

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

AFFIDAVIT



Ingrid Adamson of Children’s Health Queensland Hospital and Health Service, Project Manager, solemnly and sincerely affirms and declares:

Background

1. I am employed as a Project Manager, Child and Youth Mental Health Service (Project Manager) with Children’s Health Queensland Hospital and Health Service (Children’s Health Queensland). My Resume outlines my formal qualifications and career summary. **Exhibit A** to this affidavit is a copy of my current resume.


2. I am a graduate member of the Australian Institute of Company Directors.

3. I was approached and encouraged to apply to the position of Project Manager, Child and Youth Mental Health Service. I believe this occurred in August 2013. I recall attending an interview for the position with Dr Stephen Stathis, Clinical Director and Deborah Miller, Acting Executive Director of the Office of Strategy Management of Children’s Health Queensland on 26 August 2013. I recall I also briefly met Dr Peter Steer, Health Service Chief Executive, during this interview.

Deponent  ¹ 

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On behalf of the State of Queensland

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4. I commenced my role as Project Manager in September 2013. I was appointed to the role on 9 September 2013 and I continue to be employed on a contractual basis, currently until 30 June 2016. **Exhibit B** to this affidavit is a copy of my letter of appointment and movement forms relating to my employment as Project Manager.
5. Although my role officially commenced on 9 September 2013, I participated in a site visit to Logan Hospital, as part of my duties in this position, on 30 August 2013.
6. There has never been any defined document which outlines the duties and role description for the position of Project Manager. The role and its associated duties and responsibilities have been organic in that the role has been evolving since my commencement in September 2013. My role is largely dependent on the needs of the Child and Youth Mental Health Service and the projects I manage. I have created a list of the key responsibilities and duties I have performed since commencing the role. These key responsibilities and duties include:
 - (a) Project Management – project planning and reporting; communications plan; risk and issue management;
 - (b) Financial Management- managing the project budget and service budget post service establishment;
 - (c) Secretariat for the Chief Executive and Department of Health Oversight Committee, Adolescent Mental Health Extended Treatment Initiative Steering Committee (previously Statewide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee); Service Options Working Group, and the Youth Resi Governance Panel (previously Young Person Extended Treatment and Rehabilitation Initiative);

- (d) Interface between Children's Health Queensland and West Moreton Hospital and Health Service (West Moreton) - including receipt of update reports and collaboration on correspondence;
- (e) Service Options Development – Continuum of Care concept; models of service for each service element; referral processes, etc. culminating in a Service Business Case;
- (f) Service establishment for Assertive Mobile Youth Outreach Services (AMYOS), Day Program North, Youth Resis, and Sub-acute Beds, including service agreements, tender preparation, recruitment documentation, site fit out planning and preparation for the Day Program, etc;
- (g) Service evaluation – development of Key Performance Indicators, progress reporting, and overseeing service evaluation framework development;
- (h) Initiate and maintain relationships with and between key internal and external stakeholders;
- (i) Preparation of all correspondence, ministerial and departmental briefs, estimates briefs, and executive and board reporting in regard to Adolescent Mental Health Extended Treatment Initiative;
- (j) Assist with the opening of the Mental Health Inpatient Unit at the Lady Cilento Children's Hospital, with a specific focus on risk and issue management;
- (k) Assist with the relocation of Child and Youth Mental Health Service (CYMHS) from fit out of new premises through to relocation of staff; and

- (l) Other activities as directed.
7. The above key responsibilities and duties were developed through discussion with my direct manager, Deborah Miller, Acting Executive Director of the Office of Strategy Management, (and then Judi Krause, Divisional Director Child and Youth Mental Health Service from 28 July 2014) and through responding to the practical needs of implementing the Project Plan created by myself and endorsed by the Statewide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee (the Steering Committee). **Exhibit C** to this affidavit is a copy of the Statewide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Project (the Project) Plan and Communication Plan.
8. I recall attending a site visit to the Logan Hospital with Dr Stephen Stathis, Dr Leanne Geppert, Dr Trevor Sadler and Kevin Rodgers on 30 August 2013. I recall providing an email report of this site visit to Dr Peter Steer and Deborah Miller. **Exhibit D** to this affidavit is a copy of my email report dated 30 August 2013.

My role and involvement with respect to the Barrett Adolescent Centre

9. I had no direct involvement with the Barrett Adolescent Centre. From the commencement of my role in September 2013, I was kept informed about the Barrett Adolescent Centre operations, pending future closure, and details regarding the transition of patients. This was facilitated through my discussions with the West Moreton key contact Dr Leanne Geppert and regular updates as a member of the Steering Committee.

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10. As the Project Manager for the Project, I understood my role was to focus on the development of future services, and Dr Leanne Geppert's role was to manage the closure of the Barrett Adolescent Centre and the transition of patients.
11. I was in frequent contact with Dr Leanne Geppert as she was the key contact from West Moreton. She would provide me with updates on the Barrett Adolescent Centre and the transfer of patients, and I would in turn provide her with information as to the issues and decisions being made by Children's Health Queensland with regard to the development of future services. These communications were in addition to our meetings and discussions as members of the Steering Committee.
12. Initially, one off funding of \$300,000.00 was provided by the Mental Health Alcohol and Other Drugs Branch of the Queensland Department of Health to fund three Project officer positions, two positions at Children's Health Queensland and one position at West Moreton. The two project officer positions at Children's Health Queensland were combined to fund the Project Manager position to which I was appointed and 0.4 FTE of a psychiatrist position for 2 months, filled by Dr Stephen Stathis. Laura Johnson was appointed to the position of Project Officer at West Moreton. Details of this arrangement are outlined in the Statewide Adolescent Extended Treatment and Rehabilitation Project Plan, developed by West Moreton, and an email to the Queensland Department of Health. **Exhibit E** to this affidavit is a copy of the Adolescent Extended Treatment and Rehabilitation Project Plan and an email to the Queensland Department of Health.
13. When I commenced my role, the Steering Committee had already held one meeting. I first attended a meeting of the Steering Committee on 9 September 2013. Copies of the

Steering Committee minutes and papers, and my personal working notes are **Exhibit F** to this affidavit.

14. Upon attending this meeting, I undertook the role of preparing the minutes of meetings and creating other reporting documents for the Steering Committee to consider.
15. I maintained a Risk Register and created Project Status Reports to keep the Steering Committee informed of the issues arising resulting from the implementation of the Project. The Risk Register and Project Status Reports were created from the information I obtained through exercising my duties as Project Manager and from consultations with interested parties and stakeholders. The Risk Register and Project Status Reports were standing items on the Steering Committee agenda and were discussed on an as required basis at Steering Committee meetings. **Exhibit G** to this affidavit is a copy of the completed Risk Register. **Exhibit H** to this affidavit is a copy of the Project Status Reports.

The Closure Decision

16. I had no involvement in the decision to close the Barrett Adolescent Centre.
17. I commenced my role as Project Manager after the decision to close the Barrett Adolescent Centre had been made. I do not know who made the decision to close the Barrett Adolescent Centre.
18. I cannot recall the date I was made aware of the decision to close the Barrett Adolescent Centre. I was not aware that the Barrett Adolescent Centre existed before being approached to consider the Project Manager position in August 2013. I believe I became aware of the decision to close the Barrett Adolescent Centre through copies of

21. I did not hold any concerns regarding the decision to close the Barrett Adolescent Centre.
22. I was not consulted prior to hearing the decision to close the Barrett Adolescent Centre.
23. I did not facilitate or attend any meetings regarding the closure of the Barrett Adolescent Centre as the decision to close was made before the commencement of my role.
24. I was not involved in any decision regarding the date for the closure of the Barrett Adolescent Centre. I believe this decision was a clinical decision driven by the clinical treating team of the Barrett Adolescent Centre patients.
25. As Project Manager, I was generally kept informed of the impending closure of the Barrett Adolescent Centre and transition arrangements for patients.
26. I cannot recall the exact date I was made aware of the decision that the closure date would be January 2014. I believe I would have been made aware of this information from my frequent communications with Dr Leanne Geppert. I may have received this information by email. I do not currently have access to the GroupWise emails I sent and received at that time.
27. I cannot recall specific conversations but I believe I was informed by Dr Leanne Geppert that West Moreton was receiving increasing requests from the parents of patients at the Barrett Adolescent Centre to confirm a date that the doors of the Barrett Adolescent Centre would be shutting and when their children would be transitioned. Dr Leanne Geppert communicated this to the Steering Committee at a meeting on 9 October 2013 and this is documented in the meeting minutes in **Exhibit F** to this affidavit.

28. I believe West Moreton made a decision to set the January closure date to provide some level of certainty for patients and their families. At that point, there were only a very small number of patients remaining at the Barrett Adolescent Centre.
29. I believe the closure date for the Barrett Adolescent Centre was also influenced by the Minister for Health statement in August 2013 that the Barrett Adolescent Centre would be closed in “early 2014.”
30. In October 2013, I edited a memo to the Mental Health Clinical Clusters with the contact details for Children’s Health Queensland. This memo was developed by West Moreton to communicate that they were working toward closing the Barrett Adolescent Centre at the end of January 2013. A copy of this memo is at **Exhibit L** to this affidavit.
31. I recall West Moreton provided the Steering Committee with Barrett Adolescent Centre update reports and that by 18 November 2013 there were only 4 patients that remained at the Barrett Adolescent Centre. In **Exhibit M** to this affidavit are copies of the West Moreton update reports provided to the Steering Committee.
32. By the end of December 2013, most of the patients had been discharged into other care arrangements and only 3 patients remained, two of whom had transition plans in place. One patient was being transferred to a new facility in Townsville, being a service which had not yet officially opened. This delayed this particular patient’s transition progression. The last patient’s transition plans were delayed due to difficulties securing accommodation through the Department of Communities and Disability Services.
33. I recall it was the view of the West Moreton treating clinicians that it was not clinically or therapeutically appropriate to keep the Barrett Adolescent Centre open for one patient. At that time, I believe high level negotiations between the Queensland

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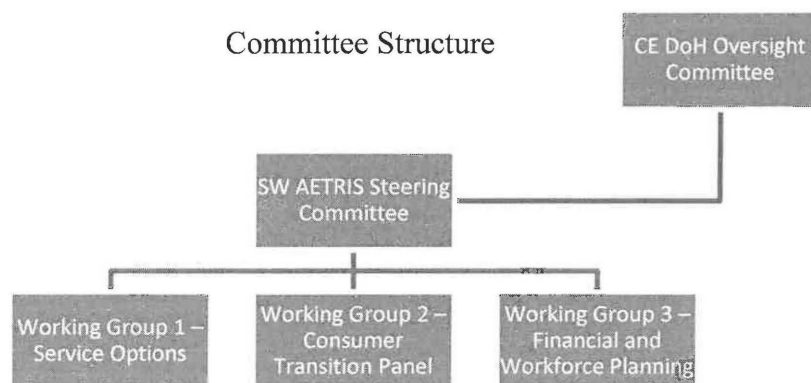
Department of Health and the Queensland Department of Communities and Disability Services, through the Chief Executive and Department of Health Oversight Committee (the Oversight Committee), facilitated the transition of the final patient. This is noted in the Oversight Committee meeting minutes dated 22 January 2014. In **Exhibit N** to this affidavit are copies of the Terms of Reference, minutes and papers of the Oversight Committee's meetings.

34. I had no concerns regarding the January 2014 closure date.
35. Based on the information that was being provided to me, I understood that the closure date of the Barrett Adolescent Centre was always dependent upon finding suitable care for the Barrett Adolescent Centre patients. I understood that the closure date in January 2014 was not an arbitrary set date that had to be adhered to.

BAC Consumer Meeting

36. I recall attending a meeting held at 8:45am on 18 December 2013 ("the BAC Consumer Meeting"). **Exhibit O** to this affidavit is a copy of the minutes of that meeting.
37. I have no independent recollection of the discussions that occurred during that meeting and would rely on the content of the minutes to reflect the discussion of that meeting. I did not keep my own notes or a record of this meeting. The "BAC Consumer Meeting" was run by West Moreton.
38. I was routinely invited to meetings as part of my role as Project Manager so that I could remain abreast of transition arrangement progression, risks and issues.

- 39. The transition of patients had already commenced and over 50% of the Barrett Adolescent Centre patients had been transitioned at the time of the BAC Consumer Meeting on the 18 December 2013.
- 40. I disagree with the assertion that “it is not safe to commence transitions at the end of January 2014” and that “a closure date had to be set but was not set on clinical need.”
- 41. This assertion is not captured in the minutes of the meeting and does not reflect my recollection of my interactions with West Moreton regarding the transition of patients.
- 42. The Steering Committee had approved the creation of the following Working Groups:
 - (a) The Service Options Implementation Working Group. **Exhibit P** to this affidavit is a copy of this Working Groups Terms of Reference.
 - (b) The Barrett Adolescent Centre Consumer Transition Panel. **Exhibit Q** to this affidavit is a copy of this Working Groups Terms of Reference.
 - (c) The Financial and Workforce Planning Working Group. **Exhibit R** to this affidavit is a copy of this Working Groups Terms of Reference, minutes of meetings, papers and my personal notes.



43. The Barrett Adolescent Centre Consumer Transition Panel was created to ensure the continuity of care for adolescents admitted to the Barrett Adolescent Centre, and support their transition to the most appropriate care option/s that suited their individual needs. I drafted the Terms of Reference for the Barrett Adolescent Centre Consumer Transition Panel.
44. I never attended any meetings of the Barrett Adolescent Centre Consumer Transition Panel. I recall being informed that West Moreton wanted to retain the clinical governance of the Barrett Adolescent Centre closure and transition arrangements of the patients. I recall the Steering Committee agreed with that course of action. This is reflected in the minutes of the meeting dated 23 September 2013 in **Exhibit F** to this affidavit. I also communicated this information to the Panel membership in an email dated 27 September 2013. This email is contained in **Exhibit Q** to this affidavit.
45. West Moreton renamed the Barrett Adolescent Centre Consumer Transition Panel to the Clinical Care Transition Panel, which I understand was comprised of treating clinicians of the Barrett Adolescent Centre patients. This panel managed the individual patient's transition planning and implementation. I was not a member of the Clinical Care Transition Panel and did not attend their meetings.
46. To assist the Clinical Care Transition Panel on complex cases, West Moreton also established a Complex Care Review Panel. **Exhibit S** is a copy of the Complex Care Review Panel Terms of Reference.
47. I was provided with frequent updates by Dr Leanne Geppert as to how patient transition plans were progressing and the concerns of transition patient families. The Steering

Committee was also provided with updates from West Moreton regarding the progression of transition arrangements. These reports are provided at **Exhibit M** above.

48. The information I received from Dr Leanne Geppert never indicated to me that it was not safe to transition patients. I understood that the transition of patients was progressing based on the individual patient's clinical needs.

Tier 3 Services

49. I held no concerns regarding the decision to close the Barrett Adolescent Centre without a replacement "Tier 3" service in place because there were two sub-acute beds available at the Mater Hospital.
50. I understand, through my communications with Dr Leanne Geppert and as a member of the Steering Committee, that no Barrett Adolescent Centre patient required the services, described as "Tier 3" in the Expert Clinical Reference Group recommendations, upon the closure of the Barrett Adolescent Centre.
51. From my own research and consultation with members of the Steering Committee, I was not able to find any evidence of a tiered system that categorised tiered services in Australia.
52. The term "Tier 3" is not a recognised system for categorising services in Australia.
53. I am aware of a tiered system used in England but that system does not reflect the tiered categories of services identified by the Expert Clinical Reference Group recommendations.

54. When planning transition and new services, the decision was made to establish sub-acute beds at the Mater Hospital and later at the Lady Cilento Children's Hospital. This was the equivalent of the services the Expert Clinical Reference Group identified as 'Tier 3.' Documents outlining the arrangements with the Mater are provided at **Exhibit T** to this affidavit.

Barrett Adolescent Centre Education Program

55. I had no involvement with the cessation of the Barrett Adolescent Centre education program. I did on occasion have meetings with representatives from the Department of Education in regard to the new continuum of care and integration of education services into the new service elements.
56. I recall at some stage the Steering Committee considered whether a representative from the Department of Education should be included as a member of the Steering Committee. This did not eventuate as we were having regular update meetings with Department of Education representatives. These discussions are captured in the Steering Committee meeting minutes dated 9 September 2013 and 23 September 2013 in **Exhibit F** to this affidavit.
57. **Exhibit U** to this affidavit is a collection of communications with Department of Education representatives within my possession.

Save the Barrett

58. I received a number of emails that had been created by the 'Save the Barrett' community group. I initially signed an online petition and provided my personal email address but never received any 'Save the Barrett' emails directly from that group.

59. A personal friend of mine received emails from the “Save the Barrett” group. This personal friend was aware of my role as Project Manager and forwarded me a copy of a “Save the Barrett” email.
60. I asked this friend to continue to forward any “Save the Barrett” emails they received to my personal email account. I would then forward on the “Save the Barrett” emails to others who had an interest in the ‘Save the Barrett’ community group, including Dr Stephen Stathis, Judi Krause, Deborah Miller, and Dr Leanne Geppert. **Exhibit V** is copies of the ‘Save the Barrett’ emails in my possession.
61. I did not attend any meetings with the ‘Save the Barrett’ group.
62. I did attend meetings and presentations with families of the Barrett Adolescent Centre patients on 4 November 2013, 7 November 2013 and 11 December 2013.
63. The Steering Committee authorised me to arrange for families of Barrett Adolescent Centre patients to provide a presentation to the Steering Committee on 4 November 2013. The purpose of this presentation was to provide the families with the opportunity to engage with the Steering Committee and for the Steering Committee to obtain a ‘family perspective’ to assist with the development of improved mental health service options for adolescents. **Exhibit W** is a copy of the documents relating to the presentation to the Steering Committee from parents that occurred on 4 November 2013.
64. I was involved in another meeting with two parents of Barrett Adolescent Centre patients on 7 November 2013. Also in attendance at this meeting were Dr Peter Steer and Dr Stephen Stathis. The purpose of this meeting was to provide an opportunity for these parents to raise concerns with Dr Peter Steer. Included in **Exhibit W** above is a

copy of typed notes I made as a result of that meeting, titled “File Note_Details of Parent Meetings”. I had originally made handwritten notes at the time of the meeting; however, those handwritten notes have now been destroyed. The typed notes provided were transcribed by me from my hand written notes.

65. I was involved in organising a presentation to Barrett Adolescent Centre patient families on 11 December 2013. This presentation was hosted by West Moreton. The purpose of this presentation was to inform families of the new and enhanced services being established by Children’s Health Queensland.
66. I created a PowerPoint presentation for Dr Stephen Stathis to present. I recall Dr Leanne Geppert also made a PowerPoint presentation delivered to the families on behalf of West Moreton. **Exhibit X** to this affidavit is a copy of the PowerPoint presentations provided to the parents on 11 December 2013.

Transition Arrangements

67. I had no involvement in developing, managing and implementing transition plans for Barrett Adolescent Centre patients who transitioned to alternative care arrangements in association with the closure of the Barrett Adolescent Centre.
68. The development, management and implementation of patient transition plans were performed by the clinicians at West Moreton. West Moreton would provide frequent “BAC updates” to the Steering Committee. I was also given frequent updates by Dr Leanne Geppert.
69. I was responsible for managing the budget received from Queensland Health to fund transition arrangements. **Exhibit Y** to this affidavit is a copy of the emails and

documents in my control relating to Barrett Adolescent Centre patients' transition plans not otherwise exhibited to this affidavit.

70. I was also responsible for managing the budget Children's Health Queensland received to establish new services. This funding was originally the balance of the operating budget for the Barrett Adolescent Centre for the 2013/2014 financial year. As the Project Manager, I kept spreadsheets of the funding allocations and copies of these are in **Exhibit Z** of this affidavit. Exhibit Z also includes email correspondence relating to the management of those funds.
71. I did not have an active role in identifying, developing, managing and implementing arrangements for adolescents on the Barrett Adolescent Centre waiting list who would otherwise have been admitted to the Barrett Adolescent Centre.
72. I recall West Moreton retained clinical governance with regard to the Barrett Adolescent Centre waitlist patients.
73. I do recall being part of a telephone conversation where waitlist patients were being discussed. I recall Dr Stephen Stathis, Dr Leanne Geppert and Dr Anne Brennan were also parties to that telephone conversation. I recall a spreadsheet was created which captured the content of this telephone conversation.
74. I believe there was a second telephone conversation relating to Barrett Adolescent Centre waitlist patients that I was not involved in. I received an updated version of the spreadsheet in an email. I am not the author of that spreadsheet and believe that it was created and maintained by West Moreton. **Exhibit ZA** to this affidavit is a copy of the emails, documents and spreadsheets in my control relating to Barrett Adolescent Centre waitlist patients.



Committees, Groups and Panels*State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee*

75. As explained in paragraph 6, my role as Project Manager included being the secretariat of the Steering Committee. The Purpose of the Steering Committee is outlined in its Terms of Reference (**Exhibit F**). My role as a member of the Steering Committee included taking the minutes of the meetings and reporting to the Steering Committee on the project status in terms of risk, issues and timeframes.
76. The official name of the Steering Committee was renamed by the Children's Health Queensland Board Chair in January 2014. It changed from being the Statewide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee to the Adolescent Mental Health Extended Treatment Initiative Steering Committee.
77. The Steering Committee was not involved in any decisions in regard to the closure of the Barrett Adolescent Centre. The Steering Committee did however provide guidance with respect to mental health service planning, models of care, staffing transitions, financial management, and consumer transition associated with the Project. **Exhibit F** to this affidavit is copies of the minutes and papers of the Steering Committee meetings.
78. As discussed at paragraph 63 of this affidavit, parents of Barrett Adolescent Centre patients were invited to make a presentation to the Steering Committee on 4 November 2013.