

## Inquiry into the mental health conditions experienced by first responders

Thank you for the opportunity to place a submission before your inquiry. I was a police officer in Victoria for 30 years. I was also a volunteer for Ambulance Victoria as a Community First Responder (team leader) 5 years and currently a volunteer fire fighter with the Country Fire Authority Victoria. I am also involved in the running of a peer support program for ex police officers living in Victoria. (Police Veterans)

I resigned from Victoria Police in 2006 after 30 years as I had become quite unwell from a mental health injury. I was not prepared to lodge any claims to the insurers due to the fact that it would have made me more unwell. I left the job and have seeking some professional help was able to live a fulfilling work and family life.

During my journey I have observed the following.

1. The state government in Victoria uses private insurers. These are companies who need to make a profit
2. These companies employ questionable work tactics including 'independent medical examiners'. (IME) These are opinions for hire who have worked in this industry for years and years and whose sole income is doing assessments so the assessments they are given are favoured towards the insurer.
3. The IME system is not geared towards getting the patient better, simply testing the veracity of the claimant. This is to the detriment of the claimant as he continually repeats their story while not getting better.
4. Financially I have seen claimants lose any cash saving paying for medications prior to the claim being refused/accepted from the insurer. Likewise paying for private treatment as it is rare for psychiatrists/psychologists to bulk bill.
5. Whilst claims are being processed the claimants are recipients of surveillance from private insurance companies. If you want a policeman to become paranoid then do just that.
6. Any claims that are refused are generally settled prior to a court case. The winners in this are the legal profession, the losers are the claimants.
7. The stress of the injury as well as financial implications tear families apart so you end up with secondary injuries to families. It also leads to an increase in domestic violence that goes largely unreported.
8. Alcohol and prescription non prescription of drug use increases. This has implications for the family budget as well as long term health and social issues such as drink/drug driving.
9. Withdrawal from support networks such as work, sport/social clubs as they battle the insurers and eventually, if they get treatment getting back on their feet to resume a normal life.
10. Feelings of self-worth are eroded if they continually denied the ability to accept the claim and get on with treatments.
11. Self-harm becomes an issue that unfortunately is followed through on occasions.

12. If 20 percent of a police force is undiagnosed or diagnosed with mental health injuries then in the state of Victoria that means 3000 officers.

This is by no means a comprehensive list but it shows the issues that first responder claimants face. Each state and territory is different, with different standards to be applied depending on the insurance company.

There is a way to fix the issue of claimants being denied treatment. The Canadians have presumptive legislation for mental health injuries which means:

1. Treatment is commenced immediately
2. Chances of recovery back to work greatly increase
3. Claimant has confidence in the system that is geared towards recovery
4. Claimant has a decreased potential for self-harm
5. Self-medication is not the preferred option
6. The family unit will potentially stay stronger
7. Workmates have confidence in a system that they see working and may in-turn seek treatment with confidence
8. The workplace has a more satisfied and committed work force, less sick days/less complaints

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