

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

**AFFIDAVIT**

Margaret Ellen Jean Nightingale of The Barrett Adolescent Centre, teacher solemnly and sincerely affirms and declares:

1. I have been provided with a Requirement to Give Information in a Written Statement dated 28 October 2015. **Exhibit A** to this affidavit is a copy of this notice.
2. I am an approved teacher with a permission to teach at the Barrett Adolescent Centre. **Exhibit B** to this affidavit is a copy of the Approval Notice and Permission to Teach certificate issued by the Queensland College of Teachers.

**Background and Qualifications**

3. Between 14 October 1991 and 30 April 1995, I undertook an approved psychiatric nursing course at the Wolston Park Hospital Complex. **Exhibit C** to this affidavit is a copy of the Certificate – Psychiatric Nursing Course evidencing my participation and completion of this course.
4. Between 1992 and 1995, I was a student nurse at the Barrett Adolescent Centre.
5. Between 1995 and 1998, I worked as a registered nurse at the Wolston Park Hospital Complex, mostly in the Barrett Adolescent Centre.

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Deponent

A.J.P., C.Dec., 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  
 TEL: [REDACTED]  
 Email: [REDACTED]

6. Between 1998 and 2000, I was the Clinical Liaison Person and Acting Clinical Nurse at the BAC.
7. In 1999 and 2002, I was a medical representative for Bristol Myers Squibb.
8. Between 2002 and 2007, I took time away from working to raise my children. I decided to pursue a career in teaching, as I thought this would suit my family situation better than working as a nurse on shift work.
9. In 2007, I was employed as a casual teacher aide at the Forest Lake State School in its Special Education Unit.
10. Between 2010 and Semester 1, 2015, I was employed by Education Queensland as a teacher aide at the Barrett Adolescent Centre. This was a part time casual position. My average working hours were approximately 1-2 days per week.
11. Between 2012 and 2015, I undertook a Bachelor of Education (Honours) degree at the University of Southern Queensland. My degree specialisation was in primary education. My honours specialisation was in special education, with my honours thesis on the topic of student anxiety disorders within schools. My honours supervisor at the University of Southern Queensland was Yvonne Salton. **Exhibit D** to this affidavit is a copy of my academic transcript for my degree and honours courses.
12. Whilst studying for my degree in education, I completed a practical teaching component for two weeks at the Grand Avenue State School in a special educational placement. I am also employed by the university to provide peer learning and support sessions to other students. These sessions are called 'meet up'. In addition to this, I am employed in the role of Leader Assistant Meet up Program which oversees all employed 'meet up' leaders across both the Springfield and Ipswich campuses.

13. On 13 July 2015, I was granted to permission to teach at the Barrett Adolescent Centre by the Queensland Teachers College. I am permitted to teach Maths, Science, History, English and Art.
14. Whilst being permitted to teach at Barrett Adolescent Centre, teaching two days a week, I work an additional one day a week as a teacher's aide.
15. I am currently a member of the Queensland Teachers Union.
16. I have a current curriculum vitae. Exhibit E to this affidavit is a copy of my curriculum vitae.

#### **Background in education of special needs children and adolescents**

17. As a registered nurse, clinical nurse, teacher aide and teacher at the Barrett Adolescent Centre, I have dealt with the educational needs of special needs children and adolescents.
18. The students at the Barrett Adolescent Centre Special School all have complex mental health issues. Sometimes those mental health issues overlap with other disabilities, for example minor intellectual impairment and/or cerebral palsy.
19. As a registered nurse at the Barrett Adolescent Centre, I:
  - (a) would sit in the classroom with students I was supporting, or just outside the classroom, to observe and assist the students as required;
  - (b) was involved in the planning of school camps;
  - (c) had input into case management of the students;
  - (d) was involved in informing the community about the services of the Barrett Adolescent Centre. For example, I attended a health services expo at the

Princess Alexandra Hospital to discuss the services offered at the Barrett Adolescent Centre.

20. As the Community Liaison Person, I coordinated the referrals of patients to the Barrett Adolescent Centre. I would liaise with the referring agency, the students' parents or families and other community based services. As I understand the process of referrals, when students were referred to the Barrett Adolescent Centre, including day patients, if accepted, they were admitted to the Barrett Adolescent Centre and would automatically be enrolled at the Barrett Adolescent Centre special school.

#### **Circumstances of involvement in the Barrett Adolescent Centre**

21. In 2011, I contacted the principal at the Barrett Adolescent Centre Special School, Kevin Rodgers, about working at the Barrett Adolescent Centre as a teacher aide. I had previously worked with Mr Rodgers in my role as a registered nurse and clinical liaison person at the Barrett Adolescent Centre.
22. My experiences as a nurse and what I had seen as a nurse at the Barrett Adolescent Centre inspired me to pursue a career in teaching children and adolescents with mental health issues. I believe there are often gaps in the knowledge of teachers who are teaching students with mental illness and I wanted to contribute to the body of knowledge around teaching those students.
23. From 7 February 2011, I was employed by Education Queensland as a casual teacher aide at the Barrett Adolescent Centre Special School, working 24 hours per fortnight (two days a week). **Exhibit F** to this affidavit is a copy of my appointment letter, dated 16 February 2011.



24. As a teacher aide, I would assist the teacher with classroom activities and the supervision of students. I would also perform administration tasks as required.
25. I was also the grants officer for the Barrett Adolescent Centre Special School, which involved writing and submitting applications for grants for things like vehicles and funding for camps. If the grant was awarded, I would then be required to follow through with the distribution and acquittal of the grant funding.
26. As a teacher, my duties included teaching classroom lessons, developing lessons, developing and drafting curriculum, policy development, students' case management and liaising with stakeholders about negotiated education plans and student management.
27. As noted above, over the years I have had several roles at the Barrett Adolescent Centre and Barrett Adolescent Centre Special School. I was first involved as a student nurse, then a registered nurse, then as the community liaison person, then as a teacher aide, and currently as a teacher.
28. I do not have to hand a current position description for my role as a teacher. My approval notice - permission to teach is attached as **exhibit B** to this affidavit.

#### **The reporting structure at the BAC**

29. As a teacher and teacher aide at the Barrett Adolescent Centre Special School, I reported to the principal Kevin Rodgers, or the acting principal, either Deborah Rankin or Stephen Marriot. Ms Rankin or Mr Marriot would act as principal when Mr Rodgers was on leave.
30. No-one directly reports to me in my roles as either a teacher aide or teacher at Barrett Adolescent Centre Special School.

31. The hierarchical structure currently at the Barrett Adolescent Centre Special School is a principal and five teachers, with three teacher aides and some administrative support personnel. This structure is similar to the structure prior to January 2014.

**The teaching program at the Barrett Adolescent Centre Special School**

32. Before January 2014, students at the Barrett Adolescent Centre Special School were not usually co-enrolled at other schools. The emphasis at the Barrett Adolescent Centre Special School was teaching the Barrett Adolescent Centre Special School program which was based on the Australian curriculum.
33. Given the severity of the mental illness affecting some students, the focus of the education program was to re-engage the students with learning activities. Many students had been disengaged from school and learning for a long time and had significant anxiety around school, classes and learning. The educational goal for some students could simply be to make them comfortable sitting in the classroom. Often this would involve exposing them to learning tasks within their tolerance zone.
34. Prior to January 2014, there were three classrooms at the Barrett Adolescent Centre Special School and the students were allocated to a class with a specific teacher in one of those class rooms. They would focus on the Barrett Adolescent Centre Special School curriculum. Students would be assigned to a classroom based on their learning needs and educational goals and group dynamics. After January 2014, the students enrolled at the Barrett Adolescent Centre Special School are now also enrolled at substantive schools, so those students follow the curriculum set by that school. Students may have their curriculum set by Vocational Education and Training (VET) and TAFE agencies or the Brisbane School of Distance Education. The students' education programs now focus on the General Capabilities of literacy and numeracy and social and personal capabilities ("the base curriculum").

35. The Barrett Adolescent Centre Special School still has a "living skills" focus, by which we teach basic living skills, such as cooking and community engagement. We augment the base curriculum provided by the students' substantive school with a focus on building the student's capacity to reengage with their learning and their community through self-awareness, self-management and social awareness and social management
36. As the Barrett Adolescent Centre Special School is now based at Tennyson, there is one learning space and the students are all doing different curricula as set by their substantive schools. This is different to the set up at Barrett Adolescent Centre Special School when situated at The Park where there were three classrooms with the students in each classroom with required variations or adjustments

#### **Communication between clinical and education staff**

37. Prior to August 2013, the clinical and education staff would hold a weekly case conference meeting, at which every patient/student (both inpatient and day patients) would be discussed. This was a multidisciplinary meeting, with education staff, clinical and nursing staff, and allied health staff all contributing to the case conference. At these conferences, we would also discuss referrals from other health providers.
38. We would also hold intensive case workups on individual students. Each student would be reviewed every six weeks to two months. These conferences would involve the classroom teacher to whom the student was assigned, the principal of the Barrett Adolescent Centre Special School, the clinical consultant, therapists, nurse coordinator and any allied health providers involved in the student's care. These conferences would allow for constant review of the treatment and activities in which the student was involved and their learning needs and educational goals. These

conferences would focus on how to manage the student's behaviour, the management of the student's treatment, their curriculum, interaction with family members, and their leave from the Barrett Adolescent Centre.

39. Students' individual needs were identified in case conferences and through personal education plans. The teaching staff would hold meetings about the education programs for each student. These meetings were focussed on the students' education and were more detailed from an educational perspective than the case conferences. Each student had their own personal education program and the student and the student's parents were engaged in the development of that program. As such, there was liaison between the teaching staff and the student's parents.
40. The education staff also had group meetings with other professionals such as occupational therapists, speech therapists, psychologists and social workers. For example, the teachers would work with occupational therapists to plan school camps, and with other allied health professionals in the students' community exposure and re-engagement. The education staff would also liaise with Child and Youth Mental Health Services and transition schools to ensure that there was appropriate transition in and out of the Barrett Adolescent Centre Special School and that students were always supported.
41. As a registered nurse, I was also involved in family therapy and individual therapy and case co-ordination of the students. I worked with Dr Trevor Sadler in this capacity.

#### **Work at the Barrett Adolescent Centre Special School**

42. It is difficult to estimate the average number of students engaged in school work at any one time at the Barrett Adolescent Centre Special School, prior to January 2014. All of the inpatients and day patients were enrolled at the school, but some of them

were at times too unwell to attend school. I recall there may have been as many as 22 students enrolled at the school (either as day or in patients).

43. As noted above, there were three classrooms, and the students would be assigned to one of the three classrooms. As such, there could be up to eight students in a class at any one time. Sometimes there would be as few as three or four students in the classroom. The students would also participate in some combined activities where all students would be involved in the one activity. There could be up to 22 students in such activities.
44. Records of attendance were kept, but mostly in the form of the nurses' clinical observations which would record where a student was at particular time. I recall that school attendance was recorded, but I am not sure how that was recorded.
45. A school file on each student was kept, which noted anything of significance, such as changes to programs, reports, documentation such as personal education plans and information from previous schools. As a teacher aide, I could document observations and activities in the student's school file and patient clinical files. As I recall clinical staff would not usually document observations in the school file.

### **Working hours**

46. Prior to January 2014, I was a teacher aide rostered to work one to two days a week, between 9am and 3pm. After January 2014, this arrangement continued on a casual basis
47. When I was granted permission to teach from 13 July 2015, my hours increased and I would work between 8:30am and 3:30pm. When I was first granted permission to teach, I worked three weeks full time (about 25 hours a week) and after that I worked

two days a week as a teacher. I still do some hours as a teacher aide, even though I am an approved teacher.

48. As a Community Liaison Person, I would work between 8am and 4pm, Monday to Friday. As a registered nurse, I would work shift work as required.
49. When the Barrett Adolescent Centre closed in 2014, there was some uncertainty about whether there would be any shifts for me as a teacher aide, after the school relocated. I was able to keep my shifts when the school relocated to Yeronga and then again to Tennyson. In semester 2, 2015 I was then employed on contract as an approved teacher, whilst still working some hours as a teacher aide.

### Communications

50. Prior to January 2014, we would hold morning and afternoon meetings. The morning meetings were run by the students. After the nursing staff did their morning handover, the students, nursing staff, treating team and teaching team would have a 10 minute meeting. In this meeting, we would discuss any difficulties or general ward or school related issues the students were having, any observations the students wanted to make, and what appointments they had that day. It was considered important to provide a structure to the students' day so they knew what was happening that day.
51. There was free and informal communication between teaching and clinical staff prior to August 2013. We also held a lot of information meetings. After August 2013, the teaching staff would communicate with the nursing staff usually via email. The reasons for this are set out below in paragraphs 59(b) and 69 below.

52. I have no knowledge of the content of the middle management meetings, other than that I believed they were regular and structured. I was not privy to the formalities of those meetings.
53. I would have frequent, informal conversations with nursing staff, the principal and allied health practitioners. These conversations were not always documented.
54. I engaged in written communication with Greg Fowler in early 2015, when I emailed him a wish list of the services and amenities that staff believed would make delivery of the program easier. Exhibit G to this affidavit is a copy of the email I sent to Greg Fowler on 20 February 2015.
55. I also had conversation with Annastacia Palaszczuk, as my local member, about my concerns about the closure of the Barrett Adolescent Centre. I recall she and Lawrence Springborg came to the Barrett Adolescent Centre to discuss the staff's concerns about the closure and the troublesome nature of the closure. I recall this to be towards the end of 2012, but I cannot recall the exact date or time.

### Family involvement

56. Prior to the closure of the Barrett Adolescent Centre in January 2014, a Parents and Citizens Association Committee was formed. There were also parent support groups formed which operated to allow parents to discuss issues, concerns and arrangements. The parent support group often included teachers and nursing staff, and they would provide the parents with information about mental illness and information about how to access support services. The support group would form and meet intermittently. The regularity would depend on the student cohort and the level of involvement of their families.



57. The Barrett Adolescent Centre Special School teaching staff would also send weekly emails to parents to keep them updated on the week's activities and upcoming events. The teaching staff would also communicate as required with families about the students' educational progress. The Barrett Adolescent Centre Special School teaching staff would also have parents or guardians sign off on education plans where possible.
58. Other events which the Barrett Adolescent Centre Special School held to involve students' family included:
- (a) Family days at which students' work was showcased for the families to view. These would be held once or twice a term, depending on the activities that had occurred in the term;
  - (b) 'BACademy' awards in which the students performed a stage production;
  - (c) Pizza days when families were invited to eat with the students who would cook pizza in a wood-fired oven.

### Key Challenges

59. There were many challenges with the work at the Barrett Adolescent Centre and the Barrett Adolescent Centre Special School, including:
- (a) From late 2012 the nursing cohort underwent increasing staff changes and quite often new nurses would not know the system and some had inadequate skill sets to deal with adolescents with psychiatric injury. It was a concern that there were nursing staff who were inexperienced with an adolescent population with illnesses as severe as those on the unit.



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- (b) making sure the teaching team was strong and effective, when there were negative relationships forming, especially with the nursing staff around job security. There was a divide between health staff and education staff which became difficult to manage. This divide began festering from late 2012, when the Barrett Adolescent Centre staff first heard of the closure. The relationship between the education staff and health department staff deteriorated to the point where education staff was no longer welcome in the discussions about the closure, those meetings were for health staff only, and education staff were isolated. I believe one of the reasons for this was that education staff were more assertive in asking the Health department representatives questions about the future of the Barrett Adolescent Centre, whereas the nursing staff felt bullied and intimidated and like they could not do anything.
- (c) the removal of Trevor Sadler.
- (d) concerns about the transition for students after the Barrett Adolescent Centre was closed. When the announcement was made, it felt like everyone was talking about [REDACTED]. The education staff was voicing their concerns more readily than the nursing staff, but everyone was discussing how worrisome it was. We all knew how unwell the students were and the difficulties they would have transitioning back into the community. There were lots of conversations about where was the future for these students as there was nowhere else for them to go.

60. For myself the concerns outlined in paragraph 59 (d) arose from my belief that the service the Barrett Adolescent Centre offered was a process from admission to transition back in to the community, focussing on the students' developmental context. The aim of the Barrett Adolescent Centre was to keep the students safe

whilst providing wrap around care and treatment and teaching the young people skills to manage their illness. Sometimes it took considerable time until their developmental context changed and they were able to utilise these skills. If students were discharged too early, their progress would deteriorate. We tried to manage their developmental needs, but often due to the severity of their illness, a student's development was delayed. The students who came to Barrett Adolescent Centre had already received community and/or acute hospital based care prior to their admission and continued, despite this level of service involvement to further deteriorate. By the time they came to Barrett Adolescent Centre, their illnesses were chronic and severe. Some students required shorter stays at Barrett Adolescent Centre, responding well to therapy. However, some illnesses would take years to treat and the students would get that treatment at the Barrett Adolescent Centre, which they were unlikely to get in the community service programs. We never gave up hope for the students and always believed that with ongoing support they could transition back into the community. This transition was supported by regular leave to home, community exposure and community engagement programs.

61. On reflection, over my time at the Barrett Adolescent Centre prior to the closure, I noted that the length of stay per student increased. I believe this happened as a result of the community service programs that were being set up. The community service programs would deal with adolescents with less severe mental illnesses. Only those with really severe illnesses, who had failed in the community services programs, would come to the Barrett Adolescent Centre. That resulted in students at the Barrett Adolescent Centre requiring longer admission periods than previously.

**Decision to close Barrett Adolescent Centre and transition arrangements**

62. I became aware of the intention to close the Barrett Adolescent Centre after a media report of Dr Brett McDermott's evidence when he discussed child safety and said that the Barrett Adolescent Centre would close. I recall that was on 8 November 2012.
63. After that media report, the Barrett Adolescent Centre staff had a meeting with Lesley Dwyer. In that meeting, Ms Dwyer gave a very mixed message about the future of the Barrett Adolescent Centre. She said words to the effect that, there was no intention to close the Barrett Adolescent Centre, but we are closing the building, and when I questioned her further she said words to the effect that, the Barrett Adolescent Centre could not stay where it was but there was nowhere for it to go and no funds to relocate it. There was no intention to build a new building, but they were not closing the service at this time. This was very disheartening and frustrating for staff, because Ms Dwyer was very vague in her statements but the inference was that there was no chance the service provided by the Barrett Adolescent Centre could continue, despite there being a lot of dialogue to avoid saying that.
64. I recall receiving an email on 9 November 2012 which I printed at the time which was originally from Sharon Kelly about a meeting with Queensland Health held on 9 November 2012 about media reports about the future of the Barrett Adolescent Centre. I cannot recall if this email was sent to me directly, or forwarded to me. **Exhibit H** to this affidavit is a copy of that email.
65. I understand that none of the Barrett Adolescent Centre staff knew anything about the intention to close the Barrett Adolescent Centre prior to the media report.

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66. I recall also seeing an email to Kevin Rodgers from an ABC journalist requesting certain information. I recall Mr Rodgers showed the email to the education staff and spoke to us about not speaking to the media. I think this was in the context of Mr Rodgers advising that any of us may be contacted by the media, but I cannot recall the exact circumstances of being forwarded a copy of the email. **Exhibit I** to this affidavit is a copy of that email dated 8 November 2012.
67. I also recall seeing a letter which was a proforma letter to parents about the future of the Barrett Adolescent Centre. **Exhibit J** to this affidavit is a copy of that letter dated 12 November 2012. I believe that letter was given to education staff as a general information letter so that we could give the same information to parents and families if they called us to discuss the media reports.
68. I found out officially on 6 August 2013 about the Closure Decision. I knew there had been a couple of meetings prior to that, but I did not know the outcome as I, and other staff, was told the Expert Clinical Reference Group had reviewed the Barrett Adolescent Centre program and structure, but a decision could not be made about closure until the report arising out of that review was received. The education staff asked if the Expert Clinical Reference Group had recommended a tier 3 service, but we were told that there was no funding for that and the Expert Clinical Reference Group had to look at alternatives.
69. After the Closure Announcement, Sharyn Kelly and Lesley Dwyer requested meetings with all Barrett Adolescent Centre staff. Those all-inclusive meetings only happened on two or three occasions and then education staff were asked not to attend any further meetings. I believe that was because education staff would challenge and question the information being disseminated they could thwart the process. Education staff would ask interrogative questions because we knew there

were no existing services in place and any replacement services were a long way off, and we were in constant contact with the parents about the transition. I recall Kevin Rodgers advising me that education staff were not to attend the meetings, because we were considered "obstructionist".

70. I did not know about the closure announcement until it was made. I heard about the announcement through word of mouth and then we got the notice in a media release. I recall seeing something about the closure on the news as well. I believe Kevin Rodgers would have forwarded on any documentation he had received and I recall him coming into work to talk about the Closure Decision. I remember talking with the education staff as group and everyone was quite distressed and troubled.

#### **Consultation regarding education needs**

71. I recall that 13 December 2013 was the last day of school for the year. I do not recall being consulted about the students' ongoing educational needs, and I assume Kevin Rodgers or Deborah Rankin may have been consulted but I am not sure. I am aware that one of the teachers, Justine Oxenham attended some early transition meetings. Mr Rodgers and Ms Rankin then attended some transition meetings. However Mr Rodgers or Ms Rankin gave very limited feedback to the education staff. There were later transition meetings which took place but to my knowledge no education staff attended.

#### **Management decisions**

72. For a long time after the media release in November 2012, the education staff did not know if the school was going to continue. Myself and other staff were very stressed due to concerns about appropriate care not being available to the students going forward. There was very little information or support about managing the closure, the relocation and the move itself. The education staff had to interact and deal with the

new school, and fit our school into the new school and deal with all the difficulties associated with that with very little support from the department. For example, we were told that we were not allowed to enrol students, but we were encouraged to support student enrolment. There were stressors around the model of service, but there was no clear model or process for accepting new students. There were frequent changes in requirements from the Region. For example, it was unclear whether we were allowed to talk to guidance officers about possible referrals or whether we could use the staff cars. We were also initially told to do in-reach programs then told to do out-reach programs.

### Support provided

73. Prior to the Closure Announcement, there was a meeting with Peter Blatch who informed staff that permanent employees would still have jobs but there was uncertainty about casual and contract staff positions as the education department was still waiting for health to finalise decisions about Barrett. This meeting occurred in May 2013. I recall that the education staff involvement in the multidisciplinary reviews (set out in paragraph 37) became diminished as they progressed into transition meetings. I believe one teacher may have still gone to the multidisciplinary case conferences, but I was not part of those meetings and I am not sure if case co-ordination for each student continued. I only know what went on in those transition meetings from what the teacher who attended told me. I was aware that there was discussion about transition arrangements, but I was told by Justine Oxenham that she was not allowed to discuss details of the transition arrangements.
74. After the Closure Announcement, we did not know what was happening with the Barrett Adolescent Centre. Peter Blatch, from the Education Department, told us that the school would continue, and that the students needed somewhere to continue

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their education. In November 2013, we were told that we were possibly moving to Tennyson or Yeronga. I recall that we started packing up the school about that time. I remember shortly after we started packing up the school that we were told we were moving to Yeronga. Other than being told that students would be going back to their substantive schools I am not aware how well considered the educational transition was. Some of the students were no longer required to go to school (because of their age) but were eligible for extra semesters of schooling (having missed some (part) semesters due to illness). I believe that some of the students would have benefited from those extra semesters, but they were being transitioned out into the community. I was not provided with any information or support about the transition arrangements.

75. On 12 August 2013, the teachers union came to the school to provide some information to the teachers. Once we had moved to Yeronga, I recall there was some discussion about support from Optum (the employee assistance program at the time) and from the regional office of Education Queensland, but those discussions were mainly about [REDACTED], and measures to respond to this if it occurred. There was some discussion about how we, as staff, were coping which occurred mostly [REDACTED]. Prior to the relocation, there was very limited support given to the education staff about the move and the move was very rushed. The teaching staff had a great deal of support from Deborah Rankin, who was the acting principal at the time. By this time, Kevin Rodgers was off on sick leave and he did not transition to Yeronga with the school.

76. We had very little support to move campuses. I remember having to pack up and move over the holidays. I remember the logistics around the move being quite difficult. For example, it felt like the Yeronga School did not want the parent body to know that the Barrett Adolescent Centre special school was moving there. As such, there were a lot of difficulties around negotiating for space and having to move at the



end of the year. There was no clear, consistent decision about where the school would be located and that was difficult for the parents. We were always told to access the EAS, but that was in terms of "it's there if you want it".

## Relocation

77. The relocation was increasingly unsettling for the students. They were becoming very distressed. [REDACTED]

Confidential

78. It was around this time, October 2013, that the teachers were stopped from attending the transition meetings. This was hard for education staff as we did not know what was happening with the transition arrangements for students.

79. It was very traumatic for the education staff when Dr Trevor Sadler was stood down, especially the way it was reported in the media and in Parliament. I was horrified at the way it was reported. To me, it implied or gave an inference to the public that was totally inaccurate. The way it was reported and presented in parliament painted Dr Sadler in a negative light [REDACTED]

[REDACTED]. A number of my friends who read the parliamentary transcripts or had seen the article on the news rang me and [REDACTED] It really caused great distress to everyone.

80. For a long time there had been a harmonious relationship between Dr Sadler and the education staff and the students were very distressed by his removal. Further, for [REDACTED]



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him to be removed in a time of chaos (after the Closure Announcement and around the time for relocation) was very unsettling for the students. To lose him at that time was very negative, and it gave me the feeling of being on a sinking ship.

81. Once the Barrett Adolescent Centre special school had moved to Yeronga, the whole way we operated changed, from the day to day operation of the school to the class room space we were given.
82. I only came to find out about the discussion to relocate on 6 November 2013, when Peter Blatch came to talk to us about a possible move to Yeronga. I recall being at that meeting. Basically, attending staff were told that we were moving Yeronga and given instructions to start packing. We tried not to do the packing in front of the students, as some of them could be very distressed even by the sight of us packing up books. I recall we did most of the packing after school was out for the year.
83. I was involved in the relocation process in that I physically helped pack up the school and transported materials and supplies and unpacked at Yeronga. I helped with moving furniture and moving packed boxes. I recall I took some laptops in my personal car from the Park to Yeronga, as we did not want to put them in the removal van. I remember packing, moving and unpacking over the school holidays.
84. I recall I had organised a grant for a school camp from the Sydney Myer fund of about \$10,000. However, that grant money had to be returned because of the change in circumstances of the school.

#### **Concerns regarding the closure of BAC**

85. I recall discussing my concerns about the closure with Lesley Dwyer, Sharon Kelly and Dr Anne Brennan. I had known Dr Brennan as she had previously been employed as a Registrar in the Barrett Adolescent Centre. I am aware that many

education staff had verbal discussions with those senior staff expressing concerns that there was an insufficient level of service available to support the needs of the students. I was concerned that it would result in [REDACTED], or at the very least a deterioration in their conditions. I believe that other education staff shared that concern.

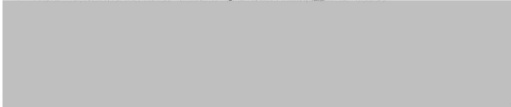
86. I recall having discussions with allied health practitioners, nursing staff, education colleagues, and Annastacia Palaszczuk that the closure was a big mistake and that the timeframe for the transition was all too rushed.
87. I recall having a conversation with Dr Brennan in the kitchen at the Barrett Adolescent Centre (at the Park) and I told her of my concerns and said that I recognised that she had a very difficult task. I am unsure of the date that conversation took place.
88. I recall that I had several discussions about my concerns over the date range from the announcement of the closure until recently. I took every opportunity to discuss my concerns whenever I saw Ms Dwyer or Ms Kelly and I would say, "just to be clear", and then launch into my concerns about the transition arrangements. I recall having these discussions from around the time of Dr Brett McDonald's announcement in November 2012.
89. There was obviously a lot of distress about the closure of the Barrett Adolescent Centre, and everyone was unsettled, and it took a very long time for the Expert Clinical Reference Group report to be released. I remember reading a document which outlined the response to the Expert Clinical Reference Group report which said that the recommendations would be accepted with considerations. I and other education staff were very concerned with the recommendations that came out of that report, especially as the considerations around the recommendations essentially

nullified the recommendations. I recall there was a big gap of time between the report being finished and it being released. I knew the report was finished, because Kevin Rodgers was a representative on the expert clinical review panel and he told us that the report was finished and it was some time after that before it was released.

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

Affirmed by Margaret Ellen Jean  
Nightingale on 24<sup>th</sup> November, 2015 at  
Brisbane in the presence of:

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)



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

**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**

Exhibits "A" to "J" to the Affidavit of Margaret Ellen Jean Nightingale sworn on 24th November, 2015.



Deponent



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

**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**

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"A"

Barrett Adolescent Centre Commission of Inquiry

**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 Margaret Nightingale

Of: c/- Crown Solicitor, 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 sections 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 before **Friday 6 November 2015**, 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** 28<sup>th</sup> **day of** October **2015**

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

## SCHEDULE

### Background and experience

1. What are your current professional role/s, qualifications and membership? Provide a copy of your most recent curriculum vitae.
2. Provide details of your background in education of special needs children and adolescents.

### Involvement with the Barrett Adolescent Centre (BAC) School

3. Explain the circumstances in which you became involved in a professional role with the BAC School. In particular,
  - a. on what date, in what position and on what terms did you first become involved with the BAC School?
  - b. describe your duties and responsibilities in respect of your position with the BAC School; and
  - c. detail all relevant documents and communications, including the job description and letter of offer in relation to how you became involved with the BAC School.
4. Explain and detail any changes in your position and/or terms of employment or engagement throughout your time with the BAC School. In particular,
  - a. what was the change, what was the reason for the change and on what date did the change occur?
  - b. describe any changes in your duties and responsibilities in respect of your position with the BAC School; and
  - c. detail all relevant documents and communications in relation to any changes in your position and/or terms of employment or engagement.
5. Explain and detail the reporting structure at the BAC School. In particular, detail

The logo for Bayrent Adolescent Centre, featuring the text "Bayrent Adolescent Centre" in a stylized font.

- a. who were your supervisor(s) and/or the people to whom you reported; and
  - b. anyone who reported to you as a supervisor or manager.
6. To your knowledge, describe the teaching program at the BAC School. In particular, describe
- a. the educational curriculum;
  - b. the structure of the teaching staff;
  - c. the engagement between the teaching staff and other professionals; and
  - d. whether the program was tailored to suit the needs of the BAC clients and if so, how was it tailored and the structures in place to develop tailored programs.
7. Describe your work at the BAC School. In particular,
- a. on average the number of students you taught or assisted in teaching at any given time;
  - b. the subjects you taught or assisted in teaching; and
  - c. your roster at the BAC school including how long was each class and how often you taught or assisted in teaching.
8. Detail and explain the nature and level of communication between clinical and educational staff at the BAC School, including whether there was any formal structure of communication between clinical and educational staff.
9. Detail and explain the nature and level of involvement of student families in school activities and curriculums.
10. Detail and explain key challenges in your role at the BAC School, including
- a. actions taken, if any, in response to the challenges; and
  - b. detail relevant communications, if any, you had with anyone else in relation to the challenges.





Barrett Adolescent Centre Commission of Enquiry

11. Explain the circumstances in which you ceased work at the BAC School. In particular,
  - a. on what date and what was the reason you ceased work at the BAC School; and
  - b. detail relevant communications in relation to your cessation of work at the BAC School.

**Decision to close the BAC and transition arrangements**

12. Explain the circumstances in which you became aware of the intention to eventually close the BAC. In particular,
  - a. on what date, by whom, and by what means were you informed about the intention to eventually close the BAC? and
  - b. detail all relevant communications in relation to how you became aware of the intention to eventually close the BAC.
13. The Commission understands that on 6 August 2013, an announcement was made to ultimately close the BAC. Explain the circumstances in which you received official notification of the decision to ultimately close the BAC. In particular,
  - a. on what date, by whom, and by what means were you informed about the decision to ultimately close the BAC? and
  - b. detail all relevant communications in relation to how you became aware of the official decision to ultimately close the BAC.
14. From 31 October 2012 to when you ceased work at the BAC School did anyone from the BAC or the BAC School consult you or, to your knowledge, other staff from the BAC School in relation to the closure of the BAC and the transition of students to alternative care? If so, describe
  - a. on what date, by whom and by what means were you consulted? and
  - b. detail all relevant communications in relation to the consultations.



Bayrett Adolescent Centre (BAC) School of 2012

15. From 31 October 2012 to when you ceased work at the BAC School did anyone provide support to you or to your knowledge, other staff from the BAC School in respect of the decision to close the BAC and the transition of students to alternative care? If so, describe
  - a. on what date, by whom and by what means was support provided? and
  - b. detail all relevant communications in relation to the support offered.
  
16. From 31 October 2012 to the end of your engagement with the BAC School, were you, or to your knowledge, other education staff, consulted on the students' ongoing educational needs and how those needs will be met during the transition period? If so, describe
  - a. on what date, by whom and by what means were you consulted? and
  - b. detail all relevant communications in relation to the consultations.
  
17. From 31 October 2012 to the end of your engagement with the BAC School, to your knowledge, were there any management decisions related to the intention to close the BAC that impacted on the day to day operation of the BAC school? If so, describe
  - a. changes to staffing arrangements, if any, including who made the decisions in relation to the change, when was the decision made and communicated, how was the decision communicated, what was the change and the reasons given for the change;
  - b. changes to student and teaching arrangements, if any; and
  - c. any other relevant management decisions.
  
18. To your knowledge, state whether you were aware of the decision to relocate the BAC School to other location(s). If so,
  - a. on what date, by whom and by what means did you become aware? and
  - b. detail all relevant communications in relation to how you became aware.

Barrett Adolescent Centre Commission of Inquiry

19. To your knowledge, state whether you were aware and/or involved in the process to relocate the BAC School to other location(s). If so,
  - a. on what date, by whom and by what means did you become aware of the process to relocate the BAC School?
  - b. on what date, by whom and by what means did you become involved in the process to relocate the BAC School?
  - c. detail all relevant communications in relation to how you became aware of the process to relocate the BAC School; and
  - d. detail all relevant communications in relation to your involvement in the process to relocate the BAC School.
20. Detail the concerns, if any, you had in relation to the closing of the BAC, including
  - a. if you discussed your concerns with others, on what date and with whom did you discuss your concerns? and
  - b. detail all communications in relation to your discussions under (a) above.
21. Elaborate upon any other information or knowledge (and the source of that knowledge) that you have relevant to the Commission's Term of Reference.
22. Identify and exhibit all documents in your custody or control that are referred to in your witness statement.

"B"

19 JUN 2015



Mrs M Nightingale



Level 10 Sherwood House  
89 Sherwood Road  
Toowong Qld 4066

GPO Box 702  
Brisbane Qld 4001



QCT Identification Number: [Redacted]

Dear Mrs Nightingale

**APPROVAL NOTICE – PERMISSION TO TEACH**

The Queensland College of Teachers (QCT) is pleased to inform you that you have been granted Permission to Teach (PTT) under the *Education (Queensland College of Teachers) Act 2005 (the Act)*.

Under the Act you are considered to be an 'approved teacher' for the period specified in this notice. The parameters and conditions of your PTT are as follows:

**Period of PTT:** 13 July 2015 to 11 December 2015

**School:** Barrett Adolescent Centre

**Subjects to be taught:** 13 July to 31 July 2015

- Mathematics Years 7-12
- Science Years 7-12
- History Years 7-12

**Classes per week:** 27

**Subjects to be taught:** 3 August to 11 December 2015

- Mathematics Years 7-12
- Science Years 7-12
- English Years 7-12
- Art Years 7-12

**Classes per week:** 10

0498 | 51701 | 0514

[www.qct.edu.au](http://www.qct.edu.au)



Enclosed is a certificate of Permission to Teach. From 13 July, your name will appear on the publicly available part of the Register of Teachers, accessible via the QCT website [www.qct.edu.au](http://www.qct.edu.au).

Please note that PTT is not a form of registration. It cannot be used outside the specific timeframe and teaching assignment outlined in this notice. Furthermore, it is an offence under the Act for a person who holds PTT to claim to hold registration.

A priority for the QCT is strengthening ongoing communication with teachers. A **Teacher Services log-in section** is available on our website where you can update your personal details, view your payment history and register your email address.

You are legally required to notify the QCT if:

- there is a change to your criminal history
- you change your name or address
- a qualification used as a basis for you to obtain permission to teach is removed or varied

Information about the legislation and policies governing the QCT is available on the QCT website.

Should you have any queries about the PTT you are welcome to contact Marilyn Cole, Senior Registration Officer, Teacher Registration, by email at [REDACTED] or by telephone on [REDACTED].

Yours sincerely

[REDACTED]  
John Ryan  
Director

[REDACTED]  
Cc to: Deborah Rankin, A/Principal, Barrett Adolescent Centre

Queensland College Of Teachers



# Permission to Teach

Identification # [REDACTED]

Name MARGARET NIGHTINGALE

Period of Permission to Teach 13/07/15 to 11/12/15 \* subject to payment of annual fee

### CONDITIONS OF PERMISSION TO TEACH

School BARRETT ADOLESCENT CENTRE

Subject/s to be taught MATHEMATICS, SCIENCE, HISTORY, ENGLISH, ART

Year Level/s 7-12

Hours per week 27 CLASSES PER WEEK FROM 13 TO 31 JULY  
10 CLASSES PER WEEK FROM 3 AUGUST TO 11 DECEMBER

Other Conditions

The bearer of this Certificate is not a registered teacher. The Permission to Teach enables this person to perform the duties of a teacher for the period shown and under the stated conditions, unless the Permission to Teach is cancelled.

In accordance with the provisions of the Education (Queensland College of Teachers) Act 2005. Issued with no alterations or erasures.

FORM A125/05/V01  
Education (Queensland College of Teachers) Act 2005 Section 61



Mrs M Nightingale



This permission certificate is **NOT** a form of registration and **cannot** be used outside the specific timeframe and teaching assignment outlined on the above certificate.

"C"



**SCHOOL OF NURSING**

**WOLSTON PARK HOSPITAL  
COMPLEX**

**NURSING ACT 1992  
(SECTION 81)**

***CERTIFICATE - PSYCHIATRIC NURSING COURSE***

This is to certify that           Margaret TELFORD           whose signature  
appears hereunder commenced an approved psychiatric nursing course on  
          14 October 1991           and completed such course on           30 April 1995.

She has completed the required theoretical instruction and clinical  
experience and passed all the examinations conducted for the purposes of  
the course.

She is eligible to apply for registration as a nurse and endorsement as a  
Psychiatric Nurse under the Nursing Act 1992.

Dated at Wolston Park Hospital Complex this

          18th           day of           MAY           1995.

[Redacted Signature]

Signature of  
successful student

[Redacted Signature]

Signature of  
Assistant Director of Nursing  
(Education/Staff Development).

*This is a true copy of the original*

*BARRETT  
ADDED 6/15  
D.D. INE. 10 02  
SCHOOL*



**"D"**

**UNIVERSITY OF SOUTHERN QUEENSLAND**

University of Southern Queensland  
 Toowoomba QLD 4350 AUSTRALIA  
 Telephone [REDACTED]  
 www.usq.edu.au

**PROGRAM LOAD**

A normal full-time program load is 8 units for the year or 4 units in a semester.

For further details of program requirements and unit values reference should be made to the USQ Handbook:  
[www.usq.edu.au/handbook/current](http://www.usq.edu.au/handbook/current)

**GRADING INFORMATION**

Correct at the time of printing. For official results legend and glossary, refer to the USQ Policy Library:  
<http://policy.usq.edu.au/portal/custom/detail/assessment>

Final Grade	Code	Description
High Distinction	HD	Students assigned a "High Distinction" grade will, in addition to the passing requirements have demonstrated achievement of all objectives at an extremely high level, or achievement of most objectives at an outstanding level of performance.
Distinction	A	Students assigned a "Distinction" grade will, in addition to the passing requirements have demonstrated either achievement of some objectives at an extremely high level of performance, or achievement of a large number of objectives at a high level of performance. (The code "D" was used in 1973, and "H" from 1967 to 1972.)
Credit	B	Students assigned a "Credit" grade shall have met the passing requirements and will have demonstrated achievement of some objectives at a high level of performance.
Pass	C	Students assigned a "Pass" grade will have demonstrated satisfactory levels of achievement in all objectives designated as essential for passing the course. (The code "P" was used from 1967 to 1973.)
Ungraded Pass	P	Students may be assigned an "Ungraded Pass" in courses in which a satisfactory level of achievement is gained in all objectives but it is impossible or irrelevant to distinguish between levels of performance.
Low Pass or Conceded Pass	LP or D	The code "LP" was used between Semester 2, 2007 and Semester 3, 2009. The code "D" was used prior to Semester 2, 2007 and re-Implemented Semester 1, 2010. The codes "PT", "T" and "Q" were used in the years prior to 1974.)
Satisfactory Progress	SP	A student assigned a grade of "Satisfactory Progress" for a course will have completed all the requirements for that course to allow the student to progress to the next course in a sequence of courses based on research in a postgraduate program.
Pass, Must Repeat Course	PR	Awarded to ELICOS students who had completed a course but needed to repeat it in order to progress to the next level of instruction.
Fail	F	A grade of "Fail" may be awarded when a student has failed to achieve sufficient objectives of the course to be awarded a passing grade. May also have a qualifier (PLW; FNC; FNP; FNS) (The code "N" was used from 1967 to 1972, and "I" without any qualifier was used from 1973 to 1989.)
Temporary Grade	Code	Description
Incomplete	IS	Supplementary examination granted
	IM	Make-up work required
	ISM	Supplementary examination granted, and make-up work required
	IDS	Deferred examination granted
	IDM	Deferred assignment submission granted
	IDB	Deferred examination and deferred assignment submission granted
	IIP	In Progress—Students may be assigned a temporary IIP grade to signify that the final grade for the course is dependent on the assessment of work completed in a sequence of two courses over more than one term.

**OTHER SYMBOLS USED**

- NR No Result Expected
- NA Non Assessable Students
- RW Result Withheld
- RN Result Not Available
- W Withdrawn (will have a qualifier to distinguish without academic and financial penalty or a demerit penalty only)
- E Exemption
- T Transfer

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**IMPORTANT NOTES**

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# Official Academic Transcript



UNIVERSITY OF SOUTHERN QUEENSLAND

Margaret Ellen Nighthale

Bachelor of Education  
Specialisation Primary

COURSE	DESCRIPTION	TERM	UNIT	GRADE	GP
EDC1100	Lifespan Development & Learning	S1, 2012	1.0	T	0.0
EDC1200	Self, Education and Society	S2, 2012	1.0	T	0.0
EDX1170	Foundation Language & Literacy	S1, 2012	1.0	T	0.0
EDX1260	The Arts Curriculum & Pedagogy	S1, 2012	1.0	T	0.0
EDC1400	Perspectives in Education	S2, 2012	1.0	T	0.0
EDX1460	Foundation Curriculum & Pedagogy	S2, 2012	1.0	T	0.0
EDX1460	HPE Curriculum and Pedagogy	S2, 2012	1.0	T	0.0
EDC2100	Manage Supportive Learning Environments	S1, 2013	1.0	T	0.0
EDC2400	Diversity and Pedagogy	S1, 2013	1.0	T	0.0
EDP2111	The Middle Years	S1, 2013	1.0	T	0.0
EDX2260	Teaching Science: Understanding	S1, 2013	1.0	T	0.0
EDC2300	Assessment and Reporting	S2, 2013	1.0	T	0.0
EDX222	Pedagogy and Curriculum 2	S2, 2013	1.0	T	0.0
EDX1280	Foundations of Literacy	S2, 2013	1.0	T	0.0
EDX2170	English Curriculum & Pedagogy	S2, 2013	1.0	T	0.0
EDC2200	Indigenous Perspectives	S2, 2013	1.0	T	0.0
EDC3100	ICT and Pedagogy	S1, 2014	1.0	T	0.0
EDX2100	Aus Hist & Geog Curriculum & Pedagogy	S1, 2014	1.0	T	0.0
EDX3270	Literacies Education	S2, 2014	1.0	T	0.0

Bachelor of Education (Honours)  
Specialisation Primary

COURSE	DESCRIPTION	TERM	UNIT	GRADE	GP
EDC1100	Lifespan Development & Learning	S1, 2015	1.0	HD	7.0
EDC1200	Self, Education and Society	S1, 2015	1.0	HD	7.0
EDC1300	Perspectives in Education	S1, 2015	1.0	HD	7.0
EDC1400	Foundation Curriculum & Pedagogy	S1, 2015	1.0	HD	7.0
EDC2100	Manage Supportive Learning Environments	S1, 2015	1.0	HD	7.0
EDC2300	Assessment and Reporting	S1, 2015	1.0	A	6.0
EDC2400	Diversity and Pedagogy	S1, 2015	1.0	B	5.0
EDC3100	ICT and Pedagogy	S1, 2015	1.0	A	6.0
EDP2111	The Middle Years	S1, 2015	1.0	A	6.0
EDP222	Pedagogy and Curriculum 2	S1, 2015	1.0	A	6.0
EDX1170	Foundation Language & Literacy	S1, 2015	1.0	HD	7.0
EDX1260	The Arts Curriculum & Pedagogy	S1, 2015	1.0	B	5.0
EDX1280	Foundations of Literacy	S1, 2015	1.0	A	6.0
EDX1460	HPE Curriculum and Pedagogy	S1, 2015	1.0	A	6.0
EDX2170	English Curriculum & Pedagogy	S1, 2015	1.0	A	6.0
EDX2100	Aus Hist & Geog Curriculum & Pedagogy	S1, 2015	1.0	HD	7.0
EDX3270	Literacies Education	S1, 2015	1.0	HD	7.0

COURSE	DESCRIPTION	TERM	UNIT	GRADE	GP
EDO4676	Research Approach Contemporary Education	S2, 2014	1.0	HD	7.0
EDP3333	Pedagogy and Curriculum 3	S2, 2014	1.0	A	6.0
EDX3160	Science Curriculum & Pedagogy	S2, 2014	1.0	A	6.0
EDO4551	Honours Project 1	S3, 2014	1.0	IP	0.0
EDX3352	Honours Project 2	S1, 2015	2.0	#	0.0
EDX4130	Technology Curriculum	S1, 2015	1.0	#	0.0
EDP4140	Second Language Learning	S2, 2015	1.0	#	0.0

GPA = 1.0 / 3.0 = 6.4

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## UNIVERSITY OF SOUTHERN QUEENSLAND

University of Southern Queensland  
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NA	Non Assessable Students
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W	Withdrawn (will have a qualifier to distinguish without academic and financial penalty or academic penalty only)
E	Exemption
T	Transfer

## IMPORTANT NOTES

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13-1333

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the original BARRETT.

26/6/15  
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ADOLESCENT SCHOOL

"E"

## Margaret Nightingale – Curriculum Vitae

Mobile: [REDACTED] Email: [REDACTED]

---

### CAREER PROFILE

#### EDUCATION & QUALIFICATIONS

- |                                     |   |
|-------------------------------------|---|
| Feb 2011 – Current                  | <i>University of Southern Qld. – Springfield</i><br><b>Bachelor of Education Honours</b> <ul style="list-style-type: none"> <li>• Due to complete November 2015</li> <li>• Honours research focus is on teaching students with anxiety disorders</li> </ul> |
| Oct 1991 – Nov 1996<br>(Month/Year) | <i>Wolston Park Hospital School of Nursing</i><br><b>Registered Nurse with Psychiatric Endorsement</b>  |
| Current                             | <i>St John Ambulance</i> <ul style="list-style-type: none"> <li>• Provide an emergency first aid response in an education and care setting (HLTAID004)</li> <li>• Provide advanced first aid (HLTAID006)</li> </ul>   |

#### TRAINING/WORKSHOPS/SEMINARS

- Advanced First Aid
- School Wide Positive Behaviour Support
- Child Protection Training
- Critical Incident Debriefing
- Speech and Language Difficulties associated with mental illness

#### WORK EXPERIENCE

- |                     |   |
|---------------------|---|
| July 2015 – Current | Barrett Adolescent Centre School, (Tennyson) QLD<br><b>Teacher</b> <ul style="list-style-type: none"> <li>• Complex Case Management</li> <li>• Facilitation of professional development</li> <li>• Coordinating student referrals</li> </ul>  |
| Mar 2013 - Current  | University of Southern Queensland – Springfield<br><b>Leader Assistant Meet-Up Program (LAMP)</b> <ul style="list-style-type: none"> <li>• Program Quality Assurance</li> <li>• Mentoring Student Leaders</li> <li>• Facilitation of Leader Development Sessions</li> </ul>                 |
| July 2012 - Current | University of Southern Queensland – Springfield<br><b>Meet-Up Leader</b> <ul style="list-style-type: none"> <li>• Facilitating Collaborative Learning Activities</li> <li>• Providing advice and support to novice students</li> <li>• Academic writing support to EALD students</li> </ul> |

- June 2010 - Current Barrett Adolescent Centre School, (Wacol, Yeronga, Tennyson) QLD  
**Teacher Aide**
- Supporting students with living and social skills
  - Supporting students in on campus classes and outreach programs
- March 2010 - Current Forest Lake State School P&C Association  
**President (volunteer position)**
- Licensee for Outside School Hours Care (OSHC) Service
  - Responsible for the management of 25 employees and business activities in accordance with legislation
  - Provide leadership to the organisation and recommendations to the school administration
  - Oversee the management of activities of association, including business hubs of tuck-shop, uniform shop and OSHC
- 1995 - 1996 Barrett Adolescent Centre – Wolston Park Hospital  
**Registered Nurse**
- R.N. in an Inpatient Adolescent unit.
  - Case management, Family Therapy,
  - Planning and facilitating groups therapy, and living skills groups and activities
- 1996 - 1998 Barrett Adolescent Centre – Wolston Park Hospital  
**Clinical Nurse – Community Liaison Person**
- Intake assessment
  - Management of referrals and admissions
  - Liaison with multiple stakeholders such as external health and community agencies, families, schools, governmental departments and Non-Government Organisations.

**SPECIAL SKILLS/ABILITIES****Communication and Interpersonal skills**

- Ability to establish a good rapport with young people, through establishing supportive relationships with students within the classroom environment.
- Well developed communication skills and an ability to communicate effectively with various stakeholder groups.
- Provision of professional development sessions and workshops.
- Successful outcomes of grant applications

**Planning and Organisational skills**

- Strong organisational and planning skills, at individual through to complex event and organisation levels.
- Ability to coordinate a classroom of children, with particular skills in behaviour management strategies and differentiation.

**Technology skills**

- Proficient in: Microsoft Office (Word, Excel, Power-point and Publisher), Internet, E-mail and Online learning environments.

"F"

Metropolitan Region (Ipswich Office)  
Tower Central 214 Brisbane Street Ipswich 4305  
Private Mail Bag 2 Ipswich Queensland 4305 Australia  
Telephone [REDACTED] Website www.education.qld.gov.au



**Queensland Government**  
Department of Education and Training

Reference: [REDACTED]

18 February 2011

**Copy For**

Principal  
Barrett Adolescent Centre Special School  
The Park - Centre for Mental Health  
Locked Bag 500  
SUMNER PARK QLD 4074

Mrs Margaret Ellen Nightingale  
Barrett Adolescent Centre Special School  
The Park - Centre for Mental Health  
Locked Bag 500  
SUMNER PARK QLD 4074

Through the Principal

Dear Mrs Nightingale

Welcome to the Department of Education and Training. You have been appointed to Barrett Adolescent Centre Special School as a temporary part-time Teacher Aide, to commence duty on 7 February 2011. Unless otherwise advised this engagement will cease on 27 April 2011. Your hours of duty will be 24 hours per fortnight.

Barrett Adolescent Centre Special School is located at Orford Drive, Wacol, Phone [REDACTED] Fax [REDACTED]. If you require any clarification or advice with regard to your appointment please contact the Principal, at the above address, or this office.

Your general conditions of employment are detailed in the 'Conditions of Employment' which are available on the intranet at *DET services>Human resources>Awards and agreements>Conditions of employment*.

Confirmation of your salary classification will appear on your fortnightly pay advice. In order to ensure the prompt payment of your salary, please arrange with your Principal to complete a Commencement Advice Form on your first day of duty.

Due to the nature of your appointment I confirm that you are not eligible to claim reimbursement of your appointment expenses.



I trust you find your role with the Department of Education and Training to be fulfilling and enjoyable.

Yours sincerely



Regional HR Manager

CC Principal, Corinda State School

2018



RE: Barrett School - NIGHTINGALE, Margaret [REDACTED]

Page 1 of 2

RE: Barrett School

Greg Fowler [REDACTED]

Fri 20/02/2015 2:56 PM

To: NIGHTINGALE, Margaret [REDACTED]

Thanks Margie. I will progress. Greg

**From:** Margaret NIGHTINGALE [REDACTED]

**Sent:** Friday, 20 February 2015 2:45 PM

**To:** Greg Fowler

**Cc:** Deborah RANKIN

**Subject:** Barrett School

Hi Greg, As discussed I have included below some of our thoughts.

As a result of the closure of BAC the school has been operating in an adjusted manner as a greater metro region educational service supporting disengaged students with mental illness to transition to school or vocational pathways. At present we are supporting students who are enrolled in other schools. There is an obvious need for a service such as this to support students who have a mental health diagnosis for who mainstream schooling is inappropriate or have disengaged from mainstream schools.

It is hoped that the BAC school will be able to continue to support externally enrolled students and to receive applications for support through senior guidance officers. Applications are assessed by the support team to determine suitability of fit with our criteria which includes the requirement for students to have a mental health diagnosis and to be receiving treatment from a mental health practitioner.

We appreciate the commitment of the Labor government to the rebuilding of a tier 3 facility with integrated school and the continuation of the Barrett School. It is recognised that interim measures will need to be considered.

As you are aware, there have been significant challenges as a result of the closure of BAC, the possibility of the closure of the school, the frequent moves and changes to our service. Our team has discussed and highlighted a number of specific issues that could be addressed to assist with our provision of service in the interim period.

Ideally, the co-location of mental health staff (OT, Psychologist, Consultant Psychiatrist, Mental Health Nurse) on site to support students through the provision of a day patient/outpatient type program would be of great assistance to the students and the school enabling complex case management to occur seamlessly. There is existing space on site for this to occur.

Other than this, it is hoped that the following could be provided:

- Wireless internet connection

<https://outlook.office365.com/owa/>

18/09/2015



RE: Barrett School - NIGHTINGALE, Margaret 

Page 2 of 2

- \* Budget for a replacement/upgrade to the school vehicle that has been written off due to hail damage. We require a 6 seater vehicle as we no longer have access to the hospital vehicle pool (as at the Park). The payout figure offered for the existing vehicle is around \$17000. This vehicle is a necessity as teaching staff are visiting and transporting the majority of our supported students on a daily basis.
- \* A visiting (or fulltime OT)
- \* For the school to continue to operate as a stand-alone school with its own budget, principal and teaching/administrative staff.

BAC school is overseen by Jenny Hart- Principal Supervisor, Statewide Special Schools, reporting to Matthew Johnson, the new ARD, Statewide Special Schools. Mark Camppling is the Regional Director.

We look forward to further consultation with you and appreciated your continued support and interest.

Kind regards,

Margie Nightingale

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"H"

MEETING WITH QLD HEALTH FRIDAY 09.11.12

>>> WM TeamConnect 9/11/2012 2:40 pm >>>

Yesterday there were several media articles that appeared in relation to the future of the Barrett Adolescent Service that have caused some anxiety among staff at the centre.

On Friday 9 November I along with the Chief Executive, Lesley Dwyer met with the majority of staff at the Barrett Adolescent Service to correct this misreported information and ensure all staff are given detailed and factual information about any proposed organisational change in adolescent mental health services.

Given the current speculation and in the interests of our staff, patients and their families I am keen to inform you about the present thinking in relation to the future of adolescent services at The Park.

1. I can confirm that high level discussions have been taking place in regards to the future of Barrett Adolescent Services in the context of the 'Redlands option' no longer being available.
2. Any decision will take into account that the role and structure of The Park facility is that of an adult forensic service, and have regard to concerns held by some stakeholders regarding the co-location of adolescent services and adult forensic/secure services.
3. The West Moreton Hospital and Health Service supports the national reform agenda to ensure young people are treated closer to their homes in the least restrictive environment, and with minimum possible disruption to their families, educational, social and community networks. As all of you would be aware, the National Mental Health Service Planning Framework clearly recommends community-based and non-acute care settings for the care of mental health consumers, particularly young people.

We gave a commitment to staff today to ensure that as soon as information becomes available they will be kept up-to-date. Staff have access to Employee Assistance Program (EAP) and I encourage any staff who require this assistance to call [REDACTED]

Meetings will now be arranged with the System Manager, other Hospital and Health Services and key experts to discuss options. Staff will have the opportunity to be involved and we welcome input during this process.

Staff and unions will be advised directly and in detail about whatever direction our services will take in the future. Once any decision is made I am committed to consultation about the implementation of any organisational change, particularly in regard to minimising the impact of any change on staff.

As always staff are welcome at any time to bring forward all suggestions and ask questions. I would ask you speak to your line manager in the first instance or alternatively you can email [REDACTED]

Kind Regards

Sharon Kelly  
*Executive Director Mental Health and Specialised Services*

"P"

08.11.12 ABC RANG AT 2.30PM TO ASK THE PRINCIPAL TO COMMENT ON THE CLOSURE OF BARRETT

EMAIL RECEIVED FROM ABC REPORTER 08.11.12 at 8.50pm

Hi Kev,

Please find the statement from the West Moreton Hospital and Health Service below.

Could you please ask the Director to call me if they want to speak about the issue tonight?  
I'm on [REDACTED]

Kind regards,  
Stephanie Small

STATEMENT: No decision has been made about the future of the Barrett Adolescent Centre at The Park Centre for Mental Health.

The transfer of the care of adolescent mental health patients to other facilities in south east Queensland is an option being considered by the West Moreton Hospital and Health Service Board. There is capacity in other facilities for these patients to be cared for through a community model.

The Board will take into account the following factors:

- The role and structure of The Park facility in that it is mainly an adult service.
- There are concerns about the co-location of Barrett Centre for adolescents with the secure services delivered by The Park.
- We support the national reform agenda to ensure young people are treated as close to their homes as possible, in the least restrictive environment, and with the minimum possible disruption to their families, educational, social and community networks.
- The National Mental Health Service Planning Framework clearly recommends treatment in community-based and non-acute care settings for mental health patients, particularly young ones.

Stephanie Small  
Journalist, ABC News

P  
M

F

Enquiries to: Chief Executive Officer  
Telephone: [REDACTED]  
Facsimile: [REDACTED]  
Our Ref: 1112 BAC

LETTER FROM EXECUTIVE DIRECTOR HEALTH TO PARENTS

Name  
Address  
Town QLD pc

Dear Mr / Mrs /Ms

West Moreton Hospital and Health Service, in partnership with the Mental Health Branch, Queensland Health have commenced discussions with key experts, other health services and staff regarding the future model of adolescent mental health care in Queensland.

A new Barrett Adolescent Centre that was to be built at Redlands as part of the Statewide Mental Health Plan is no longer an option and the current condition of the Barrett Adolescent Centre building at The Park – Centre for Mental Health is no longer fit for purpose.

The Park - Centre for Mental Health in accordance with the Statewide Mental Health Plan is to become an adult high forensic centre. It will no longer be appropriate to have young teenagers in a facility that was purpose built for adults in a medium to high security setting.

In light of the centre at Redlands no longer being built we have now commenced reviewing the model of mental health care for young people in Queensland. We need to ensure that it is aligned to expert clinical opinion and research to ensure the future care provides the best available outcomes young people.

The West Moreton Hospital and Health Service supports the national reform agenda to ensure young people are treated closer to their homes in the least restrictive environment, and with minimum possible disruption to their families, educational, social and community networks. The National Mental Health Service Planning Framework clearly recommends community-based and non-acute care settings for the care of mental health consumers, particularly young people.

It was always our intention to ensure that discussions about the future model of adolescent mental health included our clinicians, patients and their families. Unfortunately information and concerns were raised with the media before thorough planning and consultation could commence.

I understand you have been advised by staff from our service of the current status of discussions and this letter is to formally acknowledge your concerns and to inform you that no decision has been made on the future of the Barrett Adolescent Centre. The care plan your child is currently on, is the care plan they will continue on.

This is a complex issue and one which will require wider consultation before a way forward is found. As the family of one of the adolescents currently receiving care, I will ensure you are kept up to date as information becomes available.

Should you require any further information in relation to this matter, I encourage you to contact Dr Trevor Sadler, Clinical Services Director, Barrett Adolescent Centre, on telephone [REDACTED] who will be able to assist with any questions you may have.

Yours sincerely



**Lesley Dwyer**  
**Chief Executive**  
**West Moreton Hospital and Health Service**

12 / 11 / 2012

