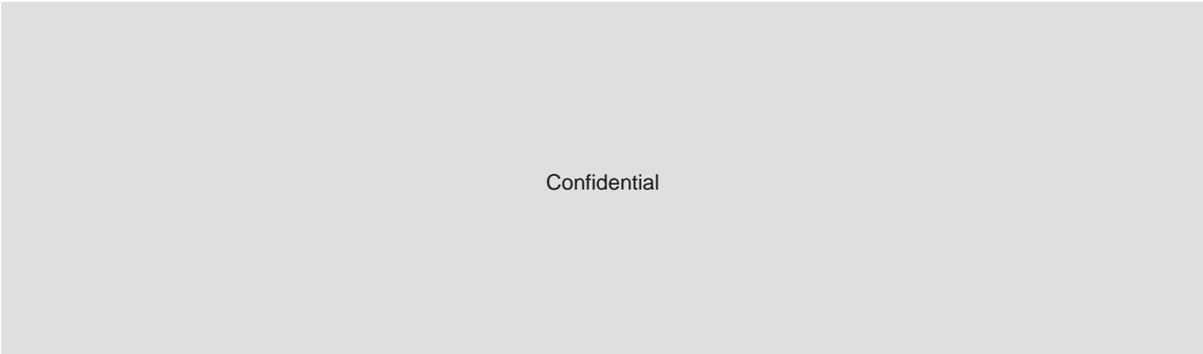


**In the matter of the *Commissions of Inquiry Act 1950*  
Commissions of Inquiry Order (No.4) 2015  
Barrett Adolescent Centre Commission of Inquiry**

**AFFIDAVIT**

Alicia Jane Martin of 643 Kessells Road, Upper Mt Gravatt, Brisbane, Senior Psychologist, solemnly and sincerely affirms and declares: -

1.



Confidential

2.

**Professional background**

3. I am currently employed as a Senior Allied Health Professional at Brisbane South Evolve Therapeutic Service. In my professional capacity as a psychologist I have held the following positions:-

- (a) Psychologist – Tablelands Child and Youth Mental Health Service;
- (b) Acting Head Child and Youth Team – Tablelands Child and Youth Mental Health Team;
- (c) Clinical Psychologist – West Moreton Child and Youth Mental Health Service;
- (d) Psychologist undertaking United Kingdom Clinical Accreditation – Newham Diagnostic Memory Clinic and Psychotherapy Service for Older Adults, London;

Deponent



A J.P., G. 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

Telephone

Email:

- (e) Psychologist Undertaking United Kingdom Clinical Accreditation – Newham Community Team for People with Learning Disabilities, London;
- (f) Locum Lead Psychologist – Coborn Adolescent Inpatient Unit;
- (g) Clinical Psychologist – Newham Child and Family Consultation Service, London;
- (h) Clinical Co-ordinator (later Senior Psychologist) – Mater Child and Youth Mental Health Unit (CYMHS);
- (i) Senior Allied Health Professional – Brisbane South Evolve Therapeutic Service (Mater Health Services 23 April 2014 – 28 November 2014 and Children’s Health Queensland from 29 November 2014 to present).

4. **Exhibit D** to this affidavit is a copy of my curriculum vitae.

Confidential

## EXHIBIT 80

Pages 3 through 143 redacted for the following reasons:

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The Commissioner has granted confidentiality to parts of this document under correspondence dated 9 November 2015.

Alicia Jane Martin

[REDACTED]

[REDACTED]

### Key Skills

I am a psychologist with thirteen years post-qualification experience. I have chosen to specialise in working with children, young people and families and my experience reflects this. The roles I have filled have provided me with key skills in many areas:

- Extensive experience in providing individual therapy for a wide range of presenting difficulties in children and young people. My preferred way of working individually is a cognitive behavioural approach and I am particularly interested in third wave CBT approaches.
- Extensive experience in using systemic approaches work with families and networks providing family therapy and systemic consultation
- Extensive experience in running groups for young people with mental health difficulties
- Excellent capacity to communicate with multiple stakeholders such as families, schools, child safety organisations, police, medical and allied health professionals
- Extensive experience in providing clinical supervision to trainee clinical psychologists, more junior team members and other allied health and medical professions wishing to provide therapy
- Demonstrated leadership and management skills in both inpatient and community settings
- Experience in service development and quality management

### Employment History

**23 April 2014 – present**

**Job title:** Senior Allied Health Professional (HP4)

**Employer:** Brisbane South Evolve Therapeutic Service

**Description:** As an Evolve clinician I manage a caseload of young people within the care of the Department of Child Safety. I provide comprehensive mental health assessments which involve liaison with significant numbers of stakeholders, individual assessments with the child and their carers and reviews of Department of Child Safety (DCS) child protection histories. I distil these assessments into timely and comprehensible reports for the DCS' ongoing understanding of the young person. This plan informs the development of an Evolve treatment plan based on the bio-psycho-social-cultural needs of the young person and their support network. I

provide crisis response to stabilise the behaviour of the young people within my caseload through the development of appropriate coping strategies. I provide individual and dyadic therapy for traumatized young people and their carers to facilitate their ability to form stable attachments following ongoing abuse and neglect. I educate young people's support networks and associated agencies on the effects of trauma and abuse to facilitate individualised appropriate care for that young person.

**Key achievements •** As a clinician with significant mental health experience I provide advice and guidance about access to tertiary mental health services and transition planning for adulthood for the young people within ETS both within my own caseload and to my colleagues

- Instigation of mindfulness practice into team meetings to help address team anxiety at a time of transition contributing to improved team morale

### **22 June 2013 – 22 April 2014**

**Job Title:** Clinical Coordinator (later altered to Senior Psychologist HP4)

**Employer:** Mater CYMHS Inpatient Unit

**Description:** I provided clinical input as a case manager within the inpatient team for children and adolescents with severe mental health difficulties. This involves providing individual assessment and treatment, family work, coordination of care plans across the multidisciplinary team and liaison with external stakeholders including education, community mental health services and the Department of Child Safety. I also run two therapeutic groups in the unit; a mindfulness group and a coping skills group, both designed to assist with distress tolerance and emotional regulation. I provide neuropsychological assessments for the team and am an active contributor to the complex case discussion, case conference and positive behaviour group providing a psychological perspective. I provide a mentoring and leadership role within the allied health team.

**Key achievements•** Coordinated redesign of group therapy program to better meet client needs

- Improvement in morale and culture within allied health team due to my leadership skills

### **2 October 2006 – 6 February 2013**

(excluding a six month secondment listed below)

**Job Title:** Clinical Psychologist (HP3 equivalent until I obtained a Statement of Equivalence of my qualifications from British Psychological Society, then HP4 equivalent)

**Employer:** Newham Child and Family Consultation Service (CAMHS/CYMHS), London, UK

**Description:** Newham CFCS has a split assessment and treatment model and all clinicians have a job plan which incorporates this. Half a day of my time was spent in a multidisciplinary assessment team which prioritises and assesses all new clients. I

conducted face to face assessments, provided opportunities for training and shadowing of this skill to trainees and newly qualified professionals and provided a clinical psychology perspective in the multidisciplinary discussion. My job plan also incorporated working in two treatment teams; the clinical psychology team and the adolescent mental health team. Within the clinical psychology team I was involved in individual therapy, family work and consultation to other agencies, including child safety organisations and education, for young people aged 0-18 with a range of common mental health difficulties as well as providing neuropsychological assessments. The adolescent mental health team works with young people aged 13 - 17 with severe mental illness. As the clinical psychologist within this multidisciplinary team I provided specialised individual therapy to clients, particularly using cognitive behavioural therapy, I also worked with families helping them to understand their young person's difficulties and give a clinical psychology perspective to team discussions. I acted as a care coordinator for a number of young people using the Care Planning Approach which involves extensive liaison with, consultation to and team working with other professionals in the network. My caseload within this team incorporated adolescents with difficulties including eating disorders, severe depression, life-threatening self-harm, complex post-trauma presentations, obsessive compulsive disorder, psychosis, bipolar disorder and emotionally unstable adolescents with significant risky behaviours. Alongside the educational psychologist in the team I provided neuropsychological assessment. As part of my role I provided reports to Mental Health Act Review Tribunals for young people I care coordinated. Newham is an ethnically diverse borough where 75% of young people speak English as a second language and it faces the challenges of financial and social deprivation and has a high proportion of asylum seekers. Working with this population has fostered my creativity in relation to adapting interventions to fit the client.

**Key achievements:**

- Conducted service evaluation research on referral patterns to inform treatment pathway/resourcing funding
- Development of specialist supervision program for CBT

### **3 April 2011 – 4 November 2011**

**Job Title:** Locum Lead Psychologist (HP4/HP5 equivalent)

**Employer:** Coborn Adolescent Inpatient Unit

**Description:** I was appointed as the Locum Lead Psychologist for an inpatient adolescent unit when the incumbent went on maternity leave. The Coborn Adolescent Unit has 12 acute beds, 3 psychiatric intensive care beds and 9 day care places. They service the ethnically diverse and socioeconomically challenged area of East London. The unit has been designed with the cultural needs of the young people and their families in mind and provides a clinical service for 12-18 year olds with a range of serious mental health difficulties. I participated in the senior management team of the unit, line managing a team of three psychologists and providing clinical and professional supervision and management to a variety of other staff from a staff group of seventy. I participated in a strategic service redesign to

offer packages of care for different presenting difficulties and provide marketing of the unit at a time of a change in the way inpatient services for young people were funded.

**Key achievements:** • Participation in senior management group development of treatment pathways and associated marketing material

• Development of a protocol and associated education package for referral for neuropsychological assessment

#### **24 September 2008 - 3 March 2009**

**Job Title:** Psychologist undertaking UK Clinical Accreditation

**Employer:** Newham Community Team for People with Learning Disabilities, London, UK

**Description:** As part of my Statement of Equivalence in Clinical Psychology through the British Psychological Society I completed a 45 day placement gaining further experience in working with adults with learning disabilities.

#### **7 January 2008 - 11 September 2008**

**Job Title:** Psychologist undertaking UK Clinical Accreditation

**Employer:** Newham Diagnostic Memory Clinic and Psychotherapy Service for Older Adults, London, UK

**Description:** As part of my Statement of Equivalence in Clinical Psychology through the British Psychological Society I completed a 60 day placement gaining further experience in working with older adults with both psychological and organic difficulties.

#### **29 June 2004 - 31 August 2006**

**Job Title:** Clinical Psychologist (PO3)

**Employer:** West Moreton Child and Youth Mental Health Service

**Description:** My clinical role in this service was very similar to that described in my experience in the Tablelands Child and Youth Mental Health Service. During my final twelve months in the service I took on the dual role of a clinician with a caseload and the team's referrals officer which I shared with another clinical psychologist. The role of referrals officer entailed being the first point of contact for the service for all referrers and for clients on the waiting list. I triaged all referrals, gathering further information from referrers if required and organising and conducting screening interviews if necessary. I then participated in the referrals meeting with the team leader and consultant psychiatrist where decisions were made about whether the client would be accepted and the level of priority their referral would receive. Whilst clients were on the waiting list I fielded inquiries from families and referrers and organised and conducted crisis assessments and interventions as required. During my time in this service I also began supervising trainee clinical psychologists and worked closely with local training programs to provide an enriching CAMHS experience for trainees.

**1 April 2004 - 28 June 2004****Job Title:** Acting Head of Child and Youth Team(PO3)**Employer:** Tablelands Child and Youth Mental Health Team

**Description:** For a period of three months I acted as Head of the Child and Youth Team after staffing changes. This meant that in addition to my clinical responsibilities I had the responsibility of managing the waiting list, making decisions about allocation of resources to requests for health promotion and preventative work and represented the service at local and regional forums and meetings.

**11 March 2002 - 1 April 2004****Job Title:** Psychologist (PO2)**Employer:** Tablelands Child and Youth Mental Health Service

**Description:** My role as a Psychologist in a rural Child and Adolescent Mental Health Service in northern Australia provided me with a range of experiences in working with children and adolescents with significant mental health issues and their families/carers/other service providers. Common presenting problems which I worked with included; Depression (Major Depressive Disorder, Dysthymia), Anxiety disorders (Generalised Anxiety Disorder, Post-Traumatic Stress Disorder, Social Phobia, Separation Anxiety, Obsessive Compulsive Disorder), Adjustment Disorders, Severe behavioural problems (Oppositional Defiant Disorder, Conduct Disorder), Psychotic illnesses (Schizophrenia, Schizoaffective Disorder), Affective Disorders (Bipolar Affective Disorder), Eating Disorders (Anorexia Nervosa, Bulimia Nervosa, Eating Disorder NOS), Self-harm and suicidal ideation, Drug and alcohol problems co morbid with other mental health issues, Attachment difficulties (eg. Reactive Attachment Disorder), Other common childhood disorders including Attention Deficit Hyperactivity Disorder, Autism, Aspergers Disorder, Learning Disability, specific Learning difficulties, and Communication Disorders. I developed experience in working with families from diverse ethnic and cultural backgrounds including indigenous Australian, Croatian, Vietnamese, Chinese, Samoan, Thai, Polish, British, and American families. During my time at the service I developed my skills in neuropsychological assessment and gained experience in the administration and interpretation of common neuropsychological tests for adults and children including WAIS-III, WISC-IV and WMS-III. I also gained confidence in the bio-psycho-social-cultural assessment of mental health difficulties in children and young people, and subsequent development of formulations and diagnosis in conjunction with the multi-disciplinary team. My previous training had focussed heavily on the administration of Cognitive Behavioural Therapy with children, adolescents and adults which I further developed in my first post. In this post I also received training and experience in the use of Expressive Therapies with children and adolescents and Family Therapy. My Masters dissertation involved a randomised controlled trial examining the efficacy of using the Triple P Positive Parenting Program as a work-site intervention to reduce work stress in parents. This provided good grounding for significant experience in the clinical use of parenting programs in a variety of formats including the Triple P Positive Parenting Program and the Management of Young

Children Program. This role provided me with significant experience in case management in a child and youth mental health service setting with extensive cultural, geographical and socio-economic diversity. I developed an enhanced ability to liaise effectively with other professionals including guidance officers, school-based youth health nurses, paediatricians, allied health staff and police. A significant aspect of my role within this service was in Health Promotion. I gained experience in providing workshops to schools and local interest groups on help-seeking behaviour, developing healthy body image, and psycho education on mental illness.

## Education

### **1 January 2008 - 30 September 2010**

**Place:** University College London

**Qualification:** Statement of Equivalence Program

**Description:**

I was accepted into the UCL Statement of Equivalence support Program which supports overseas clinical psychologists seeking to have their qualifications recognised in the UK through the British Psychological Society by completing a Statement of Equivalence.

### **1 January 2000 - 14 February 2002**

**Place:** University of Queensland, Brisbane, Australia

**Qualification:** Masters in Clinical Psychology

### **1 January 1999 - 31 December 1999**

**Place:** University of Queensland

**Qualification:** Honours Degree in Psychology (2:1)

### **1 January 1996 - 31 December 1998**

**Place:** University of Queensland, Brisbane, Australia

**Qualification:** Bachelor of Arts (Psychology)

## Professional Qualifications/Professional Development Activities

### **Statement of Equivalence in Clinical Psychology in United Kingdom**

**Date Attained:** 30 September 2010

**Granted by:** British Psychological Society

- Beyond the manual: How to do child and family therapy really well: Engaging families with children with conduct problems, Mark Dadds, 6<sup>th</sup> May 2015
  - Evolve Orientation, 2 day training, 9<sup>th</sup> 10<sup>th</sup> March 2015
  - Non-suicidal Self-Injury 2 day training, 6,7 November 2015
- Sexually Reactive Behaviour, 2 day training May 2014 - Evolve

- January 2013 3 day training in Narrative Therapy for PTSD for adults and children – Net and KidNet
- October 2012 Master Class in CBT for PTSD – British Psychological Society
- September 2012 Master Class in CBT for OCD – British Psychological Society
- October 2009 – April 2011 I participated in a Family Therapy training reflecting team weekly at Newham CFCS which consisted of workshops and discussions on system family therapy as well as providing family therapy under supervision
- April and June 2011 Autism Diagnostic Observation Schedule Training – accredited to diagnose Autism using this instrument
- Northern Thames Supervision of Neuropsychology 1 day workshop at University of East London 2010
- Mentalization Training, 3 day workshop, Peter Fonagy, Coborn Unit 2010
- Cognitive Behavioural Therapy for Eating Disorders, 2 day workshop, Christopher Fairburn 2010
- Mindfulness, 1 day workshop at University College London (UCL) 2010
- Systemic therapy, 1 day workshop at UCL 2009
- Third Wave Cognitive Behavioural Therapy, 1 day conference UCL 2009
- Schema-focussed therapy, 1 day workshop at UCL 2009
- Northern Thames Basic Supervisors 2 day workshop at UCL 2007
- Northern Thames Power in Supervision 1 day workshop at UCL 2007
- Half day workshop on Dialectical Behaviour Therapy at UCL 2007
- One day workshop on Cognitive Behavioural Therapy for Post Traumatic Stress Disorder at UCL 2008
- Half day workshop on Assessment of attention and memory at UCL 2008
- One day workshop on Cognitive Analytic Therapy at UCL 2008

### Registration

- Currently fully registered with Psychology Board of Australia and Health Professionals Council in UK

### Publications

Martin, A. & Sanders, M. R. (2003). Balancing Work and Family: A Controlled Evaluation of the Triple P- Positive Parenting Program as a Work-Site Intervention. *Child and Adolescent Mental Health* 8(4), 161-169.

### References

<b>Name</b>	Madonna Gassman	<b>Name</b>	Emma Keefer
<b>Company</b>	Brisbane South Evolve	<b>Company</b>	LCCH Consultation and Liaison Service
<b>Position title</b>	Team Leader	<b>Position title</b>	Team Leader (Psychologist)
<b>Relationship</b>	Line Manager	<b>Relationship</b>	Supervisor
<b>Contact number</b>		<b>Contact number</b>	
<b>Email Address</b>		<b>Email address</b>	