



Standing Committee on Justice and Community Safety

Inquiry into Immediate Trauma Support Services in the ACT ANSWER TO QUESTION TAKEN ON NOTICE

Asked by Mr Peter Cain on 26 March 2024: David Segrott, Policy and Advisory Committee Member, Australian Institute of Health and Safety took on notice the following question:

Reference: Hansard [uncorrected] proof transcript 26 March 2024 p 16.

In relation to:

THE CHAIR: Did you follow the Dangerous Driving Inquiry?

Mr Segrott: No, I have not followed that particular inquiry.

THE CHAIR: Okay, so one of the recommendations from that inquiry—and some would say this is like a sub-inquiry following on from that one. Recommendation 22 of that inquiry said, “The committee recommends”—that is our committee—“the ACT government urgently fund a trauma service that is available at the scene of an accident and a 24-hour hotline to help victims and their families.”

Actually, if I may be so presumptuous to recommend that report and that government response to you, because it certainly overlaps in your areas.

The government noted that recommendation and outlined the series of services that are kind of available that people get connected to through one means or another, but it did make an interesting comment, and it said that “ACT Policing submitted that it was extremely difficult for police to offer trauma support at the scene of an accident due to their primary role to investigate.” Yet, frankly, as they and the emergency services are often the first people there, it is hard for them not to feel that they have got an obligation to someone who is suffering or a witness or a family member who turns up. That would seem to be a bit of an OHS issue as well, where police themselves—

Mr Segrott: It would be, yes.

THE CHAIR: —have identified a concern that their officers are sort of expected to be that person, but they are not really equipped to provide that service.

Mr Segrott: It comes down to whether they have got the right training, the right skills, and whether the resources available at the time are sufficient that there are enough officers there to be able to deal with the actual trauma and deal with the people that are affected by the trauma. It comes down to what is the major priority, and I would say that the major priority is dealing with the actual trauma.

THE CHAIR: Would you have a recommendation to the ACT government, or at least you could pass that on to us for us to consider as a recommendation to the ACT government?

Mr Segrott: I will certainly take that on notice and do some work. We have got another policy committee meeting next week.

Australian Institute of Health and Safety: The answer to the Member's question is as follows:—

Whilst it is noted that in most cases, apart from passers-by who may stop to render assistance, ACT emergency services, including ACT Police, ACT Fire and Rescue and the ACT Ambulance Service are the first formalised response service to respond to a major crash incident.

As part of their response, it would be reasonable to have some expectation that they would provide a level of comfort and support for those affected by the trauma associated with the incident.

However, the extent that this support can be provided must be balanced with their primary responsibilities to respond to the incident, such as 1) making it safe for others at the time (e.g. managing traffic), 2) performing rescue and recovery of persons involved in the incident, and 3) assessing and providing physical first aid treatment to these persons.

A scenario where an emergency services worker feels conflicted in having to decide between competing priorities may give rise to an unsafe psychosocial work environment. From a work health and safety (WHS) perspective, the ACT Managing Psychosocial Hazards at Work Code of Practice (see <https://www.legislation.act.gov.au/ni/2023-482/>) outlines several hazards that could be interpreted as existing in this context. Psychosocial hazards must be mitigated and controlled as far as reasonably practicable, just like physical health and safety hazards.

For example, in this scenario emergency response workers have 1) high job demands, 2) low job control, and arguably 3) inadequate support (in relation to dedicated skills and capabilities) and 4) lack of role clarity (including 'unofficial roles' in providing support to those in acute need). These stressors may be compounded by the vicarious trauma triggers that are also likely to exist in these settings.

The existence of a dedicated support service, such as previously provided by SupportLink Australia or another similar organisation or entity, to respond and lead the provision of support services to trauma victims at the time of an incident, would reduce the pressure from emergency services to balance multiple and potentially competing demands. Emergency services would be able to concentrate on focusing on executing their rescue and recovery skills. Similarly, ACT Police representatives would be able to concentrate on their primary responsibilities, such as making the scene of the incident secure and safe, and gathering information and evidence that may assist any further investigation or inquiry.

WHS duties are also invoked if the incident involves a person at work (i.e. a worker). This may include a worker travelling for work, or to or from their place of work in some contexts. Their PCBU's have a duty to provide support should their workers be involved in a serious incident. A dedicated support service would bolster the range of measures the worker would receive. A dedicated support service would become an external component of PCBU's management system, in the same way emergency services authorities are included in plans for serious incident

responses in many workplaces. The support service would therefore assist PCBU's in meeting their obligations to provide a work environment and/or system of work that is without risk for their workers as far as is reasonably practicable.

On this basis, the Australian Institute of Health and Safety supports the provision of a dedicated trauma support service for serious incidents in the ACT. We believe it would provide for better health and safety outcomes for emergency services personnel, any workers involved in serious incidents, and other affected parties from the community.

Approved for circulation to the Standing Committee on Justice and Community Safety

A handwritten signature in black ink, appearing to read 'D Segrott', with a stylized flourish at the end.

Signature:

Date: 3 April 2024

By the Australian Institute of Health and Safety, David Segrott