

## Abstracts

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### Priorities for the Defence Health Services

*Robyn Walker*

Health is a key contributor to fighting power, as only a health military force can function at, and sustain, maximum effort. Health is not merely the absence of injury or disease, but in the widest meaning, includes physical and mental well-being, spiritual welfare and a balanced private life.

As such, the role of the Defence Health Services includes not only the treatment of disease and injury, but also preventive measures and post injury rehabilitation across the physical and mental spectrum. It includes the identification of and testing for, occupational parameters in order that personnel with the appropriate level of physical and mental

fitness, as well as the appropriate aptitudes are identified, so that the right person is put in the right job.

The Defence Health Services mission is to optimise the health of the ADF personnel. The strategy to achieve this mission involves minimising the effects of injuries and disease on ADF unit effectiveness, readiness and morale.

The key priorities for the Defence Health Services in 2007/2008 include people, capability and governance. These priorities will be discussed.

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## Miscellaneous

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### Modelling Defence Health Service continuing professional development

*Nigel C Carlton, Margaret M Cherry*

**Aim:** To develop and test a conceptual framework for assessing the Continuing Professional Development needs of the Defence Health Service.

**Design, Setting and participants:** A literature search of contemporary concepts of military and health professionalism led to the development of a conceptual framework for Continuing Professional Development (CPD) combining a Professional Environments Concept with the Learning, Education and Professionalism (LEAP) framework. This informed a conventional Needs Assessment with data evaluated using descriptive analysis and simple cross-tabulation. ADF health service providers were asked to complete an anonymous survey delivered on both the internet and Defence Restricted Network. Corporate perspectives were assessed by semi-structured interviews with senior executives (one star appointment) within the Defence Personnel Executive.

**Results:** The study identified an overarching theme of inequity of access to CPD activities with a strong need for flexible delivery, practical learning opportunities and workforce/place support. This theme was broadly supported by the Corporate Group with the caveat that capability and the broader Defence need direct the priority of effort. A low response rate to both surveys along with inconsistencies in PMKEYS data prohibited the accurate extrapolation of the study results across the DHS population.

**Conclusion:** The proposed CPD conceptual model, combining the Professional Environment concept and modified LEAP framework components of CPD, proved appropriate to the ADF health sector. While the study results cannot be generalised across the Defence population, the study represented a successful pilot of the conceptual model.

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### Physical Employment Standards (PES) for the Ground Based Air Defence (GBAD) trade

*D. Billing, A. Laing, R. Attwells, D. Ham, M. Patterson, A. Fogarty, G. Moorby*

The PES Project includes the development of trade-specific assessments to evaluate the physical capability of personnel relative to job requirements. Four physical employment assessments (PEAs) have been developed for the GBAD trade.

Development of PEAs involves the quantification of the physical demands required to safely perform trade-tasks. Tasks inherent to the GBAD trade were observed within an operational context and heart rate, metabolic rate, global positioning system and sensory perception information was collected. The key physical demands on GBAD personnel were identified as aerobic and anaerobic capacities, strength and

muscular endurance. The PEAs developed assess these capacities using movement patterns and muscle groups relevant to the GBAD trade-tasks.

Performance standards set were based on the measured requirements, in consultation with SMEs and doctrine. As trade-tasks are performed in series, not isolation, standards were set to ensure soldiers can complete tasks without reaching maximum capacity, allowing continued operational effectiveness. Three capability zones were set to classify personnel: Green, ready to go and low risk; Amber, medium risk with minor remedial conditioning required; and Red, high risk with major remedial conditioning required. These PEAs provide a risk-management tool for commanders to minimise injuries and sustain performance.

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### Provision of mental health first aid to the ADF

*Annette Owtrim*

**Background:** Aspen Medical has established itself as the pre-eminent Australia supplier of operational and project based health in the region. Through its strong association with the ADF and operational health support, Aspen has become active managers in the area of mental health.

The ADF have issued a comprehensive Mental Health Strategy which provides numerous resources and information to Commanders and members.

Aspen, through other Contracts has identified that this level of support is not widely available in other commercial or government organisations. This prompted Aspen to develop a Mental Health First Aid package which it is delivering to institutional health care providers such as Detention Centres and Correctional Services.

Increasing familiarity and awareness of mental health in the Military and civilian sector has seen an

increase in the incidence of reported mental health conditions. Organisations have a duty of care to their dependants to either provide the appropriate help or offer resources that may assist in the management of the condition.

**Aim of the Course:** The Aim of the Mental Health First Aid Package was to develop and deliver a half day course that is designed for non-medical personnel.

**Course Content:** The Course covers the major components of mental health which are found in the community and within institutions. The key areas covered include:

- Depression;
- Anxiety;
- Suicide;
- Changes to normal behaviour.

Signs and symptoms for each aspect are covered to assist non clinicians to recognize these conditions in the dependant population and to alert health professionals or encourage others to seek support.

Basic Mental Health First Aid is provided for each major condition.

**Course Design:** The course is a combination of didactic and interactive sessions.

The purpose is to allow non health care providers to recognise and seek assistance before a major or catastrophic events occur. In addition, the work conducted within institutions can itself be demoralising and this course provides an opportunity for self awareness amongst employees.

**Relevance to the ADF:** The ADF provide a range of media and other opportunities for ADF Commanders and members to become informed about Mental Health Conditions. However, in some instance members may not seek out assistance and Commanders and psychology resources are overstretched to provide such courses. Aspen could trial the relevance of this course at Puckapunyal and other sites to assess the effectiveness in knowledge.

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