

Oaths Act 1867

Statutory Declaration

I, **Dr Mary Corbett** of c/- West Moreton Hospital and Health Board, Ipswich Hospital, Chelmsford Avenue, Ipswich in the state of Queensland, do solemnly and sincerely declare that:

1 Provide a copy of Dr Corbett's current/most recent Curriculum Vitae.

1.1 Annexed and marked **MC-1** is a copy of my current curriculum vitae.

2 Outline all positions and appointments (permanent, temporary or acting) held by Dr Corbett in Queensland Health for the calendar years 2012-2014.

2.1 The positions and appointments held by me in Queensland Health in the calendar years 2012 to 2014 were:

- (a) From May 2012, I held the following positions in respect of the West Moreton Hospital and Health Service (**WMHHS**):
 - (i) Chair of the West Moreton Hospital and Health Board (**WMHHB**)
 - (ii) Chair of the Executive Committee, WMHHB
 - (iii) Member of the Finance Committee, WMHHB
 - (iv) Chair of the Nominations Committee, WMHHB
- (b) From July 2013 to November 2014, I was a member of the Chief Health Officer's Report Advisory Committee as a representative of the HHS Board Chairs.
- (c) From December 2013 to May 2014, I co-chaired the HHS Performance Management Framework Committee as a representative of the HHS Board Chairs.

3 Outline Dr Corbett's formal qualifications (to the extent these qualifications are not outlined in the Curriculum Vitae to be provided in response to question 1 above).

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3.1 My formal qualifications are as set out in my curriculum vitae.

4 On what date was Dr Corbett appointed to the position of Board Chair, West Moreton Hospital and Health Services (the Board) (and provide a copy of Dr Corbett's Position Description)?

4.1 I was appointed to the position of Board Chair, WMHHB on 18 May 2012. Attached and marked **MC-2** is a copy of a letter from the Minister for Health, Lawrence Springborg dated 17 May 2012 confirming my appointment for the period 18 May 2012 to 17 May 2013, and a letter dated 4 June 2013 confirming my appointment for a further term from 18 May 2013 to 17 May 2016.

5 Identify the names of those other persons, and their positions, who sat on the Board between the period May 2012 and mid-2014.

5.1 As some Board positions changed on 18 May 2014, the below information in relation to sub-committees relates to the position up to 17 May 2014.

5.2 The other members of the WMHHB and their positions, between May 2012 and mid-2014, were:

(a) Mr Tim Eltham:

- (i) Deputy Chair (29 June 2012 to 17 May 2014)
- (ii) Chair of the Audit and Risk Committee, WMHHB
- (iii) Member of the Safety and Quality Committee, WMHHB

(b) Mr Paul Casas:

- (i) Board Member (29 June 2012 to 17 May 2014)
- (ii) Deputy Chair (18 May 2014 to Present)
- (iii) Chair of the Finance Committee, WMHHB
- (iv) Member of the Executive Committee WMHHB

(c) Dr Robert McGregor:

- (i) Board Member (29 June 2012 to Present)

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- (ii) Member of the Executive Committee, WMHHB
 - (iii) Member of the Safety and Quality Committee, WMHHB
- (d) Ms Melinda Parcell:
 - (i) Board Member (29 June 2012 to Present)
 - (ii) Chair of the Safety and Quality Committee, WMHHB
- (e) Professor Julie Cotter:
 - (i) Board Member (7 September 2012 to 1 April 2015)
 - (ii) Member of the Audit and Risk Committee, WMHHB
 - (iii) Member of the Finance Committee, WMHHB
- (f) Mr Alan Fry:
 - (i) Board Member (7 September 2012 to 17 May 2014)
 - (ii) Member of the Safety and Quality Committee, WMHHB
 - (iii) Member of the Audit and Risk Committee, WMHHB
- (g) Professor Sonj Hall, Board Member (18 May 2014 to 17 May 2015, 26 June 2015 to Present)
- (h) Mr Gary Edwards, Board Member (18 May 2014 to 17 May 2015).

6 Outline the functions of the Board, including but not limited to, the Board's role and responsibilities with respect to the operations of:

(a) the West Moreton Hospital and Health Service (WMHHS);

6.2 Pursuant to section 22 of the Hospital and Health Boards Act 2011 (HHB Act), WMHHB controls WMHHS, with WMHHS having the functions set out in paragraph 19 of the HHB Act.

6.3 Pursuant to section 33 of the HHB Act:

- (a) WMHHB appoints a Health Service Chief Executive to manage the WMHHS.
- (b) In managing the WMHHS, the Health Service Chief Executive is subject to

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direction by WMHHB.

6.4 The functions of WMHHB are also stated in the WMHHB Charter in the following terms:

- (a) To oversee and manage WMHHS.
- (b) To ensure that the services provided by WMHHS comply with the requirements of the HHB Act and the objectives of the WMHHS.

Attached and marked **MC-3** is a bundle comprising the WMHHB Charter dated 27 July 2012 and updated WMHHB Charter dated 28 June 2013.

6.5 The HHB Act permits a Hospital and Health Board to delegate functions to the Hospital and Health Service it controls. WMHHB had such delegations in place including financial delegations to various levels, specifically noting that the following are not delegated:

- (a) Agreement of the Service Agreement with Queensland Health.
- (b) Approval of the annual budget.
- (c) Approval of WMHHS Strategic Operations and Service Plans.
- (d) Approval of the WMHHS Annual Report including audited Financial Statements.

(b) the Barrett Adolescent Centre (BAC); and

6.6 The functions of the Board with respect to the operations of BAC were:

- (a) BAC was a unit within The Park Centre for Mental Health (The Park).
- (b) The Park is a service within WMHHS mental health services.
- (c) WMHHS mental health services is one of the clinical services streams provided within WMHHS.
- (d) WMHHS had a statutory obligation pursuant to section 19 of the HHB Act for the delivery of services at BAC.
- (e) WMHHB had a statutory obligation pursuant to section 22 of the HHB Act in respect of WMHHS's delivery of services at BAC.

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(c) Queensland Health.

- 6.7 Members of the WMHHB are appointed by the Governor in Council on the recommendation of the Minister for Health pursuant to section 23 of the HHB Act, and may be removed from office by the Governor in Council in the circumstances set out in section 28 of the HHB Act.
- 6.8 Pursuant to section 16 of the HHB Act, a Service Agreement between the Director-General of the Department (as Chief Executive of the Department of Health) and WMHHS specifies:
- (a) The hospital services and other health services to be provided by WMHHS.
 - (b) The funding to be provided to WMHHS for the provision of those services, including the way in which the funding is to be provided.
- 6.9 Pursuant to section 35 of the HHB Act, the Chair of WMHHB must sign the Service Agreement on behalf of WMHHS.
- 6.10 Pursuant to section 38 of the Act, if WMHHS and the Chief Executive of the Department of Health cannot agree on the terms of a Service Agreement, the Minister for Health decides the terms of the Service Agreement.

7 Explain Dr Corbett's role and responsibilities in the position of Board Chair, including but not limited to her reporting relationships.

- 7.1 The business of the WMHHB is required to be conducted in accordance with Schedule 1 to the HHB Act. In that regard, my responsibilities are:
- (a) I am to preside at all meetings of WMHHB at which I am present.
 - (b) I am required to call a meeting of WMHHB if asked in writing to do so by the Minister for Health or at least the number of members forming a quorum for the Board.
- 7.2 Pursuant to section 35 of the HHB Act, I am responsible for signing the Service Agreement between WMHHS and the Department of Health.
- 7.3 Pursuant to section 32C of the HHB Act I am required to chair the executive committee

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of the WMHHB.

- 7.4 Pursuant to section 18(3) of the Hospitals Foundations Act 1982 I am required to either be a member of the Ipswich Hospital Foundation body corporate or to appoint a nominee for that position.
- 7.5 Under the WMHHB Charter, my responsibilities in the position of Board Chair are:
- (a) Presiding over all meetings of the Board at which I am present.
 - (b) Maintaining a regular dialogue and mentoring relationship with the Health Service Chief Executive and senior executives.
 - (c) Monitoring the performance of the WMHHB and individual members as well as promoting the on-going effectiveness and development of the WMHHB.
 - (d) Managing the evaluation and performance of the Health Service Chief Executive.
 - (e) Informing the Minister for Health about significant issues and events.
 - (f) Delivering the annual report to the Minister for Health and the community.
- 7.6 There is no formal reporting line from the Board or Board Chair to the Minister for Health, other than delivering the annual report to the Minister, but as a matter of practice and pursuant to my responsibilities under the WMHHB Charter, in my role as Board Chair, I report to the Minister, or request that a Briefing Note be prepared by the Health Service Chief Executive to the Minister or to the Director-General to be actioned to the Minister, regarding matters of high significance, politically sensitive matters or matters on which the WMHHS was unable to agree with the Director-General of Health, should such a circumstance arise.

Operation and Management of the BAC

- 8 Provide detailed information about Dr Corbett's involvement in the operation and management of the BAC between her commencement as Board Chair and the decision to close the BAC in around early or January 2014. In particular:**
- (a) details of any briefings presented or provided by Dr Corbett to the Minister with respect to the operations, management and/or future of the BAC;**

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- 8.1 To the best of my recollection I attended three meetings at which I presented or provided a briefing to the Minister for Health with respect to the operations, management and/or future of BAC.
- 8.2 On 14 December 2012, I met with the Minister for Health, Lawrence Springborg. WMHHS Health Service Chief Executive, Lesley Dwyer and WMHHS Executive Director Mental Health and Specialised Services, Sharon Kelly attended the meeting with me. The purpose of the meeting was to discuss the mental health services provided by WMHHS generally. The meeting was not specifically in relation to BAC. However BAC was discussed. In that regard:
- (a) Attached and marked **MC-4** is a copy of the Briefing Note for Noting dated 11 December 2014 from the Health Service Chief Executive, WMHHS to the Director General with attached Briefing Note for Noting to the Minister ahead of the meeting.
 - (b) Attached and marked **MC-5** is a copy of a Board Committee Agenda Paper with the agenda subject 'Mental Health Strategy' for the Board Meeting on 14 December 2012 and attached proposed talking points for Ms Kelly for that meeting which was prepared in anticipation of the meeting and which reflect the matters discussed at the meeting.
- 8.3 On 15 July 2013, I again met with the Minister for Health. WMHHS Health Service Chief Executive, Lesley Dwyer and WMHHS Executive Director Mental Health and Specialised Services, Sharon Kelly attended the meeting with me. In that regard:
- (a) Attached and marked **MC-6** is a copy of a Board Committee Agenda Paper with the agenda title 'Barrett Adolescent Strategy – Update' provided to the Board for the Board Meeting on 28 June 2013 prepared by Sharon Kelly, which advised that:
 - (i) A meeting had been held on 11 June 2013 between WMHHS Chief Executive, Lesley Dwyer, Children's Health Queensland Hospital and Health Service (**CHQHHS**) Chief Executive, Dr Peter Steer, Leanne Geppert and Sharon Kelly, in which in principle agreement had been

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reached that CHQHHS will partner with the Mental Health Alcohol and Other Drugs Branch (**MHAODB**) to progress a State-wide service model, and at which it was agreed that the timeliness of the development and implementation of a State-wide service model is a priority for WMHHS as the decision to cease providing services at BAC is contingent on a viable service model option being available.

- (ii) A meeting had been held on 17 June 2013 with the Director-General of Health, Tony O'Connell and Deputy Director-General of Health, Michael Cleary, Ms Dwyer, Ms Kelly and Ms Geppert which confirmed in-principle support of the plan for closure of BAC with the understanding the new model of service is identified and developed.
 - (iii) The Minister for Health was to be updated and a meeting had been planned between the Minister, Ms Dwyer and myself for that purpose.
- (b) Attached and marked **MC-7** is a copy of the WMHHB Minutes for the Board Meeting on 28 June 2013 noting the contents of that Agenda Paper.
- (c) Attached and marked **MC-8** is a copy of a Briefing Note to the Minister for Health requested on 8 July 2013 noting that 'the West Moreton Board considered the recommendations of the Expert Clinical Reference Group on 24 May 2013, and approved the closure of the Barrett Adolescent Centre dependent on alternative, appropriate care provisions for the adolescent target group and the meeting of the Minister.

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- 8.4** On 2 December 2013, I attended a meeting with the Minister for Health together with Children's Health Queensland Hospital and Health Board (CHQHHS) Chair, Susan Johnston, CHQHHS Chief Executive, Dr Peter Steer and WMHHS Chief Executive, Lesley Dwyer. Ms Johnston and Dr Steer presented in relation to the governance role of CHQHHS in relation to new services being developed by CHQHHS for adolescent mental health services and the progression of planning of transition of services.
- 8.5** Following that meeting on 11 December 2013 a Briefing Note for Noting was provided to the Director-General of Health with a Briefing Note for Noting to the Minister for Health in response to a request from the Minister's office for an update on BAC. Attached and marked **MC-9** is a copy of those Briefing Notes.

(b) details of any internal or external reviews/reports/evaluations, of which Dr Corbett had knowledge of between 2012 and mid-2014, concerning the operation and management of the BAC during the period January 2012 to mid-2014 and details of the circumstances surrounding the commissioning of those reviews/reports/evaluations;

- 8.6** I am not aware of any internal or external reviews, reports or evaluations between 2012 and mid-2014 concerning the operation and management of BAC during the period January 2012 to mid-2014 save to the extent that the work of the Expert Clinical Reference Group and the Planning Group constituted such a review.

(c) on what date, from whom and by what means Dr Corbett first became aware of any intention to close the BAC; and

- 8.7** I first became aware of an intention to close BAC in or about early November 2012. My understanding is that the intention to close BAC dated back to around 2008 when a decision was made, reflected in the QPMH, to build a new facility at another site to replace the physical BAC facility.
- 8.8** On 8 November 2012 I was advised by the Health Service Chief Executive, Lesley Dwyer that a psychiatrist from another Hospital and Health Service had made a public comment to the effect that BAC may be being closed. Ms Dwyer was interviewed on ABC radio about this.

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- 8.9 I sent an email to the other Board members on 8 November 2012 notifying the Board members of the possibility of media publicity on this matter and I received in response an email from the Deputy Chair, Tim Eltham outlining his knowledge on the matter. Attached and marked **MC-10** is a copy of that email chain.
- 8.10 On 9 November at 5.58am I received an email from the Health Service Chief Executive, Lesley Dwyer forwarding an email from the Executive Director Mental Health and Specialised Services, Sharon Kelly which stated:
- (a) Deinstitutionalisation of services provided at The Park will result in only forensic and secure services being provided at The Park by July 2013.
 - (b) Concerns have been raised about the co-location of BAC with adult forensic and secure services delivered at The Park.
 - (c) Under the QPMH it was determined that a new model of care for BAC was required.
 - (d) The Redlands Adolescent Extended Treatment Unit, funded under the QPMH, was intended to replace BAC but the project has ceased due to unresolved environmental issues and budget over-runs.
 - (e) Recent sector advice proposed a re-scoping of the BAC service model and governance structure to ensure a contemporary, evidence-based model of care is being provided for adolescents with serious mental illness.
 - (f) Bed occupancy at BAC was low, at 43%.
 - (g) The age and condition of the BAC building has been identified by the Australian Council on Healthcare Standards as unsafe, necessitating urgent replacement.
 - (h) Against that background, the HHS has been considering the planned closure of BAC.
- Attached and marked **MC-11** is a copy of that email.
- 8.11 Later that morning I sent an email to the other members of the Board conveying that information. Attached and marked **MC-12** is a copy of that email.

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8.12 On or about 16 November 2012, I received and read the Board Papers for the meeting of the WMHHB scheduled for 23 November 2012.

8.13 In her Executive Report for the Board for the WMHHB meeting on 23 November 2012, the Health Service Chief Executive, Lesley Dwyer provided an overview advising:

- (a) In accordance with the QPMH, The Park is to become an adult forensic centre, anticipated to occur from July 2013 and it would no longer be appropriate to have young teenagers on a campus for adults in a medium to high security setting.
- (b) In August 2012, the Minister for Health endorsed that the capital build funding would no longer be available for the Adolescent Extended Treatment Unit which was to be built at Redlands and these funds had been reallocated within the health portfolio.
- (c) In light of the Redlands centre no longer being an option, the current condition of BAC being no longer fit for purpose, and the plans for the adult forensic service at The Park, WMHHS had commenced high level discussions with Queensland Health and senior staff of The Park some weeks prior to the date of the Board Paper.
- (d) Information was provided to the media via an external source that raised the issues in the community before WMHHS had been able to implement any planned approach to the consultation and decision making process.
- (e) A Planning Group was being formed to lead the planning, consultation and development of options and final recommendation for closure.

Attached and marked **MC-13** is a copy of that Executive Report. A copy of the Board Meeting Minutes for that meeting are attached and marked **MC-14**.

(d) **Dr Corbett's knowledge of any future plans for the transfer of the BAC to another location.**

8.14 At that time, I became aware that there had been an intention to transfer BAC to a location at Redlands, but that this was no longer an option as capital funding for the facility to be built at Redlands was no longer available.

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- 8.15 I had no knowledge, before or at that time, of any other future plans for the transfer of BAC to another location.

9 Provide information about the policy frameworks Dr Corbett was operating under, as Board Chair, between May 2012 until in or about mid-2014, and the impact of those policy frameworks with respect to decisions made about the BAC. In particular, explain the impact (if any) of the following:

- (a) the actions and targets set out in the Government's Blueprint for Better Healthcare in Queensland and any other key reform documents (with respect to matters such as contestability/greater efficiencies/fiscal restraint/workforce reforms/clinical service redesign);**

9.1 The Blueprint for Better Healthcare in Queensland (**Blueprint**) was issued in February 2013. It was a high level document and did not provide specific direction or set requirements for clinical services delivery at BAC.

9.2 The Blueprint established principles against which HHSs were to plan and deliver services. In relation to the specific principles in the Blueprint:

- (a) BAC as a State-wide single site for extended treatment adolescent mental health care was not aligned with the Blueprint's principles that control of local healthcare decisions belongs with local communities.
- (b) The exploration of new or more contemporary models of care for extended treatment adolescent mental health care was aligned with the Blueprint's principle of patient-centred care and the provision of best services in the best location.
- (c) The Blueprint contained principles around financial value, greater efficiency, cutting waste and higher financial accountability in the provision of health care, but the decisions regarding the operation of BAC and future service delivery for the cohort of patients involved, were not directed to financial control or savings.

(b) the Queensland Plan for Mental Health 2007-2017;

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9.3 The main impacts of the QPMH with respect to decisions made about the BAC were:

- (a) The QPMH places an emphasis on the decentralisation of mental health services, ie the desirability of providing care to individuals in their own community.
- (b) The QPMH established funding allocations for major projects and services re-designs within mental health services across the State over the 10 year period of the plan. It included a significant capital allocation for the development of The Park into an adult high and medium security facility.
- (c) Funding under the QPMH had been allocated for the adolescent extended treatment facility to be built at Redlands, following which the physical facility of BAC would be closed. (As noted, this funding was cancelled in the second half of 2012).

(c) Commonwealth health plans and frameworks including:

(i) the National Health Reform Agreement and activity-based funding;

9.4 I am relatively familiar with the National Health Reform Agreement and the general mechanics of activity-based funding. This is the Agreement and mechanism by which the WMHHS received its budget to perform the services required of it. It is not specifically related to BAC and it did not impact decisions made about the BAC. The decision to close BAC was never, from the perspective of WMHHS, a financially-driven decision.

(i) Fourth National Mental Health Plan: an agenda for collaborative government action in mental health 2009;

(ii) National Mental Health Service Planning Framework;

(iii) National Standards for Mental Health Services;

(iv) National Partnership Agreement on Mental Health Reform;

(v) 2011-2012 National Mental Health Reform Budget Measures;

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(vi) National Practice Standards for the Mental Health Workforce.

- 9.5 These are documents of the kind that would inform, at a background level, knowledge for a Board member in considering a best practice operating environment and standards in mental health care. Further, the National Mental Health Service Planning Framework and the National Standards for Mental Health Services, in particular, are relevant to the manner of delivery of clinical services to a particular patient, and therefore directly applicable to front line clinical and other staff in the HHS.

(d) service agreements between WMHHS and Queensland Health which incorporated services provided by the BAC.

- 9.6 Since the commencement of the HHB Act, HHSs are required to enter into a Service Agreement with Queensland Health (**Department**) on an annual basis, at that time reviewed quarterly, which define the services the HHS is to provide and the funds which will be available for them to deliver those services.
- 9.7 I am familiar with Service Agreements because the power and obligation to sign a Service Agreement on behalf of the HHS rests solely with the Board Chair. In practice, I seek approval from the WMHHS before signing the Service Agreements or any amendments to the Service Agreements.
- 9.8 The Service Agreements had a direct impact with respect to decisions made about BAC in that the Service Agreements required WMHHS to provide the services in the Service Agreement. In practical terms, WMHHS did not have the power to unilaterally decide to cease BAC services without the endorsement of the Department of Health, which would then be reflected in the Service Agreement.

10 Did the Board and/or Dr Corbett separately, receive any form of Directive or instruction from the Minister or any Queensland Government entity, between the period May 2012 and mid-2014, concerning the operations or management of the BAC? If yes, what was the Directive or instruction, when was it received and by what means, and what administrative processes were associated with actioning it?

- 10.1 Neither I nor the WMHHS received any form of Directive or instruction from the Minister

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or any Queensland Government entity, between the period May 2012 and mid-2014 concerning the operations or management of BAC.

- 10.2 WMHHS is obliged to provide the services set out in the Service Agreement, which at the relevant time included the services at BAC. The Director-General issued many Directives to WMHHS regarding particular aspects of operations of HHSs across the State and within WMHHS. I am not aware of any Directive or instructions from the Director-General specific to BAC.

11 Did the Board issue any Directive or instruction to the WMHHS concerning the operations or management of the BAC between the period May 2012 and mid-2014? If yes, what was the Directive or instruction, when was it issued and by what means, and what administrative processes were associated with actioning it?

- 11.1 The WMHHB did not issue Directives concerning the operations or management of BAC between the period May 2012 and mid-2014.

- 11.2 As to instructions to the WMHHS concerning the operations or management of BAC between May 2012 and mid-2014:

- (a) At a meeting of the WMHHB on 26 April 2013, the WMHHB instructed the Executive Director Mental Health and Specialised Services, Sharon Kelly that the strategy for the future of BAC was to be developed and brought back to the WMHHB for approval.
- (b) At a meeting of the WMHHB on 24 May 2013, the WMHHB instructed that until a decision was confirmed in regard to the plans for BAC, clinical services were to continue to be provided and patients discharged as appropriate, ie in accordance with standard clinical care, not targeted to potential closure of BAC.
- (c) At a meeting of the WMHHB on 27 September 2013, the WMHHB instructed that it could not advise a firm date for closure of BAC in the absence of an alternative model. The WMHHB supported parties working toward early 2014 for transfer to a more appropriate model but instructed that closure of BAC was

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contingent on an appropriate model of care being developed and a clear plan being in place for the transition of current patients.

12 Who was responsible and what was the arrangement for engagement of staff at the BAC? Were they directly employed by WMHHS or on secondment from the Department of Health or a Human Services Agency? (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, Disability Services, Community Services and Housing).

- 12.1 WMHHS came into existence on 1 July 2012, with status as a body corporate pursuant to section 18 of the HHB Act.
- 12.2 Prior to that date, all staff employed at BAC were employees of the State of Queensland.
- 12.3 From 1 July 2012, staff remained employees of the State of Queensland until WMHHS was prescribed, following which staff became employees of WMHHS, pursuant to section 80 of the HHB Act. In that regard, WMHHS became a Prescribed Employer on 1 July 2014. None of the terms and conditions of employment changed for individuals upon that transfer of employment.
- 12.4 Employees of the State of Queensland were managed within WMHHS under a system of delegations whereby the Director-General gave certain delegations to the Health Service Chief Executive in relation to the management of staff, and the Health Service Chief Executive gave certain sub-delegations to the Executive Directors and other executives and managers of units within the WMHHS. Under that system, matters such as engagement of staff, management of staffing levels and the like, were dealt with locally in the WMHHS. Executive Directors for the various divisions, and line managers within divisions, assisted by the Workforce Division, managed staffing matters.
- 12.5 The exceptions to this are that:
- (a) The Health Service Chief Executive is appointed pursuant to an executive contract between the WMHHS and the Health Service Chief Executive, with the

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approval of the Minister for Health, pursuant to section 33 of the HHB Act.

- (b) Other health executives are appointed pursuant to a contract of employment between the health executive and the Health Service Chief Executive.

12.6 I am not aware of the specific details of individual secondment arrangements. However I confirm that secondment from another Hospital and Health Service, or from divisions within Queensland Health was one of the mechanisms used to ensure the appropriate skill and expertise for WMHHS's operations.

12.7 Staff of the Barrett School were employees of the Department of Education.

13 During the period May 2012 until mid-2014, what was Dr Corbett's knowledge of and involvement in the Turn Around Plan for Mental Health and Specialised Services? Please include details as to any briefings given by Dr Corbett with respect to the Turn Around Plan (and to whom, on what date, and for what purpose).

13.1 A Turn Around Plan for the whole of WMHHS was established in 2012 and was endorsed by the WMHHS. The Executive Director for each of the service streams within WMHHS was asked to review their own service stream and provide a plan as to how the service stream would provide the services required under the Service Agreement, within the budget allocated in the Service Agreement. A Turn Around Plan was prepared by the Executive Director Mental Health and Specialised Services as part of the overall WMHHS Turn Around Plan.

13.2 I was not involved in the development or implementation of a Turn Around Plan for Mental Health and Specialised Services. I have no recollection of being provided with a copy of such a plan. In relation to the specific mental health plan, my involvement was limited to considering Board Papers which presented updates regarding the implementation of the plan. For example, the Board Meeting on 25 January 2013 noted part year savings in relation to the Mental Health Turn Around Plan Strategy which related to BAC.

13.3 I did not give any briefing in relation to the Mental Health Turn Around Plan Strategy.

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The Closure Decision**14 Explain the extent of Dr Corbett's/the Board's involvement and/or input into the decision to close the BAC.**

- 14.1 As outlined in paragraph 8.7, a decision to close BAC had been made in about 2008, with adolescent extended treatment being transferred to a new site to be built at Redlands.
- 14.2 Following the cancellation of the Redlands capital works project, the WMHHB received advice as outlined in paragraphs 8.10 to 8.13. The Board Paper noted in paragraph 8.12 informed the WMHHB that a meeting with key child and youth psychiatrists, WMHHS Chief Executive, Lesley Dwyer, Executive Director Mental Health and Specialised Services, Sharon Kelly, and the Department of Health with agreement reached that a Planning Group be formed to lead the planning, consultation and development of options and final recommendations for decision.
- 14.3 The extent of my and the Board's involvement and input into the decision to close BAC from that point were as follows.
- 14.4 At its meeting on 23 November 2012, the WMHHB noted the board paper of 23 November 2012. The Board Meeting Minutes for the WMHHB meeting on 23 November 2012 are Attachment MC-13.
- 14.5 I attended a meeting with the Minister for Health, Lawrence Springborg on 14 December 2012 in relation to financial and organisational matters affecting the whole spectrum of mental health services provided by WMHHS. The need to develop an alternative contemporary State-wide model(s) of care to replace the services then being provided at BAC was discussed. The speaking notes prepared for that meeting, which were circulated to the WMHHB as an attachment to an Agenda Paper for the meeting of the WMHHB on 14 December 2012 are Attachment MC-5.
- 14.6 At a meeting of the WMHHB on 25 January 2013, the Board noted an Agenda Paper providing an update of the Barrett Adolescent Strategy and the Executive Director

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Mental Health and Specialised Services, Sharon Kelly provided an overview of the Project Plan. In that regard:

- (a) Attached and marked **MC-15** is a copy of the Board Committee Agenda Paper entitled 'Update on Barrett Adolescent Centre' provided for the meeting on 25 January 2013.
- (b) Attached and marked **MC-16** is a copy of the Board Meeting Minutes for the meeting on 25 January 2013.

14.7 At a meeting of the WMHHSB on 26 April 2013, the Executive Director Mental Health and Specialised Services, Sharon Kelly provided an update on the Barrett Adolescent Strategy. The noted action from the update was that the strategy regarding the future of BAC was to be developed and brought back to WMHHSB for approval. In that regard:

- (a) Attached and marked **MC-17** is a copy of a Board Committee Agenda Paper entitled 'Barrett Adolescent Centre'.
- (b) Attached and marked **MC-18** is a copy of the Board Meeting Minutes.

14.8 At a meeting of the WMHHSB on 24 May 2013, the Board considered an Agenda Paper with recommendations to support the closure of BAC. WMHHSB:

- (a) Noted the following actions:
 - (i) Minister to be updated regarding proposed closure, plan for development of alternatives and community engagement strategy.
 - (ii) Minister's approval to be sought to not accept any further patients into BAC.
 - (iii) WMHHS to engage with Children's Health Services and MHAODB re planning for future model of care.
 - (iv) WMHHS to pursue discharge of appropriate current patients with appropriate 'wrap around' services.
- (b) Recorded a formal decision that 'the Board approved the development of a

Dr Mary Corbett

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Witness

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