

Referral process

GP referral to Accredited Psychiatrist
with The Melbourne Clinic



Accredited Psychiatrist refers to the
PTSD program for Emergency Service workers



The Melbourne Clinic assist with application
for funding with insurer



Assessment conducted by The Melbourne Clinic
to ensure the program meets patient needs



Patient is invited to the next available program.

This program offers the following service

- Comprehensive assessment to ensure the program is suitable for your needs
- 10 week program where you will attend two consecutive days a week
- Morning tea and lunch provided
- Discounted parking
- Input from Psychology, Neuropsychology, Psychiatrist, Occupational Therapy and Social Worker
- Booster groups post program
- Carer/family member information.



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A Healthscope hospital.

ABN 85 006 405 152



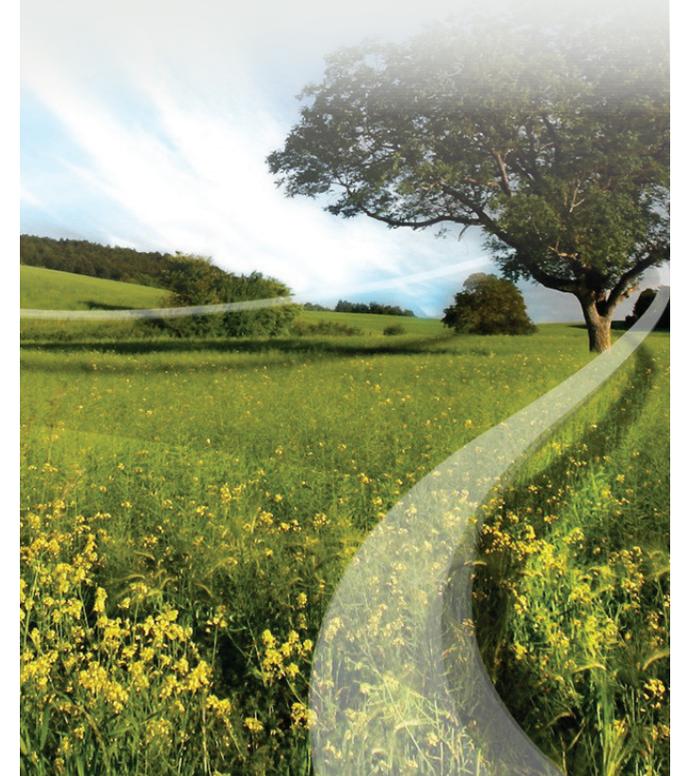
11/2017



The Melbourne Clinic

PTSD Program for Emergency Service workers

Post-Traumatic Stress Disorder



Aim of the program

To provide best practice treatment to Emergency Service workers who have been diagnosed with having symptoms of Post-Traumatic Stress Disorder (PTSD).

What is PTSD?

PTSD describes severe and persistent stress reactions after exposure to a traumatic event. A prerequisite to the symptoms of PTSD is that an individual must be exposed to threatened or actual death or serious injury to self or others, including repeated or extreme exposure to the adverse details of traumatic events, as typically occurs with emergency workers.

In addition, PTSD involves four clusters of symptoms:

1. Re-experiencing symptoms including intrusive memories, flashbacks, nightmares, and distress to reminders of the trauma
2. Avoidance symptoms including active avoidance of thoughts and situational reminders of the trauma
3. Negative cognitions and mood associated with the traumatic event, such as an inability to remember important details about the event or persistent unusual ideas about the cause or consequence of the traumatic experience
4. Arousal symptoms including exaggerated startle response, insomnia, irritability, and sleeping and concentration difficulties.

The latest version of the Diagnostic and Statistical Manual of Mental Disorders, DSM-5, requires that at least one symptom in each of these clusters be present for more than one month and be associated with significant distress or impairment in social, occupational, or other important areas of functioning.

Evidence based treatment

PTSD is treatable. There are a number of interventions available that have been shown to markedly reduce or even eliminate the symptoms of PTSD (Karlin, et al., 2010).

Time lines of service

When symptoms of PTSD are experienced, evidence-based treatments should be commenced as soon as possible. Although both early and delayed interventions for established PTSD have similar rates of symptom response, early intervention should reduce some of the occupational and social consequences of PTSD.

Group therapy

Well-conducted groups provide an opportunity for peer support, normalisation of post-traumatic experiences and learning and motivation from other patients' experiences of recovery. Group cognitive behavioural therapy has been shown to be effective in treating PTSD.

Group treatments for PTSD offer value to the individual who has experienced trauma, from emotional and practical support, to education about trauma and its impact, to training in more effective ways of coping. Groups can also be used to deliver therapeutic exposure and cognitive therapy, two of the best-validated forms of PTSD treatment.

Individual therapy

It is recommended that participants do engage in individual therapy in line with current guidelines of treatment for PTSD in Emergency Service workers.

Treatment program for Emergency Service workers diagnosed with PTSD

In line with best practice guidelines for PTSD, the program uses a trauma focused cognitive-behavioural approach. Group sessions are skills-based and focus on a range of treatment areas including:

- Skills for managing symptoms of PTSD
- Skills for managing depression and anxiety
- Anger management skills
- Distress tolerance skills such as grounding and mindfulness
- Skills for managing urges to address substance abuse
- Vocational skills and return to function planning
- Strategies for overcoming behavioural avoidance
- Skills for managing unhelpful patterns of thinking
- Medications used in PTSD
- Memory and cognitive issues in PTSD
- Family and relationship issues in PTSD.

The groups are “closed”, in the sense that the same cohort of patients will meet each week - promoting safety and stability for group therapy. A Maximum of eight clients will be in the group. In addition to the groups, patients will also have the option to access individual treatment. These sessions will provide an opportunity for patients to process their traumatic experiences using exposure-based therapy.

The Melbourne Clinic is mindful of the impact the environment has for Emergency Service workers to feel safe and comfortable. The groups are located in rooms external to the main hospital with food being offered directly to the group rooms or it is in close proximity to great cafes.

Parking is offered on site, with a discount voucher provided.