

Oaths Act 1867

Statutory Declaration

I, **WILLIAM BRENNAN** of c/- Corrs Chambers Westgarth, Level 42 One One One, 111 Eagle Street, Brisbane in the State of Queensland, by email to [REDACTED] do solemnly and sincerely declare that:

Background and experience

**1 What are your current professional role/s, experience, qualifications and memberships?
Provide a copy of your most recent curriculum vitae.**

- 1.1 I am currently employed as Executive Manager Service Operations for a not for profit organisation providing mental health support services to individuals in the community.
- 1.2 Attached and marked **WB-1** is a copy of my curriculum vitae.

2 The Commission understands that you held the position of Clinical Nurse Director at the Barrett Adolescent Centre (BAC). Could you please specify the period in which you held this position.

- 2.1 I have never held the position of Clinical Nurse Director at the Barrett Adolescent Centre (BAC).
- 2.2 I have held the following positions relevant to BAC:
- (a) Between October 2010 and November 2012, I held the position of Director of Nursing, The Park Centre for Mental Health (**The Park**).
- (b) Between November 2012 and December 2014, I held the position of Director of Nursing, West Moreton Mental Health and Specialised Services (**WMMHSS**) save that:

[REDACTED]
.....
William Brennan

[REDACTED]
.....
Witness

EXHIBIT 30

- (i) between mid March 2014 and May 2014 I had a mix of annual leave and long service; and
- (ii) between May 2014 and October 2014, I undertook a six month secondment as Project Manager in the Mental Health Alcohol and Other Drugs Branch (MHAODB)).

3 In the position of Clinical Nurse Director at the BAC:

(a) outline and explain your key responsibilities in that role;

- 3.1 My key responsibilities in the role of Director of Nursing, The Park was responsibility for the strategic and operational management of nursing services at The Park.
- 3.2 Nurse Unit Managers within the units at The Park reported to a Nursing Director who in turn reported to me. I reported to the Executive Director Mental Health and Specialised Services.
- 3.3 My key responsibilities in the role of Director of Nursing, WMMHSS were the same, but across the whole of WMMHSS, so in addition to the units within The Park, it included the Nursing Directors responsible for Offender Health and Clinical Support, Community Integration and Service Improvements and Evaluation.

(b) provide a copy of your job description; and

- 3.4 A copy of my Position Description for the role of Director of Nursing, The Park is attached and marked **WB-2**.
- 3.5 A copy of my Position Description for the role of Director of Nursing, WMMHSS is attached and marked **WB-3**.

(c) outline and explain the working conditions you experienced at the BAC and whether these changed at any particular time.

- 3.6 The structure was that the nurses within BAC were managed by a Nurse Unit Manager

.....
William Brennan

.....
Witness

who reported to the Nursing Director, Secure Services who in turn reported to me. I did not work in BAC. I had accountability for nursing staff in BAC but was not involved in its day to day delivery of clinical services.

4 Were you aware of the circumstances surrounding Dr Sadler's departure, removal or suspension from the BAC in or about September 2013? If so, when did you first become aware and by what means? Give details of what you were told or understood were the reasons for Dr Sadler's removal or suspension.

4.1

4.2

4.3

4.4

4.5



[Redacted signature]

William Brennan

[Redacted signature]

Witness

4.6

4.7

4.8

4.9

4.10



Closure of the BAC



William Brennan

14592903/1



Witness

5 On what date, how and by whom did you first become aware of any decision to close the BAC?

- 5.1 When I commenced at The Park in 2010 a decision to close BAC had already been made. BAC was to close and its operations transferred once a new facility being planned at Redlands was completed.
- 5.2 In 2012 I became aware that the Redlands project had been cancelled. I was not informed of, or consulted in relation to, any alternative plans for BAC. From my perspective, the role and function of BAC would continue.
- 5.3 On 9 November 2012, a psychiatrist from another service, Dr Brett McDermott made a comment in the context of giving evidence at an inquiry about child safety matters, that BAC was going to be closed. I was asked to attend a meeting of BAC staff that day, with the Health Service Chief Executive, Lesley Dwyer, the Executive Director Mental Health and Specialised Services, Sharon Kelly and the Nursing Director Secure Services, Padraig McGrath. Some of the staff were quite angry or upset. I recall Ms Dwyer was the main one who spoke. I don't recall specially what she said but it was to the effect that the future of services was being considered.
- 5.4 I was aware in 2013 that an Expert Clinical Reference Group had been established to review its model of care and make recommendations about future services. I was not a member of the ECRG and I was not invited to contribute to its work.
- 5.5 I again became aware of a firm decision to close BAC when the Minister for Health publicly announced that it would close. I have no independent recollection of the date of that announcement but I have been referred to the transcript of an interview given by the Minister on ABC radio in which he confirms BAC was to be closed, from which I have confirmed that the date of the announcement was 6 August 2013. Attached and marked **WB-4** is a copy of that transcript.

6 In relation to the circumstances surrounding the decision to close the BAC:

(a) were you made aware of the reasons for the closure decision? If so,

.....
William Brennan

.....
Witness

explain how you were made aware of the closure decision and any reasons you were told about that decision;

6.1 I was not formally advised of reasons for the decision to close BAC. The informal reasons I was given were:

- (a) The BAC buildings were no longer suitable. The buildings were old and had had little by way of refurbishment over a period of years. I assume this was because it had been planned for many years that BAC would be relocated.
- (b) It was inappropriate to co-locate vulnerable adolescent patients with the cohort of patients accommodated at The Park as it moved toward completion of redevelopment into an adult forensic-only service.

(b) were you consulted at all and, if so, by whom, when and what was the nature of any such consultation?

6.2 I was not consulted in relation to the decision to close BAC.

(c) to your knowledge, what information, material, advice, processes, considerations and recommendations related to or informed the closure decision? and

6.3 As I was not involved in the decision to close, I do not know what information, material, advice, processes, considerations or recommendations related to or informed the closure decision.

6.4 As previously stated, I believe the decision to close BAC had been made before I commenced at The Park, to relocate the service to a site at Redlands.

(d) to your knowledge, what was the decision making process related to the closure decision?

6.5 As I was not involved in the decision to close, I do not know what was the decision making process related to the closure decision.

.....
William Brennan

.....
Witness


Transition arrangements

7 From late 2013 until early 2014, a number of BAC patients were transitioned to alternative care arrangements in association with the closure or anticipated closure of the BAC (transition clients). Did you have any involvement in developing, managing and implementing the transition arrangements for the transition clients (including, but not limited to identifying, assessing and planning for their care, support, service quality and safety risks)? If so:

- (a) outline and explain any panels that were formed and your involvement (if any) with such panels;**
- (b) identify the transition clients with whom you were involved; and**
- (c) explain the transition arrangements in place and how those transition arrangements were developed in the period from October 2012 to January 2014 for those transition clients;**
- (d) explain, to your knowledge, any information, material, advice, processes, considerations and recommendations that related to or informed the transition arrangements.**

7.1 I did not have any involvement in developing, managing and implementing the transition arrangements for the transition clients.

8 For each of those transition arrangements:

- (a) state who was responsible for preparing and overseeing the transition arrangements; and**
- (b) were there any arrangements to review, follow up and monitor the outcome of the transition arrangements? If so, what were those arrangements?**

8.1 I was not involved in preparing or overseeing transition arrangements.

.....
William Brennan

Witness

EXHIBIT 30

- 8.2 My understanding is that transitions were arranged by the clinical team headed by the Acting Clinical Director, BAC, Dr Anne Brennan.
- 8.3 I was not involved in the day to day planning or identification of services for BAC patients, however I was aware of the progress of the transitions because I had overall management responsibility for the nursing workforce and for ensuring that nursing resources matched needs as advised to me by the Nursing Director, Padraig McGrath or the clinical team.
- 8.4 I do not recall the arrangements for review, follow up and monitor the outcome of the transition arrangements.

9 The Commission understands that you attended numerous BAC Transition Care Planning meetings. If so, in relation to these meetings:

(a) Explain the function/purpose of these meetings. What did they involve?

- 9.1 To the best of my knowledge, there was only one BAC Transition Care Planning Meeting. The function and purpose of the meeting was to consider the specific circumstances of four BAC patients and develop actions for their transition.

(b) How often did the group meet?

- 9.2 To the best of my knowledge, the group only met once, on 11 December 2013. I have seen draft Minutes of that meeting which record that I attended the meeting, although I do not now have an independent recollection of the meeting.

(c) Who attended?

- 9.3 According to the draft Minutes, the attendees at the meeting in addition to myself were:
- (a) Dr Leanne Geppert, Acting Director of Strategy
 - (b) Dr Anne Brennan, Acting Clinical Director, BAC
 - (c) Dr Elisabeth Hoehn, Psychiatrist, Child and Youth Mental Health Services,

.....
 William Brennan

14592903/1

.....
 Witness

page 8 of 12

CHQHHS

- (d) Michelle Giles, Director of Allied Health and Mental Health Community Programs
- (e) Padraig McGrath, Nursing Director, Secure Services
- (f) Sharon Kelly, Executive Director Mental Health and Specialised Services
- (g) Dr Terry Stedman, Clinical Director, Mental Health and Specialised Services
- (h) Laura Johnson, Project Officer, Mental Health and Specialised Services.

(d) What were the resolutions or findings or actions determined as a result of those meetings?

9.4 The resolutions, findings and actions determined at the meeting are recorded in the draft Minutes.

(e) Were any records or minutes kept of these meetings? If so, provide copies or identify where copies may be located.

9.5 Minutes of the meeting were kept. Attached and marked **WB-5** is a copy of the draft Minutes. I do not have a copy of any final Minutes and do not know if the Minutes were finalised.

10 Did you have any discussions with the medical or other staff at receiving alternative services regarding the transition clients' transitional arrangements, treatment plans, clinical and educational needs or other matters? If so, provide details of the alternative services and explain the nature of these discussions, including the date on which they occurred, with whom and for what purpose.

10.1 I was involved in discussions with staff at a receiving alternative service on one occasion only.

10.2 [Redacted]

[Redacted]
 William Brennan

[Redacted]
 Witness

[Redacted]

[Redacted] I was asked to attend to provide support for Vanessa Clayworth. That role would usually be one for Padraig McGrath but he was unavailable at the particular time. [Redacted]

[Redacted]

[Redacted] I did not speak and there were no action items for me from the meeting.

11 In relation to the transition arrangements did you have any consultation(s) with transition clients and or their families, friends or carers? If so, on what date(s) and provide detail(s) of any such consultation(s).

11.1 I did not have any consultations with transition clients and or their families, friends or carers.

11.2 I was aware that the clinical team was in contact with families and carers, and also that Sharon Kelly and Lesley Dwyer had contact with some of the families and carers.

12 Did you have or were you aware (and if so, how and when did you become aware) of any concerns regarding the transition arrangements for any of the transition clients (including but not limited to the implementation of the transition arrangements) from the BAC to an alternative service provider? If so:

- (a) Outline and explain the particular alternative service provider and the details of any such concerns.
- (b) Were such concerns documented? If so, provide copies or identify where copies could be located.
- (c) If there were concerns, who were these concerns expressed by and to whom?
- (d) On what date and by what means did you become aware of these concerns?

.....
William Brennan

.....
Witness

(e) What steps, if any, did you cause to be undertaken as a result of any such concerns?

- 12.1 I was aware of specific concerns regarding the transition arrangements for the four patients discussed at the BAC Transition Care Planning Meeting. In that regard:
- (a) The concerns were documented in the draft Minutes of that meeting referred to in paragraph 9.5.
 - (b) The concerns were expressed by Dr Brennan at the meeting.
 - (c) The meeting set action items for the resolution of those concerns, which are recorded in the Minutes. There were no action items for me as a result of that meeting.
- 12.2 Other than in respect of the concerns raised at that meeting, I do not recall specific concerns regarding the transition arrangements for any of the transition clients as I was not involved in the planning or implementation of transition arrangements.
- 12.3 I recall that throughout the period from the time the Minister for Health announced that BAC would close, some staff expressed concerns about patients being anxious about change, uncertainty and/or not wanting to move away from BAC. However, I was not informed of patient-specific concerns. These were managed by Dr Brennan and her team and it would be my expectation that if Dr Brennan had concerns about particular patients she would escalate these through Dr Hoehn or through appropriate peer escalation and report back to West Moreton as to progress.

13 Outline and elaborate upon any other information or knowledge (and the source of that knowledge) that you have relevant to the Commission's Term of Reference.

- 13.1 Nil

.....
William Brennan

.....
Witness

14 Identify and exhibit all documents in your custody or control that are referred to in your witness statement.

14.1 All documents referred to in my witness statement are exhibited.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.

Taken and declared before me by)
WILLIAM BRENNAN at Brisbane in the)
State of Queensland this 16th)
day of November 2015)
Before me:)



.....
Signature of authorised witness

Schute

A Justice of the Peace/
Commissioner for Declarations



.....
Signature of declarant

STATUTORY DECLARATION OF WILLIAM BRENNAN
INDEX OF EXHIBITS

No	Document Description	Document number	Page
WB-1	Curriculum Vitae	WMS.5000.0027.00001	1-6
WB-2	Darling Downs-West Moreton Health Service District – Role Description for Director of Nursing (Mental Health), undated (from 2010 to 31 March 2011)	WMS.5000.0027.00197	7-11
WB-3	West Moreton Hospital and Health Service District – Role Description for Director of Nursing, undated (2013)	WMS.5000.0027.00189	12-17
WB-4	Document entitled 'Lawrence Springborg transcript of ABC radio interview – 6 August', undated	WMS.0016.0001.16011	18-21
WB-5	Barrett Adolescent Centre Transition Care Planning Meeting Minutes dated 11 December 2013	WMS.3003.0001.00024	22-23


William Brennan

14743703/1


Witness

CURRICULUM VITAE

WILLIAM BRENNAN

HIGHER EDUCATION

MASTERS in Mental Health Nursing, University of the Sunshine Coast (Dean's Commendation for Academic Excellence)	2008- 2009
DEGREE BSc (Hons) Management of Psychosis	1999 - 2000
DIPLOMA Dip. HE Registered Mental Health Nurse RMN (Project 2000)	1994 - 1997

NURSING COURSES

Executive Learning Sets James Hardy Group	2013
Transformational Leadership	2011
Interest Based Bargaining workshop	2011
Clinical Supervision Training	2007
Root Cause Analysis	2007
Inspiring Leadership Workshop	2006
Recruitment and Selection	2006
Performance Appraisal for Managers	2006
Online Mental Health Act Training	2006
DBT Two Day Residential Training	2004
Self-Harm Workshop	2003
Gender Sensitive Training	2003
Control & Restraint	2001
ENB N13 Introduction to Cognitive and Behavioural Therapy	1998 - 1999
ENB 998 Teaching Practice	1998

EMPLOYMENT HISTORY

EXECUTIVE MANAGER SERVICE OPERATIONS RICHMOND FELLOWSHIP QUEENSLAND

August 2015- Current

PREVIOUS POSITIONS

DIRECTOR OF CLINICAL SERVICES BELMONT HOSPITAL

December 2014- July 2015

As the Director of Clinical Services I was responsible for the delivery of clinical services provided which include day programs and inpatient services. I was responsible for all nursing and allied health staff inclusive of financial management, workplace health and safety and HR management.

DIRECTOR OF NURSING WEST MORETON MENTAL HEALTH AND SPECIALISED SERVICES

November 2012 – December 2014

In my role as Director of Nursing Mental Health and Specialised Services (DON MH&SS) I was responsible as the professional lead for over four hundred nursing staff within the HSS. This responsibility spans across The Park - Centre for Mental Health, Offender Health Services (staff at three Correctional facilities), Brisbane Youth Detention Centre, Ipswich Mental Health Service, Community Mental Health Services, ATODS, Service Improvement and Evaluation and The School of Nursing and Education.

I commenced the duties of this role in November 2012. I was appointed to this position in an acting capacity on 18 February 2013 and was made permanent in the role on 1 May 2013.

MANAGER LEGISLATIVE POLICY – MENTAL HEALTH BRANCH

May 2014 – September 2014

During the period May 2014 to October 2014 I undertook a 6 month secondment to develop a strategic plan for the implementation of the changes to the Mental Health Act 2000.

EXHIBIT 30

ACTING DIRECTOR OF NURSING THE PARK CENTRE FOR MENTAL HEALTH**October 2010 – November 2012**

As acting DON I was responsible for the strategic and operational management of nursing services at The Park. The Park had been undergoing a significant redevelopment, which has included the opening of a nine-bed assessment unit in the High Secure Inpatient Services, closure of the Dual Diagnosis Unit with a refurbishment into a Forensic Extended Rehabilitation and Treatment Unit.

STATE WIDE PROGRAM CO-ORDINATOR COURT LIASON SERVICE**December 2006 – October 2010**

As state-wide coordinator for Court Liaison Services, I was responsible for the expansion and further development of the service across Queensland. The role entailed ensuring that there is a consistent approach to court liaison services with a standard service delivery model and clinical practices. Data collection is now consistent with the same data being collected throughout the state.

TEAM LEADER, QUEENSLAND HEALTH, REDCLIFFE ADULT MENTAL HEALTH TEAM**September 2005 – December 2006**

In my role as Team Leader I was responsible for managing the Adult Mental Health Team at Redcliffe to make sure the service meets service delivery objectives whilst adhering to policies and procedures of the Redcliffe/Caboolture District Mental Health Service and Queensland Health.

**CASE MANAGER – CLINICAL NURSE
QUEENSLAND HEALTH, REDCLIFFE ADULT MENTAL HEALTH TEAM****June 2004 – September 2005**

As Case Manager, key responsibilities included providing clinical case management to clients of the service, providing evidence based interventions, providing advice, education and support to carers and working collaboratively with consumers to develop treatment plans.

**ACTING FORENSIC SERVICE MANAGER, IN-REACH SERVICE
CHESHIRE AND WIRRAL PARTNERSHIP NHS TRUST, STYAL WOMENS
PRISON MANCHESTER, UK****2003 - 2004**

Setting up and managing a mental health team within Styal Women's prison. The NHS was responsible for managing a multidisciplinary team including mental health nurses, social workers, art therapists, cognitive and behavioural therapist and for writing and implementing protocols for practice within the prison. I also developed joint protocols with the prison service for serious

EXHIBIT 30

incident review and clinical incidents. Other responsibilities were reviewing and improving risk assessment and risk management, developing education packages for prison officers relating to mental health issues, and the management and clinical audit within the team. I also carried out needs assessment relating to skill mix required within the team and continued to maintain a clinical caseload, implementing evidence based practice with a cognitive and behavioural therapy model.

**FORENSIC SERVICE OUTREACH MANAGER
CHESHIRE AND WIRRAL PARTNERSHIP NHS TRUST, MILLBROOK UNIT,
MACCLESFIELD, CHESHIRE, UK**

2002 - 2003

My main responsibilities included effectively managing a case load of clients recently discharged from Dane Ward (HDU), to reintegrate these clients into community mental health teams, to effectively liaise with the formal and informal community care providers, to work with patients and their families and provide support, care and ongoing therapeutic interventions, to attend outpatient clinics and to review community patients progress, to attend multidisciplinary team meetings and contribute to the Care Program Approach.

**SENIOR STAFF NURSE
EAST CHESHIRE NHS TRUST, DANE WARD, MILLBROOK UNIT,
MACCLESFIELD, CHESHIRE, UK.**

1998 - 2000

Working with a low secure unit (High dependency unit), my duties included assessing, planning and implementing and evaluating individual care plans. I was a proactive member of the multidisciplinary team working within the professional guidelines of the UKCC code of professional conduct, participating in training programmes for junior staff and leading innovative change. I also received and provided clinical supervision and took charge of the clinical area on a shift by shift basis.

**STAFF NURSE, SALFORD MENTAL HEALTH TRUST, PRESTWICH HOSPITAL,
MANCHESTER, UK**

1997 - 1998

Working in the regional secure unit (Medium secure) my main duties included assessment, planning, implementation and evaluation of programmes of care for the mentally disordered offender client group. I was also responsible for taking charge of the ward when required.

STUDENT NURSE
UNIVERSITY OF NORTHUMBRIA AT NEWCASTLE UPON TYNE, UK

1994 - 1997

Theoretical and practical knowledge was gained in a variety of mental health settings i.e.: acute admission wards, community, care of the elderly and forensic wards.

CONFERENCES

2010

Presenting a paper at the Australian and New Zealand Association of Psychiatry, Psychology and Law (Gold Coast, Queensland).

Speaker at National Institute for Mental Health conference to discuss setting up an In-Reach service's in prisons.

March 2003

Risk assessment of violence

RESEARCH ARTICLES PUBLISHED

Neilson P. & Brennan W. (2001) *The use of special observations: An audit within a psychiatric unit. Journal of Psychiatric and Mental Health Nursing; Vol 8(2), 147-155.*

Presentation at ANZPPL conference 2010 "Diversion of mentally ill people from custody to hospital"

Review of a chapter "Assessing quality of life and perceptions of care" Published in *Manual of Psychosocial Rehabilitation.*



Job ad reference:	H10WM06286
Role title:	Director of Nursing (Mental Health)
Status:	Temporary Full Time up to 31 March 2011
Unit/Branch:	The Park – Centre for Mental Health, Treatment, Research and Education
Division/District:	Division of Mental Health Darling Downs – West Moreton Health Service District
Location:	Wacol
Classification level:	Nurse Grade 10 (4)
Salary level:	\$127 123 per annum
Closing date:	Monday, 12 July 2010 (Applications will remain current for the duration of the vacancy)
Contact:	Katrina Mathies
Telephone:	[REDACTED]
Online applications:	www.health.qld.gov.au/workforus or www.smartjobs.qld.gov.au
Fax application:	[REDACTED]
Post application:	Darling Downs-West Moreton Health Service District, Recruitment Services, PO Box 2221, MANSFIELD BC 4122
Deliver application:	Darling Downs-West Moreton Health Service District, Nexus Building, 96 Mt Gravatt Capalaba Road, Upper Mt Gravatt.

About our organisation

Queensland Health's mission is 'creating dependable health care and better health for all Queenslanders'. Within the context of this organisation, there are **four core values** that guide our behaviour:

- **Caring for People:** Demonstrating commitment and consideration for people in the way we work.
- **Leadership:** We all have a role to play in leadership by communicating a vision, taking responsibility and building trust among colleagues. Queensland Health applies the National Health Service (NHS) Leadership Qualities Framework.
- **Respect:** Showing due regard for the feelings and rights of others.
- **Integrity:** Using official positions and power properly.

Purpose

- To provide professional mental health nursing leadership and management of nurses employed at The Park – Centre for mental health. The position also provides professional mental health nursing leadership for nurses employed within the Division of Mental Health (West Moreton and South Burnett Integrated Mental Health Service components)
- In collaboration with the Executive Director Mental Health and senior clinical and managerial and executive nursing staff to ensure that the provision of clinical nursing services are aligned to the core business of patient care, and achieve both strategic and operational nursing service outcomes.

Your key responsibilities

- Fulfil the accountabilities of this role in accordance with Queensland Health's core values, as outlined above.
- Provide effective professional leadership and management of nursing service delivery including workforce planning, recruitment and selection, and monitor a range of service indicators as they apply to nursing service delivery at The Park – Centre for Mental Health.

To find out more about Queensland Health, visit www.health.qld.gov.au

EXHIBIT 30

- Collaborate with Nursing Directors to maintain or initiate where appropriate the following:
 - A strategic management plan for the nursing division
 - Policies for the nursing division
 - Nursing philosophy and goals
 - Innovative, contemporary approach's to nursing practice
 - Plans for research and education in nursing
- Provide nursing leadership to promote the professional delivery, practice and conduct of mental health nursing consistent with a performance culture, the Model of Service Delivery, National Standards for Mental Health Services, the Australian College of Mental Health Nurses Standards, Clinical Indicators and Queensland Health values.
- Provide high level support, advice and information to the Executive Director of Mental Health and the Executive Team, on key strategic and operational issues impacting on mental health nursing within the Division of Mental Health (West Moreton), including the provision of effective organisational leadership and management during the redevelopment of The Park – Centre for Mental Health.
- Collaboratively manage The Park – Centre for Mental Health's budget to ensure efficient, effective allocation of resources to maintain a high standard of service delivery.
- Participate in the development and integration of key objectives from the district and facility's strategic plans into service delivery.
- Build and manage partnerships with key areas and establish and maintain broad networks in order to ensure consumer focused service delivery.
- Provide executive leadership by sponsoring key projects and service wide committees as required. Represent as part of the Mental Health Service management team, relevant District, State and National Mental Health committees and forums as required.
- Facilitate a collaborative working relationship with key educational and professional stakeholders to promote opportunities for training and development for mental health staff, to promote evidence based nursing practice and the provision of specialist post-graduate programs. Including the development and management of a framework to promote the development of a supervision model for mental health nurses within the service.
- Actively contribute to a working environment which promotes:
 - The participation of consumers and carers in the development, delivery and evaluation of mental health services, fostering a sound value base of trust, and respect for consumers and their families.
 - Integrity and professionalism, including the development of employee abilities and competencies.
- Provide a strategic approach through a high Level knowledge of, and compliance with: Queensland Health Consumer Complaints Management Policy and Standards, any local procedures relating to this policy, the Health Quality and Complaint Commission Standard, Queensland Health's Integrated Risk Management Policy Workplace Health and Safety, Equal Employment Opportunity, and Antidiscrimination requirements, and ensuring any staff reporting to this position are also aware of these policies, procedures and standards.
- This position reports operationally to the Executive Director Mental Health, and professionally to the Executive Director of Nursing and Midwifery.
- Nursing Directors and Nurse Managers at The Park – Centre for Mental Health report professionally and operationally to this position.
- The Nursing Director (Integrated Mental Health Service – Ipswich) reports professionally to this position.

Qualifications/Professional registration/other requirements

- Registered or eligible for registration of the Queensland Nursing Council and possession of an Annual Practicing Certificate. Post graduate qualifications in Mental Health are considered desirable.
- This position participates in an after hours on call roster and provides after hours clinical and management support to all staff.
- This position may involve some travel via road within the Division and to other Health Service Districts.
- The possession of a licence to operate a class C motor vehicle would be considered desirable but not mandatory.

To find out more about Queensland Health, visit www.health.qld.gov.au

EXHIBIT 30

Are you the right person for the job?

You will be assessed on your ability to demonstrate the following key attributes. Within the context of the responsibilities described above, the ideal applicant will be someone who can demonstrate the following:

Specialist Knowledge	Comprehensive understanding of the political environment, health service legislation and public service standards. Application of specialist mental health nursing knowledge to maintain a competent nursing workforce that provides safe, efficient and effective patient care.
Staff Management	Effectively manages staff within HRM framework and builds trust and rapport with the team. High level written and oral communication skills.
Financial Management	Understands financial principles and takes responsibility for meeting budgets, remaining cost focused and working within funding limits.
Continuous Improvement	Proactively identifies needs for improvement and initiates and drives continuous improvement with an awareness of objectives.
Negotiation	Negotiates, persuades and gains support from appropriate people to reach consumer focused solutions.
Work Values	Demonstrates honesty, integrity and respect for all patients, carers and staff.

How to Apply

Please provide the following information to the panel to assess your suitability:

- **Your current CV or resume, including referees.** Applicants must seek approval prior to nominating a person as a referee. Referees should have a thorough knowledge of your work performance and conduct, and it is preferable to include your current/immediate past supervisor. By providing the names and contact details of your referee/s you consent for these people to be contacted by the selection panel. If you do not wish for a referee to be contacted, please indicate this on your resume and contact the selection panel chair to discuss.
- **A short response** (maximum 1–2 pages) on how your experience, abilities and knowledge would enable you to achieve the key accountabilities and meet the key skill requirements.
- **Application form** (only required if not applying online).

About the Health Service District/Division/Branch/Unit

The Darling Downs – West Moreton Health Service District covers approximately 95,000km² to the west of Brisbane, extending south from the New South Wales border to Wandoan in the north and Glenmorgan in the west. The District services a population of approximately half a million people. The District's demographics are diverse and include metropolitan, large rural town and small rural community settings.

The District is home to two major regional hospitals, two mental health facilities, 22 rural and remote acute facilities, seven aged care facilities, community and oral health services.

The District also has a major teaching role providing both undergraduate and postgraduate clinical experience for members of the multidisciplinary health care team.

If you are looking for a challenging and supportive working environment, we encourage you to consider progressing your career with us.

This position sits within **The Division of Mental Health**

The Division is responsible for providing comprehensive mental health services to the District and some specialised services outside the District as determined by Queensland Mental Health Policy. It includes two large stand alone psychiatric hospitals – Baillie Henderson Hospital and The Park – Centre for Mental Health.

The Division provides specialist primary, secondary and tertiary level services including acute and extended in patient services.

To find out more about Queensland Health, visit www.health.qld.gov.au

EXHIBIT 30

Acute inpatient services are provided at Toowoomba and Ipswich Hospitals. Extended inpatient services are provided at The Park – Centre for Mental Health and Baillie Henderson Hospital. Community Mental Health services are provided from two major sites – Ipswich & Toowoomba, 8 principal sites across the District and outreach services across the whole District.

Pre-Employment screening

Pre-employment screening, including criminal history and discipline history checks, may be undertaken on persons recommended for employment. Roles providing health, counselling and support services mainly to children will require a Blue Card. Please refer to the Information Package for Applicants for details of employment screening and other employment requirements.

Health professional roles involving delivery of health services to children and young people

All Health Professionals (including registered nurses and medical officers) who in the course of their duties formulate a reasonable suspicion that a child or young person has been or is likely to be abused or neglected in their home/community environment, has a duty of care obligation to immediately report such concerns to the Department of Child Safety.

All relevant health professionals are also responsible for the maintenance of their level of competency in the provision of health care and their reporting obligations in this regard.

Disclosure of Previous Employment as a Lobbyist

Applicants will be required to give a statement of their employment as a lobbyist within one (1) month of taking up the appointment. Details are available at <http://www.psc.qld.gov.au/library/document/policy/lobbyist-disclosure-policy.pdf>

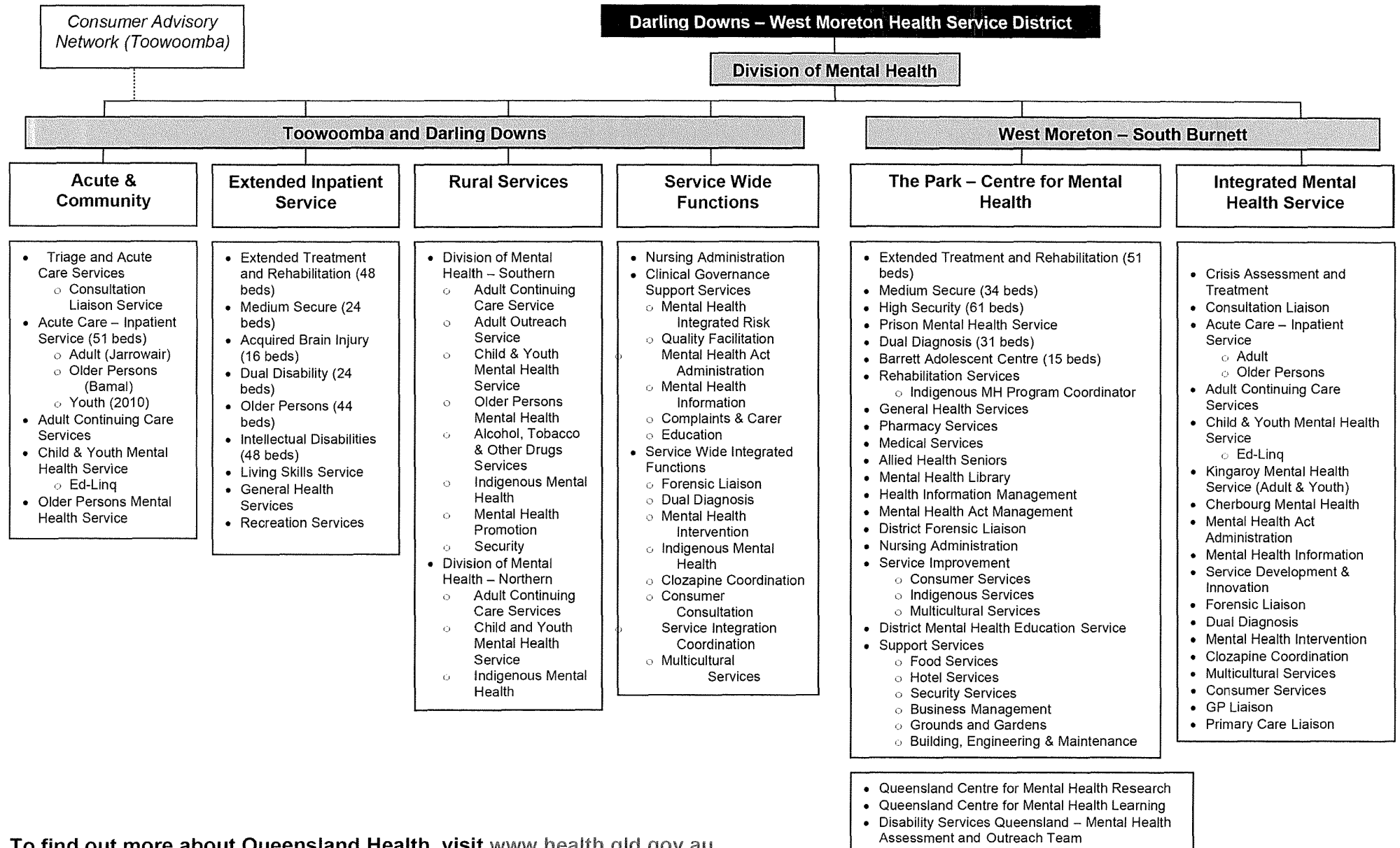
Probation

Employees who are permanently appointed to Queensland Health may be required to undertake a period of probation appropriate to the appointment. For further information, refer to Probation HR Policy B2 http://www.health.qld.gov.au/hrpolicies/resourcing/b_2.pdf

Organisational chart

** Revised amalgamated structure for Division of Mental Health current under consultation. The following existing structures are provided as a guide to current services.

**Darling Downs – West Moreton Health Service District
Division of Mental Health
Service Structure – DRAFT August 2009**



To find out more about Queensland Health, visit www.health.qld.gov.au



Queensland
Government

“WB-3”

West Moreton Hospital and Health Service

Queensland Health

www.health.qld.gov.au/workforus



Job ad reference:	H13WM02122
Role title:	Director of Nursing
Status:	Permanent Full Time <i>(Future vacancies of a temporary, full time or part time nature may be accommodated within this role)</i>
Unit/Branch:	Mental Health and Specialised Services
Division/District:	The Park – Centre for Mental Health West Moreton Hospital and Health Service
Location:	Wacol
Classification level:	Nurse Grade 11.3 (previously advertised at Nurse Grade 10.4)
Salary level:	\$136 173 per annum
Closing date:	Friday, 8 March 2013 <i>(Applications will remain current for 12 months)</i>
Contact:	Sharon Kelly
Telephone:	[REDACTED]
Online applications:	www.health.qld.gov.au/workforus or www.smartjobs.qld.gov.au If you are unable to apply online, please contact Statewide Recruitment Services on [REDACTED] or recruitment_mtgravatt@health.qld.gov.au
Deliver application:	Hand delivered applications will not be accepted

About our organisation

Queensland Health's purpose is to provide safe, sustainable, efficient, quality and responsive health services for all Queenslanders. Our behaviour is guided by Queensland Health's commitment to high levels of ethics and integrity and the following **five core values**:

- **Caring for People:** We will show due regard for the contribution and diversity of all staff and treat all patients and consumers, carers and their families with professionalism and respect.
- **Leadership:** We will exercise leadership in the delivery of health services and in the broader health system by communicating vision, aligning strategy with delivering outcomes, taking responsibility, supporting appropriate governance and demonstrating commitment and consideration for people.
- **Partnership:** Working collaboratively and respectfully with other service providers and partners is fundamental to our success.
- **Accountability, efficiency and effectiveness:** We will measure and communicate our performance to the community and governments. We will use this information to inform ways to improve our services and manage public resources effectively, efficiently and economically.
- **Innovation:** We value creativity. We are open to new ideas and different approaches and seek to continually improve our services through our contributions to, and support of, evidence, innovation and research.

Purpose

- Lead, manage and coordinate nursing services within the Division of Mental Health and Specialised Services (MH&SS), West Moreton Hospital and Health Service (HHS).
- Contribute as a member of the West Moreton MH&SS Leadership Team to the planning and delivery of the range and scope of mental health services provided by West Moreton HHS.
- Provide authoritative advice and guidance on the strategic planning and delivery of quality contemporary mental health nursing services through a detailed understanding of national and state mental health policy directives.

To find out more about Queensland Health, visit www.health.qld.gov.au

EXHIBIT 30

- Provide authoritative advice and guidance on the strategic planning and delivery of quality contemporary Offender Health nursing services through participating in and supporting state offender health policy directives
- In collaboration with the Executive Director Nursing and Midwifery (EDNM), provide expert advice regarding the nursing service, to ensure nursing services are managed in the most efficient and cost effective manner.

Your key responsibilities

- Fulfil the responsibilities of this role in accordance with Queensland Health's core values, as outlined above.
- Staffing and budget responsibilities:
 - The Director of Nursing West Moreton Mental Health and Specialised Health Services is responsible for approx 430 nursing FTEs across all clinical programs at The Park – Centre for Mental Health, Offender Health Services, Integrated Mental Health Services and Brisbane Youth Detention Centre.
 - Reporting to this position are four Nursing Director roles:
 - Nursing Director Secure Inpatient Services
 - Nursing Director Offender Health and Clinical Support
 - Nursing Director Community Integration and
 - Nursing Director Service Improvement & Evaluation
- This position reports operationally to the Executive Director MH&SS and professionally to the Executive Director NM, West Moreton HHS.
- Coordinate and manage the planning and delivery of nursing services within the MH&SS in accordance with the West Moreton HHS Strategic Plan, the MH&SS Operational Plan and the Nursing and Midwifery Operational Plan.
- Provide nursing leadership to promote the professional delivery, practice and conduct of mental health nursing consistent with a performance culture, the Model of Service Delivery, National Standards for Mental Health Services, the Australian College of Mental Health Nurses Standards and Clinical Indicators.
- Provide nursing leadership to promote the professional delivery, practice and conduct of Offender Health nursing standards and models of care.
- Provide high level support, advice and information to the Executive Director of MH&SS and the Leadership Team, on key strategic and operational issues impacting on nursing within MH&SS.
- Deliver on the agreed financial and activity performance targets and requirements as outlined in the MH&SS Performance Agreement, including the review the nursing staffing profile consistent with the business planning framework and a contemporary model of service delivery.
- In collaboration with the Leadership Team, promote a range of operational nursing service delivery matters including workforce planning, recruitment and selection, and monitor a range of service indicators as they apply to nursing service delivery.
- Actively contribute to the strategic and operational planning, organisational and service improvement processes, including the budgetary processes, the devolution of human resource management, cost centre management and service objectives associated with clinical service delivery.
- Encourage and foster a workplace culture which values education, research and learning and development within MH&SS.
- Provide leadership in collaboration with the Clinical leadership team, West Moreton MH&SS, the development, oversight and implementation of quality systems and processes which support innovative work practices, outcome-driven decisions and integrated risk management in the clinical service areas.
- Represent as part of the MH&SS Leadership Team, relevant HHS, State and National Health committees and forums as required.
- Facilitate a collaborative working relationship with key educational and professional stakeholders to promote opportunities for training and development, to promote evidence based nursing practice and the provision of specialist post-graduate programs.
- Actively contribute to a working environment which promotes:
 - The participation of consumers and carers in the development, delivery and evaluation of mental health services, fostering a sound value base of trust, and respect for consumers and their families.

To find out more about Queensland Health, visit www.health.qld.gov.au

- Integrity and professionalism, including the development of employee abilities and competencies.
- Ensure effective performance management of Nursing Directors and oversee the performance management of their reporting officers and throughout MH&SS for nursing staff.

Qualifications/Professional registration/Other requirements

- Appointment to this position requires proof of qualification and registration as a registered nurse with the Nursing and Midwifery Board of Australia - AHPRA. Certified copies of the required certificates and supporting information must be provided to the appropriate supervisor/ manager, prior to the commencement of clinical duties.
- Post graduate endorsement and qualifications in mental health nursing and health management would be highly regarded.
- This position requires the incumbent to operate a class C motor vehicle, and an appropriate licence endorsement to operate this type of vehicle is required. Proof of this endorsement must be provided before commencement of duty.
- This position will be required to travel and work across all sites within West Moreton MH&SS which including The Park – Centre for Mental Health, Ipswich Hospital, Community Mental Health Sites and the prisons where Offender Health Services work.

Are you the right person for the job?

You will be assessed on your ability to demonstrate the following key attributes. Within the context of the responsibilities described above, the ideal applicant will be someone who can demonstrate the following:

- Demonstrated high level knowledge of contemporary mental health nursing practice and capacity in transformational leadership skills and management practices to engage and motivate stakeholders to achieve quality patient outcomes and productivity targets.
- Demonstrated ability to apply leadership principles which encourage self-awareness, innovative thinking and motivation in others to perform at expected levels within a complex health service environment.
- Demonstrated commitment to outcome-driven performance and organisational achievement.
- Demonstrated knowledge and experience in collaborative coordination of Nursing Excellence Programs, Accreditation and/or Quality Nursing Programs.
- Demonstrated knowledge and sound skills in strategic budget monitoring, management and analysis at a senior level.
- Demonstrated comprehensive analytical and problem solving skills in the strategic evaluation of professional performance and productivity monitoring for mental health nursing services.
- Demonstrated proficiency to work effectively within a leadership team to meet the demands of complex healthcare environments.
- Demonstrated commitment and motivation to effectively contribute to organisational goals and ability to develop apply and adhere to organisational policies, procedures, guidelines and Queensland Health's Code of Conduct.

How to apply

Please provide the following information to the panel to assess your suitability:

- **Your current CV or resume, including referees.** You must seek approval prior to nominating a person as a referee. Referees should have a thorough knowledge of your work performance and conduct, and it is preferable to include your current/immediate past supervisor. By providing the names and contact details of your referee/s you consent for these people to be contacted by the selection panel. If you do not wish for a referee to be contacted, please indicate this on your resume and contact the selection panel chair to discuss.
- **A short response** (maximum 1-2 pages) on how your experience, abilities, knowledge and personal qualities would enable you to achieve the key responsibilities and meet the key attributes.
- **Application form** (only required if not applying online).

About West Moreton Hospital and Health Service

West Moreton Hospital and Health Service (WMHHS) comprises of four local government areas Scenic Rim Regional Council, Lockyer Valley Regional Council, Somerset Regional Council and Ipswich City Council.

To find out more about Queensland Health, visit www.health.qld.gov.au

Ipswich is the major city of the region. Esk, Laidley, Gatton, Boonah and Wacol are townships spread throughout the service area.

The WMHHS services a population of approximately 249,000 people. The region's demographics are diverse and include metropolitan and small rural community settings.

The service has a major teaching role, providing both undergraduate and postgraduate clinical experience for members of the multidisciplinary healthcare team. The service currently employs over 2 600 staff.

WMHHS is home to one medium sized hospital, Ipswich Hospital, four rural facilities, Boonah Rural Health Service (RHS), Esk RHS, Gatton RHS, and Laidley RHS.

Based at Gailes are The Brisbane Youth Detention Centre Health Service and The Park-Centre for Mental Health, Treatment, Research and Education which also hosts the state-wide service of Queensland Centre for Mental Health Learning and Queensland Centre for Mental Health Research.

Wacol Women's Correctional Offender Health Service (including Helana Jones at Albion), Wolston Correctional Offender Health Service, Brisbane Correctional Offender Health Service became a part of West Moreton Hospital and Health Service on 1 July 2012 as part of the state-wide health reform.

Community Health Services operate from both the Ipswich Health Plaza and Goodna Community Health Centre and provides an outreach service to the rural area.

Oral Health services are provided in 18 fixed clinics and 12 mobile dental clinics across the region, coordinated to provide comprehensive adult and school based services. The main oral health clinic is the Ipswich Community Dental Clinic based in the Limestone Street Centre.

By 2031 it is projected that the WMHHS population will more than double to approximately 580,000, making the Hospital and Health Service the fastest growing in the state.

Mental Health and Specialised Services

The MH&SS currently consists of:

- Integrated Mental Health Services (IMHS),
- The Park- Centre for Mental Health (The Park)
- Offender Health Services (OHS)
- Alcohol, Tobacco and other drug services
- Brisbane Youth Detention Centre (BYDC)and
- The Drug Court Program (which will cease by 30 June 2013)

Since 1 July 2012, Offender Health Services have been devolved to Hospital and Health Services. Historically, the mental health services within WMHHS have functioned and been managed and resourced as distinct separate services. A revised integrated organisational structure for MH&SS has been implemented.

Additional information on the Hospital and Health Service is available on QHEPS site via www.health.qld.gov.au

Pre-employment screening

Pre-employment screening, including criminal history and discipline history checks, may be undertaken on persons recommended for employment. The recommended applicant will be required to disclose any serious disciplinary action taken against them in public sector employment. In addition, any factors which could prevent the recommended applicant complying with the requirements of the role are to be declared.

Roles providing health, counselling and support services mainly to children will require a Blue Card, unless otherwise exempt. Please refer to the Information Package for Applicants for details of employment screening and other employment requirements.

To find out more about Queensland Health, visit www.health.qld.gov.au

Health professional roles involving delivery of health services to children and youth

All relevant health professional (including registered nurses and medical officers) who in the course of their duties formulate a reasonable suspicion that a child or youth has been abused or neglected in their home/community environment, have a legislative and a duty of care obligation to immediately report such concerns to Child Safety Services, Department of Communities.

All relevant health professional are also responsible for the maintenance of their level of capability in the provision of health care and their reporting obligations in this regard.

Salary Packaging

To find out whether or not your work unit is eligible for the Public Hospital Fringe Benefits Tax (FBT) Exemption Cap please refer to the Salary Packaging Information Booklet for Queensland Health employees available from the Queensland Health Salary Packaging Bureau Service Provider - RemServ at <http://www.remserv.com.au>. For further queries regarding salary packaging RemServ's Customer Care Centre may be contacted via telephone on 1300 30 40 10.

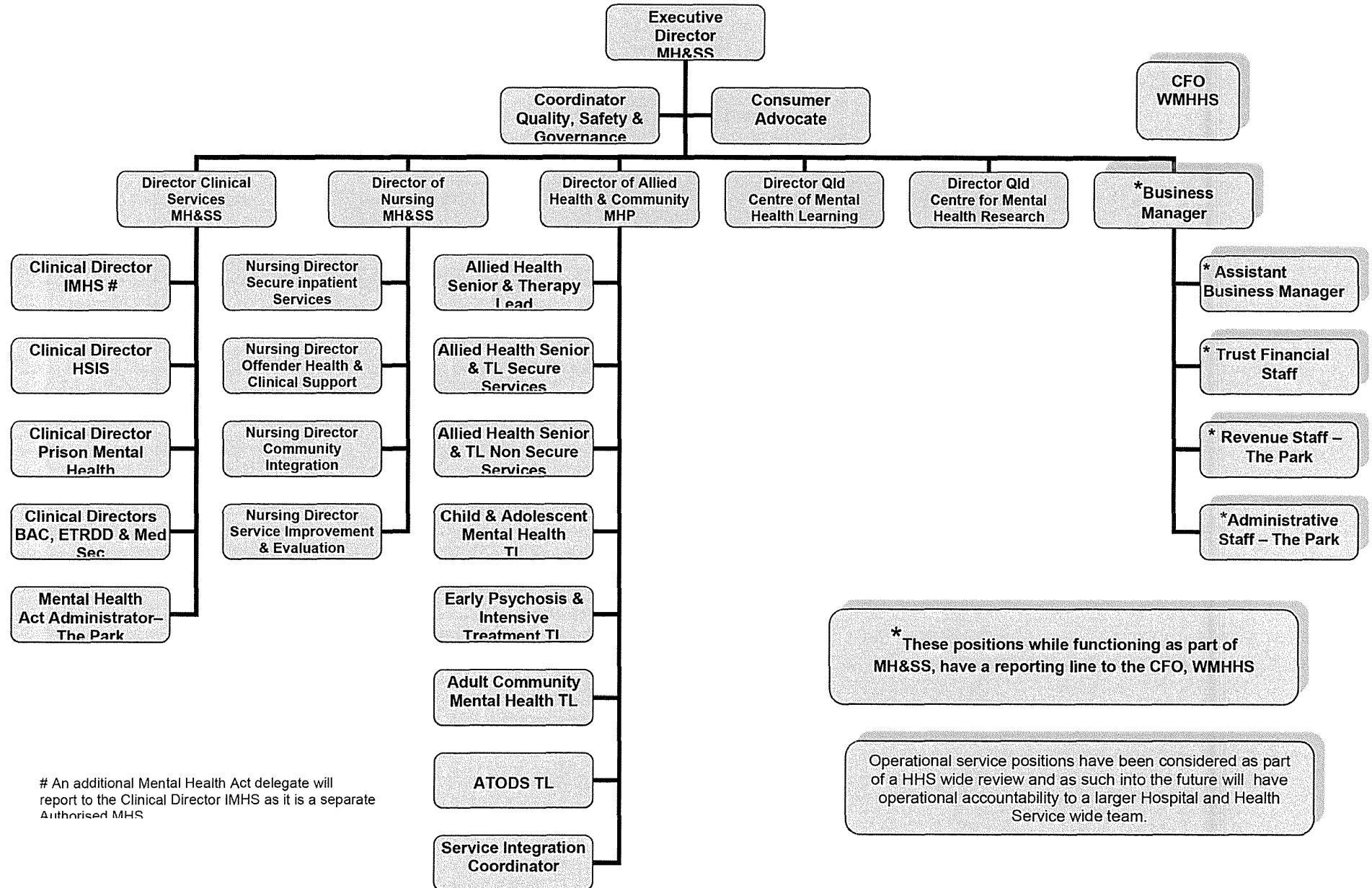
Disclosure of Previous Employment as a Lobbyist

Applicants will be required to give a statement of their employment as a lobbyist within one (1) month of taking up the appointment. Details are available at <http://www.psc.qld.gov.au/library/document/policy/lobbyist-disclosure-policy.pdf>.

Probation

Employees who are permanently appointed to Queensland Health may be required to undertake a period of probation appropriate to the appointment. For further information, refer to Probation HR Policy B2 <http://www.health.qld.gov.au/qhpolicy/docs/pol/qh-pol-197.pdf>.

Organisational Chart – West Moreton Mental Health and Specialised Services



An additional Mental Health Act delegate will report to the Clinical Director IMHS as it is a separate Authorised MHS

* These positions while functioning as part of MH&SS, have a reporting line to the CFO, WMHHS

Operational service positions have been considered as part of a HHS wide review and as such into the future will have operational accountability to a larger Hospital and Health Service wide team.

"WB-4"

Lawrence Springborg transcript of ABC radio interview – 6 August

RE: BAC closure

LS - It is true that sometime by early 2014 that centre will be closing as we actually come up with a range of new options to actually deliver those services to people closer to their own home or right in their own home town. But we do understand that there will need to be acute inpatient type options for youth. At the moment you've only got 1 and that's at the Barrett and they have done an exception good job its an aging facility wont be able to function much beyond this year because it is in the middle of adult mental health facility which is going to be expanded and of course that carries with it some risks and also an expert clinician panel will be made up of clinicians from within Queensland and also outside of the state plus a resident and residents parent or a former residents parent will be providing advice to us and the other thing about it is that it is going to be auspiced in the future, youth mental health in Queensland under statewide childrens health service which is the statewide body to look after childrens health so we can actually make sure we get a statewide approach to this.

ABC – So just to be clear Minister come the end of 2013 the Barrett Adolescent Centre will close.

LS – Probably early, well we expect to have the options available to people in early 2014 and the transition will start some time in the early part of 2014 as we build up services in other areas around the state.

ABC - And will you guarantee that there will be services in other parts of the state that provide residential care because

LS – Absolutely

ABC - that is what I'm hearing from the patients that I have spoken to and the parents that I have spoken to that this is not about acute care this is not about the trauma when a teenager attempts suicide this is about the long term care plan

ABC – So, so sorry to be clear, will you guarantee that there will be services operating that offer inpatient care for teenagers in Queensland before Barrett shuts?

LS – That's the whole point of this to actually leave no one who is currently a patient or resident there and those that are hopefully on waiting on the list so that they can have services closer to their own home and we are allocating an additional \$2m for that and that's why we have an expert clinician panel and also a former resident and a parent who is also guiding the experts along the way because I am very keen to make sure that we can provide this service across Queensland and that's why I put on hold the closure of Barrett when I

became the Minister we understand these young people have got very very complex mental health care needs and that would involve that they have inpatient or very supported residential requirements around the state and including working with Education Queensland to make sure they have education plans that are necessary as well.

ABC - Yeah, because that's the other part of this I will get to the school in just a moment but how many inpatient facilities are you envisaging in Queensland?

LS – Well, basically what we have at the Barrett Youth Adolescent mental health facility at the moment is 15 beds their not always completely occupied there has been times past where they haven't been but obviously it doesn't meet the needs for children with these complex needs around Queensland and what we have to do is to look at the options which can ensure that all of those young people can be accommodated locally because a range of them will come from that local area or within their own community and there has to be inpatient equivalent support for all of them and hopefully additional young people around Queensland.

ABC – You said that broad statement about providing the services but how many inpatient facilities will exist in Queensland? What's the plan?

LS – Well, we'll be taking the advice of the expert panel who actually is indicating to us whether we need to have more inpatient beds or whether these young people can be supported in residential accommodation in their own local community with the experts in more of a homely type of environment so that's the sort of thing that is being worked through at the moment ok it's been finalised I'm giving you the broader picture about how this is going to work that is that we are no longer going just have the focus being at the Barrett where like if you have an issue in Rockhampton or Cairns or Townsville or wherever the case may be your option is the Barrett it needs to be close to you but of course for the young people in south east Queensland they need to have a facility similar to this or supported accommodation very similar with very high level support very close to their home town.

ABC – Lawrence Springborg is my guest, the Minister for Health in Queensland just discussing broadly the plan for adolescent mental health care in Queensland. You're listening.....

ABC –In terms of acknowledging the situation for parents I mean you heard the anxiety from Angela tonight, the staff and patients that I have spoken to as well have indicated that these last couple of months have been a difficult time for them. At what point will you be speaking directly those staff members and including the people who are part of the school that is on site at the Barrett centre?

LS – Yeah, well, can I just touch on the isolated issue first? Certainly as the new Cairns based hospital is built and opened, there will also be some options there for young people with regards to inpatient care and also in

Townsville. But I think we need to understand is often once you go past that acute episode its about assisting the young person to build their confidence their life skills and to give them that support outside of that environment but in a very supportive way. Now of course there is a part of this transition that would have happened with the closure of Barrett and movement to Redlands there will no doubt be consideration for staff and how they are going to relocate and reorganise within the system and as I understand WMHHS will be undergoing that particular process with the staff. Now that would be happening now or under the previous plan by the previous government as they planned to move that facility to elsewhere in south east Queensland.

ABC – So is that a definite that there will be a facility in the Redlands?

LS - No the previous governments proposal was to close the Barrett Adolescent facility and to put one in the Redlands. I indicated when I became Minister that I did not like that idea because I felt not enough consideration had happened. We needed to look at the whole issue whether we should have one facility or whether we should look at having those services broken down across Queensland so that we could deliver services across the state and not just in one consolidated area, so no, that won't be going ahead per se as in the major dev but it may very well be possible as a part of this that smaller residential type options with that acute support in various areas are available to people closer to their own home whether it be Ipswich, the Northside of Brisbane, the Gold Coast you name it and also scattered throughout Queensland and the finer details to the way that's going to be worked out is just going through now and as I indicated we've got probably around about another 7 to 8 months before its completely formalised and that's being done with consultation from this expert panel. I'm not on the expert panel but I'm very confident that's what's been put in place.

ABC – Ok, 7 to 8 months before you finalise the plan. Is that the point which you will be able to tell Queenslanders look this is where these centres will be located?

LS – Absolutely and where the options are and an additional \$2m has been put in to it over and above the money which is currently allocated so we believe that will be able to not only properly have facilities and support for these young people with complex needs but to accommodate additional young people as well who have these care needs. I think you've been fairly raising this issue over the last couple of weeks, we wanted to be in a position to give you and those that are concerned that have been talking to you some guidance about what's been suggested because we are aware of the importance of this facility, that it was always going to close, previously I put that on hold but we want to actually this is the proposal, it is now being worked through, this is the idea behind it, we will have a much clearer picture by the latter stage of this year and the final details around it will be the early part of next year, where are in August now, so we are probably looking in that 6 odd months down the track.

ABC – Lawrence Springborg is my guest, Minister for Health in Queensland.
Minister, I very much appreciate you coming on the program tonight and
giving us the broader



BARRETT ADOLESCENT CENTRE TRANSITION CARE PLANNING MEETING**Meeting Details****Day and Date** Wednesday 11 December 2013**1. Attendees**

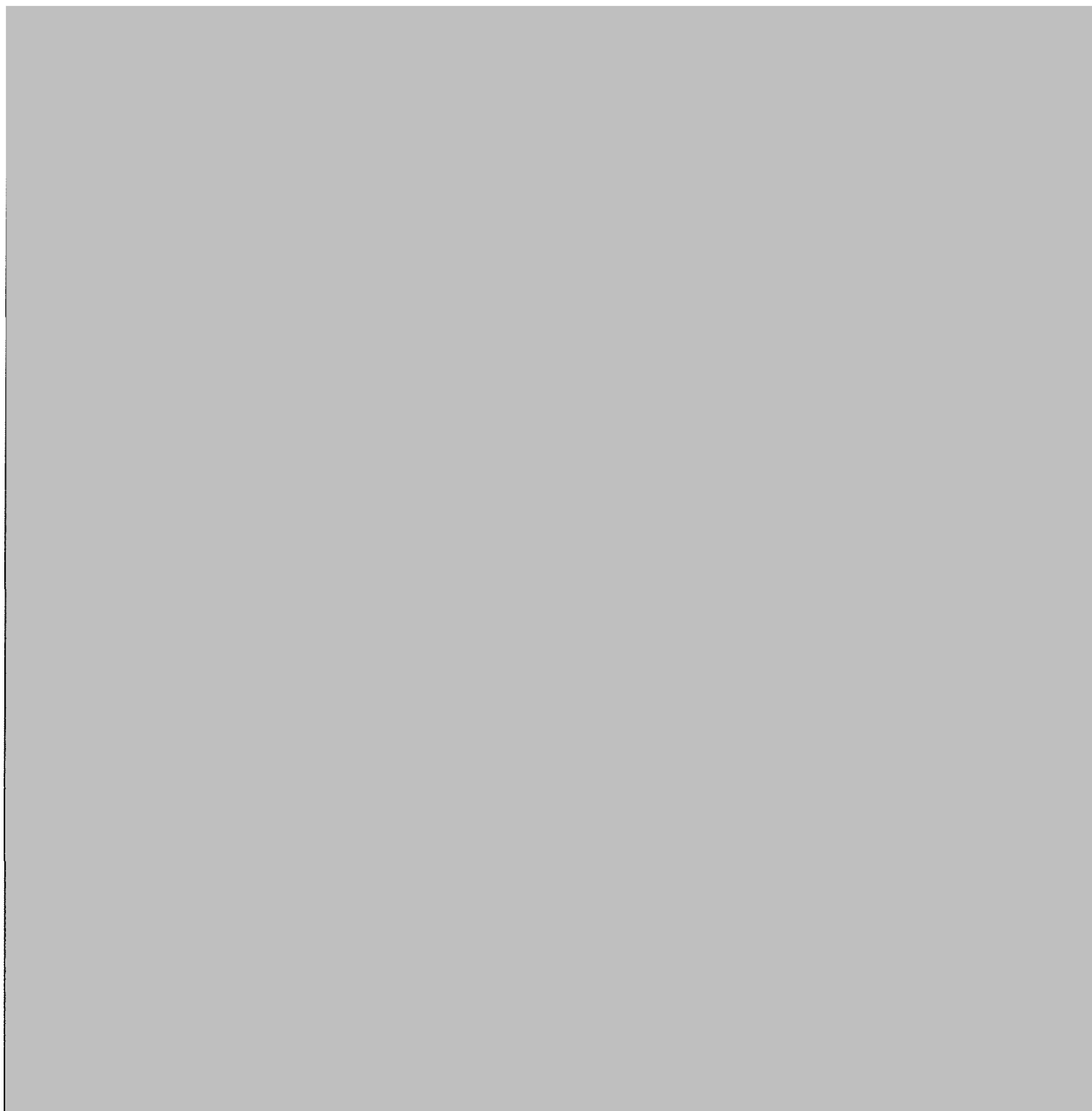
Name	Position
Leanne Geppert (LG)	A/Director of Strategy, Mental Health and Specialised Services
Anne Brennan (AB)	A/Clinical Director, Barrett Adolescent Centre
Elisabeth Hoehn (EH)	Psychiatrist, Child and Youth Mental Health Services, Children's Health Queensland Hospital and Health Service
Michelle Giles (MG)	Director Of Allied Health And Mental Health Community Programs
Will Brennan (WB)	Director of Nursing, Mental Health and Specialised Services
Padraig McGrath	Nursing Director, Secure Services
Sharon Kelly (SK)	Executive Director, Mental Health and Specialised Services
Terry Stedman (TS)	Clinical Director, Mental Health and Specialised Services
Laura Johnson (LJ)	Project Officer, Mental Health and Specialised Services

2. Apologies

Nil

3. Discussion

Consumer	Discussion and Actions	By Whom	By When



Other Actions for Follow Up	Final costs for Aftercare Transition Services Adequate nursing staff is a major risk, to be added to risk register Engagement of patients in the Holiday Program will be done via a contract. If day patient does not commit to the Holiday Program they will be discharged to services as per transition plan.	LG follow up IF LJ LJ to draft contract	
-----------------------------	---	--	--