## COMMUNITY DEVELOPMENT AND JUSTICE STANDING COMMITTEE

## INQUIRY INTO THE RECOGNITION AND ADEQUACY OF THE RESPONSES BY STATE GOVERNMENT AGENCIES TO EXPERIENCE OF TRAUMA BY WORKERS AND VOLUNTEERS ARISING FROM DISASTERS

TRANSCRIPT OF EVIDENCE TAKEN AT BRISBANE FRIDAY, 6 JULY 2012

**SESSION ONE** 

**Members** 

Mr A.P. O'Gorman (Chairman) Mr A.P. Jacob (Deputy Chairman) Ms M.M. Quirk Mr I.M. Britza Mr T.G. Stephens

## Hearing commenced at 10.53 am

GONDA, MS BARBARA,

Manager, FireCare, Queensland Fire and Rescue Service examined:

The CHAIRMAN: On behalf of the Community Development and Justice Standing Committee I thank you for meeting with us this morning. The Community Development and Justice Standing Committee is a committee of the Legislative Assembly of Parliament of Western Australia. The committee may look at the information it receives today as part of its deliberations for its final report.

Can you just give us a bit of an idea of what your role is with things like Fire and Rescue?

**Ms Gonda**: Effectively, I oversee the counselling and internal peer support network for Fire and Rescue, plus also manage and oversee the external provision of counselling for our members across the state.

**The CHAIRMAN**: Do you have a particular external organisation that you use for counselling?

**Ms Gonda**: No, we have a number of individuals across the state, often people who also have backgrounds with Queensland Ambulance Service EAP in providing the same employee assistance service. So, we just contract or have agreements with them individually across the state.

**The CHAIRMAN**: And the peer support group for Queensland fire brigade, how does that operate?

Ms Gonda: We actually select those people—interview them, select them, train them. Then they are put back to their regions. Each region has a network with a counselling supervisor in charge of that network. They keep an eye on the peer supporters; make sure they are attending supervision; keeping up with training; what jobs they do; whether they need help with those jobs. Sometimes, the peer supporter will go with a counsellor to help with a debrief or something like that. The training is provided centrally from my office, but the ongoing support and care of those peer supporters happens in each region uniquely.

**The CHAIRMAN**: What does the training involve?

Ms Gonda: It is a five-day training. It is somewhat experiential in that we get people to stop and have a look at their value systems and have a look at their agendas, their reasons, for wanting to be peer supporters—sometimes they are a bit loaded—and to consider what they want to get out of being a peer supporter. We try to make sure that people have thought through what they want to do and how they want to do it. We do basic micro skills: how to ask a question; how not to ask a question; how to get people to talk more comfortably; how to get them to relax; how to help them work out what their resources are; asking questions back; paraphrasing—real basic kind of counselling or people skills. We also look at critical incident management and what trauma is. We touch on those areas that we consider to be of risk, such as depression, anxiety and suicide as well. We also look at stress management and we do quite a large module on grief and loss and, also, a big thing on communications as well as the values and agendas.

**The CHAIRMAN**: How many peer supporters have you got? You have got a staff of—what? I have forgotten. Your staff is how big?

Ms Gonda: Within the office or within Fire?

The CHAIRMAN: No, Queensland.

**Ms Gonda**: I think it is about 4,500 firefighters and others and then there is a phenomenal number of volunteers.

**The CHAIRMAN**: And the staff that you have to support them?

Ms Gonda: There is myself, another psychologist or a professional officer and an admin assistant.

**The CHAIRMAN**: Was there a dedicated response to support the firefighters after the floods?

Ms Gonda: From our office?

The CHAIRMAN: Yes.

Ms Gonda: I would suggest it was while they were still happening. So, in looking through what you want to cover today, I think some of the stuff already in place—we just heightened our normal response and that was a big help. A lot of it was having to respond as we saw it at that moment in time. So, the different places depending on where, too, in that three or four-month period it was as to how we acted and responded. I could answer that question in very great detail if you want me to.

**The CHAIRMAN**: The relationship with the union—is there a strong relationship with Queensland fire and the firefighters union?

**Ms Gonda**: I do not know. I try to stay very apolitical. We are working at the moment with the unions to look at a mental health focus group and to develop a terms of reference for how we might collectively work for the greater good. During the disasters the rural firefighters association were around a bit and we did a bit of work with them. I do not recall anyone else from the union coming to me in particular, but I am a pretty small fish.

**Ms M.M. QUIRK**: Did you say how long the peer supporters' training was?

**Ms Gonda**: It is five days with us. They then go back to their regions and they do six months of supervised practice where they get buddied up with another peer supporter. At the end of those six months they are re-evaluated within their region and we look at personal qualities as well as interpersonal qualities to make them fully fledged peer supporters. Then they are re-evaluated every two to three years on that same batch of criteria.

**Ms M.M. QUIRK**: Presumably, the firefighters have access to an anonymous employee assistance program as well, do they?

**Ms Gonda**: Yes, the external provision is the employee assistance program. The internal provision is the PSOs.

**Ms M.M. QUIRK**: You said that response was well in train at the time of the floods. I know you said it was detailed, but could you give us some detail about what was done?

[11.00 am]

Ms Gonda: As I said, I was pondering this. I think because Fire and Rescue is normally a critical incident-orientated group anyway, the FireCare support, we already had that mentality and we also had that a quite well practiced and oiled machine for that. Effectively, it was a big critical incident with some trimmings and a lot more involvement. We had to rotate peer supporters out of different regions to back up where the major issue was at that point in time. We had to bring in some different counsellors at different times. I myself went out, which was different. Normally, if there is a critical incident in the region—it could be a multiple fatality; we have had some nasty house fires with deaths recently—they would be managed within the region. The local peer support network and the local supervision counsellor would respond. If it is something that just needs to be followed up on—I am very big on presence. I think FireCare has to have a presence. Even if we are a nuisance and they say, "We do not need you," at least they know we are around. I think we do more good by being around than not being around. So, that presence is there. The peer supporters are well skilled at identifying when someone needs professional intervention or not. If it is a significant event, the counsellor will go in. If it is quite well managed from within each region, if there is something they think I should be aware of or out of the ordinary or that makes it bigger or they want

extra help with, they will let me know or I will contact them and say, "How are you travelling? Is everything okay?" So that normally happens within the region anyway.

**Ms M.M. QUIRK**: How many colleagues have you got that—I take it you are a clinical psychologist?

Ms Gonda: I am just a psychologist.

**Ms M.M. QUIRK**: And you have got other colleagues or how many?

**Ms Gonda**: My 2IC is a psychologist, so that is just within the office. Then all our external providers are social workers, psychologists or members of PACFA, which is a national body that oversees counsellors. So, they have all got clinical or counselling skills and intervention skills, yes.

**Ms M.M. QUIRK**: So when you say someone is identified to have counselling, it might be one of those people rather than internal?

Ms Gonda: Yes. Sometimes if we cannot get an appointment fast enough here or some of them might think, "I know you; I'd rather come and have a quick chat to you," we will do an intervention, an immediate sort of short-term something-or-other, which ends up being an assessment as such and then referring them to some people who might be best suited to their needs. I would suggest any PSO can sit with someone in crisis and then the clinical intervention can come after.

The CHAIRMAN: How many peer support officers have you got?

**Ms Gonda**: We have got about 100 at the moment. It has been built up over the last couple of years.

**The CHAIRMAN**: Through the floods there was a response. The fireys turn up at the road crashes and, as you said, you have had a few disturbing fires lately. Is there a recording of which firefighters go to those particular critical incidents where there is a major trauma? Is there a period of time—a number of traumas that you say, "Hang on, you need a break"?

Ms Gonda: That is sort of a piece-of-string question for us still at the moment. The people in the region will know, "Watch out for him because he's been to a number of fires lately." We are training up managers to be more aware of when someone has got enough on their plate or have had too much on their plate. The peer supporters will keep an eye on people. If they do not need counselling, but they will probably just pop in for a coffee now and then and hang around or drop an email or a chat or something like that. I have lost the train of thought now, Tony.

**The CHAIRMAN**: When you have people who continually turn out—some stations will obviously have a greater demand—is there a monitoring of that to make sure that, you know, the guy is not driving down the street saying at spots, "Somebody died there and I remember doing that"?

Ms Gonda: "Somebody died there and somebody died there." That is the internal system where the PSOs will just keep an eye on them. More formally, we are developing a tracking system so that we can highlight or flag particular units. So, when a unit goes to a fire, it is recorded which crew goes and from what station. We have just started a stats-reporting database that will flag that crew, that crew, that crew. So, we should be able to in time search for that crew and see how often they have been turned out. Thankfully, a lot of supervisors keep an eye on them and might even give us a ring. Some of it is informal and we are working on a formal tracking system just to be aware of how much is enough.

I guess the trouble with trauma, if that is the word, is that is a piece of string; you can do it for 25 years and it will be just that one other thing or you can do it for a week and it will be that one other thing. The proactive stuff—I guess that is also something about what we did before disasters—is putting out information brochures, being present, doing station visits. Those regional supervising counsellors will jump in their cars and drive around and just pop in and say hi, a bit like the chaplain does.

**The CHAIRMAN**: Can I just query on the peer supporters? Is that their job? Are they front-line people that at times just come off and —

Ms Gonda: They are front-line people; they are administration people; they are FireCom; they are also operational people. They are practically anybody from within Fire and Rescue who want to be peer supporters. A lot of them are front-line people. This is a voluntary role, so they will have to get permission from their supervisor to be able to be freed up. A lot of the PSOs will go in their own time and make phone calls and follow up in their own time; or, if the station is quiet, there might be a bit of leeway there.

**The CHAIRMAN**: Do you use chaplains?

Ms Gonda: Yes, I have got it written on my notes here. We have one chaplain in Queensland Fire and Rescue plus some informally appointed ones in a couple of the regions. We have a fabulous working relationship with our Chaplain. We will scratch his back and he will scratch ours. Certainly during the disasters we did an awful lot of networking about making sure that everybody had the cover that they needed, whether that be the spiritual support or community support through Salvation Army or clothing or those sorts of things, or whether they just needed to stay within their rural firefighter brigade and be supported by them.

**Ms M.M. QUIRK**: Has there been any spike in the number of post-traumatic stress cases you have had in recent years?

Ms Gonda: No, not at the moment. We have had significant increase in counselling in the last 12 months. I did my figures yesterday for you. There has been an increase of about seven per cent from the previous year of those people seeking support and counselling. Some of that is reactive stuff. Some of that will be normal day-to-day stuff and some of that will be about disasters. One of the difficulties of working out whether this is disaster related or not is that disasters will heighten whatever has already been a problem. If it is a relationship or a marriage or finances or whatever, it is just going to—sometimes we cannot tease that apart.

**Ms M.M. QUIRK**: Is there any suggestion or consideration being given to psychometric testing at recruit stage so that people who are going to be more susceptible, if you like, to react to trauma are weeded out?

Ms Gonda: They do psychometric testing and that is a domain of recruiting. We go to each intake and talk to them about what FireCare does and about trauma and about stress. We have always touched base with those guys, with the new FireCom people and intake; we touch base with them. We have developed touching base with those people doing specialist training like the search and rescue or the fire investigators. We actually go and say, "Tell us what is going to be different about this and what different skills will you need to be able to manage that?" Hopefully, our face is seen somewhere all the way across that.

**The CHAIRMAN**: In the new recruits training, what sort of training do they get in respect of building up resilience and what they might expect when they hit the road?

Ms Gonda: That is part of what we do. So, looking at balanced lifestyles, looking at stress management skills, looking at what trauma is and how to identify it and how to look at your predisposing risks and factors like stress and family relationships and things such as that. Certainly with the search and rescue and the fire investigators we say, "If you are not in a good space at this moment in time, do not put yourself at risk, or talk to someone before you put yourself at risk, by going out and doing a big investigation or a big response." During the disasters we tried to make the specialty groups aware of the stresses that they had. "Gosh, you've done this flood. You've done this flood. You've done that, that, that, that," but it is a different thing in a way because they are doing what they are really trained for. For them it is professional fulfilling and challenging and meaningful. So, to stop them because they have done too many will have repercussions as well. So, it is really —

The CHAIRMAN: Judgement call.

**Ms Gonda**:— an individual thing to call it quits.

[11.10 am]

The CHAIRMAN: Do your services extend to volunteers as well?

Ms Gonda: All the rural firefighters in Queensland are volunteers. When we were in Grantham we went down to the incident control centre at ground zero—if that is the word for it—and hung around and chatted and talked. Some crews had not come back, so we would take them lunch. We were a presence and an opportunity for a chat. People would come back and have lunch and not complain but comment and say, "Gee whiz, that was an amazing thing". We might spend five or 10 minutes with them, but they have a chance to touch base and ground themselves and to catch up with themselves. There were endless crews and people who wanted to make a difference and be involved. Sometimes we had to manage their frustration of not being able to do enough. I have been with fire and rescue for nearly three years now, and the camaraderie and sense of belonging is one of the greatest mitigators of stress and trauma as far as I am concerned. They belong in a team; they belong in a group and they care about each other. They wanted to go to Grantham and make a difference. Quite a number of our rural firefighters had been involved.

**The CHAIRMAN**: What is the fatigue management regime that is in place, particularly for volunteers? How do you tell them it is time to go home and have a break?

**Ms Gonda**: We leave that to the supervisors. In situations like that we might advise them and say that Fred is a bit grumpy or so and so has been here for three days in a row. We drop little hints for people to be aware and to monitor. A fatigue management protocol has been put through workplace health and safety, and it says, "That's it pal!"

**Mr A.P. JACOB**: Do volunteers have access to the EAP?

Ms Gonda: Yes, they do. There are some differences in what they can avail themselves of. It will affect what they will be doing in the fire service or if it has been brought about because of something they have done for fire and rescue, then, yes, certainly. I do feel that we have a duty of care if someone approaches us and we cannot quite deal with a matter. They might need long-term care and it may be an issue that we cannot cover. However, we have a duty of care to give them information and support them until they can access that information. I feel quite strongly about that.

**Ms M.M. QUIRK**: Terms that seem to be in vogue at the moment are "mental health first aid" and "psychological first aid". Do all recruits receive training on that during their recruitment? Is that a good idea?

Ms Gonda: All year we have been rolling out training or retraining in immediate management post-trauma. That used to be the critical incident debriefing and defusing, but for most of this year we have been teaching people psychological first aid as a replacement model. All the PSOs are very close to having had that training, and now we are starting to roll it out with crews at the ground level. It is already happening and in motion. We would like to get to managers and supervisors as well, because it is just good common sense in caring for people who are in distress and who have a bit of a need at this moment in time.

**The CHAIRMAN**: Do you extend your support to the families of fireys?

**Ms Gonda**: Yes. Again, with the rural volunteers it is a bit limited because of finances and so forth. Certainly, it is extended to the families of our auxiliaries, who are part-time firefighters and permanent firefighters. During a disaster kids will respond because dad has been away for a while or they watch television and see other firefighters and think about their dad who is also a firefighter. We have a responsibility to care for the bigger picture.

**The CHAIRMAN**: Do you have a USAR in Queensland?

Ms Gonda: Yes.

**The CHAIRMAN**: Has it been deployed lately outside of its jurisdiction?

**Ms Gonda**: Not since Christchurch that I am aware of.

**The CHAIRMAN**: They were deployed to Christchurch?

Ms Gonda: Yes. I think one or two went to Japan as well.

**The CHAIRMAN**: Is there anything special in place for them?

Ms Gonda: Yes. The psychologist who went over with them began defusing them in-country. It was the first time that anyone from FireCare has been able to do that. It was fabulous for us to make that much difference. Natalie went over and when she came back I asked her to be the patron saint of the tech rescue people! She does not particularly like that title. She is a key figure for them to connect with. She did a beautiful job in Christchurch by being just one of the guys and familiarising herself with the people and being a comfortable person for them to relate to. She has taken up the task of doing three-month and 12-month monitoring of those USAR people who are willing to be assessed. We are interested to see what that will show, because it has not been done before in that light. The difference about the USAR people after last year was the relentless flooding and drowning events and the swift-water rescues. I do not want to be too arrogant, but, boy, there are not many times in life where people have had that much stuff so close together and then to be sent to Christchurch as well.

**Mr I.M. BRITZA**: Given that Natalie was exposed to quite a bit, what did she do to be debriefed, for want of a better word?

**Ms Gonda**: It is good practice that psychologists and counsellor supervisors have supervision themselves. We can pick a single person with whom to debrief. We talk about what we have done, how we have done it, whether we did it well and about the people we have interacted with and could we have done it differently.

**Mr I.M. BRITZA**: At least they would be aware of the importance of it, not like those in the field. That is really good.

**Ms Gonda**: Absolutely. In the last 10 years we have been really pushing it. But it is a part of keeping us healthy so that I do not dump my agenda onto somebody else. I would love to have gone to Christchurch, but I was aware that I was too pooped. I was able to self-monitor, so I did not go.

**Mr A.P. JACOB**: What was the attitude and mindset of some of the individuals going, first of all, to Christchurch while, I imagine, a lot of the clean-up was still happening here? Did they have feelings of leaving home to help someone else at the time?

Ms Gonda: I do not know. I imagine that the locals were very happy to look after their local stuff. I would imagine that a lot of the tech rescue guys identified that as their team, as their group. I certainly know that over in Christchurch, the camaraderie, dedication and commitment of these guys to soldier on to find something was profound. It is good for their morale. They care for each other.

**Mr A.P. JACOB**: Are you aware whether any of them lost property or had to vacate their homes?

Ms Gonda: Yes, some of them did. We tried hard to get details to follow those people up. A number of them went on to have individual ongoing support after that initial disaster style of contact.

**The CHAIRMAN**: Barbara, have you ever considered using retired firefighters as peer supporters?

Ms Gonda: I have.

**The CHAIRMAN**: You have considered it; have you done it?

Ms Gonda: I have spoken to the president of the retired firefighters, even to do peer support within the retired firefighters, and certainly for the new younger firefighters coming through to have a mentorship or some sort of "uncle" who can support them and help them through stuff. We have a retired firefighter who very graciously offered to assist us to spread the word about trauma and post-traumatic stress. He is a retired firefighter. He has made significant impressions on people by telling his story of doing something early, not late. It has been good for people to hear him, because he had 25 years in the service and has credibility and kudos within the ranks. Getting fireys to talk about this stuff is probably a little more valuable than having some psychologist who used to be here and there.

**The CHAIRMAN**: Do you ever any idea of the attrition rate in the Queensland fire and rescue?

**Ms Gonda**: It is very low. It is three or five per cent or something like that. It is remarkably low and it is one of the lowest in the public service.

**The CHAIRMAN**: Are they given exit interviews when they leave?

**Ms Gonda**: They are. I am not party to those, because it is more of an HR function.

**The CHAIRMAN**: After the floods did you notice an increase in domestic violence or substance abuse amongst fireys?

Ms Gonda: Not that came through on the stats. We devoted extra money to regional supervising counsellors to go out and be much more present. They held barbecues during, after and before. I have written it down three times, and I thought "whoa", but the barbecues are a very normalising and friendly family event at which they can get together and bounce stuff off each other. I am sure there has been increase in stuff because of the nature of how we function and how people are. We do not have the stats to support that. Anecdotally I could talk to the supervisors to see what their general impressions are.

[11.20 am]

**The CHAIRMAN**: Do you get reports from psychologists? I assume they are confidential and that you do not know which individuals have shown up for what reasons; you just get the stats.

**Ms Gonda**: Yes. The stats show whether it is a permanent or auxiliary firefighter, their gender and the problem they presented with. It is quite general and unidentifiable.

**The CHAIRMAN**: It has been suggested to us in some jurisdictions that all the emergency services agencies, likes ambos and fireys, should train together and do their recruitment and training so that they all know each other. Do have a view on whether or not that is a good option?

Ms Gonda: At the recruit level?

**The CHAIRMAN**: Yes, kind of like an emergency services academy.

Ms Gonda: They would have some stuff in common, such as their coping styles, humour and camaraderie; but the organisational structures and cultures are different between the three emergency services, including police. I do not know when it is good to introduce that identity. I have worked in the same role in the police as well and culturally there is quite a different population. They require different resilience skills. I imagine, if you did that, it would have to be real basic stuff, and fairly soon they would need to start to identify themselves as those working groups and look at the coping styles, the skills, the challenges that belong to those working groups. That is as important.

**The CHAIRMAN**: Following on from that, I refer to the notion of having one counselling service for all the different areas. Most agencies use 30 or 40 psychologists who are dotted around the state. You do not have any one particular organisation. You are all using the same people anyhow.

**Ms Gonda**: We have people who have an insight into what the peer support network is about—that is one of the key factors. The issues that apply to emergency services such as fatigue and shift work

and chronic exposure to trauma and those sorts of things is not something that any counsellor could do. I think there is a level down here where any peer supporter from any organisation could care for somebody to that point. But after that point, it is ideal to have someone who knows what it is like to have to collect body parts and those sorts of things. In crisis, if you had to at a pinch, anyone can do that. But to do that, ideally you need someone who has insight.

**The CHAIRMAN**: How vast is the difference in cultures between the agencies?

Ms Gonda: I do not know a lot about ambulance culture. I know a bit about volunteer-type cultures. I cannot speak a lot for emergency services. The fire culture—I am a bit of a fan of fireys, so you might have to temper me down a little bit—is benevolent and is the best public service I have worked in my working career as far as caring for its people. I was talking to someone recently about that. I think it comes from the top as well as from what we put in at our level; it is the attitude and the culture and the support and care given to people. If I had a couple of lifetimes, I would do a PhD or two about belonging to a group. Even at the fire stations the same crews work together for sometimes 10 or 15 years, so they are family. I think that is very protective for people.

**Mr I.M. BRITZA**: Is the implication then that the frontline service—this may be the wrong terminology—has a trusting relationship with the administration? That is what I thought you were implying.

**Ms Gonda**: That they have a trusting relationship with —

**Mr I.M. BRITZA**: You made a comment about the whole department; is that right?

Ms Gonda: The whole fire and rescue?

**Mr I.M. BRITZA**: Yes. Therefore, my question stands: are you implying that the frontline service—which has a natural distrust of administration—has an understanding with the administration?

Ms Gonda: I am an idealist and a romantic. I would like to think there is an understanding. I am aware of some ruffles, because we go to the coalface and talk to people. There is an inevitable difference between management and staff. I see more of what management does than I do of what happens at the coalface because I do not get out there as much as I would like to. Certainly from what I have seen within management, the attitude is one of care and benevolence.

**Mr I.M. BRITZA**: Yes, that is an important message to get across to the front line, because they often question that.

Ms Gonda: Yes, and I am not sure how I sell that one really well. I keep trying to. Certainly, when we recently did the first lot of training we ever did with fire investigators, we did a group on mental health wellbeing with them. We have never seen them as a target group before and we have started to do that now. We encouraged them to see the fact that we were there and that the money is being spent for us to be there meant that they were supported and it was an important part of looking after them.

**Ms M.M. QUIRK**: How many personnel are in your particular group in FireCare?

**Ms Gonda**: Just myself and another psychologist and an admin officer.

**Ms M.M. QUIRK**: What is the budget you have? I presume the external counselling comes under your budget as well.

Ms Gonda: Yes. Last year's budget blew out. It is probably not recognisable as being what it should have been because we did so much extra work for the disasters.

Ms M.M. QUIRK: But what sort of general ballpark figure was it?

**Ms Gonda**: I think \$680,000 was the year before—somewhere around that—which includes wages and travel and training and everything.

**Ms M.M. QUIRK**: Are you familiar with a New South Wales case involving a police officer called Doherty?

**Ms Gonda**: Doherty or Hegarty?

**Ms M.M. QUIRK**: No; Hegarty was here, Doherty was in New South Wales. You may be more familiar with Hegarty, but certainly Doherty was a case where a police officer successfully sued because of consistent exposure to post-traumatic stress. Has the prospect of litigation on that sort of issue changed how the fire service deals with these issues, or given them added impetus or —

Ms Gonda: I do not know. I have been with fire for only three years in October. I did four years in police and then a number of years in health in internally APs. For me, I think the obligation I have as a registered professional as well as a public servant is accountability. It is not so much being fearful of litigation as being able to demonstrate that we met our duty of care. It is a duty of care thing. It is the same as giving people the information that if they do not want to come to FireCare, they can go here and here and here, as a duty of care to them to get the best that they can get, wherever they want to get it.

The CHAIRMAN: The floods were a huge event. As you said, that was an event upon an event upon an event upon an event. Has the fire service or FireCare decided to survey all its officers just to see if they were happy with how they were supported and with how the whole thing came together? With all those events—4,000 career people and stacks of volunteers on top of that—it could be a huge issue that just does not bubble to the surface, it is just bubbling underneath the surface causing problems. Has there been any thought to doing that sort of follow-up?

Ms Gonda: It is a thought. I guess to get around to it is the issue, maybe. We aim to do yearly surveys or offer yearly surveys to all QFRS employees to see what they think of FireCare and whether they are aware of FireCare. There was a survey done about two years ago about what people knew about FireCare, what they think of it, did they trust our confidentiality and those sorts of things. No, we have not done anything about that yet.

The CHAIRMAN: You have done that survey previously. Was there a good result?

Ms Gonda: Yes, actually; it was quite a nice feeling. I think, Tony, if there is anything, we need to improve our presence in the rural areas or people need to have more knowledge of us in the rural areas. It is not day-to-day knowledge of us. A lot of my supervising counsellors would do some trips to the back of Charleville and places like that just to let people know that we are around. We are slowly getting more peer supporters scattered throughout the state, so that is another bonus as well.

[11.30 am]

**Ms M.M. QUIRK**: In terms of publications, is there a wallet card or posters that go up in the stations?

Ms Gonda: There are posters and bumper stickers and pens and little stress cards and business cards. We have got stands in some of the stations with all the brochures in them. There are about 10 or 12 FireCare brochures on various topics as well. And we get a big blurb and promotion every now and then. There is a rural volunteers' symposium at the end of next week and we will have a stall and promote it. We have created a mini-PSO for rural people, so I am hoping they might pick that up as being a commitment they can make in two days without taking time off work. It is designed specially to meet rural areas and rural demands in critical incidents.

Ms M.M. QUIRK: Is there any examination of using social media for some of this stuff?

**Ms Gonda**: For spreading this stuff?

Ms M.M. QUIRK: Yes.

**Ms Gonda**: We looked at that. We are told that a lot of rural people do not have access to that or access to Queensland Fire and Rescue's social media. It is one of those things that is on the page.

**Mr A.P. JACOB**: You have 1,500 rural bushfire brigades, so it has got to be very hard to try to get coverage of all of those. I guess it is your urban ones that are your professionals, so all your regional ones are volunteers.

**Ms Gonda**: Some of them are auxiliaries. The larger regional centres will have auxiliary brigades, so they get paid to come in three hours a week or something like that and will get turned out and get paid. Other than that you have just got your volunteers.

**Mr A.P. JACOB**: Okay, so is it the greater Brisbane area, including, say, the Gold Coast and Sunshine Coast, that you have your professional ones and then outside of that it is only really auxiliaries?

**Ms Gonda**: That is kind of a rule of thumb. In saying that, in Brisbane up near Caboolture we have an auxiliary brigade or rural brigade. There are little pockets tucked in behind the mountains. And we have got Mt Isa, which is actually a permanent station.

**Mr A.P. JACOB**: So your Townsvilles and that are just auxiliaries?

**Ms Gonda**: They would be major stations; they would have permanent firefighters. Some of the stations like the smaller ones further up the coast will work a Monday to Friday—they will be permanent firefighters. They are there Monday to Friday and they get called in too. There are all sorts of different variations in the work status of those people.

**The CHAIRMAN**: Is there a rule that says that if somebody is turning out to a fatality or something like that, automatically a peer supporter goes there as well? How does that work?

Ms Gonda: We have just finished revising the incident directive. We have listed 10 presentations that we would consider potentially traumatic. The person in charge of the event or the fire comperson would ring the local PSO and let them know that there has been a fatality or there has been a child injured or whatever it is that has happened, so the PSO will then either ring those people and connect with them or follow them up in a couple of days. There is less and less support for immediate contact and follow-up but rather to give people time to become tuned down and more normal and then follow them up and see how they are going.

**The CHAIRMAN**: For the rural fire brigades and that?

Ms Gonda: That would be the same.

**The CHAIRMAN**: Okay. Is there a natural network of counsellors and psychs across Australia who deal with emergency services?

**Ms Gonda**: I guess we come across each other at conferences and things, such as memberships in certain organisations. There is a conference in Perth in September on trauma. I brought you a couple of copies in case you want to go. There will be some significant trauma people there. The Australian Centre for Posttraumatic Mental Health has sponsored that. I thought maybe you would be interested. I do not know how long your inquiry goes for.

**The CHAIRMAN**: We are hoping to report in late September.

**Ms Gonda**: David Forbes might be in charge of this whole thing now. It is certainly always very —

**Ms M.M. QUIRK**: We have spoken to David.

**The CHAIRMAN**: Do members have any other questions? All exhausted?

Ms Gonda: You must be getting pretty tired!

**The CHAIRMAN**: Barbara, is there anything that you wanted to say extra that we may not have covered?

**Ms Gonda**: Yes. I guess maybe during the event. If I was talking to a smaller state, you know, but talking to Western Australia with your regional variations you appreciate that what works down in Perth is not going to work up the back of the Pilbara or wherever.

**The CHAIRMAN**: Careful! We have the member for Pilbara right down the end.

Ms Gonda: Well, you would appreciate that you are different to Perth and are special! It is to not have one size to fit everything. What works in Brisbane does not work in the back of Toowoomba. I was mindful and it seemed to be of value that the regions manage themselves and told me where their weak spots were and where they needed more support, so we always kept up negotiation with the local people, particularly up in Cairns and around Townsville after Yasi went through there. There was Yasi and then there were more cyclones hanging around and there had been another one just beforehand. We did not know how long our response had to be held over for.

We got to Yasi very quickly in the piece—I think we were there within a day and a half—which gave us plenty of time to assess the environment and to see how we were going to manage using local resources and resources from other regions and how to marry those people together so that they could work well together and we did not step on any toes or ignore anybody. That makes a difference, does it not? Also, we drove around and got to know people, got to talk to people, got to find out. We were able to advise management that that was a good place, this was a bad place, there was stuff there. Also what was happening is that the fireys and management were coming and saying, "There's a whole bunch of community people down there that are upset and we don't know what to do."

Some of what we did, too, was just duty of care for people. I can remember getting a firey to come down and help them with particular needs that they had. So we were helping the public as well. You cannot turn your back on someone who is distressed just because they are not your client group.

**Ms M.M. QUIRK**: I take it there was a bit of anger about not having the correct resources or having to do things that were either above their level of competency or were not consistent with their standard operating procedures.

Ms Gonda: I was not aware of that. I was more aware that the frustration was that people were there and they wanted to make a difference and they had not got a job to do, so some of the work that management had to do was to divvy it up so that everyone felt like they could contribute. That need to contribute and make a difference was huge, I think. Working it out as we went along was important and using local resources and getting to know local people and afterwards to then let the regions know, too, what they wanted to do. I am pleased that we did it that way; that I did it that way. There were barbecues and barbecues and barbecues, because that was just the most healing thing.

When it was first suggested to me I thought it was not going to make a difference. This was in one of the towns that had been significantly flooded. The peer supporters and I put together this barbecue and the crews came in at lunchtime and their families and the kids. That was probably far more healing, or as healing, to just have a normal event where they could reconnect with each other and say, "Oh, did you hear about Fred?" and "Did you hear this happened?" At the end of that barbecue the kids played and had a water fight. I felt quite reassured that if kids could play with water after a flood, then that was pretty good.

**The CHAIRMAN**: We have spoken to quite a few people across the world now. Christchurch certainly had the same experience with barbecues, not just for the responders but for the community as well. It seems to be a good method.

**Ms Gonda**: I do not want to hold you guys up too much, but post-disaster we sent a lot of emails and a lot of reminders, probably for a good year, letting them know, "You might see some of these things now and you might see some of these". I think probably towards the end of the 12-month period was when some of the cracks started to show and we had a bit more volatility amongst

crews, a bit more depression—that is when stuff started, the wheels started to show that they were squeaking a little bit. Whilst the pressure is on—I used to be a nurse a long time ago—while you are in the middle of it, brilliant, you can do it, but it is afterwards when you come back down off that that things happen. So we sent a lot of reminders out to management, got extra money put aside so that counsellors could do visits and be seen, reminded people of anniversaries especially, which are the moments when you are more likely to have some sort of reaction. We found the best ways in each area to handle that and how to be present for that. I made sure all the groups had supervision.

## [11.40 am]

Normally the counsellor would supervise that peer support group, but I actually kind of got a bit stroppy and said, "No, guys, you need to get another one again", because the counsellors were just as involved. I think that was a significant factor too—that a lot of the counsellors and PSOs had been affected in some way or another by those disasters. It was their fabulous integrity that they got out there and still cared for other people. Long-term follow-up? Like I said, with search and rescue we are doing a 12-month follow-up. There will be indicators from that as to what we will do thereafter, but there is certainly a PhD in it if anyone is interested. I think they are probably the main points I wanted to get across. Also, low-key interventions and a continuing presence of the attitude of support.

The CHAIRMAN: Barbara I think we have exhausted all our questions for you. I thank you very much for coming in and giving us the benefit of your experience. We will send you a copy of the report when it is tabled, but in the meantime we will also send you a copy of the transcript, so if there are any major corrections, if you could just make those and send them back to us to make sure that we get it right. Thanks very much for everything.

Hearing concluded at 11.41 am