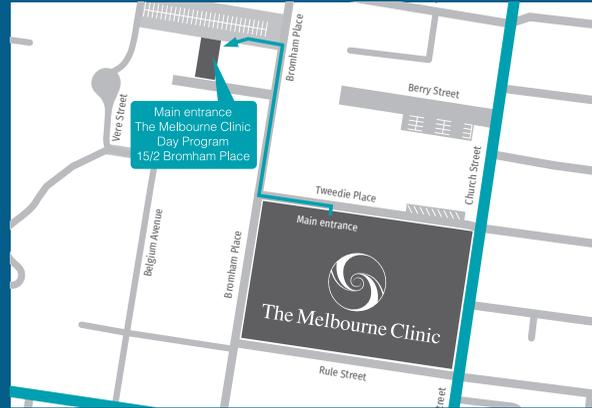


The PTSD Program for Emergency Service Workers offers:

- 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 offered on site
- Treatment from a comprehensive multi-disciplinary team which includes: Psychologist, Neuropsychologist, Psychiatrist, Occupational Therapist, and Social Worker
- Follow-up session on completion of the program
- Family and Carers Information Sessions



PTSD Program for Emergency Service Workers

Post-Traumatic Stress Disorder




**The Melbourne
Clinic**
by Healthscope

5/2 Bromham Place,
Richmond VIC 3121

P 03 8416 3800 | F 03 8416 3888

themelbourneclinic.com.au

ABN 85 006 405 152



V2_06/2021

Community
of Care

 **The Melbourne Clinic**
by Healthscope

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).

Timelines of service

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

Group therapy

Our evidence based psycho-educational and therapeutic groups help you grow and learn during your recovery. The group for the PTSD Program for Emergency Service Workers provides an opportunity for peer support, the normalisation of post-traumatic experiences, and learning & motivation from other patients' experiences of recovery. Group cognitive behavioural therapy has been shown to be effective in treating PTSD.

Our patients can expect emotional and practical support, education about trauma and its impact, and develop therapeutic ways to help cope with their trauma from group therapy. Therapeutic exposure therapy and cognitive behaviour therapy are delivered during these sessions, two of the best validated forms of PTSD treatment.

Cognitive Behaviour Therapy (CBT)

Cognitive Behaviour Therapy groups are designed to help participants focus on challenging and changing cognitive behaviours, improve emotional regulation, and develop coping strategies targeting solving current problems.

Individual therapy

It is recommended that participants engage in individual therapy as per treatment guidelines for PTSD. Discuss with your treatment team if you are not.

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 PTSD Program for Emergency Service Workers has a maximum of eight participants, with the cohort remaining the same during the 10 week program.

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. Lunch is provided during the course of the program and the Day Program building is in close proximity to several cafes.