MENTAL HEALTH & WELLBEING STRATEGY 2021–2026

Our People are mentally and physically fit, ready and capable to deliver high quality policing and emergency services for our community







Department of Police, Fire and Emergency Management

Photo: Zak Simmonds/The Mercury

÷#

K

Tasman

100 100 100 100 100

1

-

CONTENTS

Foreword	2	
Purpose of this Strategy	3	
What is Mental Health and Wellbeing?	4	
What does Mental Health and Wellbeing mean to our people?	4	
Why do we need a Mental Health and Wellbeing Strategy?	5	
Understanding our People	6	
Our Mental Health and Wellbeing Vision	7	
Our Wellbeing Support Model	7	
Our Stigma Reduction Model	8	
Principles	10	
1. Proactive and responsive	10	
2. Collaborative shared responsibility	10	
3. An integrated people-centred approach		
4. Integrity	11	
5. Hope, Efficacy, Resilience and Optimism	11	
Focus areas	12	
Our Mental Health Continuum	13	
Focus Area 1: Our People and Our Leaders	14	
Focus Area 2: Evidence-based, Proactive and Integrated Support	16	
Focus Area 3: Culture and Capability	18	
Focus Area 4: Partnerships and Collaboration	20	

FOREWORD

Emergency service work is both rewarding and challenging. The rewards are plentiful and, together with the fulfilment that comes from serving our community, they can be intensely satisfying. Emergency service work is also tough as every day we are confronted by situations that are beyond what most people will ever experience.

We owe it to ourselves, to each other, and our families to do all that we can to minimise the impact of the confronting side of emergency service work by looking after ourselves and our colleagues.

The Tasmanian Government has demonstrated an ongoing commitment to providing a mental health and wellbeing program that supports both the physical and mental health of first responders and support staff. The Government's commitment includes an additional funding allocation of \$1.5M per annum for eight extra staff.

This Strategy is evidence of the commitment we have to mental health and wellbeing. We have established Wellbeing Support to ensure that we have a comprehensive range of promotion and prevention programs in place, together with intervention and response services that are appropriate for our people.

Our Wellbeing Support Model has Our People and Their Families at the centre. We recognise the important role that families play, and our support services are extended to them if they are impacted because of the work that we do. We will also focus on normalising the seeking of help for mental health related issues as we know that it is better to access support early.

I am committed to doing everything that can be done to assist the mental health and wellbeing of our people, both volunteer and career staff. We cannot do this alone however – each of us must take responsibility for our own wellbeing and commit to reaching out when we need help.

l'Hie

D L Hine Secretary | Department of Police, Fire and Emergency Management



Purpose of this Strategy

The Department of Police, Fire and Emergency Management is committed to supporting our people to be mentally and physically fit, ready and capable to deliver high quality policing and emergency services for our community.

This Strategy consists of an overarching vision, a mental health and wellbeing model, a stigma reduction model, guiding principles and focus areas to support the mental health and wellbeing of our people.

This Strategy is based on established practice and aligned with the World Health Organisation (WHO) Framework on Integrated Peoplecentred Health Services and Beyond Blue's Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations.

Through this Strategy, we aim to support our leaders, managers, supervisors, front-line responders, support staff and their families to build a workplace where our people's mental and physical health is supported through:

- a shared understanding of mental health and wellbeing
- a workforce empowered to maintain and improve their mental health and wellbeing
- early detection and response to physical and mental health risks
- the delivery of services through an integrated people-centred approach
- an approach of shared responsibility between the organisation, our people, and internal and external supports
- policies and practices that promote a culture that is supportive of mental health and wellbeing.

We will focus on:

- leadership
- reducing the stigma attached to seeking help
- appropriate early intervention
- ensuring the services we deliver¹ are both proactive and reactive.

This Strategy has been developed with our people through feedback obtained through:

- Beyond Blue's Answering the call national survey, National Mental Health and Wellbeing Study of Poice and Emergency Services – Final Report
- the consultation phase for Project Wellbeing
- focus groups
- the 2018 Critical Incident Stress Management Program Review
- formal consultation (including 51 consultation sessions held statewide, with 440 persons attending).

The Wellbeing Leaders Group is accountable for the implementation of this Strategy. Annual organisational and business unit Wellbeing Action Plans will be developed, with all areas of the organisation required to report, at the end of each financial year, on progress in each Focus Area. This Strategy recognises the challenges of the unique environments our people work in, and that individual needs will differ. This Strategy is not intended to be directive, rather it is acknowledged that each individual has their own needs and flexibility may be required to work with them to support their mental health and wellbeing.

This Strategy supports the Tasmanian Government's commitment to providing a proactive and preventative mental health and wellbeing program that supports both the physical and mental health of front-line responders and support staff. This commitment will assist us to build safer and more supportive workplaces.

What is Mental Health and Wellbeing?

The World Health Organisation (WHO) describes mental wellbeing as a state of well-being in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.²

The Beyond Blue Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations defines wellbeing in the context of first responders as: a state of being comfortable, healthy or happy – to feel good and function well. Broader than just mental health, a state of wellbeing is where a person is considered to be flourishing in both mental and physical health³.

What does Mental Health and Wellbeing mean to our people?

As part of the consultation for the development of this Strategy, we asked our people what positive wellbeing looks like when we get it right. We were told mental health and wellbeing initiatives for our organisation should be:

- multi-faceted and consider more than one element of our peoples' health
- a shared effort and include accountability between individuals and internal and external stakeholders
- delivered in a proactive, consistent and holistic way
- based on evidence and use of de-identified data to inform and continually improve our services
- focused on the process for the delivery of services
- supported by active and visible leadership from all areas of the organisation
- embedded as part of our everyday business.



² World Health Organization. *Promoting mental health: concepts, emerging evidence, practice* (Summary Report) Geneva: World Health Organization; 2004.

³ Beyond Blue Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations (2016).

Why do we need a Mental Health and Wellbeing Strategy?

Our organisation is an emergency front-line responder agency that includes the State Emergency Service, Tasmania Fire Service and Tasmania Police, supported by Business and Executive Services and Forensic Science Service Tasmania.

Given what we do, we are, and must be, committed to the mental health and wellbeing of our people.

Our people tell us they find supporting the community very rewarding, they enjoy the camaraderie and the diverse career opportunities. However, they also tell us that working within an emergency services environment is hard work – particularly given they are exposed to distressing and dangerous situations, threats, violence, serious injury and death. Our people are called upon to see and do things the broader community would have difficulty comprehending.

These experiences, combined with shift-work, long hours and trying to achieve a work/lifestyle balance may put our people at a higher risk of physical and psychological injuries. Injuries may be experienced immediately after an incident or over time.

While non-operational workers are not front-line responders, they can also be exposed to highly stressful and potentially traumatic events.⁴ It is important we understand the specific individual and more general challenges our people face.

Family and friends also play an important role in supporting our people and their role should not be underestimated. The demands of front-line responder roles are likely to impact on family and personal relationships. Family members are often the first people to notice signs their loved ones are struggling.⁴ This Strategy acknowledges that the support provided by family and friends is a key factor for wellbeing and recovery and ensures our support services include information and support for them.

Not only is this Strategy important for the mental health and wellbeing of our people, but there can also be financial benefits. Beyond Blue's *Good Practice Framework* states: research has shown a potential return on investment of \$2.30 for every one-dollar an organisation invests in creating mentally healthy workplaces.

Whilst financial benefits are important, the reduction of the impact on our people and their families is the primary aim of this Strategy.

Our front-line responders tell us that the best part of the job includes:

"I love my job, no two days are ever the same. I really enjoy the camaraderie within policing. At the end of the day I feel like I have made a positive contribution to someone's life."

Police Officer, 14 years experience

"I have been volunteering to support my community for over 20 years. I love being able to help and give a bit back to a community that has given me so much."

State Emergency Service Volunteer, 22 years experience "... every day I go to work I may get the opportunity to save a life or at least help someone who is having a really bad day."

Firefighter, 20 years experience

Our front-line responders tell us that the most difficult parts of their job include:

"Advising family members that one of their loved ones has died."

Police Officer, 20 years experience

"I had to have a break from my volunteer role with SES. Combining the workload with my job and family can be difficult."

State Emergency Service Volunteer, 11 years experience

"The fire seasons over the last few years have been longer and more intense. It can be hard to juggle the needs of the community with my own."

Volunteer Firefighter, 25 years experience

⁴ Beyond Blue. Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations (2016).

Understanding our People

Beyond Blue's 'Answering the call' survey and our injury management data provides us with important information about the health of our people.

Answering the call⁵

First responders⁶ who have experienced stressful events that deeply affected them in the course of their work:

- 38% of TFS Career Firefighters
- 74% of Tasmania Police
- 47% of TFS Volunteer Firefighters

First responders who have thought about suicide:

- 16% of TFS Career Firefighters
- 11% of Tasmania Police
- 22% of TFS Volunteer Firefighters

First responders who have felt that 'sometimes' work drains so much of their energy that it has a negative effect on their private life:

- 33% of TFS Career Firefighters
- 38% of Tasmania Police
- 22% of TFS Volunteer Firefighters

First responders who reported they would be hesitant to disclose they were suffering from a mental health related issue or problem (self-stigma):

- 52% of TFS Career Firefighters
- 66% of Tasmania Police

Injury Management data

- in comparison to 2018-19, new workers compensation claims increased by 16% across DPFEM
- 39 new claims for PTSD have been received by the Department since October 2018. 24 of those were received in 2019-2020
- soft tissue injury is the most common type of injury sustained by both members of Tasmania Police and the Tasmania Fire Service
- mental health claims take longer to resolve and are more costly to our people, their families and our organisation.

In addition, we know:

- 12 types of cancers are known to be linked to firefighting; see Schedule
 5 of the Workers Rehabilitation and Compensation Act 1988
- more than one in three emergency services volunteers report having been diagnosed with a mental health condition in their life; compared to one in five of all adults in Australia - ABS, 2015.

Having a focused strategy to support and guide the mental health and wellbeing of our people is consistent with good practice in front-line agencies and essential for us to continue to provide emergency services to the community.



- 5 Beyond Blue Answering the call national survey, National Mental Health and Wellbeing Study of Police and Emergency Services (2018).
- 6 State Emergency Service data is not available.

Our Mental Health and Wellbeing Our Vision for positive mental health and wellbeing within the organisation is that our people are mentally and physically fit, ready and capable to deliver high quality policing and emergency services for our community.

Our Wellbeing Support Model

OUR WELLBEING SUPPORT MODEL takes an employment life cycle approach. The model is based on providing our people and their families with access to the most appropriate services for their needs at any given time, *the right support at the right time*. The model places our people and their families at the centre of this approach and recognises that the needs of our people change throughout their career.



Our Stigma Reduction Model

To improve wellbeing, we need to challenge how we think about our mental and physical health. We must create workplaces where positive mental health and wellbeing are a priority and we need to actively address the issue of stigma – especially given 52%-66% of our people said they would be hesitant to disclose they were suffering from a mental health related issue or problem.

The Beyond Blue *Answering the call* survey identified stigma was a significant barrier to seeking help. The survey found very high rates of self-stigma;

- 33% of respondents expressed shame about their mental health condition
- 32% expressed they believed their mental health caused a burden on those around them, and
- alarmingly 61% of respondents avoided telling people about their mental health condition.

Interestingly,

- most front-line responders do not hold stigmatising attitudes towards their colleagues
- only 1 % of those surveyed considered mental health conditions are the fault of the individual experiencing them, and
- only 2 % considered that those with mental health conditions are a burden on others.

To assist our people to change the way they think about their own mental health, a Stigma Reduction Model has been developed. The model provides an overview of how our people currently consider the stigma attached to mental health and wellbeing and seeking help (current state). It also shows where we want to be in 2026 (future state).

The Stigma Reduction Model recognises everyone's contribution to reducing stigma and will guide the activities we undertake to change the way our people think about their mental health and wellbeing and to create workplaces where positive mental health and wellbeing are a priority and the stigma of seeking help is removed. We recognise that by focusing our efforts on improving mental health awareness and reducing self-stigma, the number of claims for worker's compensation may increase - noting that an increase has been experienced following changes to the Workers Rehabilitation and Compensation Act 1988 related to presumptive cancer for Firefighters and Post Traumatic Stress Disorder for all State Government employees. We will use the data associated with these notifications to assist us to inform our work practices, supports, prevention and early intervention strategies.



Mental Health and Wellbeing Stigma Reduction Model

CURRENT STATE		FUTURE STATE
 OUR PEOPLE 52%-66% of our First Responders would be hesitant to disclose they were suffering from a mental health related issue or problem* 33% of First Responders expressed shame about their mental health condition* 61% of First Responders avoided telling people about their mental health condition* The number of our people seeking support is steadil increasing, but much more needs to be done 	Have a protect menta Regul check Welli Und Apj	DPLE – take responsibility for their own wellbeing better understanding of the risk and tive factors associated with positive I health and wellbeing arly initiate mental health and wellbeing ks – through MyPulse and/or through being Support erstand the importance of seeking help early preciate the importance of talking about ental health and wellbeing
 OUR COLLEAGUES/FAMILY MEMBERS 35% of Tasmania Fire Service Career Firefighters and 50% of Tasmania Police Officers believed most people in their organisation would prefer not to have someone with depression or anxiety working on the same team* 32% of First Responders expressed they believed their mental health caused a burden on those around them* Participants in mental health first aid courses conducted by DPFEM report significant changes in their understanding about mental health 	COLLEAGUES FAMILY MEMBERS	 OUR COLLEAGUES/FAMILY MEMBERS - contribute to healthy workplaces - Have a better understanding and awareness of mental health and wellbeing - Openly discuss mental health and wellbeing and their own experiences - Support others to seek help
 OUR MANAGERS/SUPERVISORS 60% of Tasmania Police officers believe that when people recover from a mental illness their career is not affected* Participation in voluntary wellbeing checks is highest when the supervisor or manager encourage involvement and participate themselves 	MANAGERS SUPERVISORS	 OUR MANAGERS/SUPERVISORS - monitor and support our people's wellbeing Promote safe, inclusive and supportive workplaces Facilitate and encourage open conversations about mental health and wellbeing Proactively provide assistance to those who need it - focus on early intervention Connect those in need to appropriate service
OUR LEADERS • Over 93% of our people believe it is important for workplaces to support someone with a mental health condition*	LEADERS	 OUR LEADERS - acknowledge the challenges of the work and the human impact Actively support the wellbeing needs of our people by fostering a culture of openness and inclusiveness Support programs and policies that facilitate the delivery of support services
Beyond Blue A <i>nswering the call</i> survey 2018 Positive wellbe matters — we have a role to	impact on you and wellbein all	

your recovery

Principles

Our model is based on five principles that guide our behaviour and decision-making:

1. Proactive and responsive

Best practice frameworks in health and wellbeing highlight the importance of having an approach to wellbeing that combines a range of elements that address health needs from promotion and prevention through to intervention and response.⁷

Being proactive and responsive means we provide a range of ways to support mental health and wellbeing across our organisation – both culturally and in policies and practices. Our services will be designed with business rules in place to ensure we provide a consistent approach, yet remain flexible so that individual needs can be catered for.

2. Collaborative shared responsibility

Promoting mental health and wellbeing is everyone's responsibility. It is a collaborative effort – from senior leaders, managers, supervisors, colleagues, unions, associations and, most importantly, individuals.

Collaborative shared responsibility means we promote the mental health and wellbeing of our people as an element of our everyday business. This includes ensuring conversations about mental health and wellbeing are as regular and open as the conversations we have about workplace safety.

3. An integrated peoplecentred approach

Our focus is on providing services around the needs of our people. Through Wellbeing Support we are able to integrate our expertise and better connect our services to create a coordinated approach for each individual seeking support.

Our aim is to empower and encourage our people to identify and work toward achieving their personal mental health and wellbeing goals.



7 Beyond Blue. Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations (2016).

4. Integrity and confidentiality

Feedback from the Project Wellbeing consultation process, and the 2018 CISM Review, highlighted that our people place a strong emphasis on the importance of confidentiality in the way their wellbeing information is handled.

We recognise confidentiality is important for several reasons. It helps to build and develop trust. This in turn helps to reduce the stigma associated with seeking help and, with informed consent, allows for the exchange of information between the individual and support services. This approach is essential to providing appropriate care.

Integrity means our approach will be to build services based upon confidentiality, duty of care and positive relationships. It means we will be transparent about the reasons why we are collecting information, how it will be used, who can access it and how it will be stored. We will have appropriate security and business rules in place to protect information.

Confidentiality does have limitations and information will be shared where there is a legal obligation to do so and consistent with the Australian Psychological Society Code of Ethics. Such situations include:

- an assessment is made that an individual is likely to harm themselves or another, which can only be avoided by disclosure of information
- children in an individual's care are at risk of harm
- there is a legal obligation to do so, or
- discussing the case with a Wellbeing Support or Clinical supervisor to ensure that service delivery to the client is maximised and duplication of services is minimised.

5. Hope, Efficacy, Resilience and Optimism

To support the wellbeing of our people, we will work towards increasing individual and organisational psychological capital, which is characterised by having high levels of Hope, Efficacy, Resilience, and Optimism.

- **Hope** the ability to set goals, maintain motivation and willpower, and the ability to see multiple pathways during challenges/obstacles that empower goal attainment
- Efficacy put simply, "confidence"

 which is argued to be the most important of psychological assets. It increases one's belief that success is achievable
- **Resilience** the ability to bounce back from adversity and, importantly, beyond
- Optimism positive attributions about the past, present and future. Research demonstrates that optimism has a significant impact on our wellbeing and performance, and also is the root of individual coping mechanisms (i.e. low optimism results in more emotional based coping mechanisms, high optimism results in more task/problem-focused based coping mechanisms).⁸

Negative experiences that impact on your mental health and wellbeing are treatable

The earlier you seek support the quicker your recovery

8 Adapted from the Law Enforcement PsyCap Whitepaper by Avolio, B. and Broad, J. Enhancing New Psychological Capital, Well-being & Performance Assets for Law Enforcement (August 2020).

Focus areas

There are many ways in which the mental health and wellbeing of our people can be promoted and supported.

Different programs and support services will be appropriate for different areas of the organisation. To provide consistency and guidance, the following focus areas have been developed:

- 1. Our People and Our Leaders
- 2. Evidence Based, Proactive and Integrated Support
- 3. Culture and Capability
- 4. Strong Partnerships and Collaboration



Our programs and support services for each focus area incorporate the following elements outlined in Beyond Blue's Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations:

Protection – protecting mental health by reducing work-related risk factors for mental health conditions and increasing protective factors.

Promotion – promoting mental health and wellbeing by developing the positive aspects of work as well as workers' strengths and capabilities.

Response – addressing mental health difficulties and conditions among workers, regardless of whether the workplace was a contributing factor.

Beyond Blue suggests these approaches are complementary, and together they are an effective, comprehensive approach to mental health and wellbeing.⁹ In addition, our programs and services for each focus area are developed in-line with our Mental Health Continuum.¹⁰ Our continuum moves from healthy, to reacting, to injured, to ill.

Our approach ensures the programs and services we provide range from proactive/preventative through to interventions that require professional support.

The approach also assists our people to appreciate their mental health and wellbeing is not static and each individual will move along the continuum in response to different experiences and/ or the stages of their career.

The Mental Health Continuum also provides an illustration of services we provide to our people at each point (healthy, reacting, injured, ill).

Positive wellbeing matters – we all have a role to play

The earlier you seek support the quicker your recovery

9 Beyond Blue. Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations (2016).

10 Adapted from B.C. First Responders Mental Health and Wellbeing Continuum Model.

Our Mental Health Continuum

Anxiety

Anger

Pervasive sadness

Hopelessness

disturbed sleep

Recurring images

Increased fatigue

• Aches and pains

Workaholic,

presenteeism

Negative attitude

Social avoidance

Increased gambling

or withdrawal

Alcohol use

Poor performance

and concentration

or nightmares

Restless or

PROACTIVE/PREVENTATIVE

- Normal fluctuations
 in mood
- Calm
-
- Takes things in stride
- Normal sleep patternsFew sleep difficulties
- rew sleep utilicul
- Physically well
- Good energy level
- Consistent performance

THE MENTAL HEALTH CONTINUUM MODEL

DPFEM WELLBEING SERVICES

- Sense of humour
- In control mentally
- Physically active
- Socially active
- Limited or no gambling
- Limited or no
- alcohol use

- Nervousness
- Irritability
- Impatience
- Sadness
- Feeling overwhelmed
- Trouble sleeping
- Intrusive thoughts
- Nightmares
- Tired/low energy
- Muscle tension
- Headaches
- Procrastination
- Displaced sarcasm
- Forgetfulness
- Decreased physical and social activity
- Regular but controlled gambling
- Regular but controlled alcohol use

INTERVENTION/RESPONSE

- Excessive anxiety
- Easily angered
- Depressed mood
- Suicidal thoughts
- Unable to fall or
- stay asleep
- Sleeping too much or too little

Ref: https://bcfirstrespondersmentalhealth.com/

- Exhaustion
- Physical illness
- Unable to perform duties/control behaviour/concentrate
- Overt subordination
- Absenteeism
- Isolation
- Avoiding social events, not going out or answering the phone
- Alcohol addiction
- Gambling addiction
- Other addictions

Self Care - R4R, Education and Training, MyPulse, Wellbeing Checks, Individual Strategies

 Family and Social Supports

 Education and Training – Wellbeing Training for Managers, Suicide Mitigation Training, Mental Health First Aid Training

 Wellbeing Checks

 Wellbeing Support Officers

 Critical Incident Stress Management Program

 Employee Assistance Program

 Specialist Support

 HEALTHY
 REACTING

 INJURED
 ILL

- - The service may be helpful during that phase of the continuum

13

Focus Area 1: Our People and Our Leaders

Why is this important?

Beyond Blue's Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations identifies Shared Responsibility as a key principle of good practice in its model for mental health and wellbeing. A shared, collaborative approach to mental health and wellbeing is fundamental to the health of any organisation. Promoting good mental health and preventing suicide is everyone's business - from senior leaders, managers, line supervisors, unions, colleagues, and workers themselves, through to mental health and health professionals working with the organisation.¹¹

The mental health and wellbeing of our people, career and registered volunteers, needs to be a shared responsibility between an individual and the people around them. Everyone can contribute to the change necessary to develop supportive workplaces that promote and value positive mental health and wellbeing. Improved physical and mental health literacy, having open conversations about our mental health and wellbeing and acting early when we need help will all contribute to improved health and recovery times.

The Good practice framework also identifies the development of leadership capability as a core area for action. Organisational leadership is critical to promoting a mentally healthy culture at work. Leadership and management practices strongly influence how workers cope and manage operational demands. Good leaders know their people and can detect any signs that a team or individual may be struggling. With the right training, they can gain confidence and skills to recognise warning signs early, have difficult conversations, and know how to manage situations effectively.¹¹

The development of our leaders who understand the factors that protect and promote mental health and wellbeing will significantly contribute to improved outcomes across our organisation. Operational responses to incidents are delivered through a command and control management model. While this approach to managing incidents is appropriate in an operational environment, when used outside of this setting it is not the most appropriate way to get the best from our people. We need to support our leaders to develop alternative approaches to managing our people; approaches that are contemporary and supportive of the needs of our people.

What are we doing?

The organisation's journey to achieve our vision for positive mental health and wellbeing is evolving and will continue to evolve over the life of this strategy. Our initial focus includes:

Strategic – organisational leadership is a key pillar of our Wellbeing Support Model. Recognising and valuing the importance of leadership ensures we focus our efforts on developing the necessary skills of our leaders, managers and supervisors to support the mental health and wellbeing of our people. **Executive Leadership** – our executive leaders have a commitment to supporting the mental and physical health of our people.

They speak openly about the importance of good health and participate in community and organisational activities that reduce the stigma associated with mental health issues.

Our Managers and Supervisors – our managers and supervisors have participated in training to assist them to improve their mental health literacy, performance management, workload management, and communication skills – including having conversations about mental health and wellbeing with their people.

Whilst mental health awareness training has been provided, we recognise there is more to be done in this area. A key area of the Department's Mental Health and Wellbeing Action Plan will be to support our managers and supervisors to adopt people focused leadership practices and ensure performance reviews are conducted annually.

Our People – improving mental health literacy and the ability to recognise signs and symptoms in ourselves and our colleagues will assist our people to seek the right services at the right time.

We are working towards embedding mental health training within the organisation for our people at all stages of their career with us.

11 Beyond Blue. Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations (2016).

We are also developing approaches to educate our people about psychological capital and the importance of Hope, Efficacy, Resilience and Optimism. Our proactive/preventative and intervention/responsive services aim to provide multiple pathways to empower our people and their families to improve and maintain their mental health and wellbeing.

Our Workplaces – some Tasmania Police officers hold a position requiring a mandated mental health and wellbeing check. These checks provide them with the opportunity to develop strategies to enhance their mental health and support their colleagues.

What does success look like?

We will strive to have:

- values based leadership, which recognises the importance of mental health and wellbeing
- leaders who are people focused
- workplaces where positive wellbeing is a priority – thinking about wellbeing is as natural for everyone as their day-to-day business
- leaders who can identify that an individual may need assistance
- leaders with the skills to have meaningful conversations
- a framework where families are supported to understand the issues associated with emergency service work and the importance of social supports
- a culture where self-stigma is reduced so our people feel safe to speak up early.



Focus Area 2: Evidence-based, Proactive and Integrated Support

Why is this important?

Beyond Blue's Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations encourages a strategic approach to mental health through an evidencebased framework of preventative measures, as well as supporting interventions for front-line responders.

The Good practice framework states organisations must be aware of their risk profile and have strategies in place to manage the mental health, wellbeing and suicide risks arising from the work. The adoption of a systematic approach to risk management, that considers and responds to mental and physical health risk factors and the safety requirements for workers, must be a core activity. The Good practice framework outlines a process to establish a risk profile followed by the development of a plan outlining strategies to mitigate the risks including effective monitoring and review across the organisation.

In addition to developing a strategic approach, the Framework identifies an integrated and holistic approach as an important key principle of good practice. It advises an effective integrated approach helps to prevent the development of mental health conditions, which is equally as important as providing support and/or treatment to people with a mental health condition and/ or at risk of suicide. This principle also acknowledges the complexity of a broad range of risk factors, organisational, operational and non-work related, that impact on a person's mental health and wellbeing. This approach is also advocated by the WHO Framework on Integrated People-Centred Health Services. Services should be coordinated around the needs and demands of people. This result requires the integration of health care providers within and across health care settings, development of referral systems and networks among levels of care, and the creation of linkages between health and other sectors.¹²

Coordination does not necessarily require the merging of the different structures, services or workflows, but rather focuses on improving the delivery of care through the alignment and harmonizing of the processes and information among the different services.¹²

What are we doing?

A number of activities are underway to ensure the supports provided to our people are evidence-based and provided in a proactive and integrated manner. These activities include:

Strategic – our Wellbeing Support Model focuses on a person-centred approach. Our approach involves providing the right support at the right time for every individual at all stages of their career.

In order to develop a person-centred approach, we need to understand what we are doing well and the areas we need to improve. Wellbeing Support will be facilitating an organisational risk assessment, which will provide us with the information we need to provide the evidence-based supports that culturally align with the diverse areas of our organisation. Once the assessment is completed, we will have a better understanding of our risks and any gaps that need to be considered. This process may also identify opportunities for streamlining of services.

Wellbeing Support will be further developing our work on the pillars of psychological capital (Principle 5) into our education and training for our people.

Structural – Wellbeing Support has been established for our organisation. This business unit will assist us to coordinate our services, provide integrated case management and develop the right treatment options for each individual that seeks support. The services provided include:

- counselling through either internal or external psychological services
- support following a critical incident
- access to Wellbeing Support Officers and Wellbeing Support Peers.

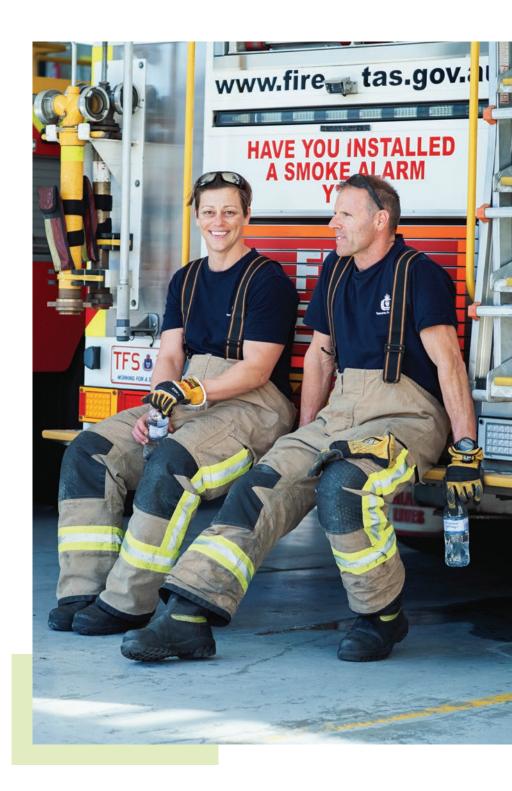
In addition, People and Culture have comprehensive processes for our people when they become injured to either keep them in the workplace or develop effective return to work strategies following injury or illness.

12 World Health Organisation. Framework on Integrated People-Centred Health Services.

What does success look like?

The delivery of evidenced-based, proactive and integrated support will lead to:

- a better understanding of the needs of our people
- streamlined prevention, early intervention and support services
- our people having the capability to maintain their own wellbeing by knowing how and where to access help
- workplaces where our people are seeking help at the earliest opportunity.



Focus Area 3: Culture and Capability

Why is this important?

The development of a strengthsbased culture to build organisational resilience is identified as a key principle in Beyond Blue's Good Practice Framework for Mental Health and Wellbeing in First Responder Organisations. This principle emphasises the importance of creating and maintaining a culture that focuses on individual strengths and developing strong working relationships based on trust and integrity.

To support the development of a strengths-based workplace culture the Framework identifies:

- preparing the workforce
- reducing stigma
- career-long education

as core activity areas and fundamental steps in promoting mental health and wellbeing in frontline responder organisations.

The stigma of seeking help can be a significant barrier to our people. All of our people need to develop the skills to recognise the signs when their own, or someone else's, mental health and wellbeing is affected and feel safe to discuss their issues and reach out for support. Wellbeing needs to be a normal part of our organisational activities and individual self-reflection and improvement needs to be an important component of our people's lives. Ongoing education will support this change, ensuring our people understand the risk factors that may impact mental health and wellbeing and provide them with the skills to respond.

Beyond Blue's Answering the call, reported:

- it is not only the exposure to traumatic events that impacts the mental health of police and emergency services personnel, but the workplace that people take those experiences back to
- workplaces which:
 - a) provide higher levels of support and inclusiveness
 - *b) have regular discussions about workplace experiences*
 - c) effectively manage emotional demands on staff

have lower rates of symptoms of psychological distress and higher rates of mental health and wellbeing.

Whilst we cannot remove exposure to traumatic events we can and should positively change the work environments that our people return to at the end of their shift.

What are we doing?

We recognise changing our peoples' understanding, attitudes and actions in relation to their mental health and wellbeing will take time and persistence. Current initiatives include:

Strategic – our Wellbeing Support Model focuses on our people's readiness to serve the community. Our supports will be developed and reviewed in accordance with this approach.

Culture – to support the implementation of our Wellbeing Support Model, a Stigma Reduction Model has been developed. The purpose of this model is to challenge how our people think about their mental health and wellbeing and the stigma associated with seeking help.

Recruitment to new roles -

recruitment practices include fitness assessments and job suitability testing. We do not wish to place people in a role in which they may be unsuccessful or have difficulties managing the stress of the job.

Similarly, not everyone is suited to specialist roles within our organisation. Our selection processes for these roles need to ensure applicants not only have the appropriate qualifications but also the suitability to undertake the role.



Training – initial training for our front-line responders is an opportunity for us to build psychological capital in our people and to promote mental health and wellbeing.

We intend to build on this strong foundation by facilitating mental health and wellbeing training throughout the careers of our people, including promotional and leadership development processes and other education and training opportunities.

Working with us – we currently offer a range of mental health and wellbeing services to support the physical and mental health of our people over their employment life cycle.

To motivate and ensure our people are aware of wellbeing initiatives, Wellbeing Champions are located in workplaces around the State. They play a vital role in:

 increasing awareness of mental health and wellbeing opportunities

- encouraging conversations in the workplace about mental health and wellbeing
- nurturing a positive mental health and wellbeing culture
- gathering feedback and ideas

Transitioning to another role – we recognise changing roles or leaving the organisation may be challenging for many of our people, both career and registered volunteers. Our managers and supervisors have a responsibility to assist our people with these changes. This support is provided through:

- induction for, and ongoing support to, a new role
- recognition of service to the organisation
- linking our people to postemployment support networks.

We have processes in place to support our people needing to separate due to a mental or physical injury and work towards resolving separation arrangements as quickly as possible.

What does success look like?

The development of a culture that understands and promotes positive mental health and wellbeing will lead to:

- the understanding that there is no stigma associated with seeking help
- the right people being connected with the right job
- increased job satisfaction, engagement and productivity in the workplace
- our people having the capability to maintain their own mental health and wellbeing, and seek assistance at the earliest opportunity at all stages of their career
- our people feeling supported when transitioning to a new role, leaving or retiring
- mental health and wellbeing education becoming a key component of recruit training courses and promotional courses.

Focus Area 4: Partnerships and Collaboration

Why is this important?

The consultation for the development of this Strategy highlighted the need for partnerships and collaboration as a focus area for action.

The development of strong partnerships and collaboration between all areas of the organisation, individuals and their family, unions, associations and other service providers, will lead to improved supports that meet the needs of our people.

The consultation identified that when someone is not aware of how to get help, or is receiving support from multiple stakeholders in an uncoordinated way, this has a negative impact on their mental health and wellbeing and may delay or hinder recovery.

The consultation also identified the following key elements for partnerships or collaboration to be effective:

- transparency and openness
- accountability between partners
- shared values, mutual understanding, and respect.

In addition, the consultation identified the importance of establishing relationships with external research institutions, particularly when evaluating initiatives.

What are we doing?

Structural – Wellbeing Support has been created for our people and their families. Wellbeing Support is well positioned to create opportunities for all support services to work together to respond to individual needs.

Wellbeing Support is developing a Good Practice Guide to:

- ensure integrity in service delivery
- inform our people of the services delivered
- inform our people how services will be delivered.

The guide will assist with the development of transparent and accountable partnerships, based on agreed principles, mutual understanding, commitment, and respect.

Governance – a Wellbeing Leaders Group, which includes the most senior leaders from each emergency service, has been established to provide oversight and support to mental health and wellbeing initiatives. This will ensure mental health and wellbeing is supported and championed by the leaders in each organisation.

In addition, Wellbeing Support will establish mental health and wellbeing support groups for each emergency service to inform and coordinate the services they provide.

Research Partnerships - we have

partnered with Edith Cowan University to undertake an evaluation of our strategies. This work will include:

- establishing a 'mental health and wellbeing' baseline
- an impact evaluation
- process evaluation 6 monthly pulse checks, program monitoring and reporting.

The information from this research will assist us to measure our progress, identify any gaps, inform any new services or revise current service delivery options to meet the needs of our people.

What does success look like?

The development of strong partnerships and working collaboratively will lead to:

- good practice support services
- clear pathways to support
- quality research and data to inform our services
- maximising the effective use of our resources
- better understanding of everyone's role in supporting an individual's mental health and wellbeing
- increased awareness and skills to manage the mental health and wellbeing of our people
- better connections with the families of our people
- the identification of future research opportunities and partnerships/collaborations to enhance existing evidence-base.





AT & DPFEM GPO Box 308, Hobart TAS 7001 Level 5, 111 Macquarie St, Hobart TAS 7000 P (03) 6173 2188 E wellbeing@dpfem.tas.gov.au 2021

GET HELP NOW

You can access a range of confidential services, which are designed specifically for the Tasmanian emergency services community from Wellbeing Support.

Ambulance Tasmania Peer Support 6166 1994

CISM 0427 181 207 | manager@cism.tas.gov.au

Wellbeing Support Psychological Services

Phone (office hours) 6173 2188 | wellbeing@dpfem.tas.gov.au

24 Hour Wellbeing Support: (03) 6173 2873

Further general information is available at **mypulse.com.au**

Printed fact sheets are available from wellbeing@dpfem.tas.gov.au