

# National AOD Workforce Development Strategy

**Submission By:  
Tasmanian Department of  
Police, Fire and Emergency  
Management**

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Dear Professor Jacqueline Bowden,

## **INVITATION TO PROVIDE A SUBMISSION TO REVISION OF AUSTRALIA'S NATIONAL ALCOHOL AND OTHER DRUG WORKFORCE DEVELOPMENT STRATEGY**

Thank you for the opportunity to provide feedback in relation to the revision of the National Alcohol and Other Drug (AOD) Workforce Development Strategy. The Discussion Paper distributed by your organisation has been reviewed within the Department of Police, Fire and Emergency Management (DPFEM). The below feedback focuses on broad AOD-related issues and outlines a range of actions and interventions that have been implemented across DPFEM to address contemporary AOD matters in the Tasmanian emergency services context.

### **What are the priority workforce development issues for workforce groups with unique needs (i.e., law enforcement)?**

Tasmania Police, along with other policing jurisdictions, fulfil a unique role in the AOD space. Members are frequently required to respond to AOD-related matters within the general community, and such interactions often occur prior to other services becoming engaged. Members maintain a complex balance between conducting business from a law enforcement and public safety perspective, whilst also considering whether individuals require further health interventions, such as mental health assessments or access to safe facilities. Some of the behaviours manifesting from substance abuse, which are most commonly encountered by Police include violence, mental health episodes and crime. From a workforce development perspective, there are significant challenges associated with responding to individuals presenting with co-morbidities.

#### Wellbeing of the workforce

- The impact of vicarious trauma is a complex and ongoing issue for most law enforcement agencies. Members of Tasmania Police who respond to AOD incidents are often faced with a range of challenging circumstances and behaviours and these can sometimes take a toll on personal health and wellbeing.
- DPFEM recognises the importance of having access to a range of programs aimed at supporting staff to navigate the pressures associated with both personal and professional life. Employees have access to:
  - Wellbeing Support, which delivers confidential, proactive and preventative mental health and wellbeing services to DPFEM and Ambulance Tasmania employees. The support offered comprises preventative, intervention and promotion elements across a mix of in-house and

externally provided services. Wellbeing Support is available to all DPFEM employees and their immediate families. In Tasmania there are currently nine permanent Wellbeing Support Officers and 29 Wellbeing Support Peers, who are a point of contact for short term assistance. Psychological and counselling assistance is also available through in-house psychologists or via referral to external service providers.

- MyPulse, which is a 24/7 service hub comprising a collection of health and wellbeing content and facilities specifically tailored to the unique needs of emergency services workers.
- The Tasmanian Emergency Services Critical Incident Stress Management Program sits within the remit of Wellbeing Support, and is responsible for managing the impact of critical incidents for both career and volunteer emergency services personnel. The program follows an internationally respected model of intervention and offers a unique service through the provision of 70 peers (career emergency services personnel), 18 psychologists, two managers and a clinical consultant.
- A Ready for Response program which enables employees to readily access facilities and resources to support healthy lifestyle choices.

#### Training and development of staff

- Training and development of the workforce to deal with AOD related matters is critical. The Tasmania Police Academy conducts comprehensive training and development for all new police recruits, with AOD and mental health relevant components including Mental Health First Aid Training, which is facilitated by DPFEM's Wellbeing Support team and an external agency, and a Drug Investigations module which covers alcohol and drug legislation, procedures and behaviours. The Tasmania Police Illicit Drug Diversion Initiative, which is a discretionary-based program aimed at diverting adult minor drug offenders away from court into appropriate therapeutic interventions, is an important part of this training. Recruits are also made aware of some of the local services currently available to assist people with AOD-related issues.

#### Collaboration between services

- DPFEM partners with Alcohol and Drug Services, Tasmanian Department of Health, for the provision of Places of Safety. This service is delivered in accordance with Section 4A of the *Police Offences Act 1935*, which focuses on providing a safe, supported and supervised environment for persons found intoxicated in a public place, as an acceptable alternative to entering a custodial facility. The partnerships and procedures surrounding the Places of Safety model in Tasmania are presently being reviewed to determine how this service provision can be improved.
- A new program is being trialled in Tasmania to allow people with mental health challenges to be treated at home. Since launching on 24 January 2022, the Police Ambulance Clinician Early Response (PACER) co-response team has been operating across several townships within the Greater Hobart area. PACER is a mental health co-response team comprising an Ambulance Tasmania paramedic, a mental health clinician and a police officer. The initiative aims to provide people experiencing a mental health crisis with a dignified, respectful and compassionate response that enables them, where possible, to be diverted away from hospital Emergency Departments.
- PACER has been modelled off the successful UK and ACT programs. Although it isn't governed by conventional policing structures, it is already showing signs of providing real benefit to the community and operational police, as well as increasing the safety of allied health professionals tasked with responding to psychiatric emergencies.

#### Service referral

- Police officers are often first responders to persons who are experiencing AOD issues. However, Tasmania Police has limited legislative ability to refer adults to therapeutic treatment options unless

they engage the service themselves. In most cases Tasmania Police can only recommend a therapeutic service and provide advice.

- The *Youth Justice Act 1997* was amended in 2014 to allow for therapeutic interventions, such as education, to be mandated under the 'community services' banner via a formal caution. This area of policing provides an important referral pathway to assist youth and their families to access support and treatment for licit and illicit substance use.

### **What workforce development goals should be set for improving workforce development outcomes for this group of workers?**

- Ensuring that law enforcement responses to AOD-related matters are reflective of the contemporary environment, and ensuring that staff can continue to be trained and developed according to areas of need and best practice.
- Ongoing evaluation and scrutiny of resources. As service providers we need to ensure that operational efforts continue to be channelled towards areas of greatest risk, need and responsiveness.
- Continued cooperation between government departments and external organisations, and growth in stakeholder relationships to achieve the best possible service delivery outcomes for all Australians with lived experience of AOD issues.

### **What substances should be considered of particular concern for the AOD sector at the current time and into the future, and what are the implications for AOD workforce development to ensure effective responses?**

Policing jurisdictions utilise a range of intelligence holdings and information sources to guide operations targeting alcohol and drug-related offending. This is completed by the national and state data provided by the Australian Criminal Intelligence Commission, including that contained within National Wastewater Drug Monitoring Program Reports and Illicit Drug Data Reports.

Australia typically sees high rates of alcohol and tobacco use across all states and territories, in both metropolitan and rural areas. In terms of illicit substances, cannabis and methamphetamine continue to be used at a much higher rate than others. Cannabis has long been considered a 'gateway drug' and the harms associated with methamphetamine are well-documented. The importation and manufacture of methamphetamine alone draws heavily on police resources across the country, and concerningly, the annual median purity of methamphetamine has increased and remained relatively high over the last decade in nearly all states and territories except Tasmania.

DPFEM thanks you for the opportunity to provide feedback in relation to the revision of the National Alcohol and Other Drug Workforce Development Strategy. Should your department have any queries regarding this response, please contact the Policy Development and Research Services team within Strategy and Support, DPFEM via email [Drug.Policy.Services@police.tas.gov.au](mailto:Drug.Policy.Services@police.tas.gov.au).

Yours sincerely



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