

*Oaths Act 1867*

## Statutory Declaration

I, **Pamela Lane** of c/- Corrs Chambers Westgarth, Level 42 One One One, 111 Creek Street, Brisbane, Queensland, in the state of Queensland retired, do solemnly and sincerely declare that:

**1 What are Ms Lane's current professional role/s, qualifications and memberships?  
Please provide a copy of Ms Lane's most recent and current Curriculum Vitae.**

- 1.1 I am retired.
- 1.2 Attached and marked **PL-1** is a copy of my most recent and current curriculum vitae.
- 1.3 My roles, qualifications and memberships are outlined in my curriculum vitae.

**2 We understand that Ms Lane was Ms Lesley Dwyer's predecessor (with the then title of Regional General Manager, West Moreton Health Service District):**

**(a) How long did Ms Lane hold this position?**

- 2.1 I was Ms Lesley Dwyer's predecessor but never held the position of Regional General Manager, West Moreton Health Service District.
- 2.2 I held five positions:
- (a) From 1999 to February 2000, I held the position of Acting District Manager of the West Moreton Health Service District;
  - (b) From March 2000 to January 2007, I held the position of District Manager West Moreton Health Service District;
  - (c) From February 2007 to November 2008, I held the position of District Manager West Moreton South Burnett Health Service District;
  - (d) From December 2008 to 30 June 2011, I held the position of District Chief Executive Officer of the Darling Downs-West Moreton Health Service District; and

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- (e) From July 2011 until 30 June 2012, I held the position of District Chief Executive Officer, West Moreton Health Service District.

**(b) What were Ms Lane's key responsibilities in this role?**

- 2.3 My key responsibilities in the role of District Chief Executive Officer, Darling Downs-West Moreton Health Service District are set out in the position description for the period November 2008 to June 2011, which is marked as Attachment **PL-2**.

**(c) When and why did the title change to Chief Executive?**

- 2.4 In 2005, Queensland Health (**QH**) was restructured from thirty eight health districts to twenty. From September 2008, the twenty health service districts were further reduced to fifteen. The Toowoomba Darling Downs Health Service District was amalgamated with West Moreton South Burnett Health Service District to become Darling Downs-West Moreton Health Service District.
- 2.5 This resulted in various title changes though I cannot recall the specific reason why these title changes occurred. I understood it was just part of the structural changes and may have reflected a change in only the title of the role.
- 2.6 I was required to reapply for my position at the time. The previous position of District Manager of the Toowoomba Darling Downs Health Service District (held by Ms Michelle McKay at the time) was dissolved and I commenced as Acting District Chief Executive Officer from Monday 8 September 2008.
- 2.7 A copy of an email that was sent by Ms McKay and I to the former District advising it of the update is marked as Attachment **PL-3**.
- 2.8 After the restructures, I was formally appointed in the role of District Chief Executive, Darling Downs-West Moreton Health Service District.

**3 Provide information relating to the operation and management of the BAC between Ms Lane's initial appointment as Regional General Manager and her retirement in 2012, including:**

- 3.1 I was never appointed as Regional General Manager, my appointments are set out above.

**(a) Ms Lane's knowledge of any future plans for the BAC;**

- 3.2 I was aware, from not long after I was appointed in 1999, that BAC was intended to have been closed at least by 1999 in line with the *Ten Year Mental Health Strategy for Queensland* released by QH, in 1996 (**1996 Strategy**) by the then Minister for Health, Mike Horan.
- 3.3 A copy of the 1996 Strategy is marked as Attachment **PL-4**.
- 3.4 There was strong community and staff reaction to the intention to close BAC and the centre did not close.
- 3.5 Whilst the intention to close BAC is not expressly stated within the 1996 Strategy, the Strategy contains no future plan for any child and youth acute or extended treatment or rehabilitation beds to be incorporated within the West Moreton District at the Wolston Park Hospital Complex.
- 3.6 The focus was on the development of, and access to, acute treatment services in line with the State Plan, *Future Directions for Child and Youth Mental Health Services* policy statement (**FDP**). A copy of the FDP is marked as Attachment **PL-5**.
- 3.7 This FDP provided that the service provision model was intended to involve:
- (a) Community treatment services (i.e. clinic based services);
  - (b) Consultation and liaison services; and
  - (c) Acute treatment services (established in a general hospital setting as discrete units).
- 3.8 In or around April 1998, the Wolston Park Hospital Transition Team and the Hospital Redevelopment Project Team (**Transition Team**) was established by Dr Mark Waters, District Manager, West Moreton District Health Service. At that time, there was no active plan to move BAC so BAC had to continue at the "new mental health services to be located on the Wolston Park Hospital site pending further planning."
- 3.9 A copy of the critical pathways document established by the Transition Team which sets out the plan for the decentralisation of Wolston Park in 1998 is marked as Attachment **PL-6**.
- 3.10 In about 1999, I recall that Dr Peggy Brown (Director of Mental Health, Queensland Health) was involved in a review which looked into the need for Statewide child and adolescent secure inpatient services and the re-development of extended treatment



adolescent inpatient services.

- 3.11 On 1 November 2001, I was copied into a memo to Dr Brown from Mr Kevin Fjeldsoe, then Executive Director and Director of Nursing at The Park – Centre for Mental Health, seeking a decision from Dr Brown on the future of BAC. Attached and marked **PL-7** is a copy of that memo.
- 3.12 The memo said:
- (a) That BAC's clinical profile was changing in that many of the new acute units developed in South East Queensland were referring to BAC increasing numbers of adolescents with complex clinical problems (often characterised by histories of aggression and violence);
  - (b) There was an urgent need for refurbishment and extension of BAC to include, in particular, capacity to provide for the safe treatment of adolescents in a high dependency unit;
  - (c) The Adult High Security Forensic Unit was to be commissioned in February 2002 and the location of BAC immediately adjacent to that facility had the potential to lead to significant problems over time;
  - (d) Discussions about the future of BAC had been occurring over a number of years and that there was concern that if a decision was not made in the near future, high risk patients would continue to be managed in an unsuitable environment/and or a commitment of significant capital funds was needed to refurbish and extend a building with a limited life span.
- 3.13 On 19 December 2001, Dr Brown responded to Mr Fjeldsoe. A copy of the response from Dr Brown is marked Attachment **PL-8**.
- 3.14 Dr Brown advised that a project officer within the Mental Health Unit, QH had been preparing a scoping report from a Statewide perspective on the need for inpatient mental health services for children and young people. She indicated that the draft report was complete. In terms of relocation of BAC, she noted that site selection was complicated and required expert assessment. She said the matter would be referred to the QH Hospital Redevelopment Steering Committee meeting in February 2002.
- 3.15 I understand that the draft report to which Dr Brown was referring is the one entitled *Report on the Need for Child and Adolescent Secure Inpatient Services and the Redevelopment of Extended Treatment Adolescent Inpatient Services (Draft Report)*.

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- 3.16 Attached and marked **PL-9** is a copy of the Draft Report.
- 3.17 I do not now recall but say that the Draft Report must have been provided to West Moreton for comment. I say this because I am aware that on 5 November 2002, Dr Terry Stedman, the then Director of Clinical Services at The Park, sent a memo to the members of the BAC Management Committee (led by Dr Trevor Sadler) providing a written response to the Draft Report. A copy of the memo from Dr Stedman to the BAC Management Committee members is marked Attachment **PL-10**.
- 3.18 Dr Stedman's memo says there was an urgent need for clear direction for the BAC including discussion of the options for refurbishment, rebuilding and/or the refocussing of the current service.
- 3.19 On 16 March 2004, I was copied into a memo from the Acting Director of Mental Health, Dr Arnold Waugh, to the manager of the Capital Works Branch, Ms Jenny Stone seeking to progress a structural/environmental review of BAC to determine its suitability to safely accommodate adolescents requiring extended inpatient treatment. Attached and marked **PL-11** is a copy of that memo.
- 3.20 In July 2004, the Department of Public Works (Project Services) was commissioned to prepare an Options Study for BAC with a view to aiding QH in making a decision about its future. Attached and marked **PL- 12** is a copy of that Options Study.
- 3.21 The Options Study identified three options:
- (a) Major refurbishment of the existing BAC building;
  - (b) Major refurbishment of the existing building plus extensive internal alterations and some extensions; or
  - (c) A complete new building on a new site.
- 3.22 The Options Study recommended a complete new building on a new site as the preferred option for the following reasons:
- (a) It would give QH the opportunity to meet all the needs of the BAC rather than just being a compromise; and
  - (b) The new building could be constructed while the old one remained in operation necessitating only one clean move. Options (a) and (b) would require the residents to move into temporary accommodation for the duration of the building

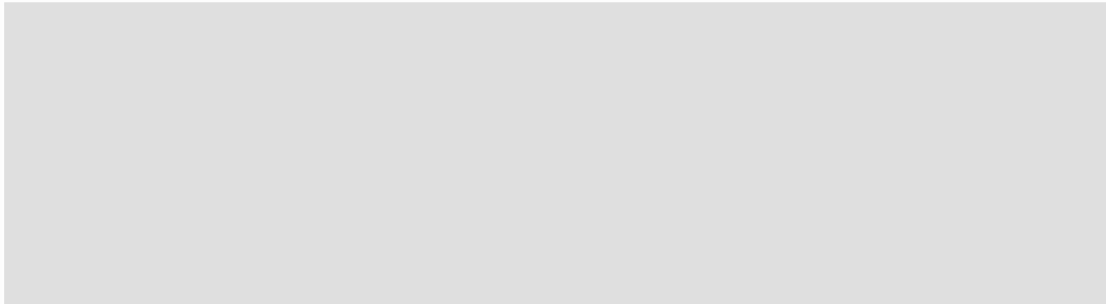
work and then move back again.

3.23 On 10 January 2006, I sent a briefing note to the Acting General Manager of the Southern Area Health Service, QH, Dr Mark Mattiussi. Attached and marked **PL-13** is a copy of my briefing note to Dr Mattiussi. I sought his approval to give priority to the redevelopment of BAC.

3.24 I highlighted a number of issues in relation to BAC's fitness for purpose including:

- (a) Inadequate patient safety;
- (b) Lack of privacy for patients;
- (c) Fixed gender ratios; and
- (d) Inadequate dining and recreational facilities.

3.25



3.26 At some time prior to 2006, a review of all the services of The Park was commenced by QH. The outcome of the review is contained in the Queensland Health Child and Youth Mental Health Plan 2006 – 2011 (**CYMHP**). Attached and marked **PL-14** is a copy of the CYMHP.

3.27 This review considered which services should stay at the Park and proposed models for taking services away from The Park.

3.28 The CYMHP concluded that redevelopment of BAC should include:

- (a) An Inpatient program for 18 occupied inpatient bed and 8 day patients;
- (b) A Day program continuing the existing the partnership between BAC and Education Queensland; and
- (c) Independent living units incorporating on site or local step-up, step-down accommodation in the form of independent living units for older adolescents transitioning to independent living in the community.

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- 3.29 The components that were identified in the CYMHP to support the clinical program included:
- (a) One or more family stay units to enable families to participate while their adolescent was an inpatient and or to enable the adolescent to participate in the day program;
  - (b) Therapeutic residential care for adolescents participating from outside Brisbane; and
  - (c) Transitional and long-term independent accommodation for the placement of adolescents post discharge.
- 3.30 In October 2007, I believe that I provided a briefing note to the General Manager for the Southern Area Health Service, QH, Ms Gloria Wallace, which outlined safety concerns and risks of delivering services at BAC.
- 3.31 The purpose of the briefing note was to inform Ms Wallace of the risks associated with providing adolescent extended treatment services at BAC in the then current premises. I said that whilst funding had been flagged for inclusion in the QH Plan for Mental Health 2007-2017 for the redevelopment of an adolescent centre to replace BAC, there had been no funding identified or allocated for interim major risk reduction measures or infrastructure upgrades. I therefore sought direction in relation to improving the environment until rebuilding could occur.
- 3.32 Attached and marked **PL-15** is a copy of my briefing note to the General Manager.
- 3.33 Part of the executive reporting structure in place at the time was for the Southern Area Health Service QH, Ms Wallace, to report to the Director-General of QH.
- 3.34 Attached and marked **PL-16**, is a copy of a similar briefing note that I understand was provided to then Director-General Ms Uschi Schreiber.
- 3.35 On 28 October 2008, Dr Aaron Groves, then Senior Director of the Mental Health Branch wrote to advise me and Dr David Theile, Chief Executive Officer, Metro South Hospital and Health Service that a "Site Evaluation Sub Group" (**Subgroup**) had been convened to provide advice on the site options identified for the redevelopment of BAC.
- 3.36 Attached and marked **PL-17** is a copy of the correspondence from Dr Groves.
- 3.37 The District Health Service was asked to:

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- (a) Provide preliminary endorsement of the recommendation of the Subgroup to redevelop BAC at the Redland site outlined in the *Report of the Site Evaluation Subgroup (Site Options Paper)*; and
  - (b) Authorise the Subgroup to consult with sector stakeholders on the preferred option.
- 3.38 The Site Options Paper for the Redevelopment of the BAC identified that land adjacent to Redland Hospital and that adjacent to The Park were the only viable options if the service was to be redeveloped as was currently envisaged. The Site Options Paper identified that the preferred option was the Redlands site (located within Metro South Health Service District).
- 3.39 Attached and marked **PL-18** is a copy of the Site Options Paper.
- 3.40 On or about 7 November 2008, I responded to Dr Groves. I provided my preliminary endorsement of the recommendation of the Subgroup to redevelop BAC at the Redlands site. I also authorised the Subgroup to consult with sector stakeholders.
- 3.41 Attached and marked **PL-19** is a copy of that correspondence to Dr Groves.
- 3.42 On 1 April 2009, Dr Groves again wrote to Dr Thiele and me. A copy of the correspondence from Dr Groves is marked as Attachment **PL-20**. He recommended that the West Moreton Health Service District:
- (a) Consider the findings of the consultation included in the *Summary of Consultation on Site Selection* (March 2009) (**Summary Report**). A copy of the Summary Report is marked as Attachment **PL-21**; and
  - (b) Provide endorsement of and approval to proceed with the redevelopment of BAC at the Redlands site.
- 3.43 On 22 April 2009, I replied to Dr Groves. Attached and marked **PL-22** is a copy of that correspondence to Dr Groves.
- 3.44 I said that staff were opposed to the relocation and that very few had indicated a preparedness to relocate permanently. I also highlighted there were significant risks associated with the relocation within the timeframes of late 2010/early 2011 as there may be up to twenty five surplus staff above the altered staffing profile for the remaining redeveloped clinical services at The Park.

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- 3.45 I said that it would represent a significant budgetary integrity and workforce management risk that would need to be quantified and that financial and human resource strategies and support would have to be provided by the Mental Health Branch QH. I also highlighted that incentive packages would need to be funded by QH for those staff who did wish to relocate.
- 3.46 However, I continued to endorse the decision making process and approval for the redevelopment of BAC at the Redlands site.
- 3.47 On 23 December 2010, I wrote to Dr Theile to outline the consumer, financial and staffing impacts associated with the relocation of BAC to the Redlands site. Attached and marked **PL-23** is a copy of my memo to Dr Theile.
- 3.48 I noted that in terms of consumer impacts, all beds at the BAC would be transferred to the Redlands Site and that consultation and detailed service planning would occur closer to the date of transfer.
- 3.49 In terms of financial impacts I noted that an agreed position had been reached with Metro South, The Park and the Mental Health Directorate (**MHD**) QH about the provision of recurrent operating expenses associated with the Redlands site. I stated that operating expenses were calculated on an agreed staffing profile in which two thirds of the existing funding (excluding environmental staffing costing) will be transferred from The Park to Metro South with the remaining one third (or greater to be provided by the MHD). I indicated that once the commissioning date was confirmed, the MHD would liaise with The Park to confirm the transferrable amount.
- 3.50 In terms of staffing impacts, I noted that my expectation was that permanent staff at The Park would be given first priority to transfer at their current level with the patients and funds.
- 3.51 On 13 April 2011, I wrote to Dr Theile in relation to the correspondence I had sent on 21 December 2010. Attached and marked **PL-24** is a copy of my memo to Dr Theile.
- 3.52 I said that we were only four months away from the first transfer of other mental health services, funds, patients and staff so requested that Dr Theile indicate his level of agreement to the proposed figures and acceptance of the process for existing permanent employees of The Park seeking employment in Metro South.
- 3.53 At the time that I concluded my employment with West Moreton, BAC was still operating at The Park and the building of the new unit at the Redlands site had not commenced.

(b) any concerns Ms Lane had about the BAC;

**Patients**

3.54 Over time the patients admitted to BAC had changed from children who probably were disturbed at some level (but were not violent and self harming) to a group that was more difficult to manage. The increased level of disturbance in the patients caused the number of beds at BAC to be reduced to give the patients more room.

3.55 I wrote numerous briefing notes to senior QH staff at Corporate Office to advise them of serious clinical and behavioural incidents at the BAC involving it's patients and staff. For example:

(a) On [REDACTED], I wrote to the General Manager of the Southern Area Health Service, QH, Ms Gloria Wallace, to report a deliberate self-harm/suicide attempt in the grounds of the BAC. Attached and marked **PL-25** is a copy of that briefing note;

(b)

(c)

(d)

3.56 I also commissioned a number of reviews and investigations in relation to clinical incidents at BAC with a view to identifying causes of the incidents, obtaining recommendations to address the causes and implement the recommendations.

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3.57 For example:

- (a) In 2003, I appointed an external investigation team to carry out a clinical review of BAC due to an increasing number and intensity of incidents in previous years involving both patients and staff. Professor Brett McDermott and his team were requested to:
- (A) Review the incident profile of the unit over the last four years and to consider the nature and extent of the risk associated with the profile;
  - (B) Consider the relationship between the risks and current target population, associated diagnostic profile and service model;
  - (C) Consider the organisational response to the incidents; and
  - (D) Consider the risk management approach in terms of individual risk identification and response efficacy.
- (b) Attached and marked **PL-29** is a copy of the report arising from Professor McDermott's review (**McDermott Review**).
- (i) This review identified that BAC was not safely accommodating adolescents requiring extended inpatient treatment.
  - (ii) One of the recommendations coming out of the McDermott Review was that the admission criteria for BAC be reviewed. This recommendation was accepted and discussed at a stakeholder meeting on 11 September 2011. A discussion paper containing a copy of the new admission guidelines is marked as Attachment **PL-30**. Attached and marked **PL-31** is the Guiding Principles for Admission to Child and Youth Mental Health Acute Inpatient Units.
  - (iii) Another recommendation coming out of the McDermott Review concerned risk management. BAC's subsequent operational plans referred to the implementation of the recommendations of the McDermott Review in relation to risk management. Attached and marked **PL-32** is BAC's operational plan dated July 2003 to June 2004. Attached and marked **PL-33** is BAC's operational plan dated 2006 – 2009.
- (c) In 2009, I appointed an external investigating team to conduct a review of consumer incidents at BAC pursuant to the *Hospital Service Act 1991*. I requested that the investigating team:

- (i) Examine and make recommendations regarding the safe care of patients at

BAC including:

- (A) Suggesting appropriate measures to manage the mix and acuity of consumers at BAC;
  - (B) Measures to ensure that arrangements for transferring care were timely and safe;
  - (C) Measures to enhance the capacity of BAC to safely manage high levels of behavioural disturbance; and
  - (D) Measures to review the progress, appropriateness and models of care;
- (ii) Review selected PRIME incident reports and suggest appropriate interventions including:
- (A) Strategies to reduce the risk of contagion; and
  - (B) Strategies to ensure the appropriate handover of clinical care to and from other medical services.

Attached and marked **PL-34** is a copy of the Terms of Reference for this review.

- (iii) On 29 September 2009, the final report was received which made a number of recommendations around governance, the clinical and nursing models of care and patient journeys. Attached and marked **PL-35** is a copy of the final report in respect of the 2009 Review.
- (iv) The final report and recommendations were released to staff at BAC along with an action plan for addressing the issues raised in the recommendations. Attached and marked **PL-36** is a copy of the action plan in response to the 2009 Review's recommendations.

3.58 In June 2011, I wrote a briefing note to the Minister for Health, Geoff Wilson to advise that the 2009 Review and recommendations had largely been actioned. I noted that the outstanding recommendations were contingent on the completion of the QH Statewide Model of Service for the Adolescent Extended Treatment and Rehabilitation Inpatient Service via the Mental Health Alcohol and Other Drugs Directorate and associated relation to the Redlands site. Attached and marked **PL-37** is a copy of that briefing note.

### **BAC Buildings**

3.59 I also had significant concerns about the physical state of the buildings themselves and the location of the buildings. BAC was in close proximity to what was becoming an exclusively adult forensic facility. My concern about the physical state of the buildings was reinforced by the Australian Council of Health Care Standards (AHCS)

Accreditation Survey of the West Moreton South Burnett Health Service District which was carried out in 2008.

- 3.60 With the exception of BAC, it was found that the physical features at The Park were largely, appropriate for their purpose. It was found there were significant patient and staff safety issues relating to the BAC built environment and it was not fit for purpose.
- 3.61 The surveyors assessed the risk presented by the BAC built environment as in the extreme category (i.e. likelihood of risk – almost certain and consequences if realised - high) based on the history of near misses and RCA investigations, discussions with clinicians on observations of the area by the surveyors.
- 3.62 The surveyor's recommendations for BAC centred around two matters:
- (a) Requirement for containment – for high acuity patients and to provide for protection from self harm or harm to others; and
  - (b) Accommodating physically fit, seriously ill adolescents in a non purpose built environment which it had been agreed, in various reports, was entirely unsuitable to their needs.
- 3.63 *Criterion 3.2.2 Mental Health (AC60) Stage 1* involved the issuing of an 'Advanced Completion in 60 days (AC60) Form' upon West Moreton and South Burnett Health Service District. Attached and marked **PL-38** is a copy of the AC60 issued upon West Moreton and South Burnett Health Service District dated 26 August 2008.
- 3.64 The AC60 required improvements to be carried out within a sixty day timeframe failing which West Moreton and South Burnett Health Service District would otherwise fail accreditation. Specifically, the AC60 required:
- (a) Written confirmation of approval be obtained (with necessary budget allocation) to immediately make the necessary environmental modifications to BAC in order to reduce risk to acceptable levels and improve patient and staff safety;
  - (b) Documented evidence of approved plans and work schedule for the environmental modifications be provided, with designated timeframes for completion; and
- 3.65 *Criterion 3.2.2 Mental Health Stage 2* (to be completed by August 2009) required:
- (i) The immediate works identified in Stage 1 to reduce risk to acceptable

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levels be completed; and

- (ii) The rebuilding of the BAC be expedited to enable care and services to be provided for adolescent patients in a purpose built facility which facilitates a safe health environment and maximises the safety, comfort and needs of the community.

3.66 In response to the AC60, the Building, Engineering and Maintenance Service (**BEMS**), West Moreton and South Burnett Health Service District obtained written approval with appropriate budget allocation for the environmental modifications to BAC to reduce risk and improve patient safety and carried out the environmental modifications.

3.67 The environmental modifications done in response to the ACHS Survey AC60, completed on 8 December 2008 included:

- (a) Removal and replacement of glass with Perspex in identified areas of the unit;
- (b) Replacement of the front entrance door with an aluminium frame and toughened glass; and
- (c) Modification of the High Dependency Unit (**HDU**). As part of this process:
  - (i) Plumbing and drainage, structural and fire and safety plans were drawn up and progressed through the building approval process;
  - (ii) Quotations were sought from three building certifiers to (among other things) issue development permits and carry out final inspection of completed works.

- 3.68 A copy of the work schedules, documentation provided to the private certifiers in relation to the HDU and associated plans and drawings are attached and marked **PL-40**.
- 3.69 At or about the same time as the ACHS Survey was undertaken a Indepth Mental Health Review was also undertaken. The report of that review is the "Report of the Indepth Review of the West Moreton South Burnett Health Service District Mental Health Services (Incorporating the National Standards for Mental Health Service into Equip)" dated 8 October 2008. Attached and marked **PL-41** is a copy of that report. Attached and marked **PL-39** is the ACHS IDR (Indepth Review) Mental Health Survey Recommendations Action Plan arising out of the report.
- 3.70 Thereafter ACHS awarded West Moreton and South Burnett Health Service District accreditation status and acknowledged the environmental improvements that West Moreton and South Burnett had made to BAC.
- 3.71 The ACHS Report noted "agreement had been reached with the Southern Metropolitan Health Service District and the Director of Mental Health for the relocation of BAC to Redlands Hospital with a planned completion in 2011. Documentation of this agreement was sighted".
- 3.72 Following receipt of the ACHS Report, West Moreton and South Burnett Health Service continued its improvement actions at BAC.
- 3.73 On 23 July 2009, I was copied into an update email from Building Engineering and Maintenance Services containing demolition photographs of the work in progress at BAC
- 3.74 Attached and marked **PL-43** is a copy of that email and associated photographs
- 3.75 On 4 November 2009, ACHS released its *Report on the Conditional Survey for the ACHS Evaluation and Quality Improvement Program for West Moreton (2009 ACHS Report)*.
- 3.76 A copy of the 2006 Report is marked as Attachment **PL-44**.
- 3.77 The 2009 ACHS Report noted that the recommendation had been implemented and AC60 was closed.

**(c) significant policy frameworks which guided the operations of BAC;**

- 3.78 In addition to those significant policy frameworks already mentioned (i.e. the 1996 Strategy, Future Directions Policy and CYMHP), the following significant policy frameworks that guided the operations of BAC included:

(a) National Mental Health Plan 2003-2008;

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- (b) Queensland Plan for Mental Health 2007-2017; and
- (c) Clinical Services Capability Framework version 3.1 Mental Health Services

In addition, there were local policies guiding the operation of BAC. Some of the more significant local policy frameworks included:

- (a) West Moreton South Burnett Health Service District – Risk Management Plan (2006);
- (b) Queensland Health Work Instruction – Emergency Response Business Unit One (BU1) and Barrett Adolescent Centre (BAC) effective from 31 April 2009; and
- (c) Queensland Health Work Instruction – De-escalation Suite for Barrett Adolescent Centre (BAC), The Park – Centre for Mental Health, Darling Downs – West Moreton Health Service District.
- (d) **any feedback (complaints or support) made by inpatients and outpatients, their families, carers, friends, Staff of the BAC, any other Relevant Stakeholder or Human Services Agency, relating to the operation and management of the BAC during this time.**

**The term "Relevant Stakeholder" is a reference to a non-Government person, entity, association or organisation;**

**The term "Human Services Agency" is a reference to a Government Department or arm of a Government Department with portfolio responsibilities for key human services including but not limited to Education, Child Safety, Disabilities Services, Community Services and Housing.**

- 3.79 I cannot recall specific feedback (complaints or support) received from inpatients and outpatients, their families, carers or friends during my time at West Moreton. It was not usual for me to be made aware of specific feedback from patients or their relatives unless it was serious.
- 3.80 In terms of feedback from any Human Services Agency in relation to the operation and management of BAC, I am aware of two community visitor reports sent to the QH Director-General by the Commission for Children and Young People and Child Guardian.
- 3.81 Specifically on 4 March 2003, a community visitor report was sent to then QH Director-General, Dr Robert Stable (**2003 Report**). A copy of the **2003 Report** is attached and



marked **PL-45**

- 3.82 Similarly, on 21 March 2007, a community visitor report was sent to the then QH Director-General, Uschi Schreiber (**2007 Report**). A copy of the 2007 Report is marked as Attachment **PL-46**. As can be seen from the 2003 Report, there were a number of positive comments made however, it was noted that the building was very run down. The report noted that it appeared that BAC was unable to make sufficient provision for the security of all residents within the existing facilities. The report highlighted that the building needed extensive redesign and rebuilding to bring it up to date with (then) present day requirements.
- 3.83 Again while a number of positive comments were made in the 2007 Report, it also highlighted that the building was not of a standard to safely house medium to long term residents and that extensive changes were required to bring it up to an appropriate standard.
- 3.84 It was usual practice when these reports were received by QH for a copy to be provided to West Moreton South Burnett Health Service District and a request made by the Director-General's office for assistance in the preparation of a response. Whilst I cannot recall specific responses that were provided to QH in respect of the 2003 and the 2007 Reports, it was usual practice to operationalise any recommendations coming out of such reports.

**4 Explain Ms Lane's role and involvement with the BAC including involvement (if any) with:**

**(a) The early intention to close the BAC in 1999;**

- 4.1 As previously mentioned, I believe that QH had an early intention to close BAC in line with the *Ten Year Mental Health Strategy for Queensland* which predated my appointment set out in 2.2 (a) above.

**(b) Any of the staff of the BAC (including those employed by the school) who were involved in the care of the inpatients and outpatients of the BAC;**

- 4.2 The Executive Officer of The Park QH and later the District Director of Mental Health Services QH, reported to me.
- 4.3 The management of the BAC staff (excluding those employed by the school) who provided the day to day care of the inpatients and outpatients was therefore delegated to those positions (in the various forms that they took).

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- 4.4 I was involved mainly to the extent that staffing and/or funding issues were required to be escalated to me:
- (a) For example, in December 2002, an investigation was carried out in respect of allegations of mismanagement of grant money and unauthorised banking procedures at BAC. Attached and marked **PL-47** is a copy of the investigation report;
  - (b) In 2003, an investigation was carried out in respect of allegations of misappropriation of a schedule 8 drug from BAC. Attached and marked **PL-48** is a copy of the investigation report and associated correspondence;
  - (c) On 21 June 2007, it was raised with me that an increased number of registered nurses was required at the BAC. Attached and marked **PL-49** is a copy of a memo to me requesting approval to create ten additional permanent registered nurse positions at the Park.
  - (d) On 26 November 2007, approval was sought from me for funding in relation to BAC operations. I approved a petty cash advance in relation to BAC's School Holiday Program. Attached and marked **PL-50** is a copy of that correspondence;
  - (e) On 4 December 2008, I was asked by Dr Stedman to support and progress the creation of a new position (Clinical Research Registrar) within BAC. Attached and marked **PL-51** is a copy of that correspondence;
  - (f) On [REDACTED], I was asked to approve the replacement of a staff members glasses that were damaged in an incident at BAC. Attached and marked **PL-52** is a copy of that correspondence;
  - (g) During [REDACTED] I was asked to issue a direction to one of the staff members at BAC that [REDACTED] attend an independent medical assessment pursuant to the *Public Service Act 2008* on the basis that [REDACTED] health was limiting [REDACTED] ability to carry out the duties required of [REDACTED] at BAC. Attached and marked **PL-53** is a copy of that correspondence.
- 4.5 I also dealt with staffing issues through the Park's established Executive Management Committee (**EMC**).
- 4.6 I met with the Executive Officer and the District Director of Mental Health Services usually Nursing at the Park, on a regular basis.

[REDACTED]  
.....  
**Pam Lane**  
14487332/14

[REDACTED]  
.....  
**Witness**