

Oaths Act 1867

Statutory Declaration

I, **Kerrie Parkin** of c/- West Moreton Hospital and Health Services, Chelmsford Avenue, Ipswich in the State of Queensland do solemnly and sincerely declare that:

**1 What are your current professional role/s qualifications and memberships?
Please provide a copy of your current/ most recent curriculum vitae.**

- 1.1 My current professional role is the position of Senior Medical Contracts Officer/Clinical Support Unit Manager, West Moreton Hospital and Health Service.
- 1.2 Attached and marked **KP-1** is a copy of my current curriculum vitae.
- 1.3 My professional roles and qualifications are set out in my curriculum vitae. I do not hold any current professional memberships.

2 The Commission understands that you held the position of Acting Director of Human Resources Services at West Moreton Hospital and Health Service (WMHHS) from October 2013 until April 2014. State whether that is correct and, if so:

(a) explain what your key responsibilities were in this position (including who you were accountable to and responsible for); and

- 2.1 I confirm that I held the position of Acting Director of Human Resource Services at WMHHS for the period 28 October 2013 to 11 April 2014.
- 2.2 The key responsibilities in this position were to lead and manage a team to provide contemporary, best practice human resource services across WMHHS in areas of workforce planning, performance management, learning and organisational development, HR policy and practices, equity and diversity, HR advisory and consultancy services, employment conditions and benefits, recruitment and staff selection, and workforce information, analysis and reporting.


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- 2.3 At the time I held the position, the Workforce division comprised three units: Workplace Relations, Human Resource Services and Workplace Health and Safety. Each unit had a Director, with the Directors reporting to the Executive Director, Workforce.
- 2.4 I held the position of Director of Human Resource Services and the other positions were held by:
- (a) Kathryn White, Director of Workplace Relations.
 - (b) Julie Trewin, Director of Workplace Health and Safety.
- 2.5 Human Resources had responsibility for the matters outlined above, including responsibility for recruitment and for basic HR services such as advice to line managers within WMHHS regarding HR issues. It did not have responsibility in respect of:
- (a) Management of ill or injured employees, which was handled by the Workplace Health and Safety unit.
 - (b) Management of grievances and similar processes, which was handled by the Workplace Relations unit.
- 2.6 My position reported to the Executive Director, Workforce. Alan Milward held, and continues to hold, that position.
- 2.7 I had responsibility for a team which comprised two Senior HR Advisors, with junior team members reporting to them.

(b) provide copies of your job description and employment contract for this position.

- 2.8 Attached and marked **KP-2** is a copy of the Role Description for Director Human Resource Services as at the time I held the position.
- 2.9 Attached and marked **KP-3** is a copy of a letter from WMHHS confirming my offer of employment. I did not have a document entitled an employment contract.

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3 Explain your role and involvement with staff from the Barrett Adolescent Centre (BAC).

- 3.1 When I commenced in the role of Acting Director of Human Resource Services, my role and involvement with staff from BAC was the same as my role with respect to the other operational units within WMHHS. I do not recall having any particular involvement with any BAC staff initially.
- 3.2 My role and involvement with BAC staff commenced when Kathryn White nominated me to take over the HR organisational change issues in relation to BAC ahead of her going on extended leave in late November 2015, details of which are described below.

4 Provide any information you have in relation to the operation and management of the BAC between 2012 and 2014, including:

(a) the number of staff employed at the BAC (including their roles and FTE status);

- 4.1 I have no knowledge or information in relation to the operation and management of BAC between 2012 and November 2013. I have no knowledge of staff numbers, roles or FTE status during that period.
- 4.2 In relation to the period from November 2013, my knowledge of the operation and management of the BAC was that BAC was in the process of transferring existing patients to other services with a plan that BAC be closed once all patients had been transferred.
- 4.3 As to the number of staff employed at BAC and their roles and FTE status during that period:
- (a) Attached and marked **KP-4** is a spreadsheet I created listing each of the BAC staff and their role description in respect of which it was potentially necessary for me to consider redeployment or termination options.
- (b) My role with respect to BAC staff was in relation to work options for those staff post-BAC, ie redeployment, redundancy and resignation. I dealt with individual

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staff members in relation their individual options. I had no involvement in monitoring or determining staffing levels in BAC and I had no knowledge of such issues.

(b) whether there was a minimum ratio of staff to patient at the BAC;

- 4.4 My involvement with BAC was with respect to identifying and actioning work options for staff exiting BAC in the context of BAC being closed. I have no knowledge of minimum staff to patient ratios, if such existed. This was a matter for the Nursing Director, Pdraigh McGrath and the Director of Nursing, Will Brennan, who had operational responsibility for BAC in relation to nursing, and the Director of Allied Health, Michelle Giles in relation to allied health.

(c) any continuing professional development or training available to staff at the BAC;

- 4.5 I have no knowledge of continuing professional development or training available to BAC staff up to November 2013.
- 4.6 Between November 2013 and the closure of BAC, BAC staff would have had available to them any professional development activities available to staff at The Park as relevant to their roles. I am not aware of any specific professional development activities being offered in that period. As professional development activity is traditionally low over the Christmas period, I expect that any such activity would have been minimal.

(d) the reporting structure for staff at the BAC; and

- 4.7 I have no knowledge of the reporting structure for staff at BAC up to November 2013.
- 4.8 Between November 2013 and the closure of BAC, to the best of my knowledge the reporting structure for staff at BAC was that:
- (a) Each grouping of employees had a line manager and a professional lead to whom they reported, for example:
 - (i) Nursing staff reported to the Nurse Unit Manager (line manager) and the Nursing Director (professional lead).

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(ii) Allied health staff reported to Lorraine Dowell (line manager) and the Director of Allied Health (professional lead)

(b) Line managers reported to the BAC Clinical Director.

4.9 To the best of my knowledge, the medical staff at BAC consisted of a Registrar and the Clinical Director. I did not have any involvement with respect to medical staff, and my assumption is that the Registrar reported to the Clinical Director, and the Clinical Director reported to the Executive Director Mental Health and Specialised Services.

(e) any changes in the staff structure or turnover of staff at the BAC.

4.10 I have no knowledge of any changes in the staff structure or turnover of staff at BAC up to November 2013.

4.11 In relation to the period from November 2013, I am not aware of any changes in the staff structure as I was not involved in determining the staff structure for BAC. My knowledge of matters relating to turnover of staff is as follows:

- (a) Where staff were on temporary fixed term contracts which expired, those contracts were not renewed.
- (b) Some staff returned to their substantive positions elsewhere within WMHHS. The spreadsheet which is KP-4 identifies seven staff members designated to return to substantive positions on either 30 December 2013 or 1 January 2014.
- (c) Some staff accepted redeployment to other units within The Park and left BAC prior its closure. The spreadsheet which is KP-4 identifies two staff members who moved to the Daintree/Franklin unit within The Park from 11 November 2013.
- (d) From recollection, there may have been others who left BAC ahead of the closure but I cannot now recall specific details.

4.12 In relation to nursing staff in particular, WMHHS maintains a casual pool of mental health nurses who can be deployed to any unit within The Park to meet short term staffing shortfalls. This resource would have been used at BAC, but I was not involved

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in decisions regarding staffing of units and I do not know if this resource was utilised at this time.

5 The Commission understands that WM HHS Human Resources Services team managed the redeployment and redundancy of staff from the BAC under your leadership. State whether this is correct and, if so, explain:

5.1 Management of the redeployment and redundancy of staff from BAC was initially undertaken by the WMHHS Workplace Relations team under the leadership of Kathryn White. The WMHHS Human Resource Services team under my leadership managed that process from mid November 2013.

(a) how and when WMHHS Human Resources Services conducted this process (including references to any applicable Queensland government directives, policies or guidelines);

5.2 WMHHS Human Resource Services conducted this process between November 2013 and end January 2014, the process having previously been commenced by Kathryn White from the WMHHS Workplace Relations team.

5.3 The process was conducted by reference to:

- (a) Directive No 06/13: Commission Chief Executive Directive: Employees Requiring Placement
- (b) Directive No 08/13: Minister Assisting the Premier Directive: Temporary Employment – End of Contract Payment
- (c) Directive No 11/12: Minister Assisting the Premier Directive: Early Retirement, Redundancy and Retrenchment.

Attached and marked **KP-5** is a copy of those directives.

(b) how this process fit in with the State-wide Voluntary Early Redundancy (VER) process in progress during the relevant time;

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- 5.4 Redundancies for BAC staff were undertaken in accordance with the State-wide Voluntary Early Redundancy (VER) process which had been in operation across the State.
- 5.5 The State-wide VER process was closed by the Department of Health on 1 July 2013, however the Department subsequently agreed to extend the process for BAC staff so that staff did not have to make decisions about seeking or accepting a VER while BAC remained open.

(c) the key challenges of this process;

- 5.6 The key challenges of the process of managing redeployment and redundancy of BAC staff were:
- (a) For some staff, closure of BAC was highly emotional as they were committed to BAC as a workplace and as a treatment model, and they did not want BAC to close. Having to consider what they wanted in terms of future employment was therefore emotionally difficult for some staff.
 - (b) Many staff, particularly those who had been at BAC long term, were close to particular patients and impending separation from them caused some of those staff emotional distress.
 - (c) Line managers and I encouraged staff to contact EAP for support. It was a challenge to ensure all staff contacted EAP for support because, as the process is confidential, it was not possible to be certain whether staff were accessing the service.
 - (d) Staff were aware that BAC would not be closed until all patients had been transferred to other care, but as that meant there was no definite closure date, it was difficult for staff members to make decisions about future employment or seek other positions as they did not know when their work at BAC would cease.
 - (e) For me personally, it was challenging listening to staff expressing concerns that closure would have a highly negative impact on patients.

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(d) how WM HHS Human Resources Services took into account the needs of staff from the BAC during this process; and

- 5.7 For staff who were on fixed term contracts expiring during the period leading up to expected closure of BAC, contracts were not renewed.
- 5.8 For permanent staff, the potential options were:
- (a) If the staff member held a substantive position outside BAC, return to the staff member's substantive position.
 - (b) Redeployment to a role elsewhere within West Moreton Mental Health Services, ie another unit at The Park, the Integrated Mental Health Service or Ipswich Hospital.
 - (c) Redeployment to a role in another Hospital and Health Service.
 - (d) Voluntary early redundancy.
 - (e) Resignation to take up a role in the private mental health services sector if they were not eligible for a VER.
- 5.9 On handover from Ms White, I received a list of BAC staff and the outcome or progress made to that point with respect to the future movement of the staff member.
- 5.10 I continued this process, with assistance from Des Suttle, one of the Senior Human Resources Advisors who reported to me. In broad terms, I provided assistance and support to line managers in the staff redeployment process, and Mr Suttle provided assistance and support to staff members.
- 5.11 WMHHS Human Resources Services took into account the needs of BAC staff during this process by considering:
- (a) The staff member's preference for locations to which they would accept redeployment.

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- (b) The type of roles to which they were interested in being redeployed.
- (c) The staff member's eligibility for redundancy, if that was their preference.
- (d) The location of potential redeployment options.

5.12 Where a staff member found alternative employment and wanted to move prior to BAC closing, WMHHS endeavoured to accommodate the staff member's preferred timing of departure from BAC.

(e) what support (if any) was offered, or provided, to staff from the BAC.

5.13 The support offered or provided to BAC staff included:

- (a) Mr Suttle was appointed as employee contact in the Human Resource Services team. He provided support via email, telephone and one-on-one meetings with staff to provide information to the staff member regarding the available options, to obtain information about their particular wishes, circumstances and preferences, and to assist with identifying roles for them.
- (b) Suzanna Perkins, Associate Advisor Workplace Relations, had one-on-one meetings with Liam Huxter, Peta-Louise Yorke, Rosangela Richardson, Maree Sheraton, Loudes Wong and Matthew Beswick to discuss the closure of BAC and its impact on staff. Attached and marked **KP-6** is a bundle of emails confirming those meetings.
- (c) Interview panels were arranged for BAC nursing staff to attend and discuss their skills, preferences and wishes for deployment. The panels comprised myself, the Nursing Director IMHS, Nursing Director Prison Mental Health and a Nursing Director from The Park. Following the panel interview, assessments were made to try to job match the BAC staff member to a nursing position elsewhere within WMHHS mental health services. Attached and marked **KP-7** is a bundle comprising the panel reviews undertaken.
- (d) In addition to the panel process, I undertook a regular process of examining

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vacancies within WMHHS mental health services for vacancies to which BAC staff could be job matched.

- (e) Mr Suttle linked in to an 'email tree' within the Department of Health whereby the HR divisions in the different HHSs would notify vacancies within their HHS before they were put out to broader applications processes. Mr Suttle would search this facility for any positions to which BAC staff members could potentially be matched, and in respect of any suitable vacancies, contact the relevant HHS and seek priority consideration for the relevant BAC staff member.
- (f) EAP sessions were provided and staff were invited to book sessions.
- (g) Sessions were provided to assist staff members with preparing or updating their curriculum vitae to assist with job seeking outside the HHS.

6 The Commission understands that Kathryn White, Acting Director of WMHHS Workplace Relations, was responsible for the management of issues relating to the staff from the BAC prior to November 2013. State whether this is correct, and if so, explain:

- 6.1 It is correct that Kathryn White, Acting Director Workplace Relations was responsible for the management of issues relating to the organisational change for BAC staff prior to November 2013.

(a) the details of the handover (if any) you received from Ms White; and

- 6.2 Shortly after I commenced in my role, I received a telephone call from Ms White. She advised me that she would shortly travelling overseas for holidays for an extended period and that she had been instructed by the Executive Director Workforce, Mr Milward to hand over the project lead for the organisational change process for BAC staff to me.

- 6.3 I then met with Ms White in person for a verbal briefing regarding the process. Ms White informed me that she had attended several information sessions with staff and management regarding the organisational change, and had drafted one or two

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information bulletins.

- 6.4 She indicated that she anticipated the process would become a very active one in the near future. I understood this was because BAC was moving toward an anticipated closure in around January 2014, so staff would be wanting to know their options.
- 6.5 On 6 November 2013, Ms White sent an email to the professional leads (Michelle Giles, Darren Neillie, Lynda Glasgow and Will Brennan) advising that she was handing over to me to progress the abolition of positions and arranging VER/ERP for staff. She confirmed she had already met with most of the staff, the exception being nursing staff who had been on leave in the previous few weeks and medical staff. Attached and marked **KP-8** is a copy of that email.
- 6.6 On 19 November 2013, Ms White sent me an email listing the BAC staff with whom she had met and their expressed preferences for future redeployment/VER. Attached and marked **KP-9** is a copy of that email.
- 6.7 On 21 November 2013, Ms White sent an email to all BAC staff also informing them that I would now be managing the process. Attached and marked **KP-10** is a copy of that email .

(b) to your knowledge and understanding, the activities Ms White undertook prior to handing this responsibility over to you.

- 6.8 On handover, Ms White advised me that:
- (a) She had met with most staff and discussed with them their preference for redeployment or redundancy.
 - (b) She had had discussions with the Chief Executive Lesley Dwyer about whether VERs would be made available for BAC staff. (This was unresolved at the time Ms White left, but availability of VERs was later confirmed and I progressed this process).
 - (c) She had been involved in the preparation of BAC Staff Communiques to provide

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information to staff regarding issues for staff relating to the closure of BAC.

6.9 Before leaving, Ms White also advised relevant professional leads and all BAC staff of her impending absence and that I would be managing the process going forward.

6.10 I am not aware of whether Ms White undertook other activities in relation to the closure of BAC.

7 The Commission understands that you met with a number of staff from the BAC to discuss issues relating to their redeployment and redundancy. State whether this is correct, and if so, explain:

7.1 I confirm that I met with a number of staff from BAC to discuss issues relating to redeployment and redundancy.

(a) when these meetings occurred;

7.2 Between November 2013 and February/March 2014, I met with all available BAC staff and their line managers. In particular:

- (a) I met with Lorraine Dowell and the BAC allied health staff as a group on 9 December 2013.
- (b) I met with Angela Clarke on 6 January 2014.
- (c) I met with Megan Hayes on 10 January 2014.
- (d) I met with Danielle Corbett on 14 January 2014.

(b) the purpose of these meetings;

7.3 The purpose of these meetings was to discuss with staff their options, available redeployment opportunities and to understand their preferences for redundancy or redeployment. The line managers were responsible for leading the discussion, and I was present to provide support and information.

(c) how these meetings were conducted; and

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7.4 I attended some meetings which were groups of staff, such as the meeting with Ms Dowell and the allied health staff on 9 December 2013. At those meetings, I provided general information about matters such as the process for job matching to other positions and the availability of VERs.

7.5 I attended a number of meetings with individual staff meetings. Generally the staff member's line manager and I attended and the staff member was offered the option of having a support person present, which some staff members did. Those meetings were directed to the specific options and redeployment opportunities for that particular staff member. We would ascertain from the staff member their preferences and any personal circumstances impacting their options, for example if the staff member wanted particular hours of work or had preferred locations to which they would accept redeployment due to distance from home.

(d) the issues you discussed at these meetings.

7.6 See paragraphs 7.4 and 7.5

8 Did you have any contact with any union representatives in relation to staff from the BAC? If so:

(a) identify the relevant union representatives, and their respective unions;

8.1 I had contact with Remi Muller, and in her absence John O'Connor, organisers from the Together Union, and Terry Cross from the Australian Workers Union.

(b) identify the relevant staff from the BAC; and

8.2 My contact with union representatives was in providing general information about the organisational change taking place at BAC. It was not in relation to individual BAC staff members.

(c) explain the circumstances of this contact (including the details of any relevant conversations or correspondence).

8.3 On about 19 December 2013 I had a telephone discussion with John O'Connor of the

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Together Union. Mr O'Connor was the Together Union contact in respect of union members at BAC on a short term basis over December 2013/January 2014 when the usual contact, Remi Muller was on leave.

- 8.4 I do not have a clear recollection of the conversation, however the purpose of the call was to provide details of the process WMHHS was undertaking with respect to job matching for BAC staff and the expected timeframes for notifying the Department of Health corporate office and the Unions regarding the outcomes. Mr O'Connor agreed with the process I described and we agreed that WMHHS would provide a background paper and details of the positions being abolished through the closure of BAC by close of business on 17 January 2014.
- 8.5 I believe that I also had a telephone conversation with Terry Cross of the AWU around this time, at which I would have given the same information, however I am uncertain as to the date and I have no clear recollection of the conversation.
- 8.6 On 8 January 2014 Ms Muller sent an email to Acting Senior Advisor Workplace Relations, Wendy Currey advising that she had returned from leave and taken responsibility for BAC back from Mr O'Connor. She noted that the Union had not received 'requested documentation' and attached an email from Mr O'Connor to Ms Currey dated 16 December 2013 (which pre-dated my discussion with Mr O'Connor).
- 8.7 I replied to Ms Muller's email the same day, noting that Mr O'Connor and I had agreed to the provision of the documentation by 17 January 2014.
- 8.8 Ms Muller responded by email expressing concern about the timeframe and asking that if WMHHS was unable to provide a complete implementation plan and the other requested documents before 17 January 2014, that she would welcome the information I had to date as soon as possible. Attached and marked **KP-11** is a copy of an email chain comprising the emails referred to above. Attached and marked **KP-12** is a copy of a letter also emailed by Ms Muller on 8 January 2014.
- 8.9 A Proposed Implementation Plan was signed off by Acting Executive Director Mental Health and Specialised Services, Dr Leanne Geppert on 10 January 2014 and a copy of

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that plan was provided to both unions. A copy was also provided to Jenni Ballantyne of the Queensland Nurses Union. Attached and marked **KP-13** is a bundle comprising emails sent on behalf of Sharon Kelly to each of Ms Muller, Mr Cross and Ms Ballantyne all dated 14 January 2014 attaching a letter, the Proposed Implementation Plan and attached list of affected positions.

9 Explain whether any staff from the BAC made any applications for stress leave or any relevant WorkCover claims between 2012 and 2014 and if so, the details of these applications (including the identity of the applicants and information about any relevant conditions).

9.1 I have no knowledge of applications for stress leave or WorkCover claims by BAC staff between 2012 and November 2013.

9.2 In relation to the period November 2013 onwards, management of ill and injured staff was within the responsibility of the Workplace Health and Safety team led by Julie Trewin. I and my team had no involvement in determining applications for stress leave or WorkCover, or the management of staff of stress leave or WorkCover. As would have been the case with a staff member from any other unit where workforce change was occurring, managing future work options for BAC staff members who were absent for such reasons was handled by the Workplace Health and Safety team.

9.3 My knowledge and involvement in relation to BAC staff with respect to stress leave and WorkCover was:

- (a) From my handover from Ms White, I was aware that there were two BAC staff members on leave due to stress related illness. The staff members were Sue Daniels and Peter Kop.
- (b) I had no involvement with the management of Ms Daniels and I do not know whether her illness was work related and/or whether she was on WorkCover. Management of her departure from BAC was handled through the Workplace Health and Safety team.
- (c) In relation to Mr Kop, I was aware that he was on WorkCover benefits but I was

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not aware of the specific details of his health condition or the work matters which had led to his claim. I had some limited involvement with his cessation of employment as follows:

- (i) I received a number of telephone calls from Mr Kop's wife seeking information in relation to Mr Kop's options, particularly in relation to VER. Mrs Kop advised that she was calling on Mr Kop's behalf and that the nature of his illness prevented him from making contact himself.
- (ii) This was less than ideal because of the privacy issues, and the potential for privacy breaches should WMHHS disclose personal information about him without his express authorisation.
- (iii) I therefore arranged for information requested by her to be delivered to Mr Kop's home address.
- (iv) In about March 2014 I was advised by Workplace Relations and Workplace Health and Safety that it was anticipated that Mr Kop's WorkCover claim would shortly be finalised and he would be ready to return to work on a facilitated return to work program.
- (v) Upon receipt of that advice, I informed the Executive Director Mental Health and Specialised Services, Sharon Kelly and the Director of Nursing, Will Brennan and advised them of steps required to be taken to determine whether Mr Kop could be job matched to a position outside BAC and if not, that a process of offering a VER or ERP should be commenced.
- (vi) From recollection, Mr Kop elected to seek a VER.

10 Explain the circumstances of any other involvement you had in the management of human resources issues relating to the staff of the BAC.

- 10.1 I had no other involvement in the management of human resources issues relating to staff of BAC.

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11 Explain any other information or knowledge (and the source of that knowledge) that you have relevant to the Commission's Terms of Reference.

11.1 Nil.

12 Identify and exhibit all documents in your custody or control that are referred to in your witness statement.

12.1 I confirm that all documents referred to in my witness statement are annexed to this statement.

13 Identify and exhibit all documents in Kerrie Parkin's custody or control that are referred to in her witness statement.

13.1 All documents referred to in my witness statement are exhibited.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act 1867*.

Taken and declared before me by)
Kerrie Parkin at Brisbane in the State of)
 Queensland this 18th day)
 of December 2015)
 Before me:)

KAREN MENEAR
JP QUAL 86947

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 Signature of authorised witness

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 Signature of declarant

A Justice of the Peace/
 Commissioner for Declarations

STATUTORY DECLARATION OF KERRIE PARKIN
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KERRIE ANNE PARKIN
Resume

Major Achievements

- Project managed the People and Culture function for the start up of Polar Fresh, a Greenfield 3rd Party Logistics Company, and the most successful 'go live' in the Coles transformation.
- Managed and co-ordinated the recruitment and training of 420 new Team Members and 34 salaried Team Members over 6 weeks.
- Received, on behalf of Polar Fresh, the Chartered Institute of Logistics and Transport Association – QLD (CILTA) Excellence in People Development Award 2009
- Received, on behalf of Polar Fresh, the Supply Chain and Logistics Association of Australia (SCLAA) People Management Award 2009
- Managed implementation of a Leadership Development Program (100 trainee's attended 7 sessions over a five week period).
- Established a monthly HR Networking Forum of 75 participants.
- Successfully arbitrated my first unfair dismissal for a major client.
- Negotiated several Enterprise Bargaining Agreements for major clients within budget, on time and without industrial unrest.
- Reviewed, negotiated and amended the Clerical Employee's Award – State through the Award Review process.

Career History**May 2015 – Current****Senior Medical Contracts Officer/Clinical
Support Unit Manager
West Moreton Hospital and Health
Service**

Managing a team of five (5) the Clinical Support Unit is responsible for the recruitment, credentialing and rostering of temporary, permanent and Locum Doctors at facilities in the West Moreton Hospital and Health Service. These facilities include Hospitals, Prisons and Mental Health Facilities.

Accountabilities

- Advise on strategic clinical staffing issues, long and short term, in collaboration with the three (3) Clinical Leads (Medical Nursing/Midwifery and Allied Health) and with the Executive Director Medical Services, Clinical Governance, Education and Research.
- Ensure systems are in place to monitor currency of relevant requirements for the employment of clinical staff:
 - Australian Health Practitioner Regulation Agency (AHPRA).
 - Immigration status of all potential and existing medical staff.
 - Credentialing and Scope of Clinical Practice of all relevant medical and dental staff.
- Oversee and manage the planning and implementation of the annual medical recruitment and placement process with the Queensland Department of Health and within WMHHS, including the provision of rural relieving positions within the HHS, annual intern and resident medical officer appointment process and senior medical appointments as required.

- Assist the Clinical Lead for Medicine and the Executive Director with appropriate rostering of junior medical staff, in collaboration with the Medical Education Unit; and management of the relieving pool to ensure appropriate and equitable leave relief.
- Maintain a detailed working knowledge of the relevant Industrial legislation, standards, policies, employment awards and Certified Agreements and provide advice on implementation and compliance.
- Prepare reports, submissions, briefing notes and correspondence on issues related to the support of the clinical workforce.
- Manage the administrative resources of the Clinical Support Unit.

December 2014 – May 2015**HR Contractor – HR Partners
West Moreton Hospital and Health
Service**

I was engaged by the Executive Director Medical Services, Clinical Governance, Education and Research Division to undertake a project to re-establish the Division in relation to recruitment, budget and establishment.

The major focus of the project has been recruitment, in line with the Division's approved establishment/headcount and budget, provision of strategic advice to the Executive Director and overseeing of the recruitment processes.

April 2014 – December 2014**Business Owner**

I took a career break to establish a coffee business after being awarded a tender by Queensland Rail to open a coffee kiosk at the largest train station on the Ipswich Line. I have recruited my team, fitted out the kiosk and it is operational. The business is now in a position that my team can run the day to day without my involvement.

I have also had a custom built mobile trailer constructed to allow me to attend events, markets and sporting days to provide a fabulous coffee experience.

I have completed a barista course at the Barista School and attended training with Merlo Coffee.

April 2014 – September**Mulgowie Farming Company
HR Business Partner**

Mulgowie Farming Company, a family owned business, employs approximately 300 employees across Australia growing fresh vegetables and sold through key contracts with major supermarket chains.

The newly established role of HR Business Partner was responsible for providing strategic advice to the Board and Executive on all HR matters.

Accountabilities

- Provide strategic HR advice to Line Managers and manage operational HR matters.
- Provide support and coaching to Line Managers, Executive Leadership Group and the Board across a range of HR related processes including:
 - Performance management
 - Disciplinary matters
 - Interpretation of Enterprise Agreements and HR policies
 - Organisational design
 - Succession Planning, Career & Development planning