23 January 2020

Productivity Commission
GPO Box 1428,
CANBERRA CITY ACT 2601

Response to Productivity Commission’s Inquiry into Mental Health - Draft Report

The Police Federation of Australia (PFA), representing the professional and industrial interests of in excess of 63,000 police officers across every policing jurisdiction, made a submission in April 2019 to this Inquiry and appreciates the opportunity to make this follow up submission to the Draft Report.

The Commission will note that in our April submission, we focussed on the mental health of police officers and the difficult and dangerous profession, both physical and psychological, of policing. We continue to reinforce the importance of the mental health and wellbeing of police and other emergency services workers however, we note, that the Draft Report has a significantly broader focus, which we support, looking at the issue from the perspective of the wider general public. The Draft Report however, has a specific emphasis on mental health sufferers, interaction with the justice system (Chapter 16), obviously of which, police are a major part.

In particular we note Draft Finding 16.2 – Police Responses Rely on Community Mental Health Services and Draft Recommendation 16.1 – Support for Police.
We pointed out in our May submission, under the heading of ‘Productivity’, that community mental health issues not only have a significant impact on the Australian economy and its productivity, but also on policing budgets, which is recognised within your Draft Report.

We highlighted 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, and quite often, particularly in regional and remote locations, the only responders and then find themselves transporting and/or guarding such persons in hospitals or other facilities. Police also often find themselves in the ‘bounce back’ scenario as outlined in Draft Finding 16.2, where access to treatment for people suffering is limited and police find themselves continually being called back to deal with the same person on numerous occasions.

We also pointed out that all police jurisdictions have well developed and tested MOU’s and other protocols between police and health departments, including ambulance services, in an endeavour to overcome such issues, however responses to mental health patients is an increasing demand on police resources.

Numerous initiatives have therefore been developed across the various jurisdictions, which were briefly outlined in our April submission.

We note that at Draft Recommendation 16.1 – Support for Police, that suggests in the short term (next two years), all state and territory governments should implement initiatives that enable police, health and ambulance services to collectively respond to mental health crisis situations. The Commission then recommends consideration of the Queensland model.

Whilst the PFA has no criticism of the Queensland model, as already alluded to, all police jurisdictions have well developed MOU’s and other protocols with health departments, including ambulance services, for dealing with such issues. We therefore encourage the Commission, if it has not already done so, to acquaint themselves with the protocols in each of the states and territories.

If needed, the PFA would be happy to assist the Commission in accessing such documents.

**Income Protection Insurance**

We note recent communications between the commission and the PFA seeking specific information about potential barriers to members being able to purchase, on a group basis, income protection insurance (including for loss of income relating to mental ill health), to enable members to access such insurance at a lower cost.

In 2016, the PFA commissioned a detailed analysis of the various police superannuation schemes across all jurisdictions, to determine any shortcomings in any of those schemes. You will note, that the issue of income protection is predominantly delivered to police through their superannuation, as it is extremely difficult and costly, for police officers to purchase independent income protection insurance due to the nature of their work.
The Commission might also be aware, that the PFA was heavily involved in lobbying the government to ensure that police were exempt from the recent debate over The Treasury Amendment (Putting Members' Interests First) Bill, regarding default insurance in superannuation products. We were ultimately successful in having police and a number of other emergency services workers exempted from the legislation enabling them to continue to access appropriate default insurance from the day they commenced work as police officers.

Some of the key findings of the work commissioned by the PFA in relation to insurance for police, is as follows:

- There is inadequate and poor default or automatic insurance cover in many schemes. The schemes that fall into this category are the following:
  
  **Commonwealth & ACT**  
  Western Australia

Some schemes also had death and TPD insurance cover that tapered off too rapidly such that the cover at age 50 was poor. Schemes that fall into this category are the following:

- Tasmania

- Death insurance benefits in the Victorian Government ESSS Defined Benefit Scheme only being based on prospective service to age 55 years. This tends to assume that all members plan to terminate their employment or retire at age 55. (This issue is currently being resolved by agreement between the Police Association and the Victorian government.)

- Some schemes do not automatically include income protection arrangements. The schemes that fall into this category are the following:

  **Northern Territory**  
  Queensland

- Some income protection arrangements provide for a superannuation benefit to be paid back into the scheme whilst the member is on sick leave, whilst some other schemes do not provide this superannuation benefit. The schemes that do not include a superannuation contribution as part of the income protection insurance benefit are the following:

  **Commonwealth & ACT**  
  New South Wales  
  South Australia
• Some schemes have inadequate or poor income protection benefits. One scheme that falls into this category is the Western Australian scheme where there is a monthly limit of $3,000 or $36,000 per annum.
• The wait period for income protection benefits in some of the schemes is too long. In some schemes the default wait period is between 60 days and 9 months which is far too long. Members should not have to wait any longer than 30 days before being able to access an income protection benefit where they no longer have sick leave to cover their absence from work. The schemes that fall into the category of having far too long default wait times for income protection benefits include the following:

  Commonwealth & ACT
  New South Wales
  Tasmania
  Western Australia

Workers Compensation

The PFA notes on page 752 of Volume 2 of the Draft Report, the Commission’s comments on “Proving a psychological injury or mental illness is work related” and the report’s reference to the PFA’s April 2019 submission. It should be noted, that a significant amount of injury (workers compensation) claims in policing, come from mental health injury. The same applies in a number of other industries, particularly those in the emergency services space.

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

The PFA’s own research indicates that one of the biggest issues faced by police is the adversarial workers 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.

In our April 2019 submission to this Inquiry, we pointed out the outcomes of the 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.

In the PFA’s submission to the Senate Inquiry 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.

In our submission to the Senate Inquiry, we went further, by arguing 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.

We believe that the Commission should support the Senate Inquiry recommendation regarding presumptive legislation and consider its expansion to other relevant industries.

**Police Superannuation**

The PFA firmly believes that the issue of superannuation, as it applies to police, is critically linked to income protection insurance (see earlier comments).

In our April 2019 submission to this Inquiry we pointed out that the Beyond Blue Report identified that those first responders who had worked more than 10 years in the emergency services space, were almost twice as likely to experience psychological distress and were six times more likely to experience symptoms of PTSD.

So, while income protection is important and the changes in default insurance via the Treasury Amendment (Putting Members' Interests First) legislation was vigorously opposed by the PFA as potentially having an unintended, yet serious impact on junior police, the ability for police and other emergency services workers, who have dedicated their working life to community service to ‘retire with dignity’, is also vitally important.
With continued discussion about increasing the age at which people can access their superannuation, will come major consequences for both the public’s and police safety. The danger in forcing police to remain on the front line past 60, is obvious.

That is why the PFA has continued to lobby respective federal governments to:

- 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.

The same applies for other emergency service workers.

The creation of a dedicated national independent service provider network

Draft Finding 16.2, highlights the ‘bounce back’ scenario, where access to treatment for people suffering is limited and police find themselves continually being called back to deal with the same person on numerous occasions.

As we point out in the early section of this submission, policing services are one of the only services readily available on a 24/7 basis and in the case of dealing with people suffering from mental health issues, police are often the first, and quite often, particularly in regional and remote locations, the only responders, who not only are responsible for transporting sufferers, but also guarding them in hospitals or other facilities.

This is one of the reasons why the PFA strongly advocated for 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 and as pointed out in our April 2019 submission to this Inquiry, why in April 2019 the Federal Government announced the establishment and funding of the ‘BlueHub’ support network.

The network, 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.

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, but as importantly and consistent with the findings so far of this Inquiry, police are often reluctant to engage with the public health system due in part to the stigma around being forced to use the same facilities as members of the public that they may interact with in a professional capacity. There is no doubt that the same scenario applies to other health professionals including ambulance officers.

The PFA believes, that once established, the ‘BlueHub’ concept may be able to be made available to other emergency services and health workers.
Conclusion

The PFA once again thanks the Commission for allowing us to make this follow up submission to this important Inquiry.

Whilst our April 2019 submission was primarily focused on the mental health of police officers, we trust that the information provided in this submission is consistent with the recommendations and findings made in the Draft Report.

In particular, the issue of persons suffering from mental health issues and their interaction with the justice system, income protection insurance and in policing’s case and we’re sure many other health and emergency services workers, that insurance’s intimate link to their workers compensation schemes and superannuation.

There can be no doubt, that police and other emergency services and health workers are at the front line in dealing with people with mental health issues. We think it is important that the Commission, in their Final Report, recognise the importance of ensuring those workers are afforded every possible support and safeguard that can be given. The above issues of insurance, workers compensation and superannuation are vitally important, as is the ability to seek treatment when they themselves suffer from a mental health injury.

We as a community owe those workers nothing less.

Sincerely yours

Scott Weber
Chief Executive Officer