

7 December 2022

Carolyn Walsh
National Transport Commission (NTC)

By email to: cwalsh@ntc.gov.au

Dear Ms Walsh

Re: Review of the draft National Standard for Health Assessment of Rail Safety Workers

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) welcomes the opportunity to provide input to the review of the [draft National Standard for Health Assessment of Rail Safety Workers](#) (Draft Standards).

The RANZCP is responsible for training, educating and representing psychiatrists in Australia and New Zealand, with more than 7700 members including more than 5600 qualified psychiatrists. In developing this submission the RANZCP consulted with members from a range of our expert committees, well placed to provide feedback given their expertise in a number of the conditions discussed in the Draft Standards.

The Draft Standard's specific guidance on non-epileptic seizures and interpretation of the K10 test is a welcome inclusion. The RANZCP supports the draft standards approach to assigning people with well-managed psychiatric disorders as fit for duty subject to review. Workers concerned that a diagnosis of a psychiatric condition will threaten their employment are more likely to avoid seeking treatment. This could worsen their condition, posing a higher risk to themselves and others. Where safe to do so, the Draft Standards should continue classifying those actively managing their condition as fit for duty (subject to review), to encourage honesty and help-seeking amongst workers.

Detailed in the RANZCP's submission for the [National Transport Commission's Assessing Fitness to Drive standards](#), there are opportunities for further improvement regarding the management of substance use, psychiatric conditions and neurological conditions.

Dementia is an umbrella term for a range of conditions with shared features and the RANZCP emphasises the complexities of diagnosing it. Not all dementia involves progressive deterioration, with components of reversibility. This is seen with cases of dementia secondary to stroke or head injury, and/or alcohol-related brain damage with abstinence for example. Section 4.4.2's statement that "*due to the progressive and irreversible nature of the condition, people with a diagnosis of dementia will eventually be a risk to themselves and others when working*" is therefore misleading. The RANZCP recommends improving the Draft Standards with a range of criteria for dementia. For this information please refer to RANZCP endorsed [clinical guidelines for dementia](#) by the University of Sydney.

The RANZCP recommends consideration of intellectual disabilities (ID) within the Standards. ID is a neurodevelopmental disorder that includes mild to profound deficits in intellectual and adaptive functioning. Proper assessment is important to maintain a safe work environment while ensuring people with ID have equal access to employment.

The Draft Standards should utilise a health-based approach rather than a punitive one when managing issues of substance use. Believing that substance use results in job loss without the possibility of return may discourage employees to seek help. During the process of remission, workers should maintain a relationship with their employer and identify a path to becoming fit for duty again.

Noting that prescribed stimulants are to be made known to authorised health professionals, the RANZCP welcomes the Draft Standard's acknowledgement of the benefits of stimulant medication for people with attention deficit hyperactivity disorder (ADHD). To ensure that people taking prescribed stimulants are confident that a drug test detecting this medication does not impact their employment, further guidance around the testing process is required. For further information on please see the [Australian ADHD Professionals Association Clinical Practice Guideline for ADHD](#).

The RANZCP recommends the inclusion of a statement recognising the role of family, friends and carers in the Draft Standards. A full assessment of fitness for duty cannot occur without their involvement, as it is often family who raise concerns that employers and authorised health professionals are unaware of. Guidance on this can be found in the RANZCP's [Professional Practice Guideline 20: Information sharing with families/whānau/carers](#).

The RANZCP provides this submission to support both the development of the Draft Standards and the NTC's ongoing work to maintain rail safety. To discuss any of the issues raised in this submission please contact Nicola Wright, Executive Manager, Policy, Practice and Research Department via Nicola.Wright@ranzcp.org or by phone at (03) 9236 9103.

Yours sincerely



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President

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