

## Release of CSU Report: “If they want us to do quality work, they need to support us”

The PSA has fought for genuine support and systems to ensure good mental health and wellbeing for caseworkers for many years. The [Charles Sturt University \(CSU\) report](#) validates all the key concerns that your Union has raised tirelessly.

This is a significant and damning academic research report that highlights this department’s failure in its legislative duty of care to its employees on so many fronts – and indirectly for the children and families it is meant to protect and support.

The CSU began its investigation into workplace wellbeing in 2018 and completed the report in 2019. Your Union has been asking for the release of this report for the last 18 months. Given the significance of the report’s findings, the PSA had asked that DCJ Secretary, Michael Coultts Trotter and Deputy Secretary Simone Czech co-sign a communique to be emailed directly to all Community Services’ workers. It is disappointing that the department chose a “soft-release” which many of you may have missed, from the Deputy Secretary only.

The department is yet to release the Action Plan associated with the CSU report. The Action Plan is essentially the road map to address the long standing and damning failings by your employer to provide a safe workplace.

### Some of the key findings in this report are:

- » Negative impact of high, unrealistic and unsafe workloads:

- » Child protection workers regularly working excessive hours and forfeiture of flex time
- » Child protection workers regularly completing work on their own time at home during the night and weekends
- » Child protection workers personal health and own family relationships negatively affected
- » New child protection workers not provided adequate training, support and absence of mentoring
- » High rates of burn-out, psychological injuries and staff turnover
- » Poor management of working hours and the lack of access to flexible work options.
- » Vicarious trauma, high psychological risks and high incidence of psychological injuries.
- » Indigenous caseworkers’ experiences of individual, social and systemic racism create extra challenges to their workplace wellbeing.
- » Feelings of being undervalued and lack of positive leadership and management.
- » ChildStory had a negative impact on wellbeing.
- » New caseworkers given caseloads prior to completing training.
- » Clear and transparent handling of bullying cases.



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- » Prevalence of Performance Management being used as a tool to threaten as opposed to support caseworkers

### PSA Continues to Fight for a Safe Workplace

Your delegates and PSA staff have lobbied both the Department and the Minister to take your concerns seriously and meet their legislative responsibilities by providing a safe workplace. The PSA is committed to working with the Department to realise the goals of this research – to support and protect caseworker wellbeing. It is time for the Department’s Executive and senior management to show true leadership by supporting and **protecting you** in the incredible work you do.

### CSU Report Mirrors The PSA’s Own Research

In early 2019 the PSA commissioned a research project to identify the parts of your work that most impact you and develop a best practice model for mental health and wellbeing specific to the context of child protection. The outcomes of this project showed that psychological injury in your agency was higher than that in Ambulance and Police. This project led to the development of the Safe Staff Safe Kids Campaign.

The [Safe Staff Safe Kids Campaign](#) calls on the NSW Government and the Department of Communities and Justice to implement all the recommendations from PSA’s best practice model for mental health and wellbeing below:

1. Cultural and organisational change
2. Peer Support Program

3. Mental health and wellbeing are key strategic priorities
4. Appointment of Chief Psychologist and a team of psychologists
5. Clinical/professional supervision
6. Dedicated time away from frontline child protection work
7. Complete overhaul/reform of recover at work program
8. Hotline for caseworkers
9. Panel of secular and non-secular chaplains
10. Child protection workforce strategy
11. Annual well-being checks for all caseworkers, MCSs and MCWs
12. Partnerships with mental health NGOs – Beyond Blue and Black Dog Institute

**Download the Best Practice Model for Mental Health and Wellbeing [HERE](#)**

**Do you know someone who still needs to join the PSA?**

You can support the work of the PSA and delegates to get better outcomes for everyone just by asking your colleagues to [JOIN](#) the PSA.

