EXHIBIT 1044

Executive Support Unit MINISTERIAL CORRESPONDENCE – ACTION SHEET		
MINMPD	92649 ITIVE SUPPORT: 10/13	
ACTION OFFICER: MOO9 COPIED TO:		
Response Yes No	Action Direct / Board to respond	
ResponseMinister forAssistantsignatory:HealthMinister	Chief of Staff	
Closing contact details: N/A		
Response Template*: A B C G	-	
Standard Letter:	* Templates can be found on QHEPS by clicking on Corporate Templates under <i>I an</i> <i>looking for</i> or from the tool bar click on Business Support, and under Administration click on Templates. Alternatively, in Word File / New and then click on Qld Health Templates (in the task panel on the right hand side of the page). It is important that you access the templates from the website <i>every time</i> (and not use a previous template as the templates are updated regularly.	
Briefing note template*: A B C		
COMMENTS: Please note comments over Refers mil92578, Mil91842,		

EXHIBIT 1044

ACKNOWLEDGEMENT:

- Acknowledgement Letter
- Acknowledgement Email
- Acknowledgement Not Required
- □ Thank you & Noted Letter

RESPONSE:

Minister

O Dept Contact required

- Assistant Minister
 - o Dept Contact required
- □ Chief of Staff
 - o Dept Contact required
- Hospital and Health Service
- Refer to Department for Direct Reply (Action Direct)
- No Response Required (Note and File)
- BRIEFING NOTE REQUIRED
- BRIEFING NOTE NOT REQUIRED

WMS.0014.0001.03869

Department Ref #:

Policy Advisor: Mark

Re-Issue: hion mblonges hil 100 IN

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Previous Dept Ref #:_____

COMMENTS / REQUESTS:	
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Reviewed b	Date: <u>9/9</u>
Sent to ESU	Date: 19 SEP 2013



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IN REPLY PLEASE QUOTE: kjb:rdh

12 September 2013

Hon Lawrence Springborg, MP Minister for Health GPO Box 48 BRISBANE QLD 4001

Dear Minister

Re: Barrett Adolescent Centre

I am writing to you regarding the future of the Barrett Adolescent Centre and the state government's continued lack of transparency around planning for Tier 2 and 3 mental health facilities for adolescents.

The QTU notes that the Expert Clinical Reference Group (ECRG) recommendations on the Barrett Adolescent Strategy include (1b) "Formal planning including consultation with stakeholder groups will be required" and that correspondence from Lesley Dwyer, Chief Executive West Moreton Hospital and Health Board, to the QTU (12/3/12) states that appropriate consultation will occur prior to a finalisation of a decision regarding a future model of care.

It is in this context that the Queensland Teachers' Union expresses our disappointment and frustration at the continued lack of consultation with our organisation and our members.

We note that the West Moreton Hospital and Health Board ceased producing Fast Facts Barrett updates in May. The last Fast Facts (number five), reported that the ECRG met for the last time in April. We further note that the ECRG's seven recommendations were not released to the public until August and only after an extensive media campaign facilitated by community action group savebarrett.org

The ECRG recommendations 5a and 5b posit that on-site education resources are essential for any Tier 2 and 3 programs. Disappointingly, and despite advice to the contrary from the West Moreton Hospital and Health Board, the Department of Education, Training and Employment does not appear to have been engaged in planning a state-wide model of adolescent extended treatment and rehabilitation service.

We are advised that the staff at Barrett, the patients and their families continue to experience similar disappointment and frustration at the lack of consultation from the Department of Health and the Department of Education, Training and Employment. Most recently staff, patients and their families informally discovered that Barrett's residential care may be decreased from 21 to 9 patients in a matter of two weeks. The QTU draws your attention to

the ECRG recommendation 3b that "Interim service provision for current and 'wait list' consumers of BAC while Tier 3 service options are established must prioritise the needs of each of these individuals and their families/carers. 'Wrap-around care' for each individual will be essential." We do not believe that two weeks is sufficient time to adequately transition young people from Barrett to their families/carers in such a way as to enable 'wrap-around care'.

Further, we draw to your attention the ECRG's Barrett Adolescent Strategy that states, "Interim service provision if BAC closes and Tier 3 is not available is associated with risk."

The QTU calls on the Department of Health to join with the Department of Education, Training and Employment to host a roundtable stakeholder meeting that includes representation from the QTU, the QNU and other unions. In accordance with commitments made by both departments to stakeholder consultation and that align with the ECRG Recommendation 1, such a roundtable should provide an update on progress that has been made towards achieving a state-wide model of adolescent extended treatment and rehabilitation service. The roundtable would also provide both departments with an opportunity to address our collective concerns about the future job security of our members, and in so doing, address the ECRG Recommendation 3C "BAC Staff (clinical and educational) must receive individual care and case management if BAC closes, and their specialist skill and knowledge must be recognised and maintained."

This roundtable meeting must take place before any changes are made to BAC's care services, facilities or workers' conditions to avoid further stress and anxiety to some of Queensland's most vulnerable children and their families.

Please contact Mr Craig Wood in the QTU Milton Office on to discuss suitable times and locations for this important stakeholder roundtable.

Yours sincerely

K Bates President