## **KG-59**

## Queensland Health

## Health Service Investigation - Barrett Adolescent Centre

1084936

Interview with RN Susan Daniel - Care coordinator for

13 October 2014

5 Parties: Beth Kotze (BK), Tania Skippen (TS), RN Susan Daniel (SD)

BK:

Okay. Okay. So I'm Beth Kotze. I'm Child & Adolescent Psychiatrist from New South Wales. Both Tania and I work for um Mental Health Children & Young People in New South Wales. So yes. A deep breath. And you've got some water there. Um and just take your time. Um so just to check up first of all, what's your understanding of the process that we're involved in

10

while we're doing this?

SD:

Um I understand you have some questions regarding the closure of the Unit

and um the level of transition, care planning,

)

BK:

Yep.

15 SD:

Preparation and everything's taped and yeah.

BK:

Yeah.

SD:

That there were a few deaths upon the closure of the Unit.

BK:

Mm. Now you've seen the Terms of Reference have you for the – um we've got an extra copy for you here if you don't have one with you but um have

you got any questions about the Terms of Reference?

20

SD: Um you know, I can you more questions as we go.

BK:

Yep absolutely. No please don't hesitate. Um so Susan your, you were employed in the, at the Barrett Unit up until its closure, is that right?

SD:

No.

25

BK:

Okay.

SD:

I actually went on stress leave.

BK:

Oh okay.

SD:

In November.

BK:

Right okay.

30

SD:

I don't have the actual date

BK:

Yep, yep. So you didn't actually return to the Barrett Centre after that?

Okay. How long have you actually worked there for?

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	SD:	About 19 years.
	BK:	19 years! Okay, okay. That's a long time.
35	SD:	Yeah.
	BK:	Yeah, yeah. Where do you work now?
	SD:	Um I haven't gone back to work yet.
	BK:	Okay.
	SD:	Um I'm giving up nursing for a while.
40	BK:	Mm.
	SD:	Just ah taking it easy for a little bit.
	BK:	Mm.
	SD:	Um yeah it was a very stressful couple of years towards the end. So I'm just going through a [?] process at the moment.
45	BK:	Okay yeah. So you said the last couple of years were, were stressful. The closure announcement I think was made in August.
	SD:	Yes.
	BK:	So what, can you tell us about the sort of period before then, about. The last couple of years you've identified as stressful.
50	SD:	A lot of it I've tried to forget.
	BK:	Sure, sure, yes.
	SD:	Um I have sort of managed to do that until I got the call to come but um I, we started to happen and we were aware that things would be winding down that the Unit would go to Redlands Hospital.
55	BK:	Oh yes Trudy was talking about that before yeah.
	SD:	Yeah.
	BK:	There was a planning process.
	SD:	There was a lot of involvement by Barrett and the clients, the parents, um, architects, um and even I think we had Kings involvement in some of it.
60	BK:	Mm.
	SD:	Regarding the architectural planning for the new unit.
	BK:	Mm.
	SD:	But we had difficulties with um some issues with the koalas and
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	BK:	Mm. Oh right. The old koala, what do they call the, the koala corridor?
65	SD:	Corridor.
	BK:	Corridor. That's right. Yep, yep.
	SD:	I think there were other issues as well [?] other pressures for that site but anyway um I'm not clear on that.
	BK:	Mm. So when did that actually happen. Was that a year, two years.
70	SD:	Actually many years before.
	BK:	Okay, yep.
	SD:	Um could have even been 2011.
	BK:	Mm.
	SD:	It just kept getting delayed.
<b>3</b> 75	BK:	Mm.
	SD:	Um and extended um. Um so leading up to that and contributing to some of the stressors was the halt on recruitment.
	BK:	Mm.
80	SD:	Um people had to think about their jobs, their futures, their careers. You know um what happens after we move. Um hard to sort of say when all this would happen because we never knew
	BK:	Yes.
	SD:	The dates kept changing. Um so we had people, some people exiting the Unit
<b>3</b> 85	BK:	Mm.
	SD:	And you know we'd replace them with contract staff.
	BK:	Mm.
	SD:	Initially that was only one monthly contracts.
	BK:	Mm.
90	SD:	Um and then we managed to get it three monthly. Um so continuity of care is a bit of a tricky balance to get. Um our Nurse Unit Manager
	BK:	Mm.
	SD:	Resigned.
	BK:	Mm.

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95	SD:	Retired and I took his place for some of that period of time, so my stress levels went up.
	BK:	Yeah.
100	SD:	Um there wasn't very many of the old more experienced staff um left to sort of take on that position or willing to take on that position, so I decided to help the Unit out, um gathered some more experience for myself um but yeah it was, it was very challenging.
	BK:	Mm.
	SD:	Especially towards the end.
	BK:	Mm. Mm.
105	SD:	I um, I stopped that position in May.
	BK:	Yes.
	SD:	Um and someone else took over. Um and returned to my position as the Community Liaison
	BK:	Mm. Yes.
110	SD:	It's a Monday to Friday position, you handle referrals, um transition of care, um and yeah the last six months were highly stressful
	BK:	Yes.
	SD:	Um September of 2012 we'd been informed that the budget had come out and um that Redlands Hospital plans was no longer going to happen.
115	BK:	Mm.
	SD:	Um that Barrett was going to go through a review process, um to see if an alternative model of care without the residential
	BK:	Mm. Yep.
120	SD:	Setting would happen. You know, was possible. Um the timeline on that review was as quickly as it could happen but, so it could have been two months to three months
	BK:	Mm.
	SD:	Initially they were hoping for that. But it went on for ah six to maybe eight months.
125	BK:	And who was involved in that review or was that
	SD:	Um Dr Sadler initially.
	BK:	Yep.

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	SD:	Um various ah, I think there was a couple of psychiatrists
	BK:	Ahm.
130	SD:	I can't tell you who.
	BK:	Okay. He was external as well
	SD:	It was very yeah.
	BK:	Right, yeah.
	SD:	Because it was a state-wide service so
135	BK:	Mm.
×	SD:	And there was parents involved in that meeting, that committee as well. Um Dr Sadler was also asked to step down
1700	BK:	Mm.
140	SD:	Due to an investigation that was occurring. Um sorry it was a very confusing time because um we had the impression that maybe um we'd have an alternative service
	BK:	Mm.
145	SD:	After this review process to go to. Um therefore as a state-wide service shouldn't we continue to accept referrals and um a lot of mixed agendas um mixed messages confusing from my perspective [?].
	BK:	Yeah.
150	SD:	Um whose direction I follow for that. Um and then ah Dr Sadler had asked to be stepped down um there seemed to be a, a separation between school and the health [?] group. Um the school felt quite isolated, um and kept out whereas before they were very much a collaborative input. Um a lot of the staff felt that they, they really didn't understand what was happening um, felt sort of not within the communication of things. Ah a lot of the happenings of where our Unit would, what was happening to the whole processes were occurring at a higher up level. Um Dr Brennan was part of that, um Vanessa Clayworth um the Acting Clinical Nurse Consultant which was a new position created in that last six months.
	BK:	Mm.
160	SD:	Um she attended some of those but mostly it was Dr Brennan. And other executives um within the District. Um and I've forgotten all their names already. Ah Sharon Kelly, um, um mainly ah Will Brennan and Elizabeth Holland I think her name was. Um and she was our governing body um the Childrens Health
	BK:	Mm.

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165	SD:	Queensland um. So yeah a lot of communication sort of feeling a little bit isolated and only pockets of information and um, um and a lot of pressure to get things happening and then we developed the transition team meeting.
	BK:	Yeah.
170	SD:	Because we'd been given this ultimatum or this deadline that you know the Unit would close January.
	BK:	Mm.
	SD:	Um I think, I'm not sure when that actually happened. It was towards the end of the year, um it could have been, it may have occurred after Dr Sadler
	BK:	Mm.
175	SD:	Um was stepped down um after September so yeah not much timeframe. Um but I mean we were always I think we were, we were trying to get kids out anyway. Um but there was more, more sort of prioritised at that point.
180	BK:	So prior to the announcement of the closure and that kind of different formal transition um period, you'd be in the position of the um Community Liaison, um that, that position, Community Liaison position and so you'd been um, ah responsible for receiving referrals were you um and that sort of receiving referrals, coordinating assessments um screening interviews and um
	SD:	Yep, yep.
	BK:	Reports and
185	SD:	Yep. Um managing the waiting list.
	BK:	Yes.
	SD:	Um working out which ones would suit the current mix and um yeah.
	BK:	And what was your involvement in discharge accounting processes in the CLP position.
190	SD:	I guess after admission, I would start that transition more of handover to the case coordinator.
	BK:	Mm.
195	SD:	[?] in terms of case workups review meetings um which occurred about two, two monthly to three monthly. And um we'd involve the Community Service that referred them
	BK:	Mm.
	SD:	Where possible. Um so that transition would also [?] but facilitate it better towards the end. Um then towards the end my role I guess was making sure that the different things were ticked off the list.

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200	BK:	Mm.
205	SD:	So checking with the registrar to stress summaries are done in time, um talking to case coordinators about um, um liaising with the outside referral, the outside mental health body that would be supporting the child. Um yeah mostly that and, and sort of making sure that they had um any copies of assessment reports that had been done.
	BK:	Mm.
	SD:	Um and a lot of those things were ticked off at the, in terms of case workups.
	BK:	Mm. So in terms of the kids during that um, that final period of transition before Barrett closed, which kids were you most involved with?
210	SD:	Um when it was decided um that there was a closure date, um we decided to create a transition team
	BK:	Mm.
	SD:	And I suggested to Dr Brennan and Vanessa Clayworth um, um who I thought would be best
215	BK:	Mm.
220	SD:	Suited to the task um, basically a group of people with key skills that would be good with that transition stuff. So psychologists, OTs, um a representative from the school, Ann Brennan, Vanessa Clayworth, myself and I think that was it. Um we didn't involve the case coordinators at those meetings but just because of the, the deadlines, the short timeframe and the fact that it was also difficult to get part timer staff
	BK:	Mm.
	SD:	Um the existing transition team and shift work as well, um, um though some of the case coordinators would have liked to have been
<b>O</b> 25	BK:	Mm.
	SD:	There for that but yeah
	BK:	Does that mean that you had um a kind of general overview role of all the kids that were being transitioned, rather than being particularly involved with individuals?
230	SD:	I had through my experience I provided that, those suggestions
	BK:	Mm. Mm.
	SD:	But um I had people above me as well who made the decision to go with that process
	BK:	Mm.

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235	SD:	Um but generally um well I guess it yeah the transition team, yeah as part of the transition team yeah I would have had a general overview.
240	BK:	Can you tell us how the process was managed of um of looking at the various agencies that kids were going to be referred to, um and how that sort of process of actually understanding what the capacities of those agencies were to receive these particular kids.
	SD:	Um I wasn't involved with a lot of the decisions in, in regards to those. Um I know that it was a very difficult task. Um, ah I'd say Vanessa Clayworth and Megan, sorry no, the OT who was on our committee um came up with a lot of the accommodation places um and
245	BK:	so the options, the suite of options
æ	SD:	Yes.
	BK:	And would actually go out to have a look at them?
250	SD:	I know Vanessa had done one. I think she's gone to or somewhere ah and she out to another place um this is regarding yeah I won't say the names, one of the
	BK:	Mm.
	SD:	Um I can't remember if, who did that for the others.
	BK:	Were you involved in any of the site visits, different agencies?
	SD:	No, no.
255	BK:	Mm. So um in the period of time with business as usual um what was your role with discharge planning?
	SD:	Business as usual?.
	BK:	Yeah business as usual before the transition period, yeah, yeah.
260	SD:	I guess um how I saw my role was um as a support person for others who um you know had placements and come to the Unit and don't really, may not remember what to do for this role, so I, I'm a prompt or a um ah a supportive co-worker [?] sort of okay this is the process for this you know um yeah so with the registrars. Um.
265	BK:	So who would be nominated in terms of business as usual as the key contact person for an agency that Barrett was referring a kid too, who'd be the key contact person of that agency back at Barrett?
	SD:	I guess it depends on what type of information they require.
	BK:	Mm.
270	SD:	Um but I would put them in touch with you know whatever they needed. I guess I am a bit of a triage person for a where they need category best tailor
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		their needs. Um I'd say that Dr Brennan probably would have been key at that time as well as Dr [?]
	BK:	In the transition period, yeah.
	SD:	As well as Vanessa Clayworth. They carried a lot at that stage.
275	BK:	Are there any observations or reflections that you would like to share with us about the transition committee?
280	SD:	Um I think that Dr Brennan was under a lot of pressure. Um she did break down and cry and she worked a lot of late hours to try and get everything done. That was expected of her. Um she, she did seek um advice and support from her supervisors um but really it was just a, my impression of her account was that it was this has to be done you know, what're you worried about sort of thing. Um I don't know how she managed to do it. She was under a huge amount of stress. Um
285	BK:	Are we right in thinking that you were um at one stage at least the care coordinator for is that right?
	SD:	Yes.
	BK:	When were you the care coordinator for
	SD:	
<ul><li>290</li><li>295</li></ul>		
0	BK:	Mm.
300	SD:	
305		
	BK:	That's fine. So do you recall, did you go off work at the beginning of November or the end of November or
	SD:	I'm not really sure.
310	BK:	That's okay, that's okay. At the time that you went on leave, were you care coordinator for only or did you have other care [?].
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	SD:	I did have another one and was fairly newly admitted.
	BK:	Right. Can you recall who that was?
	SD:	No, I can't even remember name.
	BK:	That's okay. So when did um Barrett actually stop admissions
315	SD:	was a
	BK:	Oh okay. When did Barrett actually stop admitting?
	SD:	Um probably when they asked Dr Sadler to step down.
320	TS:	Oh right okay. That was some months before that wasn't it. Was that, that was after that announcement of closure was it September or October or something?
	SD:	About same time, it could have been
	BK:	It was all around the same time yeah.
	SD:	Yeah.
	BK:	Okay. Okay thank you very much. Do you have any questions for us?
325	SD:	Am I in trouble?
	BK:	No, no, no. Thank you, I mean thank you you've been very helpful. You know we're very interested in people's perspective on what was happening and the process at the time and their involvement and observations, so thank you, you've been very helpful.
330	SD:	Um I wish that there, we kind of expected there to be something towards the end of the closure to the transfer team but obviously that wasn't going to happen and there wasn't news about well is there going to be something later. So I don't know if there has been any news since.
335	TS:	Were you very in touch with things after you um you know left the workplace. Did you still stay in touch with people and or just
	SD:	Just one colleague. She's coming tomorrow.
	BK:	Right. Yeah.
340	SD:	Um no I didn't even want to come to the Christmas breakup, school breakup, you know to say goodbye to the kids cause I just um when they decided my position had ended and were going to put me onto the floor and work shift, shiftwork, I decided that was the last straw. I just, there was too many things that had happened. I was getting burnt out towards to the end too.
	TS:	So was that in November that the position was changed?

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345	SD:	Yes. I decided then that I'd take stress leave. It was just the final straw and um I went and wanted to say goodbye to you know some of the kids because I didn't want them to worry about another staff member not, you know not being there for them and I just burst out into tears. I know that I made the right decision in stopping.
	TS:	Yeah.
350	SD:	I could never [?] gone to work and worked with them without repeating that um. You know I'm really sorry about um it's a [?]. I didn't know um the as well but I know that had mates and genuine um growth in and trust and even connection with
	BK:	Yeah.
355	SD:	And yeah it is really sad.
	BK:	Yes.
3	TS:	Yeah. Mm.
	BK:	Well look thank you very much.
	TS:	Thank you very much.

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