

**In the matter of the *Commissions of Inquiry Act 1950***  
**Commissions of Inquiry Order (No.4) 2015**  
**Barrett Adolescent Centre Commission of Inquiry**

**AFFIDAVIT**

Kirsten Palmer, of c/- Crown Law, 50 Ann Street Brisbane, Senior Psychologist, states on oath:

1. I have been provided with a Requirement to Give Information in a Written Statement dated 18 January 2016. **Exhibit A** to this affidavit is a copy of this notice.

2. [Redacted]

3. I am a Senior Psychologist, currently employed with the Adolescent Inpatient Unit and Day Service, Townsville. I commenced in this role in January 2013 working in the Day Program. I am currently on six months leave, returning to work on 15 February 2016.

4. [Redacted]

5. [Redacted]

[Redacted]

[Redacted]

Deponent

A.J.P., G.Dee., Solicitor

**AFFIDAVIT**

On behalf of the State of Queensland

Crown Solicitor  
11<sup>th</sup> Floor, State Law Building  
50 Ann Street  
BRISBANE QLD 4000

[Redacted]

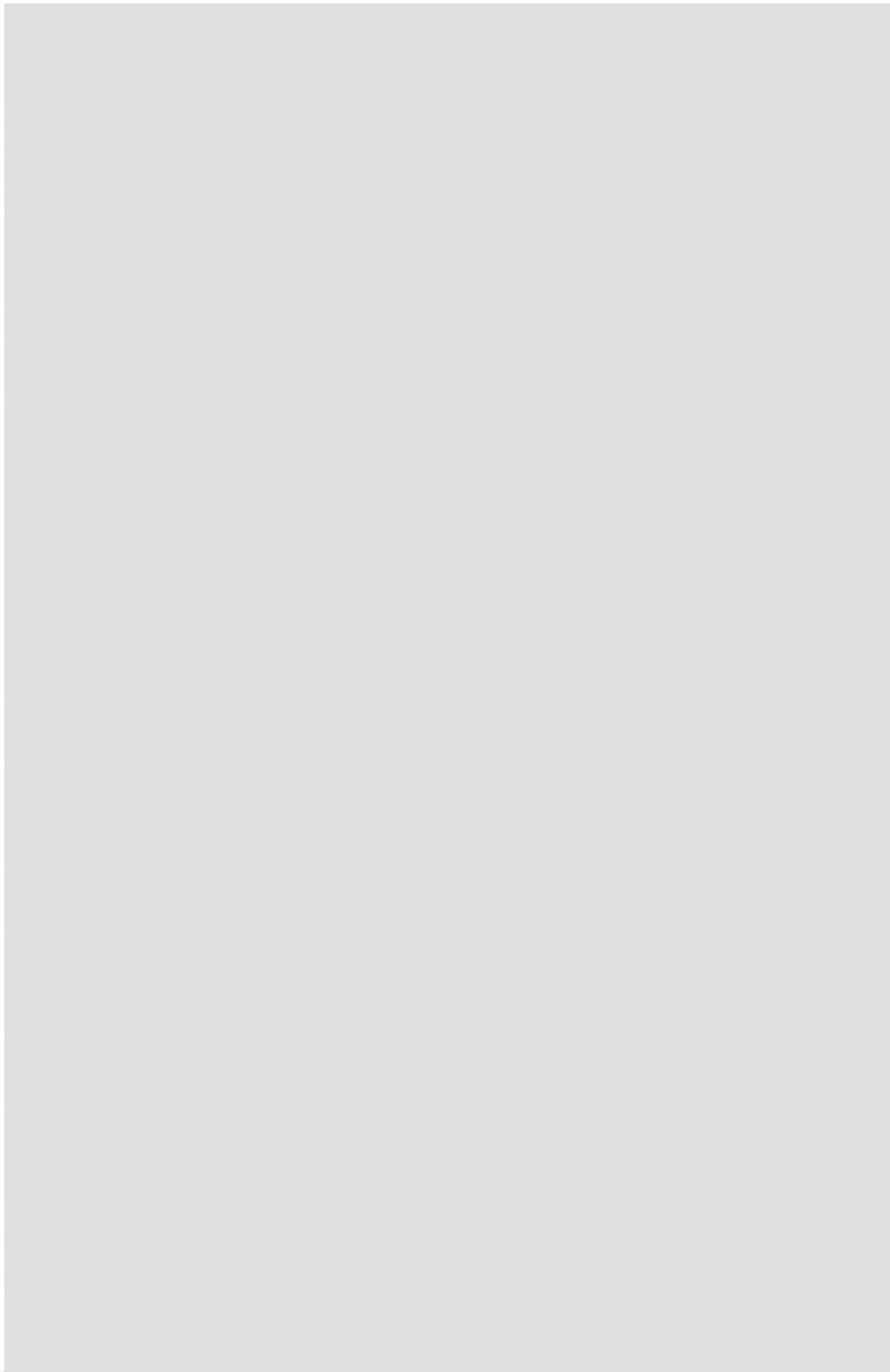
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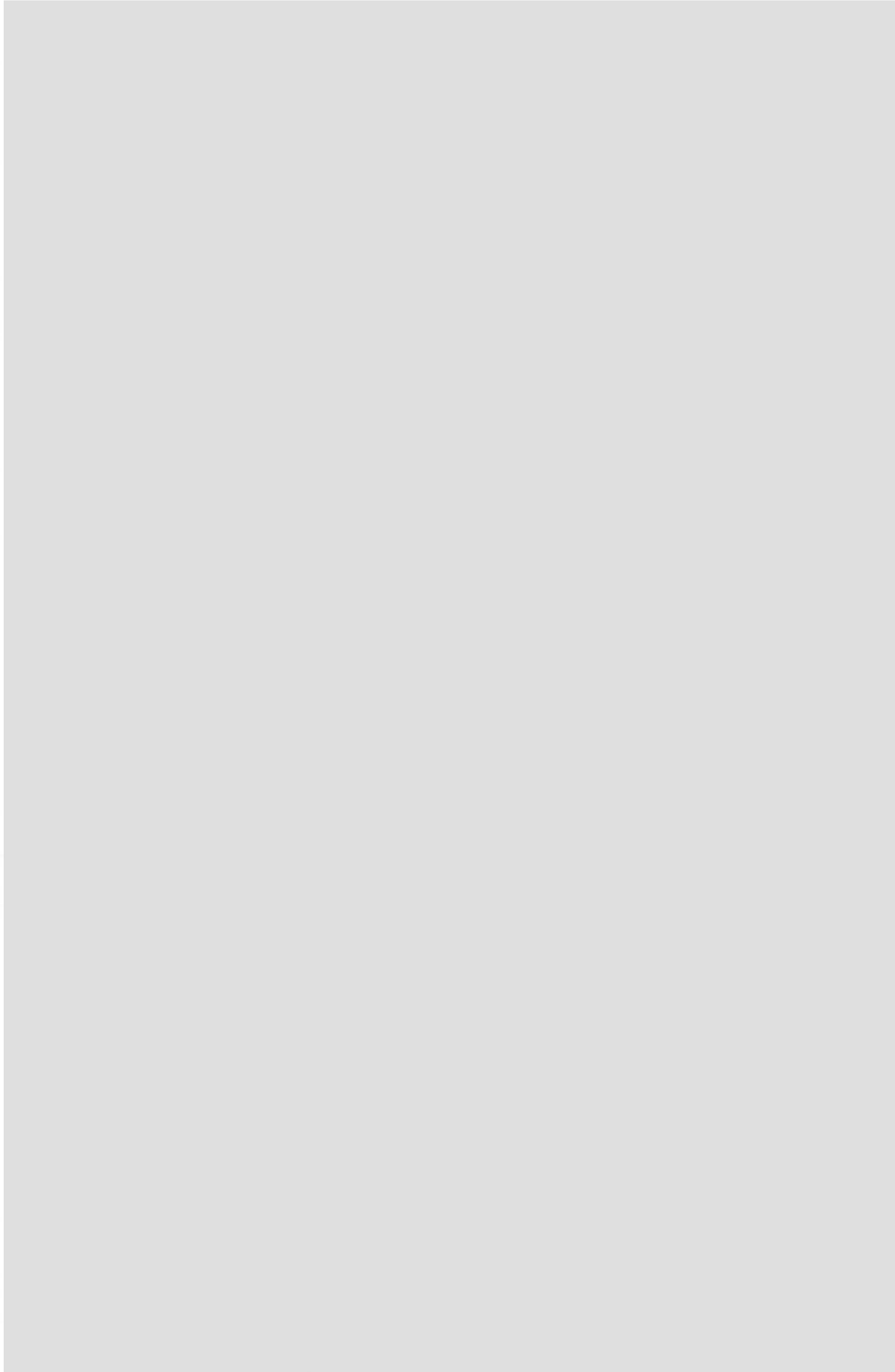
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Deponent

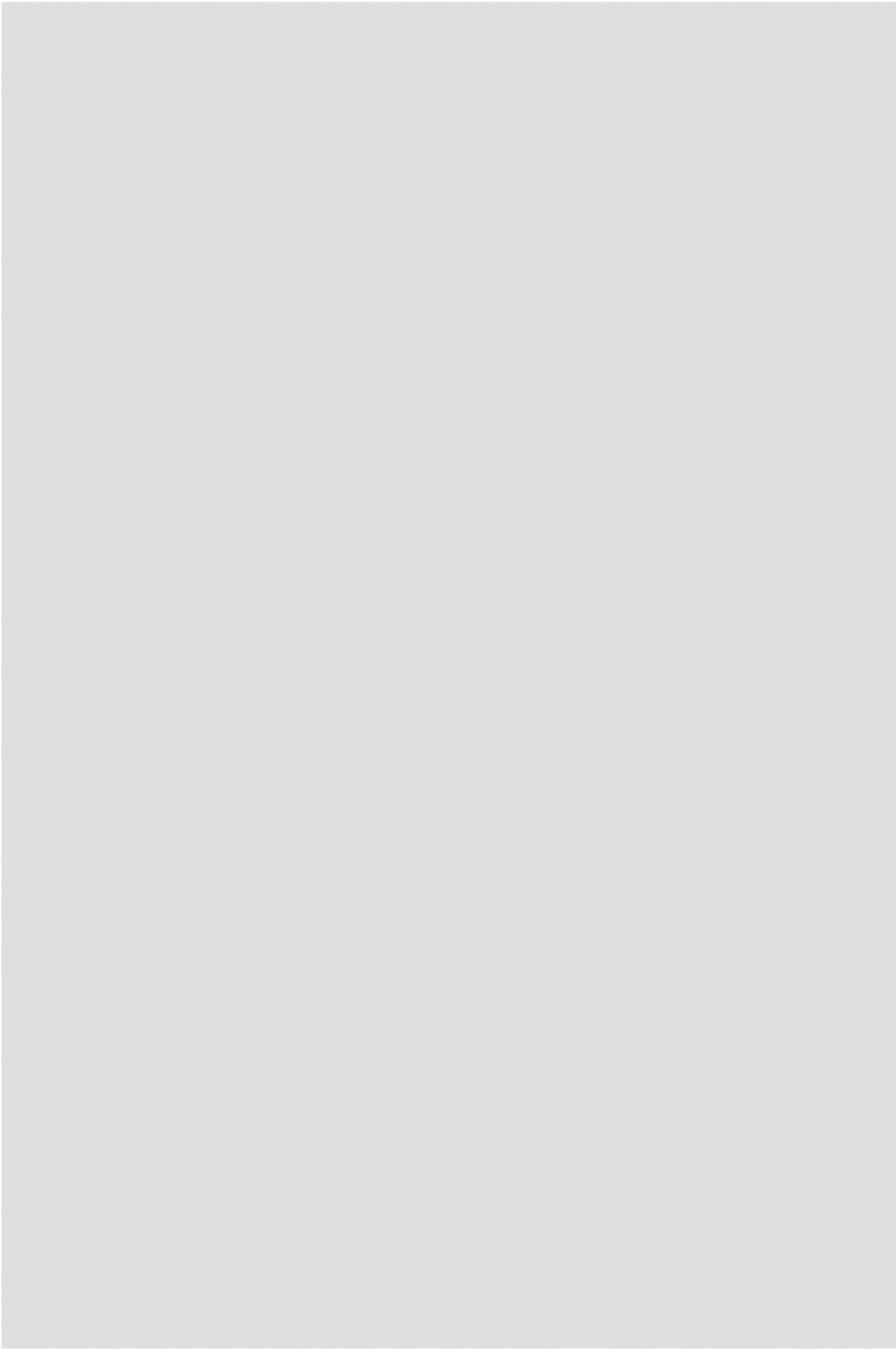
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~~A.J.P., C.Dec.~~, Solicitor

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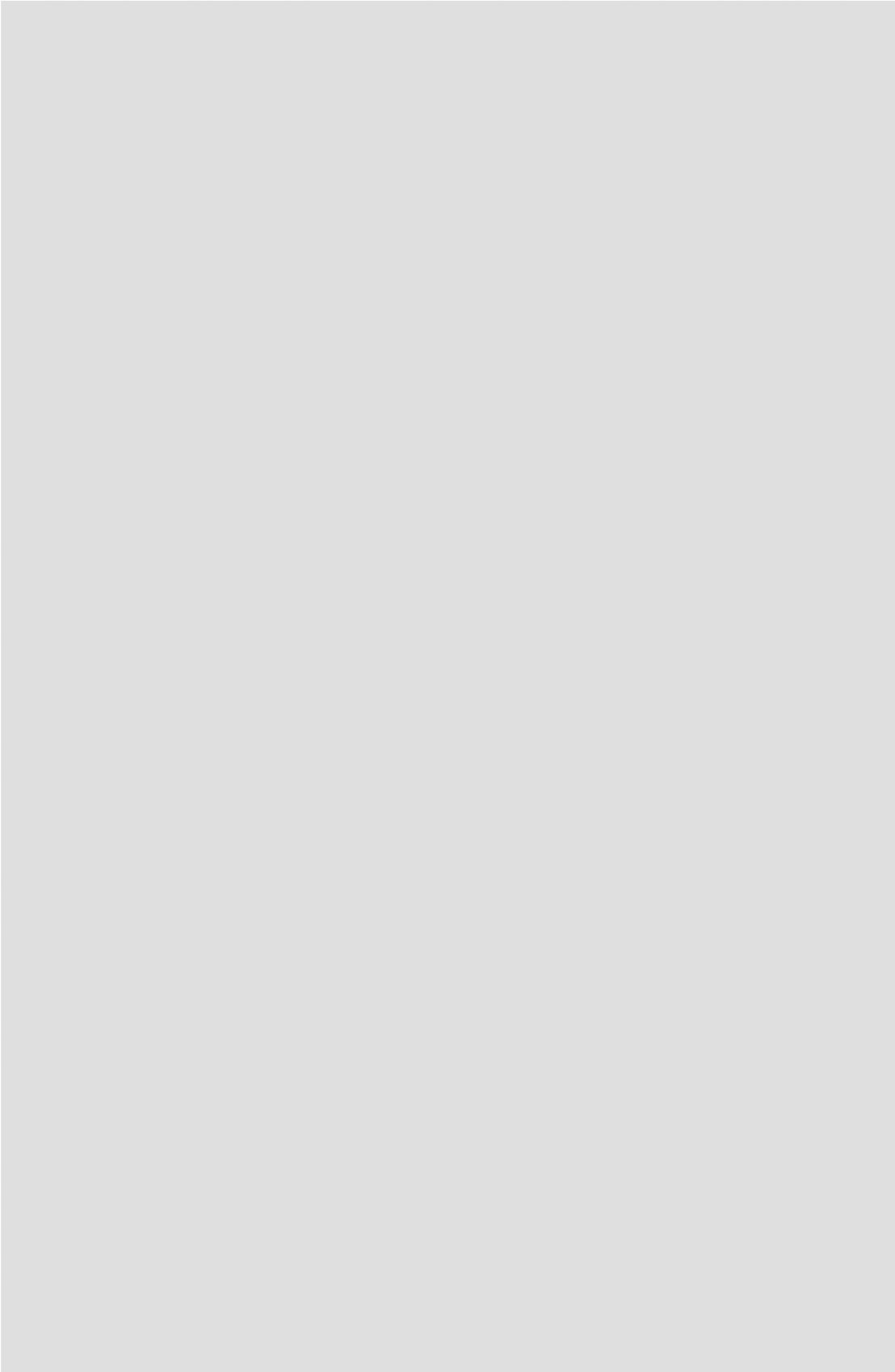


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[Redacted signature area]

Deponent

[Redacted signature area]

A.J.P., C. Dec., Solicitor

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26.

All the facts sworn to in this affidavit are true to my knowledge and belief except as stated otherwise.

[Redacted]

Deponent

[Redacted]

A.J.P., C.Det., Solicitor 

- 7 -

Sworn by Kirsten Palmer on  
29 January 2016 at  
in the presence of:

) KIRSTEN PALMER  
) 29/1/16

[Redacted]

[Redacted]

~~A Justice of the Peace, C. Dec., Solicitor~~

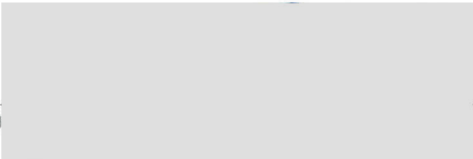
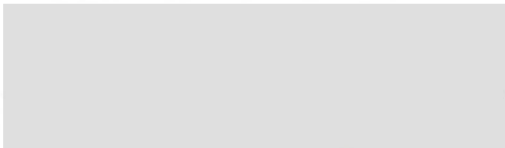
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**In the matter of the *Commissions of Inquiry Act 1950*  
**Commissions of Inquiry Order (No.4) 2015  
Barrett Adolescent Centre Commission of Inquiry****

**CERTIFICATE OF EXHIBIT**

Exhibit A to C to the Affidavit of Kirsten Palmer sworn on

D  



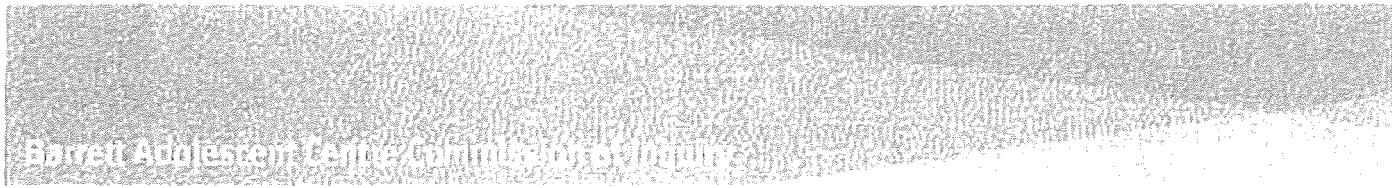
In the matter of the *Commissions of Inquiry Act 1950*

Commissions of Inquiry Order (No.4) 2015

Barrett Adolescent Centre Commission of Inquiry

INDEX TO EXHIBITS

Exhibit No	Exhibit description	Page numbers
A	Notice to Produce Written Statement	1-3
B	Curriculum Vitae	4-9
C	Role Description	10-16



**BARRETT ADOLESCENT CENTRE COMMISSION OF INQUIRY**

*Commissions of Inquiry Act 1950*  
*Section 5(1)(d)*

**REQUIREMENT TO GIVE INFORMATION IN A WRITTEN STATEMENT**

To: Ms Kirsten Palmer  
Of: c/- Mr Paul Lack, Crown Law, by email to  
[Redacted]

I, the Honourable MARGARET WILSON QC, Commissioner, appointed pursuant to *Commissions of Inquiry Order (No. 4) 2015* to inquire into certain matters pertaining to the Barrett Adolescent Centre ("the Commission") require you to give a written statement to the Commission pursuant to section 5(1)(d) of the *Commissions of Inquiry Act 1950* in regard to your knowledge of the matters set out in the Schedule annexed hereto.

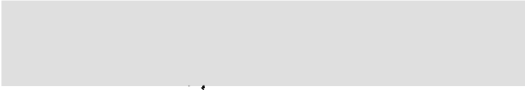
**YOU MUST COMPLY WITH THIS REQUIREMENT BY:**

Giving a written statement prepared either in affidavit form or verified as a statutory declaration under the *Oaths Act 1867* to the Commission on or before **9:00am, Wednesday 27 January 2016**, by delivering it to the Commission at Level 10, 179 North Quay, Brisbane.

A copy of the written statement must also be provided electronically either by: email at [mail@barrettinquiry.qld.gov.au](mailto:mail@barrettinquiry.qld.gov.au) (in the subject line please include "Requirement for Written Statement"); or via the Commission's website at [www.barrettinquiry.qld.gov.au](http://www.barrettinquiry.qld.gov.au) (confidential information should be provided via the Commission's secure website).

If you believe that you have a reasonable excuse for not complying with this notice, for the purposes of section 5(2)(b) of the *Commissions of Inquiry Act 1950* you will need to provide evidence to the Commission in that regard by the due date specified above.

DATED this 18<sup>th</sup> day of January 2016



The Hon Margaret Wilson QC  
Commissioner  
Barrett Adolescent Centre Commission of Inquiry

Barrett Adolescent Centre Confidential Document

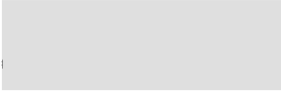
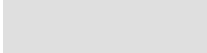
### SCHEDULE

1. What are Ms Palmer's current professional role/s, qualifications and memberships?  
Please provide a copy of Ms Palmer's most recent curriculum vitae.
2. The Commission understands [REDACTED] was transitioned from the BAC to the [REDACTED] to [REDACTED] from the [REDACTED] Outline, to your knowledge, your understanding of the following matters:
  - a. Why was the [REDACTED] mental health service identified as the appropriate service for [REDACTED] to transition into after leaving the BAC? Who made this decision?
  - b. What was the transition plan for [REDACTED] including, what accommodation was it proposed for [REDACTED] to reside in after leaving the [REDACTED]
  - c. Was any suitable accommodation in [REDACTED] found for [REDACTED] to reside in after leaving the adolescent unit? If no suitable accommodation was found, outline, what accommodation services were approached and why were they unsuitable?
  - d. In late 2013 and 2014, were any new health services (including accommodation, counselling, psychiatric, psychological, recreational or alternative therapy) developed in the [REDACTED] area for the purpose of providing health services to severely impaired youth and adolescents suffering from severe mental illness?
  - e. In late 2013/2014, were there any appropriate, 'wrap-around' services in the [REDACTED] area to provide adequate care for [REDACTED] If so, please identify which were appropriate for [REDACTED]
3. The Commission understands that [REDACTED] transitioned from the [REDACTED] back to [REDACTED] Outline, to your knowledge, your understanding of the following matters:

- [REDACTED]
- a. Why was [REDACTED] transitioned back to [REDACTED] as opposed to supported accommodation in [REDACTED]
  - b. Why was the Involuntary Treatment order (ITO) revoked? Would it have been possible for the ITO to remain in place with the treating psychiatrist remaining in [REDACTED] yet for [REDACTED] to live in [REDACTED]
  - c. What crisis management plan existed if [REDACTED] became acutely unwell whilst living in [REDACTED] Where was [REDACTED] to be admitted to hospital?
  - d. Did [REDACTED] ever need to be admitted to hospital following initial discharge back to [REDACTED] If so, how many occasions did this occur and what was the basis for the subsequent admission(s)?
  - e. What support services were provided (including through payment of a non-government organisation) to [REDACTED] whilst [REDACTED] lived back with [REDACTED] in [REDACTED] If so, what support services were provided and when did those support services commence?
4. In your opinion, do you think the transition arrangements for [REDACTED] from the BAC to [REDACTED] and then to [REDACTED] were appropriate and adequate having regard to the level of services offered in these areas?
  5. Explain any other information or knowledge (and the source of that knowledge) that you have relevant to the Commission's Terms of Reference.
  6. Identify and exhibit all documents in your custody or control that are referred to in your witness statement.



## Confidential Resume

Name: Kirsten Ann Palmer  
 Address:   
 Phone:   
 Health: Excellent, non smoker.

### Education

1982 Higher School Certificate, Toorak College, Mt Eliza, Victoria  
 1986 Bachelor of Arts, University of Melbourne  
 F/T  
 1992-1994 Psychology Major, Swinburne University of Technology, SUT  
 P/T  
 1995-1996 Graduate Diploma Applied Psychology, SUT  
 P/T  
 1997-2003 Master of Psychology (Counselling), SUT  
 P/T  
 2011 – Current Post Graduate Certificate in Clinical Psychology, JCU  
 P/T Via distance Units: Adult psychopathology diagnosis and pharmacology, Child and family assessment and therapy, Advanced evidenced based therapies for clinical patients, Clinical assessment and measurement  
 2012 Apr-Current Authorised Mental Health Practitioner Accreditation Modules

### Professional Registrations

Registered as Psychologist in Victoria March, 2000.

Currently completing requirements for individual bridging program for Clinical Psychologist Specialist registration with AHPRA (due for completion mid 2013)

Recently completed STAP, awaiting results to become accredited as a supervising psychologist for interns

Relevant Training Since July 2011 (Townsville IMHATODS)

TSV Health District	Induction For New Employees	Jul 2011
TSV IMHS	Induction for New Employees	Aug 2011
Griffith University	STAP Supervision Program	Nov 2011
QCMHL	Clinical Supervision for Supervisors	Apr 2012
TSV District	Recruitment panel Training	Feb 2012
TSV District	PA & D's for Managers	Feb 2012
TSV District	Misconduct & Official Misconduct	Mar 2012
TSV District	Performance Management	Feb 2012
TSV District	Energising From Conflict	Feb 2012
TSV District	Coaching Skills for Managers	Mar 2012
TSV District	Mental Health Act for CFMHS	Apr 2012
TSV District	Change and IMHS Reform Planning Day	Oct 2011
TSV District	“ “	Feb 2012
TSV District	Productive Communities Module1	Apr 2012
TSV District	Equip 5	Apr 2012
Michelle Burns	Monthly MHA2000 sessions for Forensic Team	Comm.Mar 2012
Bob Green & Dr Michelle Pathe	Stalker profiles and Violence risk Assessment	Dec 2011
Bob Green	HCR20 (Clinical Violence Risk Measure)	Feb 2012
Teresa Smith	Train the Trainer: Mental Health Training for Corrections staff	Mar 2012
Statewide Forensic Mental Health	Prison Mental Health Training Symposium	Jul 2011
“	Court Liaison Training Symposium	Sep 2011
“	District Forensic Liaison Officer (DFLO) Training Symposium	Oct 2011
“	Prison Mental Health Training Symposium Presenter: “Development of the TSV Prison MH Transitions Program”	Apr 2012
Statewide Forensic Mental Health In Service DVD Series	MHA 2000, the first 10 years — — —	

## Professional Experience

12 July 2011-Current Townsville Institute of  
Mental Health, Alcohol, Tobacco and Other Drugs

**North Queensland Community Forensic Mental Health Service** (One of two community forensic MHS hubs in Qld)

**Acting Team Leader (HP5.1)**

6 services within the hub, 14 EFT staff:

TSV District Forensic Liaison Officers (2 EFT)  
Rural District Forensic Liaison Officers (1 EFT)  
Community Forensic Outreach Officers (5 EFT)  
Court Liaison Service (1 EFT)  
Prison Mental Health Service (2 EFT)  
Aboriginal and Torres Strait Islander MH Workers (3 EFT)

(Currently recruiting senior ATSIMH Worker, CFOS CN for PMHS, CFOS social worker)

Achievements thus far:

- Identified service gap and high risks for MH patients leaving prison to area outside TSV area: responded by using CFOS OT role to develop and run PMH Transitions Program increased from 16 referrals in 6 months to SCIP to 45 referrals and direct service to clients returning to other districts
- Reduced by 2/3 the number of MH patients being missed in fast transition through remand/bail without follow up
- Instituted monthly MHA2000 training for CMHS
- Commenced all non accredited staff on Authorised MH Practitioner program
- Instituted Bob Green's training in HCR 20, for 3 new CFOS staff, filled to capacity with 23 participants from TSV IMH
- Re-commenced or instituted the following processes (absent for at least 2 years):
- Case reviews and closures in MDT for PMHS and CL
- Weekly meetings with agendas and minutes for CFOS/DFLO client focus, PMH and CL services both including the ATSIH Workers
- Co-ordinated the completion of the NQ Forensic Service Work Plan 2012-2013 (first in 3 years) and added the TSV components
- Requested PMHS audit by Cairns Forensic Hub Manager, excellent report and specific recommendations produced and now being worked into TSV planning



- Examples of specific plans for further service improvements:
- Commencing work with Victim Support Services and Dept of Communities, planning co-working on client cases where victims are concerned for safety, and with case managers of dual disability clients in the Forensic system (presentations to CFMHS booked as next stage in process)
  - Identified large service gap: currently nil drug and alcohol services provided to MH patient/ prisoners at either the men's nor women's TSV prisons, when co-morbidity with cannabis and alcohol misuse or dependence, in particular, is close to 90% and a major contributing factor for offending and MH episode relapse.
  - Development of Productive Communities focus on specific targets

Nov 2002-Current  
Full-Time  
(following  
maternity leave  
from above)

LaTrobe Regional Hospital  
Community Mental Health Services

Nov 02 - Apr 06: Psychologist/Case Mgr, P2, Y4 (HP3.8)  
May 06-Jun 11: Senior Psychologist P3, Y4 (HP4.4)

**This was an integrated regional/rural team**

- **Role involved:**
- **Psychiatric triage (telephone intake for all of Gippsland)**
- **ED assessments (the only authorised MHS in Gippsland)**
- **Assessments in police cells**
- **Attendance with Police at siege situations**
- **Consultation and liaison on medical wards**
- **Office based intake assessments**
- **Case management of acute and continuing care clients**
- Managing a case load of own clients as well as providing in house psychological services to other case managed clients
- Counselling and psychotherapy (individual and families)
- Psychological testing and assessment and report writing
- Supervision of psychology students
- Delegating to and providing guidance to clinicians
- Providing clinical expertise in complex cases
- Liaison with external organisations, including Mind, police, nursing homes, Quantum etc
- Liaising with carers and families, family therapy, carer education and counselling
- Set up and ran two support groups:
  - Self Harm Prevention group for women and a support group for case managed clients covering recovery, coping and social issues
  - Specialisation in clients with severe personality disorders, early psychosis, complicated cases

April 2004-  
June 29 2011

Private Practice, (Part Time)

- Counselling and psychotherapy under Medicare and Workcover and Employee Assistance Programs and non-subsidised clients
- Provision of support and advice to management at DSE and DPI Gippsland to the Border
- Conducting group and seminar programs for mental health/psychological wellbeing for DSE staff across all East Gippsland Offices, including pre-fire



season preparation, managing difficult people, managing conflict, D & A Education.

- Critical incident stress de-briefing and trauma counselling, especially to forest fire fighters, and staff involved in incidents involving death and major injury
- Provision of EAP to employees of Victoria Police, Anglicare, ASIC, DSE, Parks Victoria, DPI, Fisheries, Fulham Prison, Monash University, National Foods etc
- Medicare clients were predominantly young women with emerging personality difficulties and some prodromal symptoms

Nov 2000-Feb 2003  
Full Time

Leonie Greene and Associates

(Contracted to the government to provide services to long term unemployed Centrelink recipients)

**Psychologist**

**Duties:**

- Running screening and job preparation groups
- Psychological testing for intellectual issues, vocational and clinical issues
- Individual counselling
- Report preparation for Centrelink and case managers

\*Jun 1998-Nov 2000  
(Part-time whilst completing course Work components of Masters Degree)

Harcroft Consulting Group

Consultant Probationary Psychologist

*AND*

Private Practice as Sole Practitioner

**Duties:**

- Providing debriefing using the Mitchell CISM model, including individual follow-up
- Providing EAP counselling of up to 12 sessions (average of three)
- Clients included banks, large manufacturers, WorkCover Authority and state run prisons and hospitals (psychiatric and maternity)
- Variety of private individual clients including victims of crime and general counselling issues

June 1997-Nov 1998  
Full time

Port Phillip Prison

Probationary Psychologist/Counsellor

**Duties:**

- Counselling inmates, risk assessment, risk panel chair
- Issues included; self harm prevention, coping, depression, anxiety, relationships, offending issues etc.
- Clients included protection prisoners, management prisoners, intellectually disabled prisoners and those in the induction unit, especially notorious sex and violent offenders

Aug 1994-Aug 1997 Lifeline Melbourne

Volunteer Telephone Counsellor  
 Counsellor Recruiter  
 Counselling Trainer  
 Supervisor on Call (for life threatening calls)  
 Face-to-Face Counsellor

Jan 1994-June 1997 WorkPlacement

(Employment Project aimed at placing very disadvantaged young people into jobs, and mentoring them and the businesses post-placement)

Director, Melbourne

Duties:

- Selling the concept to employers and listing jobs
- Sourcing young people through case managers and youth services
- Training mentors on the job and educating them about issues for very disadvantaged young people
- Organising and hosting boardroom lunches with political and entertainment industry personalities and senior managers and owners of big business as speakers and guests, public speaking and radio appearances
- Managing budgets and recruiting and managing staff

May 1991-Jan 1994 Reddin Consulting Group

(Recruitment, Outplacement and Organisational Development)

Recruitment and Outplacement Consultant

Duties:

- Selling and providing recruitment and outplacement services to businesses
- Writing and placing advertising copy
- Counselling retrenched and unemployed job seekers about gaining employment
- Conducting recruitment assessment centres
- Interviewing and short listing candidates for employer clients

Jan 1990-May 1991 Fisher & Mc Donald

Professional and Technical Recruitment

Recruitment Consultant

Nov 1986-Jan 1990 Woolworth/Safeway Stores

Trainee Store Manager  
 Assistant Store Manager  
 Assistant Manager, Central Pricing Victoria  
 Buyer's Assistant



## Townsville Hospital and Health Service

*Outstanding People – Genuine Care – Incredible Location*

### Role Description



**Job ad reference:**

**Role title:**

Occupational Therapist , or Social Worker , or Psychologist or Speech Pathologist - Senior (Senior Allied Health Clinician)

**Status:**

Permanent Full Time

**Unit/Branch:**

*(Please note: future vacancies of a permanent, temporary, full time and part time nature may also be filled through this recruitment process).*  
Adolescent Inpatient Unit and Day Services (AIUDS)

**Division/Health Service:**

Institute of Mental Health, Alcohol, Tobacco and Other Drugs Services  
Townsville Hospital and Health Service

**Location:**

Townsville

**Classification level:**

HP4

**Salary level:**

\$ - \$ per fortnight

**Closing date:**

Monday, 2012 (Applications will remain current for 12 months)

**Contact:**

**Telephone:**

**Email applications:**

**Fax application:**

**Post application:**

### 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**

To provide high level specialised services, in the areas of assessment, intervention, group work, treatment planning and evaluation, training and education, supervision and research, within the Adolescent Inpatient Unit and Day Services Team. Contribute to the development of positive team culture, evidenced based care and service development within the scope of this role.

#### **Your key responsibilities**

- Fulfil the responsibilities of this role in accordance with Queensland Health's core values, as outlined above.
- Provision of advanced clinical case management services to the consumers of the Adolescent Inpatient Unit and Day Service including:
  - High Level assessment and case management services to a complex caseload
  - Discipline specific evidence-based treatment interventions with minimal need for supervision
  - Clinical consultancy services, advice and education to consumers and carers, other health professionals, outside agencies and community groups in order to provide coordinated and efficient services.
- Apply professional judgement to a complex caseload, adapting routine clinical practice as required, using evidence based practice.
- Provide clinical leadership and responsibility for clinical decision making within the team, as delegated by the Nurse Unit Manager, to the Adolescent Inpatient and Day Program Team including:
  - Ensure the implementation of individual assessment, diagnosis, treatment, follow-up, multidisciplinary consultation, liaison with referring agents, discharge planning and evaluation of care using appropriate outcome and data measurement systems.
  - Provision of mentoring and ethical decision making frameworks and education within the team as required.
  - Reviews and updates Care Plans and leads and initiates unit implementation and review of individual consumer care plans.
- \* Provision of discipline specific and/or clinical supervision to junior clinicians as agreed with the discipline Professional Senior and Nurse Unit Manager.
- Is responsive to the needs and aspirations of consumers / carers, with particular emphasis on the cultural appropriateness of the care provided and communicates the need for that responsiveness and cultural awareness to colleagues.
- Ensure that adequate and appropriate records and statistics are kept including computerised clinical information systems and support other team members on the utilisation of clinical information systems.
- Lead the planning, implementation and evaluation of Group Therapy Programs within the Unit.
- Participate in professional development activities including service planning, continuing education, research and special projects as required (service-wide, team based and discipline specific) and deliver education programs targeting a range of health workers and consumers.

#### **Qualifications/Professional registration/Other requirements**

- For **Social Work** the successful applicant must hold at least a tertiary degree (or equivalent) qualification from an accredited tertiary institution in Social Work as well as eligibility for full membership to the Australian Association of Social Workers (AASW).
  - While not mandatory, status as an AASW accredited Mental Health Social Worker is highly regarded.
- For **Occupational Therapy** the successful applicant must hold a tertiary degree (or equivalent) qualification from an accredited tertiary institution in Occupational Therapy. Registration with the Occupational Therapist Board Australia (AHPRA) is required.
- For **Psychology** the successful applicant must possess a four year degree in Psychology (Honours, Graduate Diploma) from an accredited tertiary institution. Registration with the Psychology Board of Australia is required. Possession of a Masters or Doctoral degree in Clinical Psychology from an accredited tertiary institution, or significant progress towards this, would be highly regarded.
- For **Speech Pathologists:** Possession of a tertiary degree in Speech Pathology and evidence of current registration with the Speech Pathology Registration Board of Queensland to be provided prior to commencement

- While not mandatory, eligibility for appointment as an Authorised Mental Health Practitioner under the Mental Health Act 2000 would be well regarded.
- Health Care Workers in Queensland Health whose occupation poses a potential risk of exposure to blood or body fluids must be immunised against Hepatitis B according to the National Health and Medical Research Council Australian Immunisation Handbook and the Queensland Health Infection Control Guidelines.
- 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.
- All positions appointed to the Institute of Mental Health, Alcohol, Tobacco and Other Drugs Services may be required to work in other areas of the Service.

### **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:

#### Clinical Expertise

Work within a multidisciplinary team to provide care for all clients which is safe, of the highest quality possible demonstrating high level knowledge, expertise and skill in the provision of evidenced based clinical practice, utilising your professional background. You will demonstrate the capacity to work as a high level clinician providing support and clinical expertise to other members of the team as required. You will support the Nurse Unit Manager and participate in maintaining clinical governance within the Team. Demonstrates a high level of knowledge of Adolescent Mental Health diagnosis and management in an Acute Inpatient and Day Program setting and is able to communicate that knowledge within the Multidisciplinary Team setting.

#### Supports Strategic Direction

Understands and supports Qld Health's vision, mission and business objectives. You will be able to identify the relationship between organisational goals and organisational tasks. Communicate with others regarding the purpose of their work. Understands and communicates the reasons for decisions and recommendations to others. Understands the work environment and contributes to the development of plans, strategies and goals. Identify broader influences that may impact on the team's work objectives. Demonstrates an awareness of the implications of issues for own work and work area. Draws on information from diverse sources and uses experience to analyse what information is important and how it should be used. Maintains an awareness of the organisation and keeps self and others well informed on issues that may affect work progress. Undertakes objective, systematic analysis and draws accurate conclusions based on evidence. Identifies problems and works to resolve them. Thinks laterally, identifies and implements improved work practices.

#### Achieves results

Reviews project performance and identify opportunities for improvement. Makes effective use of individual and team capabilities and negotiates responsibility for work outcomes. You are responsive to change in requirements. Values specialist expertise and capitalises on the knowledge and skills of others within the organisation. Contributes own expertise to achieve outcomes for the business unit. Establish clear plans and timeframes for project implementation. Respond in a positive and flexible manner to change and uncertainty. Shares information with others and encourages cooperation in coping with change. See projects through to completion. Monitors project progress and manages priorities. Commits to achieving quality outcomes and adheres to documentation procedures. Seek feedback from supervisor to gauge satisfaction.

#### Supports productive working relationships

Builds and sustains positive relationship with team members, stakeholders and clients. Demonstrate that you are able to be responsive to change in client and stakeholder need/s and expectations. Actively listens to staff and colleagues, clients and stakeholders involves others and recognises their contributions. Consults and shares information and ensures others are kept informed of issues. Works collaboratively and operates as an effective team member. Recognise the positive benefits that can be gained from diversity and explores diverse views. Recognises the different working styles of individuals and factors this into the management of people and tasks. Try to see things from different perspectives. Treats people with respect and courtesy. Identifies learning opportunities for others and delegates tasks effectively. Agrees clear performance standards and gives timely praise and recognition. Makes time for people and offers full support when required. Provide constructive feedback. Recognises and notes underperformance where appropriate.

#### Displays personal drive and integrity

Adopts a principled approach and adheres to public service values and Code of Conduct. Acts professionally at all times and operates within the boundaries of organisational processes and legal and public policy constraints. Operate/s as an effective representative of the organisation in internal forums. Provide impartial and forthright advice. Justifies own position when challenged. Acknowledges mistakes and learns from them,

and seeks guidance and advice when required. Take personal responsibility for meeting objectives and progressing work. Shows initiative and does what is required. Commit energy and drive to see that goals are achieved. Persists with, and focuses on achieving, objectives even in difficult circumstances. Remains positive and responds to pressure in a calm manner. Seek feedback from others. Communicates areas of strengths and acknowledges development needs. Reflects on own behaviour and recognises the impact on others. Show commitment to learning and self-development.

#### Communicates with influence

Confidently presents messages in a clear, concise and articulate manner. Focuses on key points and uses appropriate unambiguous language. Select the most appropriate medium for conveying information and structures written and oral communication to ensure clarity. Seeks to understand the audience and tailors communication style and message accordingly. Listens carefully to others and checks to ensure their views have been understood. Check own understanding of others' comments and does not allow misunderstandings to linger. Approach negotiation/s with a clear understanding of key issue/s. Understand the desired outcomes. Identify relevant stakeholder' expectations and concern/s. Discusses issues credibly and thoughtfully. Encourage the support of relevant stakeholders.

#### Occupational health and safety

You will be conversant in Occupational Health and Safety as relevant to your role, by attending the required district training. You will assist the Program Manager in maintaining a safe environment, and all occupational health and safety requirements by ensuring that you follow policy, procedure and report any incidents/hazards in a timely manner.

#### **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 the applicant's experience, abilities, knowledge and personal qualities are relevant for the role, taking into account the key responsibilities and key attributes of the position.

#### **About the Health Service**

Townsville Hospital and Health Service (THHS) offers a supportive environment for employees in a progressive workplace. Every service in the THHS is committed to the continual review and development of both its operation and its staff.

The Health Service spans across North Queensland delivering a wide range of public health services to the people of Townsville, Ingham, Palm Island, Magnetic Island, Charters Towers, Ayr, Home Hill, Hughenden and Richmond. These services strive to engage their local community through consumer groups and health partnerships.

The THHS has nine Institutes, each managed by Clinical and Operational Directors. This devolved management system is unique to the Townsville Hospital and Health Service.

#### **The Institute of Mental Health, Alcohol, Tobacco & Other Drugs Services (IMHATODS)**

The Institute of MHATODS strives to support the recovery of consumers through the provision of recovery-oriented services, designed to assist them to live well despite limitations resulting from their mental illness, its treatment, and personal or environmental conditions by:

- Promoting a framework of recovery and incorporating philosophies of hope, empowerment and partnership.
- Encouraging and facilitating recovery and wellness throughout every aspect of service delivery.
- The development of collaborative relationships between consumers, carers, family members and staff, allowing for joint planning, negotiation and decision-making.
- Understanding people in the context of their whole selves, not just their illness.
- Advocating for consumers, carers and family members rights and treating them with equality and respect.
- Ensuring consumers set their own goals and measure their own success.
- Facilitating and aiding natural support networks and by assisting consumers to find and use other community services, supports, and resources.
- Recognising that the personal knowledge and expertise of consumers, their carers and family members are equal but different from the knowledge base of staff.

- Employing staff who is compassionate and competent to assist people in their recovery.

The Institute of MHATODS supports and promotes active participation of consumers and carers in all aspects of service activity to ensure the delivery of mental health care is orientated to meet the needs of individuals. The Institute of MHATODS recognises the importance of consumers, carers and family members being engaged at an individual level and contributing to the planning, development and evaluation of services, and is committed to the ongoing development of a skilled and trained consumer and carer workforce, creating career pathway options for consumers and carers who are interested in entering the Institute of MHATODS workforce.

#### **The Adolescent Inpatient**

The inpatient unit is an acute care adolescent mental health unit with a capacity of 6 beds, it is anticipated that adolescents will be admitted for no longer than 7 to 14 days. The unit will be staffed 24 hours a day 7 days a week and provide for planned and emergency admissions. The unit will take admissions from across the whole of the Northern Region. The target population would be 12-18 year olds with mental illness who are not able to be treated adequately in the community because of the complexity or acuity of their needs.

#### **Day Services Unit**

The Day Service Program is considered an important component on the continuum of care for youths with moderate to severe mental health issues. The Program will provide multi-disciplinary assessment and treatment allowing adolescents with mental illness who are unable to be treated as outpatients via the usual CYMHS because of complexity or acuity, to receive treatment in the community rather than in an inpatient setting. The programme will be able to accommodate up to 12 places for adolescents age between 12-18 years old and will work in conjunction with Education Queensland. The Adolescent Inpatient Unit is due to open early 2013, the successful applicant will be expected to work within the Child and Youth Mental Health Services setting until completion of the unit and undertake an extensive orientation programme, and this may include working in Adolescent Inpatient Units and Day Service Programmes across the State.

Visit the Health Service website: - [www.health.qld.gov.au/townsville](http://www.health.qld.gov.au/townsville)

#### **Smoke-Free Campus**

In line with the Government's goal of smoke-free health facilities, the THHS is working towards smoke-free status at each health campus. We are happy to support our staff, patients and clients in quitting and proud to offer our visitors a smoke-free environment to help improve health outcomes for Queenslanders. All successful applicants to a facility that is smoke-free will need to adhere to the relevant requirements of the smoke-free environment

#### **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. 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 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 confirm your eligibility for the Public Hospital Fringe Benefits Tax (FBT) Exemption Cap please contact the Queensland Health Salary Packaging Bureau Service Provider – RemServ via telephone 1300 30 40 10 or <http://www.remserve.com.au>

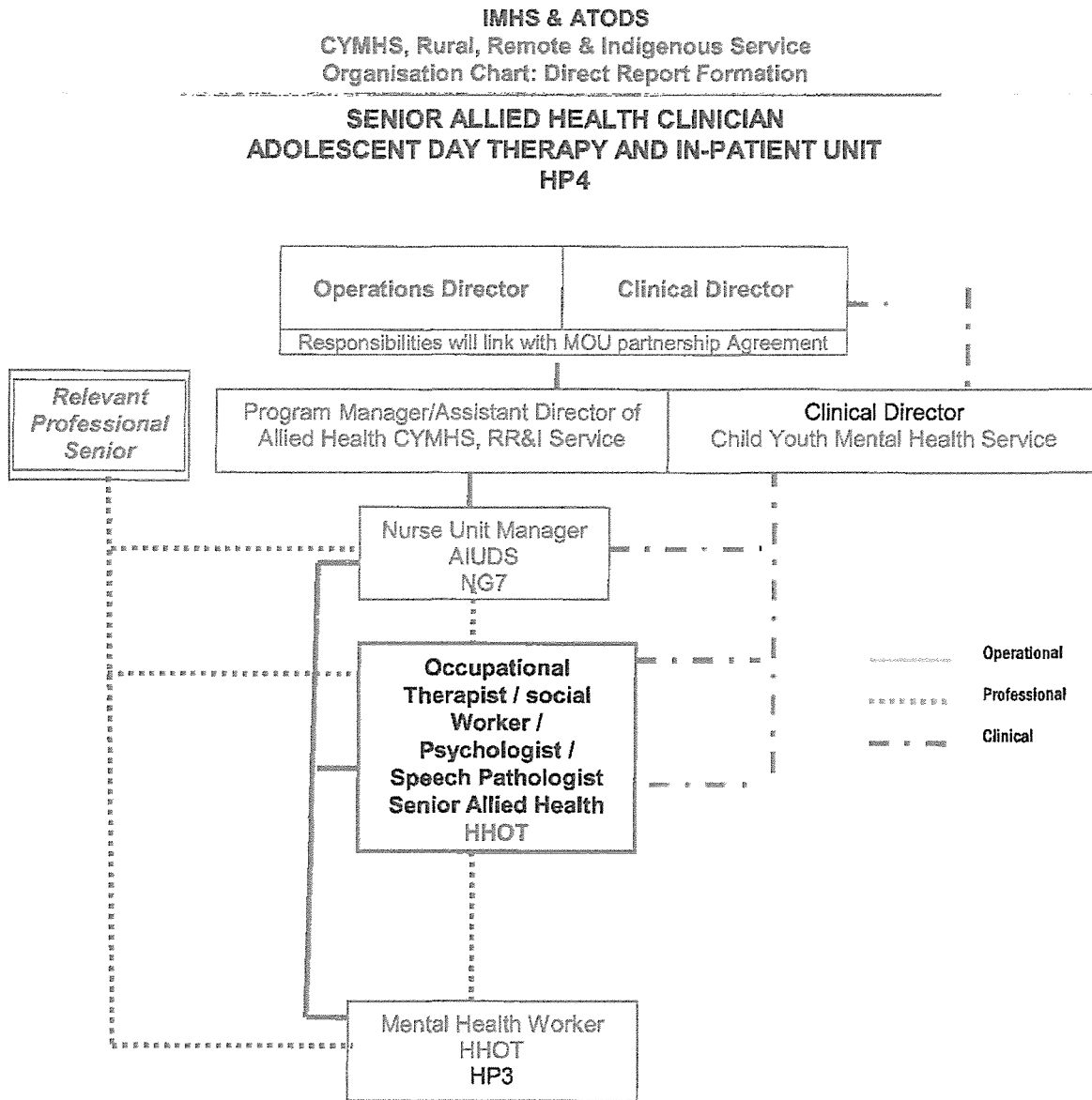
#### **Disclosure of Previous Employment as a Lobbyist**

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](http://www.health.qld.gov.au/hrpolicies/resourcing/b_2.pdf)

**Organisational Chart:**





Institute of Mental Health, Alcohol, Tobacco & Other Drugs Services - Management Structure

