

COMMUNITY DEVELOPMENT AND JUSTICE STANDING COMMITTEE

SUBMISSION FROM THE MEDICALLY RETIRED WESTERN AUSTRALIAN POLICE OFFICERS ASSOCIATION INC.

"How the WA Police evaluates its performance in regard to management of personnel"

Introduction

In order for the committee to understand the reason for our submission it is important for them to know something about our members and the background history of our association.

The purpose of forming the "Medically Retired Western Australian Police Officers Association (inc,)" (the Association) was primarily to create a support network for medically retired Western Australian police officers who were dismissed on medical grounds while proactively raising the awareness of their poor treatment and seeking redress.

The WA Police Commissioner himself has publicly stated that the current system of dealing with illness, medical retirement and compensation is flawed but to date has not acted to change key processes.

We also want the committee to realise police officers are ordinary people with families, hopes, ambitions and dreams just like themselves but that they do extraordinary things for and on behalf of the WA community. Police serve the community with pride, honour dignity and respect. They are not a resource that can be used, abused and discarded like unwanted rubbish.

History

In 2008 an internet chat and online support group was formed by a medically retired police officer for other police officers who had been medically retired from the WA Police.

Over a period of time the online group progressed to informal meetings. The conversation exchanged in these meetings led the former officers to realise that they were not alone in their suffering or in the scandalous way they had been treated and then discarded by the WA Police and WA government.

In May 2012, three medically retired former police officers from the internet chat group went public on this issue¹ for the first time by providing a written submission and giving oral evidence before the "Community Development & Justice Standing Committee" (CDJSC) who were at that time investigating "The Toll of Trauma on Western Australian Emergency Staff and Volunteers".²

¹ The West Australian - May 17, 2012 - Daniel Emerson -
<https://au.news.yahoo.com/thewest/latest/a/13703924/police-officers-tell-of-mental-trauma>

² "The Toll of Trauma on Western Australian Emergency Staff and Volunteers"
(WA Legislative Assembly Report No. 10 September 2012)

After the officer's evidence was reported in 'The West Australian' newspaper and republished on other social media, they found that they were regularly being contacted by other retired and some still serving police who wanted to share their own similar experiences.

After meeting with various influential individuals and groups our association realised that in order to resolve this issue a formal voice was required to act as an advocate and to provide support to the affected officers and their families. Accordingly the "Medically Retired Western Australian Police Officers Association Inc." was formed and formally incorporated on the 29th of April 2013.

Membership of the MRWAPOA

Between 2001–2012 there were 291 Police Officers medically retired from the Western Australia Police Service³. Of those officers 203 or 70 percent suffered from a mental impairment, depression, post traumatic stress disorder (PTSD) and or other psychological impairment.

Forced into medical retirement all suffering with significant chronic workplace related illness and injuries many struggled to find any form of suitable alternative employment or simply ended up never being able to work again. Without any form of workers compensation to aid in paying the ongoing mortgage and other household bills, many families still struggle financially to exist. Many rely on Centrelink and some are even forced to resort to food bank charities in order to feed their families. Partners, families, children and carers carry a significant burden without any recognition from the WA Police or WA. Government.

It was soon realised that members had strong common bonds in the way they were treated by the WA police and state government having been discarded without access to ongoing support or receipt of any compensation for their work related disabilities and future financial losses.

Full membership of the association - which is free - is only open to former sworn police officers who were medically "retired" as a consequence of injuries or illness sustained during the course of their employment with the Western Australia Police. Officers must have been removed from their employment pursuant to a 'Loss of Confidence' notice issued by the Commissioner of Police under the provisions of Section 8 of the WA Police Act 1892.

In addition to the medically retired officers our association has and continues to identify numerous other former WA police officers who have suffered similar medical and psychological issues but who chose to either take early retirement or to simply resign because they did not wish to suffer the perceived shame and stigma of admitting they were psychologically damaged. To date in addition to our own members these former officers (men and women) are still suffering as a consequence of their former occupation.

Context

Our Association is very grateful to the "Community Development & Justice Standing Committee" in being given the opportunity to present a submission relative to the topics of this investigation. The submission is based on the personal and anecdotal evidence of our members and supported by the research of medical and other professionals.

³ (Source Hansard WA Govt - 27/11/12 - P 8977a-8977a Hon Kate Doust to Hon M Mischin)

Specifically we wish to draw the committee's attention to two very important case study reports and the recommendations contained therein which we believe will provide significant information and statistics for comparison purposes towards this current investigation. These reports are:-

1. The Community Development and Justice Standing Committee report number 10 dated September 2012 into *"The Toll of Trauma on Western Australian Emergency Staff and Volunteers"*⁴; and most significantly
2. The WA Police Union's comprehensive report into the way sick and injured members are treated by the WA Police and the WA Government entitled *"Project Recompense"* dated November 2014⁵.

These two comprehensive reports already provide contemporary findings and recommendations that are open to this investigative committee to consider and adopt. For the sake of brevity our association will not restate these reports in full but rather we will highlight some applicable recommendations which we believe the committee should take notice of along with our own submissions.

The submission of our association is by no means all encompassing but - from our perspective - it is weighted towards issues that our members feel are critically important to them and also to the prospective, serving and the many sick and future injured post service officers and their families.

We would also like the committee to understand and take into consideration that the preparation of this submission itself has been a significant challenge to our committee because of the insidious nature of the psychological illness from which many of us former police officers suffer - we refer of course to "Post Traumatic Stress Disorder" (PTSD).

Our Association understands that the Community Development & Justice Standing Committee's current inquiry parameters primarily relate to investigating "How the WA Police evaluates its performance in regard to management of personnel".

However, we believe we would be very remiss not to also include and mention, comments and recommendations in relation to the WA Government's reprehensible treatment of police officers who were forcibly retired by the WA Police without recognition for their sacrifices on behalf of the community of Western Australia and their subsequent denial of appropriate retrospective compensation.

Our association also asks the question, why is it left to the medically retired sick and injured officers to look after the welfare of other sick and injured officers including still serving members? Currently we have the police minister, the police health and safety division and the WA police union all referring sick officers to our association for assistance. Surely after all the debate and public rhetoric on this topic it is time for the WA Government and WA Police to "Step Forward" and accept their responsibilities by:-

1. providing appropriate compensation to all medically retired officers; and
2. establishing a police specific department of veterans affairs to care for their work related casualties.

⁴ Ibid. P1.

⁵ "Project Recompense" - WA Police Union, November 2014, author Ms Jane Baker (Research Officer).

1. How recruitment practices are managed, and in particular in relation to developing ethnic and cultural diversity within the force.

Extensive media advertising campaigns have and continue to be run by the WA Police and State Government utilising all forms of the media throughout Australia and internationally in an endeavour to recruit suitable applicants to serve the community of Western Australia.

These media campaigns which are branded with the "Step Forward" logo⁶ on the WA Police government website extol the benefits and virtues of becoming part of "The Police Family" promising officers a diverse and challenging career and creating the belief that they will - just like an 'ideal family' - be well looked after should anything happen to them.

However, the harsh reality is that nothing could be further from the truth. The WA "Police family" and the WA state government are dysfunctional and coldly uncaring. Rather than taking care of its long term sick and injured it disavows and abandons them when they are irreparably broken due to work related illness or injury. They then use an archaic oath of office to justify this outrageous procedure and then spend hundreds of thousands of dollars on government lawyers to fight compensation claims to the contrary.

MRWAPOA SUBMISSION:

Our association submits that:-

- 1.1 the WA Police and WA Government immediately halt all recruitment and advertising until they implement a full and honest disclosure policy that clearly indicates to all prospective applicants the advantages and - more importantly - the disadvantages - of becoming a WA Police officer explicitly explaining the high physical and psychological risks involved and of the current exclusion policy relating to Worker's Compensation coverage.

⁶ <http://www.stepforward.wa.gov.au/>

1. How training is managed, both for recruits and on an ongoing basis.

Because most of our association members are retired officers who have been out of the WA Police for varying lengths of time we can only provide generalised historical comments relative to our time in the agency.

One issue common to all our members is that throughout their careers none were ever provided with any effective preventative psychological health assistance. Officers were pushed and pushed until they broke and then they were vilified and abandoned.

For psychological training and mental health first aid to succeed there needs to be a willingness on the part of the individual to seek help. In order for this to happen there needs to be an agency driven cultural change that recognises the propensity for psychological damage as a result of the rigors of police work and removes negative comment and stigma.

We are aware that more recently training now includes the opportunity to participate in the Peer Support and Mental Health First Aid courses.

MRWAPOA SUBMISSION

Our association submits that:-

- 2.1 Compulsory, effective preventative psychological health assistance needs to be provided to all ranks;
- 2.2 Strongly supports the Peer support and Mental Health First Aid programs currently conducted by the WA Police;
- 2.3 A sustained and concerted effort needs to be made at recruitment and thereafter to change the culture of the WA Police for individuals to be willing to seek help and to remove stigma from those who do seek help.

3. How police misconduct is managed internally.

The only comments our association wishes to make relative to the way police misconduct is managed internally is to register our utter disgust in the way that the WA Police treat officers who are being retired on medical grounds through work related injury or illness. These unfortunate officers are summarily dismissed utilising the provisions of Section 8 of the WA Police Act 1892 which is the same one used to dismiss officers who are guilty of criminal behaviour or serious misconduct..

Being "Section 8'ed" stigmatises an otherwise honourable and dignified career and is the final insult and slap in the face to the already sick and injured officers. They have been sacked for the heinous crime of getting sick or injured while serving and protecting the community of Western Australia.

The commissioner's "Loss of Confidence" notice strips officers of any remaining dignity they may have had and leaves them with overwhelming feelings of abject hurt and complete abandonment. The only comparable way of describing this grief to the committee is that it is exactly like to losing one's entire family forever to some tragic catastrophe with the person being made to feel and believe it is their fault. This soul destroying feeling goes on forever!

Unless you are killed in the line of duty there is no formal acknowledgement of the sacrifices you have made in order to protect the community. While the WA Police acknowledges officers killed in the line of duty⁷ there is no recognition for officers who suffer catastrophic injury or illness protecting the community and who are subsequently medically retired as a result.

This lack of recognition is referred to by the medical profession as "Secondary Wounding" and they recognise it as being counterproductive and that it delays recovery.

MRWAPOA SUBMISSION

Our association submits that:-

3.1 Apology

In the same manner that the Federal Government made a formal apology on behalf of the nation to Australia's "Stolen Generation", the WA Police and the State Government need to formally and publically apologise to officers who were callously discarded without support or compensation. Being unable to fulfil their obligations as a sworn police officer because of work related illness or injury that they sustained while protecting life or preserving property on behalf of the WA community is NOT a criminal offence. (*Recommendation 1 - Project Recompense*)

⁷ <http://www.police.wa.gov.au/Aboutus/HonourRoll/tabid/1056/Default.aspx>

3.2 Rewards and Recognition - Service Medal

In addition to an apology the State Government and WAPOL should jointly introduce a new medal similar to the existing Victoria Police Star specifically for WA police officers who are killed, seriously injured or who contract an illness which results in a long term disability or their subsequent medical retirement.

Under this new award, every slain, seriously injured or chronically ill (work related) WA police officer would be automatically honoured with a special commendation medal to mark their selfless community sacrifice. The award would apply to all work-related injuries, including psychological illnesses, regardless of whether the conditions first manifested on or off-duty or post police service and which subsequently led to the officer being killed, permanently injured or medically discharged. This award should also formally recognise officer suicide where the event is not linked to the officer being the subject of an investigation for criminal offences.

This reward and recognition concept was raised by outgoing WA Police union deputy vice-president Jon Groves at the 2014 WA Police Union Annual conference. It has since won support from the state opposition, families of officers killed and seriously injured in the line of duty and our incorporated medically retired association membership.

The WA Police should create a new page on their "Police Roll of Honour" Website which the WA community can access. This page would publish the number of officers that have been medically discharged by year by category as a result of work related illness or injury sustained in the service of the WA community.

4. How employment-acquired medical issues, such as post traumatic stress disorder are managed.

The nature of police employment.

The nature of police employment and service to the community is markedly different and wholly unique from all other workers in Western Australia. Sworn police are bound by their oath of office and legally required by legislation to undertake and perform - without question or hesitation - some of the most challenging, dangerous, unpredictable and life-threatening work in society. In addition to constant shift work they daily face exposure to conflict, violence, chemical, biological and psychological hazards. The recent murder of a NSW police employee highlights the new and very real threat of random terrorism all officers face whether in or out of uniform.

Unlike all other emergency services workers police cannot refuse to undertake any task set them on the grounds that they may be injured or killed. A refusal to obey orders subjects them to disciplinary action for neglect of duty which could then result in their dismissal. The stark reality is that police are the community's "defence force". The work that they selflessly undertake and repeatedly perform exposes officers to multiple complex and volatile situations where they are subjected to explicit and graphic scenes of abject horror, violence and misery on a scale that is too much for the ordinary citizen to comprehend.

They are expected to study each individual incident and event in minute detail, recording and committing to memory details for evidentiary purposes utilising all of their senses. Ordinary citizens have the luxury of being able to shut out and forget single traumatic incidents or events. Not so the police professionals who have to relive and commit to memory these dreadful experiences over and over when comforting victims or families, gathering evidence, interviewing suspects or witnesses, preparing comprehensive reports and statements, giving evidence and so forth. It is not uncommon for officers to be called upon to give evidence in civil litigation cases many years after the original incident has been dealt with in the criminal courts. They then have to dredge up and relive the horrific memories and re-learn every minute detail so they can undergo a further rigorous examination of the incident.

Police officers (just like the boy scouts motto) are expected to always be prepared and able to perform any and all tasks at any time or in any place in a highly professional, diligent and ethical manner. They are - without exception - expected to do so without showing fear or favour and critically without displaying the emotions that normal citizens would experience under similar circumstances. They are trained and retrained throughout their careers to repress their normal emotional, physical responses and reactions and this is reinforced by a stoic police culture where displays of fear or psychological illness are seen to be an individual weakness and can be exploited. The longer an officer remains in the organisation the better they become at masking their actual emotions and feelings and the more likely they are to be permanently damaged psychologically.

Public scrutiny and expectations

In addition to stringent organisational internal governance police officers also face intense scrutiny at all times (24-7-365) whether on or 'off duty' from the various internal and external investigatory bodies such as the Professional Standards, the Crime and Corruption Commission, the tabloid and visual media and especially the general public at large. Consequently they are also subject to organisational pressures and stress in the form of emotional conflict with respect to both organisational culture and perceptions of justice.

Between 2002 and 2012 two hundred and ninety one officers (291) are recorded as being retired on medical grounds.⁸ Of this number two hundred and three (203) or seventy percent 70% were forcibly retired due to chronic psychological, illness' and mental impairment which were sustained directly as a result of performing their duties.

Given the very high risks involved in policing, the general community expects, but holds a false perception, that the WA Police and WA government treat their sick and injured officers with fairness and dignity. Members of the community are struck with disbelief when members detail the way that they have been sacked on work related medical grounds without any compensation or support.

As our association has already stated and our membership proves beyond doubt nothing is further from the truth! The WA Police (and state government) clearly discriminate between officers who are suffering physical injury and those who have psychological illness. The way these two categories are dealt with are markedly different.

WA Police Health and Safety Division

From the outset it must be stressed that our association in no way seeks to criticise, undermine or demean the work currently being performed by the staff of the WA Police Health and Safety Division. What we do wish to emphasise is that this particular division is woefully understaffed, underfunded and ill equipped to deal with the ever increasing number of sick and injured officers serving the community throughout the very large state of Western Australia.

Our association notes that the "WA Police Health and Welfare Section" has recently undergone a name change to the "WA Police Health and Safety Division"

Our association understands the need to reflect the term "Safety" as part of its function but questions the removal of the key word "Welfare" from the title and queries the reason for its removal.

We are concerned that by removing the word that the agency is subliminally seeking to distance itself further from its obligation to care for the chronically sick and injured officers within its ranks as part of government cost cutting measures. Our association will never support a "Cost before Care" policy and believes the word "Welfare" should remain as part of their title to reflect their adherence to "Health, Safety and Welfare" obligations.

Sick Leave Provisions

WA Police officers currently have generous sick leave provisions written into their working agreement which recognises the special work they undertake on behalf of the community and of the unique and dangerous nature of their occupation. This sick leave entitlement (*168 days per annum - renewable by the commissioner at his discretion*) is extremely effective for officers who can - long term - be rehabilitated back into the workforce at operational capacity. The sick leave entitlements provide the security of appropriate medical treatment, time for rehabilitation and financial support while they recover.

However, while the sick leave entitlements cater for the majority of officers, there is that small percentage of the workforce whose injuries or illness are so catastrophic or incurable

⁸ (Source Hansard WA Govt - 27/11/12 - P 8977a-8977a Hon Kate Doust to Hon M Mischin)

that no amount of long term sick leave will see them return to operational capacity in the workforce. These unfortunates are the officers that are abandoned by the WA Police and government and who form our core association membership.

On 16 June 2009 the WA Government proclaimed the "*Police (Medical & Other Expenses for Former Officers Act 2008*." Under this legislation, former police officers could claim medical and other expenses incurred as a result of duty caused illness or injury on or after **1 July 2007** regardless of when the injury or illness occurred.

This crucial legislation went some way in providing redress for former sick and injured officers to have their work related medical expenses paid for on an ongoing basis post service. A "suggested compensation package" which had been part of an earlier private members bill and which effectively would have seen the creation of a police specific "Worker's Compensation Scheme" was omitted.

Our Association believes the ideal solution for the current situation would be the addition of either a lump sum compensation package or pension scheme to the "Police (Medical & Other Expenses for Former Officers) Act" and that this compensation be retrospectively applied to all former medically retired police officers.

The Minister for Police and WA Police commissioner both agree that the current flawed system must change but they are currently at loggerheads with the WA Police Union and serving members who - for very good reason - do not wish to give up any of their current entitlements. The reluctance of all parties to move on their stated positions sees an average of approximately 20 plus officers retired each year without adequate ongoing aid or compensation. These walking wounded are now being used as pawns by the government and WA police in an endeavour to force the union's hand.

Our association believes the reprehensible behaviour of bartering the sick and injured is purely for financial saving and is unconscionable conduct on the part of everyone involved in this matter and that they need to stop this process immediately.

Workers' Compensation

Western Australia Police is one of eight police jurisdictions in Australia and is responsible for policing the world's largest single police jurisdiction covering 2.5 million square kilometres with a structure comprising two regions, 11 districts and 157 police stations⁹.

Western Australia is the only state in Australia that does not have any form of workers compensation scheme for its medically retired police officers.

Every other state in Australia has some form of compensation scheme for police officers who are broken in the course of serving the community. These schemes ensure officers are provided with recourse to compensation funds for suffering work related illness, injury and loss of future earnings.

The WA state government still actively denies accountability or liability for its permanently broken employees.

⁹ Western Australia Police - *About Us*, Government of Western Australia 2015

There are currently over six thousand (6000) sworn police officers deployed around the state serving the community of Western Australia. Because policing is about managing the interaction between people and groups upholding and - where necessary - enforcing the laws of the state it then follows that the largest and most indispensable asset of the WA Police is and always will be their own personnel. Over the course of their careers each officer has hundreds and thousands of dollars invested in their initial and ongoing training to ensure they are abreast of contemporary law and community standards and that they always provide the best possible service to the community.

On a daily basis without respite officers dedicate their lives to the care and service of the community frequently placing their own health and safety at risk. The majority of officers have been told and believe policing is a lifelong career vocation. As such it is not unreasonable for them to expect reciprocity from the agency and government which employs them if they suffer dire health consequences as a result. Regrettably nothing can be further from the truth as our members and their families can attest.

Injury management protocol

Our retired and some still serving members have told us that the current WA Police injury management protocol is focused more on the agenda of the WA Government and WA Police in cost cutting measures rather than meeting the needs of the individual. This means the focus is on getting officers back on the road quickly, regardless of whether this is beneficial for their health. It also means sometimes WA Police sends officers to particular medical professionals in order to get the response that they want.

Treatment and retention of officers is also dependant on their supervising managers and the district office executive personnel. Officers who have caring supervisors are much more likely to be well supported during their treatment and reintegration process than others with managers who are uncaring and who are focussed primarily on achieving their district key performance targets regardless of the long term physical and psychological consequences to their staff..

Reports have been received from our retired and also from still serving police officers that WA Police will only fund medical expenses it believes are worthwhile. For example there is an excellent Trauma Recovery program conducted at the Hollywood Private Hospital which is specifically designed for ex-servicemen, police personnel and other first responders who are suffering the effects of PTSD. This comprehensive program has time and again proved highly beneficial to police suffering psychological trauma but it is not actively promoted by WA Police. Some officers reported having been advised that the agency (WAPOL) would only pay for a PTSD course if they considered it worthwhile and thought the officer get better and could one day regain operational status..

Approaches to injury management and medical reimbursement are inconsistent because of the discretion of individual managers whose prime budgetary concern is "cost before care". There are deeply ingrained cultural issues associated with psychological illness in the way the sufferer is viewed by their peers and police management and also in the way those with the affliction are treated. The injuries of physical trauma are visible for everyone to see and are regarded as evidence of the officers dedication to duty, bravery and sacrifice on behalf of others. They are well supported by their peers and supervisors and rarely are adverse comments made when they take extended sick leave to recover.

Trust and understanding

The highly dangerous nature of policing requires officers to have implicit faith and trust in their colleagues particularly in situations of life and death. This is developed through rigorous training with their peers and experiencing firsthand the risks and dangers involved. There is an immediate bond of trust between sworn officers that is reinforced as an organisational culture which is rarely understood by non sworn personnel. This trust also comes with embedded suspicion and mistrust of anyone outside of the sworn ranks. Previous negative experiences in the past have also made many officers mistrust the unsworn staff of the Police Health and Safety Division.

Our association members and most serving officers with whom we have contact reaffirm this suspicion and as a consequence many still seek treatment from non agency doctors and specialists in order to hide their illness'.

Visible and invisible wounds

WA Police discriminates against officers with psychological injury.

With a physical injury you are more likely to be kept in the agency and a suitable job found for you. With mental illness you get cut off very quickly as management don't know how to deal with psychological injury and you are thought of as high risk. You are also likely to receive a lesser ex gratia payment for psychological injury if one is ever actually approved.

History indicates that an ex gratia payment is also rarely paid for permanent psychological illness and if one is granted that it is well below the sum offered for permanent physical injury. Clinical Psychologist Mr Doug Brewer - one of the specialist staff based at the Hollywood Private Hospital Trauma Recovery Unit¹⁰ in Nedlands - defines and compares the psychological illness (PTSD) as just as comparable and debilitating as that of a person who is suffering paraplegia.

Members who suffer the invisible wounds of psychological trauma are viewed with suspicion and uncertainty by their peers, the agency and the general public. Psychological illness and its profound effects on the individual is still a mystery that most people - including many general practitioners - do not recognise and cannot comprehend. All too frequently the individual suffering with several classic indicator ailments is misdiagnosed and subsequently labelled as a malingerer. They are made to feel by their colleagues and managers as though they are the problem and are to blame for letting the team down. Unlike those with physical injury they are not likely to receive compassion or understanding, are ostracised by their peers and frequently are the subject of management initiated transfers (MIT's) and eventually medical retirement. Our psychologically afflicted members also stated that there was a distinct lack of contact when on extended leave which had the compounding effect of reinforcing their sense of self guilt, shame, abandonment and disconnection with the agency.

Anecdotal evidence from our members who suffer with psychological issues and who have been subject to the medical retirement process indicates that the West Australian Police directs serving officers displaying acute psychological symptoms, PTSD or depression are frequently directed towards a medical retirement rather than being assisted with rehabilitation and attempted reintegration back in to the workforce as would be the case with physical injury.

¹⁰ <http://www.hollywoodclinic.com.au/Our-Programs/trauma-and-recovery-programs.aspx>

Once detached from this agency every former police officer literally is abandoned by the West Australian Government, the WA Police and - because they are no longer sworn officers - by the WA Police Union. This avenue allows all parties to distance themselves from any responsibility or accountability with the ongoing welfare or financial issues that face these sick and injured officers. Four week's severance pay is the only fiscal assistance provided by the WA Police which coincidentally is the same amount given to officers dismissed for criminal acts or misdemeanours.

Inequitable treatment

With the WA Police and government it's about what is wrong with you not what has happened to you and what can physically be seen.

By way of example I refer to two well publicised and documented cases - Constables Matt Butcher and Constable Ryan Marron. These two officers were injured in the line of duty and had highly publicised stories that were told internationally in the media. As a consequence one was given an ex gratia payment of 3.3 million dollars while the other is awaiting a government response to his claim. Both officers still maintain their employment in the WA Police in roles that recognise their reduced capacity and service to the community.

These two examples highlight the positive effect that a high media profile can have when it comes down to how the agency and the state government treat with officers with visible injuries. The government, police agency and the general public recognise visible injuries suffered by police and can empathise with them. The same cannot be said about officers who fall victim to mental illness' such as post traumatic stress disorder which have an equally devastating effect on the individual but which cannot be seen.

In November 2013 the State Government approved voluntary redundancy packages for 196 non frontline officers with an average age of 57yrs.¹¹ The officers were all non operational because of various medical reasons. The allocated redundancy package total was \$37 million and funded from the police budget. (Average \$189K per individual)

Again in 2015 the State Government approved voluntary redundancy packages for 15 commissioned officers and 15 senior sergeants at a cost of \$5 million dollars. (\$167K per person) again funded from within the police budget.

Despite being non "frontline" capable all of the above were still gainfully employed within the police agency adequately performing their allocated duties. All were capable of seeking and being re-employed post police service. Further, in addition to the generous redundancy packages they also received their full leave entitlements and other accumulated financial benefits and access to their government pension or superannuation packages. Our association is aware that many of these officers have since gained employment with one now working at State Parliament in the security section.

At the same time our association is aware of at least three young medically retired officers with families who are now suffering lifelong chronic illnesses who over two years ago submitted applications for ex gratia compensation payments to the Attorney General's office. To date they are still awaiting a response to their applications.

¹¹ <https://au.news.yahoo.com/thewest/wa/a/20028154/196-police-officers-take-redundancy/>

As a complete contrast, according to Hansard records¹², there were two hundred and ninety one officers (291) who have quietly been medically retired between 2002 and 2012 without any large media coverage or publication and no form of compensation, redundancy or ex-gratia payment offer to them whatsoever. These individuals were so sick or injured they were incapable of work in any capacity, did not have the will or determination to fight dismissal then and now, and they received only one month salary as a maintenance payment.

Based on the preceding figures since this time it is likely that a further eighty seven sick and injured officers have met similar sad endings to their once proud and dignified careers.

Would this appalling treatment be considered by a caring community to be disgraceful and discriminatory?? absolutely!

Management responsibilities

The WA government sets the police executive specific annual targets which they must meet or exceed to be viewed as successful and some of which comprise part of their own individual performance contracts. The Commissioner and his executive team's performance are all measured by how they meet key performance indicators and they are held accountable for these. However as discovered in the "Toll of Trauma" investigation by the CDJSC there appear to be no key performance indicators, targets or accountabilities set in relation to staff health, wellbeing maintenance, rehabilitation and retention levels.

While records are kept indicating the number of medical retirements annually these lack the specific detail of the illness or injury giving rise to the retirement and - more importantly - there is no post service contact maintained by the agency to ascertain recovery or death rates amongst these officers. Similarly, despite assertions to the contrary, there appear to be no separation interview records for medically retired officers.

The true nature of the psychological illness suffered by medically retired officers is not recorded on the medical retirement form. Officers are recognised as being "depressed" but not as suffering from work related PTSD, even though there is a medically diagnosed opinion to support this. WA Police tries to disconnect injury and illness from work. The medical opinion of one specialist practitioner can outweigh all others if that is what WA Police wants to hear and enables them to retire an officer cheaply.

Officers who are targeted for medical retirement are the long term chronically ill and or injured. Most are psychologically incapable of either comprehending or understanding the future consequences of the retirement process and just want to 'run away'.. Having regard to this there is very little support provided by the agency, the union or other networks to the officer and their family in providing welfare or support during the severance process and especially post service.

Officers suffering with debilitating psychological impairment and their families are abandoned with no support from the WA Police or government in negotiating the complex procedures and documents needed to gain access to Centrelink disability support services, pension or their superannuation. Our association has in a significant number of cases been the only support available to these people to provide help.

¹² (Source Hansard WA Govt - 27/11/12 - P 8977a-8977a Hon Kate Doust to Hon M Mischin

The "Police (Medical & Other Expenses for Former Offices) Act" has been in existence since 2009 but it has received very little in the way of public promotion advertising. Many former sick and injured officers are unaware that it exists to benefit them. Our association receives on average two to three telephone calls per week seeking information and help with this topic. We submit funds be allocated to promotes this scheme.

Compensation, superannuation and benefits

It is clear from our members experience' that those forced into medical retirement suffering with significant chronic workplace related illness and injuries have and continue to struggle to find any form of suitable alternative employment. Most simply give up and face never being able to work again. Without any form of workers' compensation to aid in paying the ongoing mortgage and other household bills, many families still struggle financially to exist. Many rely on Centrelink and some are even forced to resort to food bank charities in order to feed their families. Partners, families, children and carers carry a significant burden without any recognition or compensation from the WA Police or WA. Government.

If officers had contributed to a superannuation scheme during their career they and their families were forced to access the superannuation funds to pay down their ongoing debts and their day to day expenses. This superannuation nest egg to which they sacrificed contributions was to have provided for their retirement in old age. The WA Police and state government still use this as a defacto compensation payment. Early access is also an issue because heavy financial penalties apply when people draw funds from their superannuation before the age of 60yrs.

All other WA employees and police officers in every other state of Australia who are retired as a consequent of work related injury or illness are covered and entitled to a compensation payout **in addition** their superannuation.

The only way to get compensation in WA is via an ex gratia application. To do this sick, injured and financially distraught officers must write their career and life story for cabinet to decide if they are worthy of compensation. This task alone proves to be far too difficult for officers suffering with PTSD and other psychological illness and actually exacerbates their trauma by forcing them to relive what they are trying to forget and are running away from.

To date we are aware of only two people who have successfully received ex gratia payments. The WA Police Union sometimes, but not always supports, officers in this process.

MRWAPOA SUBMISSIONS:

Our association submits that:

- 4.1 An immediate halt (moratorium) be placed on any medical retirement process for those currently in a system considered to be "harsh, oppressive and unfair" by those affected. This groups sick and injured officers into the same category as corrupt and criminal officers who are sacked under Section 8 of the WA Police Act 1892 blighting their otherwise honest, diligent and ethical service to the community.

- 4.2 No further medical retirement processes be commenced until there is a new system up and fully operational which focuses on injury/illness prevention, rehabilitation and reintegration which protects sick officers rights and affords them a dignified and financially secure exit from WAPOL.
 - 4.3 Identify peer support mentors to provide additional social support to serving police officers who are experiencing psychological challenges.
 - 4.4 External, independent case managers should be provided to assist officers to make assessments about the future and to provide unbiased professional treatment. It is critical that these people are independent of WA Police.
 - 4.5 A system similar to Veteran's Affairs should be established where medically retired officers get decent benefits that don't require them to line up at Centrelink to receive concessions and payments alongside criminals with whom they have previously had dealings.
 - 4.6 Create a Police Pension rather than forcing retired officers to go on the disability pension.
 - 4.7 Implement a voluntary separation/redundancy scheme that enable officers who are finding the stress of policing too hard the opportunity to separate from the agency with dignity after a minimum 10 years service with 5 year increments thereafter.
 - 4.8 Create a fair and equitable system of compensation for illness and injury that does not result in higher payouts for cases in the media or physical cases that can easily be seen and understood. This system should be applied retrospectively and all former medical retirees should be able to be considered.
 - 4.9 Provide more opportunity to transfer into non-sworn roles. Injured officers have diverse skills which enable them to do other jobs within WA Police but they are not considered for these roles, especially if they have psychological injury/illness. Where required provide vocational rehabilitation until the officer can return to their former role or be medically retired with dignity and appropriate compensation.
- (Recommendation 6 - Project Recompense)*
- 4.10 The immediate creation and implementation of a statutory requirement and onus of responsibility and accountability for employee health, injury and illness management, retraining and retention or lateral employment requirement throughout agency from Commissioner level delegated downward through to all managerial and supervisory staff.
 - 4.11 Immediate Implementation of agency specific Key Performance Indicators (KPI's) relative to health, safety, welfare and management of sick and injured employees. Such KPI's to be linked to accountability of Commissioner and executive staff.

- 4.12 WA Police implement an immediate overhaul of the current inadequate Health and Welfare system with sufficient resources being provided to individually case manage chronic illness/injury cases. The focus needs to be on retention, full recovery and reintegration into the workforce rather than the current system which favours progression to forced medical retirement as a cost saving measure. Retired sworn officers could be recruited into paid positions as mentors and support persons.
 - 4.13 Regionalisation of the Police Health and Safety Division.
 - 4.14 Lateral employment opportunities for injured and sick officers that does not disadvantage them financially.
 - 4.15 When it is determined an officer will no longer be able to be employed as a frontline officer or in a sworn police role, whether temporary or permanent, then an alternate employment opportunity should be provided. Suitable rehabilitation and vocational training to be provided.
 - 4.16 The establishment of a "WA Police Veterans Office" similar in structure to "WA Police Legacy" staffed by paid officers that has the ability and resources to provide information, welfare and assistance with ongoing support to medically retired officers and their families post service. This office needs to be resourced by WA government and funded separate to the WA Police budget.
- (Recommendation 10 - Project Recompense)*
- 4.17 When considering, devising and implementing any new compensation process the Medically Retired WA Police Officers Association (inc.) needs to be consulted as part of any working group formed to devise and facilitate the scheme.

David S Bentley
President
Medically Retired
Western Australian Police Officer's Assn (Inc)

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APPENDIX 1

COMMUNITY DEVELOPMENT AND JUSTICE STANDING COMMITTEE - "The Toll of Trauma on Western Australian Emergency Staff and Volunteers" 1. (WA Legislative Assembly Report No. 10 September 2012)

Our association wishes to highlight the following findings and recommendations from the above report and asks the committee to include them as part of their current investigation recommendations.

Finding 1 Page 10

The Western Australian Government has yet to present to Parliament its harmonised version of the Work Health and Safety Act 2011. Current Western Australian legislation does not include a definition for 'health' that includes psychological health.

Recommendation 2 Page 10

The Western Australian Government amend current State occupational health and safety legislation so that it includes a definition for 'health' that includes psychological health.

Recommendation 3 Page 11

Departmental chief executives of the Western Australia Police, Department of Environment and Conservation and the Fire and Emergency Services Authority should be made personally responsible for the psychological health (as a result of critical incident trauma) of their staff and volunteers. This obligation should be reflected in their performance agreements.

Finding 2 Page 12

All of the State's emergency agencies have no mechanism for tracking their staff and the number of traumatic events they have attended over a particular period.

Recommendation 4 Page 15

The Ministers for Emergency Services, Environment and Police ensure that their departments develop as a high priority a computer system for tracking their staff and the number of traumatic events they have attended over a particular period.

Finding 3 Page 16

Most of the resources allocated by the State's emergency agencies to address staff trauma from critical incidents are located in Perth.

Finding 8 Page 47

The State's main emergency agencies are undergoing a cultural change as they employ additional younger members and women. This should ensure that more staff engage with the support services offered by their welfare and health branches.

Finding 10 Page 57

Emergency agencies across Australia have struggled to fund compulsory annual physical well-being tests for their staff. Efforts to provide a voluntary psychological component to these tests have not been well-supported by their staff.

Finding 13 Page 62

Chaplains play a critical role in preparing emergency agency staff for, and in responding to, stress from a disaster or critical incident. However, Western Australia Police and FESA welfare sections have fewer chaplains (both full-time and volunteer) than similar services in other Australian jurisdictions. The Department for Child Protection and the Department of Environment and Conservation currently do not employ a chaplain.

Recommendation 12 Page 63

Finding 20 Page 91

A robust database to record staff activity at the scene of a prolonged disaster is paramount to the proper fatigue management of staff and to monitor any overexposure to trauma.

Recommendation 19 Page 98 *Refer also to Project Recompense Rec. Nr. 3*

The Minister for Police immediately instigate processes to ensure that the psychological well-being of officers is at the forefront of the Western Australia Police's staff planning. These processes should include all officers being trained in psychological first aid, with subsequent regular refresher courses. Senior officers should be the first priority for psychological first aid training.

Finding 23 Page 100

Medical records for the past five years indicate that WAPOL's medical retirement rate for stress-related illness is about seven times that for FESA.

Recommendation 20 Page 104 *Refer also to Project Recompense Rec Nr 5*

The State's emergency response agencies should offer exit interviews to all of their staff and volunteers and use the information they gather to improve their trauma management procedures.

Finding 26 Page 114

The use of retired emergency staff as mentors or peer supporters has proven valuable overseas and is well-supported by all agencies which gave evidence to the Committee.

Recommendation 22 Page 114 *Refer also to Project Recompense Rec Nr 10*

The Fire and Emergency Services Authority, Department of Environment and Conservation and Western Australia Police explore the usefulness of using retired staff as mentors or peer supporters, either directly employed or through a suitable nongovernment organisation.

APPENDIX 2

WA POLICE UNION OF WORKERS - "PROJECT RECOMPENSE" REPORT AND RECOMMENDATIONS.

Members from our association were involved with and provided research data to the WA Police Union in 2014 for inclusion in "Project Recompense". The following are the recommendations endorsed by the WA Police Union membership which have been presented to the WA Police and State Government for action and implementation.

Full explanations for these recommendations can be found in the "Project Recompense" document from page 133 onwards.

Our association wishes to highlight all of the recommendations from the report and asks the committee to consider and include them as part of their current investigation recommendations.

Recommendation 1

That WA Police acknowledge there are Members who have suffered immeasurable trauma as a result of attending a number of critical incidents without the appropriate support from the Agency, and that this trauma has been life-changing for those affected.

Recommendation 2

That WA Police further explore the benefits of resilience training, greater mental health awareness and psychological first aid and implement these initiatives immediately.

Recommendation 3

That WA Police ensure appropriate interventions are administered during an officer's career to mitigate the likelihood of developing psychological illnesses.

Recommendation 4

That WA Police increase the number of support staff in its Health and Welfare Services. Currently, there are approximately 33 members of staff across several units (including psychologists, claims management staff, chaplains, vocational rehabilitation staff and peer support employees) that are intended to service more than 6,000 police officers. If WA Police is to apply the appropriate interventions, increase training and awareness and connect more effectively with both current and retired Members, there is an urgent need to increase support staff across the various units.

Recommendation 5

That WA Police initiate a connection with separated Members, especially those who have been medically retired, so that mental health and welfare can be monitored once an officer has exited the Agency.

Recommendation 6

That WA Police, with the assistance of the Government, implement, as part of its vocational rehabilitation system, a program that invests in re-training human resources so that they may be utilised in other employment areas (be it within the public sector or the private sector).

Recommendation 7

That WA Police share the 2011 'PricewaterhouseCoopers' review of the Health and Welfare Services with WAPU and other relevant stakeholders.

Recommendation 8

That WA Police reassess its response to the Community Development and Justice Standing Committee's The Toll of Trauma on Emergency Staff and Volunteers report.

Recommendation 9

That the Former Officers' Medical Benefits Scheme be amended to encompass officers who suffered a work-related illness or injury before 1 July 2007 and to provide for vocational rehabilitation.

Recommendation 10

That an organisation similar in intent and structure to that of the Department of Veterans' Affairs, and independent of the Health and Welfare Services of WA Police, be established for police officers. This organisation must encompass units that: remunerate eligible members appropriate benefits; provide a range of health care and support services for eligible members; and offer specialised, free counselling.

Recommendation 11

That a service similar to Operation Life, and linked to the National Suicide Prevention Strategy, is developed for WA police officers.

Recommendation 12

That a compensation scheme for police officers, similar in intent and structure to the Workers' Compensation scheme, is thoroughly explored and an appropriate proposal is developed in conjunction with the relevant invested parties. The proposal must maintain appropriate sick leave provisions (both work and non-work related) similar to those currently in place for serving officers and take into consideration that police officers and their work duties are unique in comparison to all other workers.

Recommendation 13

That, in conjunction with Recommendation 12, as a compensation scheme similar to Workers' Compensation is explored for police officers, presumptive legislation (similar to

that for professional fire-fighters) is considered for police officers with respect to a range of specific illnesses and injuries.

Recommendation 14

That the Government establish an ongoing scheme, similar in structure to Redress WA, that adequately and appropriately financially compensates those police officers who have been injured in the line of duty who are ineligible for other benefits and reinvigorated support services.

ANNEXURES AND REFERENCES

- Submission to Ms Liza Harvey MLA - Minister for Police and Women's interests - 2015 - MRWAPOA - author - Mr David Samuel Bentley - medically retired Sgt 5114, President MRWAPOA.
- Medically Retiring Police Officers With Dignity - Mr. David Nelson - May 2012 - Submission to Community Development and Justice Standing Committee.
- The Toll of Trauma on Western Australian Emergency Staff & Volunteers - Community Development and Justice Standing Committee, Report number 10 - September 2012 Legislative Assembly Parliament of Western Australia
- Project Recompense - WA Police Union (Jane Baker) - November 2014
- Workforce Optimisation Project Concepts Paper - Nous Group on behalf of Western Australia Police June 2014 - uncirculated document.
- *beyondblue* Support Service - Internet