**Workplace violence is not ok – keeping first responders safe**

**Kevin, NSW Police**

I have been a police officer for 26 years and in that time I have been assaulted on a number of occasions.

I think for me the most significant was a few years ago. My partner and I were near Terry Hills and we were confronted by someone who we think at the time was drug affected and also had some mental health issues. We tried to calm him down by talking to him but eventually he just started swinging punches. It was pretty intense there for a few minutes and as a result of the scuffalo, I lost my front tooth. My partner also got two broken fingers.

Eventually I got a dental implant and the whole thing cost around $8,000. But worse is I still sometimes feel a little embarrassed about the way that I look.

I have been very fortunate I haven’t had any PTSD or anything from that incident. But for many others it can be so bad they need to stop work and I can see how badly it affects them and their family.

For me it certainly heightened my awareness of situations of a similar nature. We’re all really aware that things can rapidly escalate and if they do, people can really badly get hurt.

I have a simple message not only for myself as a police officer but for my fellow first responders. Our sole purpose out there is to help the public. Respect that and understand it. When we interact with you we are trying to solve a situation that for one reason or another you were unable to deal with and that’s why we’re there.

I know as a police officer we are often first on a scene when people are really distressed or in trouble. So the very nature of what we do means it might be impossible to eradicate workplace violence all together. But one thing we can do is to send a clear message that punching anyone, your wife, your mate or a police officer is never okay.

If you do assault someone then you will be held account by the courts and the consequences for you and your family can be really serious.

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**Carolina, NSW Nurse**

Sometimes in Emergency, patients can come in quite confused. From a head injury, or experiencing severe psychotic events and increasingly we are seeing patients really badly affected by drugs such as ice. Aggressive behaviour and being yelled at happens almost every day. I have had patients throw things at me. I have even been kicked in the chest and nurses and doctors often get bitten, slapped and pushed and shoved around.

Often this means none of us can do our jobs the way we really want or need to. Patients and families who feel they have been kept waiting can also get angry and things can quickly escalate.

It does wear everyone down. I think sometimes we all begin to think it’s normal to have people behave like that and it’s just part of our job. But really it shouldn’t be.

While I am personally okay, I do have colleagues who aren’t and are really suffering because of the things that they have experienced at work.

I haven’t ever formally complained or reported incidents of aggression to my manager. I think most of us when we have an aggressive patient we just manage them and kind of accept it as part of our job. We just work together to deal with abusive patients or have a nurse delegated to them or a security guard to sit outside their room.

I think we tend to just report assaults if we think it was really serious like when someone gets badly hurt or if there was damage to the equipment in the Emergency Department. But I guess that is too late and if we don’t tell management they won’t know how big the problem is.

I think everyone tries but if people are getting hurt at work obviously more needs to be done. The hospital has security guards in the Emergency Department but they also look after the rest of the hospital. So if they have to run from elsewhere the nursing staff may have to try to manage patients without them.

The whole issue is getting lots more attention and I do hope by talking about it more we can do things to make it safer for us when we are at work.

We need to recognise that violence seems to be getting worse often due to illicit drugs, pressure on our mental health system and with the increase with dementia patients this isn’t going to change anytime soon. I think we need more trained security staff to help manage these situations.

Nurses and staff in Emergency Departments and wards are just trying to do their jobs. No one deserves to be treated rudely or even worse assaulted at work.

People who are aggressive take up a lot of time, time we don’t always have and should be used helping patients.

So please treat your nurses and doctors well. So help us help you by treating us with respect.

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**Steve, NSW Paramedic**

As a paramedic unfortunately, I experience workplace violence almost every day.

People are often affected by drugs, under the influence of alcohol and in high stress situations. When there’s an accident people are grieving and often irrational, and we see it all.

Last month we were called out to a party which was in full swing. A young girl had collapsed. Her friends and the adult bystanders were all badly affected by alcohol and probably on drugs. They were quite threatening, yelling crowding around us. I thought one of them might hit me. I guess they were just scared kids and worried about her but it was pretty scary for us too. We were trying to focus on what we needed to do to save this kids life and all the time we were wondering if one of them was going to take a swing at us. It was, it was frightening.

I’m glad we could help her and I’m glad the girl recovered, but each time this happened it does have an impact. And as a paramedic it worries me that it seems to be getting worse. We need to do something about it.

After something like that happens it can take ages for you to wind down. I guess the adrenalines still pumping. But not in a good way. It makes you feel a bit sick. And mad that people behave like that when we are just trying to help.

And I think I cope because I can talk about it to my wife and if I need to I use relaxation techniques and I meditate to try and get through it.

What the system needs to do is help people develop those coping mechanisms that are best for them.

Fortunately these days, workplace violence for first responders and the risk of psychological trauma is being taken seriously. It’s not like the bad old days.

At my workplace referral of staff to counselling is mandatory and common after a significant event and usually the staff take up the offer. But we should do more to stop it. We need to make sure we support people who experience an assault or feel threatened or traumatised at these scenes.

I believe de-escalation training for paramedics and first responders is vital to help defuse the situations early. We need to be allowed to walk away if we feel threatened and unsafe rather than soldier on being the hero and looking after people.

As a paramedic, we’re there to help. That’s all we want to do. Please, help us do just that.

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**Rachel, Victorian Fire Fighter**

In August 2015 three fire trucks from different stations responded to a car fire. This call was not unusual for the area and we responded like we would any other day.

When we got there, a car was on fire on the basketball court. We put the fire out.

It looked suspicious so we notified the police, then we all started to get ready to return to our stations. Around 2 minutes later our call centre operator told the crews on scene that there was a house and two other cars on fire in the area. There was also reports of a man wielding an axe, threatening people in the street. So we returned to the area.

When we got back there we saw a man with an axe chasing fire fighters up the street. Our crew managed to get to safety just before he set fire to one of our trucks.

We all went straight into work mode. But I was also a bit shocked. To think that something like this can happen when we were just there to help, we were no threat to him and we were not armed.

For days and even weeks after the incident I kept thinking about it. Things kept triggering my memory. I started to worry if my family was in danger and if our crew might be attacked again if we responded to a call in the same area.

It’s hard to say if you have ever completely recovered from a traumatic situation. I think self-awareness and using resources like counselling can really help. I think when things like this happen a check-up a couple of months after the event is a good idea to remind us that we have the resources to help if we are having ongoing issues.

At work we all try to support each other but this incident was the first of our kind for our brigade. So I think management were a bit unsure about how to deal with it. We were offered a lot of counselling and we did a full debrief after the incident which really did help.

I think we need information and education sessions for emergency services workers on how to deal with drug affected or really aggressive people.

When a situation arises we need really good risk management plans that involve all emergency services workers. We need to have a good understanding of all of our roles and what we need to do in a hostile environment so we can deal with the next situation better.

Emergency services workers are just ordinary people trying to do their jobs. We really care about our work and we just want to help. We are passionate about what we do and we do it with pride. But we don’t go to work to be threatened or attacked. Just like you we want to go home safe to our families every night.

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