (IBAC) in Victoria.

To assist in alleviating the stress on police caused by complaints against them is to ensure the timely completion of such investigation and the issue of the suspension of police without pay whilst investigations are taking place, should be the last resort and only used after the conviction of an officer for what would be a dismissal type offence.

**Police superannuation**

The Beyond Blue Report also identified that those first responders who had worked more than 10 years, in that space, were almost twice as likely to experience psychological distress and were six times more likely to experience symptoms of PTSD.

This is one of the reasons why the PFA has long been lobbying for the recognition of the special needs of long serving police by legislating a preservation age that allows for officers, who have dedicated their working life to community service, to be able to retire with dignity.

Continuing to raise the preservation age for access to superannuation (up from age 55 to 60, and potentially beyond) will come with major consequences for both the public’s and police safety. The danger in forcing officers to remain on the front line past 60, is obvious.

The PFA is firmly of the view that a federal government must:

- Recognise the special needs of police officers; and
- Legislate a preservation age which allows police – after dedicating their working lives to community service – to retire with dignity.
In the lead up to the 2019 federal election the PFA has written to all political parties highlighting the complex range of mental health risks that police officers face after a career of community service. The physical and psychological rigours of operational policing are widely known and accepted, and non-operational positions, which police officers might once have moved into in their senior years, are now considerably few – in light of the civilianization and outsourcing of non-core functions.

The PFA argues that a federal government must also support schemes which guarantee police a solid level of accrued superannuation benefits by the time they retire and timely access to those benefits.

Clearly, superannuation laws apply a community-wide standard preservation age, which arose in 1993. The *Superannuation Industry (Supervision) Act 1993*, however, includes the power to exempt specified categories of people in order to provide a more flexible retirement regime.

The legislation therefore acknowledged at the time, that a one-size-fits-all approach was not necessarily suitable for the entire workforce.

The modern workplace provides flexibility for employees to retire at an age beyond 60 or 65 and to exit and re-enter the workforce according to their own circumstances.

The PFA supports this flexibility for later retirement but insists that earlier retirement option for police should also be part of any flexible arrangement.

**Other issues relevant to the Issues paper**

A perusal of the Commission’s Issues Paper raised several issues that we believe are specifically relevant to policing. They include –

*Stigma and discrimination*
As was outlined in the introduction to this submission, policing is historically a male-dominated culture that as a result, leads to a fear amongst police that acknowledging distress will result in damage to their careers.

In the POCA program, detailed earlier, the key messages that have been developed are about early intervention and destigmatizing mental health. These are policing’s two biggest challenges in this space.

**Productivity**

The Issues Paper identifies that the Inquiry is seeking to examine the effect of supporting mental health on economic and social participation, productivity and the Australian economy.

Community mental health issues not only have a significant impact on the Australian economy and its productivity, but also on policing budgets.

There is little argument that policing services are one of the only services readily available on a 24/7 basis. As such, in the case of dealing with people suffering from mental health issues, police are often the first responders and then find themselves transporting and/or guarding such persons in hospitals or other facilities.

All police jurisdictions have developed MOU’s between police and health departments in an endeavour to overcome such issues, however responses to mental health patients is an increasing demand on police resources.

As a result, most states have developed initiatives to alleviate the problems. A short synopsis by jurisdiction follows:

**Victoria** –

Dealing with mentally ill patients causes resourcing problems for Victoria Police – there are times when multiple police units are tied up waiting at hospitals. Issues also arise when
hospitals release patients soon after being admitted, resulting in repeated police attendance. The situation is expected to improve with the implementation of six mental health hubs across the state.

Northern Territory –

Police still do most of the mental health transports or assist the Ambulance in the transport and are often held at the hospital for considerable periods of time, despite the agreements and protocols.

New South Wales –

Police still spend considerable time conveying mentally ill people in the country to hospitals capable of taking them.

NSW has an agreement whereby hospital security should take over the security of mentally ill patients when they arrive at a designated hospital, although police generally stay where a patient is violent until they are sedated.

An MOU with Ambulance services exist re conveying patients in ambulances not police vehicles whenever possible.

Western Australia –

There is a current trial of Mental Health Co-Response (MHCR) teams which was introduced in January 2016.

It is a collaborative approach between WA Police, the Mental Health Commission and the Department of Health. Teams are being trialled over 2 years and evaluated to determine their value and effectiveness in responding to mental health related calls to police for assistance, and intervention within policing environment.
South Australia –

South Australia Police (SAPOL) is a signatory to the 2010 Mental Health & Emergency Services Memorandum of Understanding (Mental Health MOU) signed by:

- SA ambulance
- Royal Flying Doctor Service
- SA Health
- SAPOL

In October 2018 the state government appointed the Hon Kevin Duggan AM QC to review all aspects of police work with a view to streamline operations and reduce red tape. Part of this review includes an evaluation of police officers performing guard duties in hospitals. The Review is not yet complete.

AFP ACT, Queensland and Tasmania Police all have MOU’s with their respective health departments re the transport and guarding of mental health patients.

*Mental Health promotion, prevention & early intervention*

As earlier reported, the PFA and its branches have embarked on a campaign to raise awareness amongst members of the importance of self-awareness of mental health issues and the importance of early intervention.

Phase II of that program, which was signed off by the government on 1 April will specifically focus on the delivery of –

- Self-help strategies;
- Pathways to help;
- Self-help/interactive capabilities; and
- Family engagement
We will not change police attitudes to such an important issue of their mental health and wellbeing, unless we change the culture and acceptance of such injuries.

**Conclusion:**

We trust that the foregoing has given the Commission an understanding of the complexities confronting police of the issue mental health and wellbeing in the Australian community, including the police community.

Not only do police officers have to deal with sufferers across the community, they do so in the knowledge that their profession is one of the most affected by the virtue of their work. So, on the one hand police officers are respectfully dealing with sufferers, while potentially being a sufferer themselves.

Whilst we understand that the Commission seeks to deal with broader community issues, we suggest that attention needs to be given to those who deal with patients with mental illness, and who may suffer from the same afflictions. It is clear from all the evidence, that this cohort included a large number of police.

Sincerely yours

Scott Weber
Chief Executive Officer