

T R A N S C R I P T

LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into Ambulance Victoria

Melbourne – Thursday 5 June 2025

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WITNESS

Ray Michelle.

The CHAIR: Welcome to today's hearing. I am the Chair, Joe McCracken. We are going to go around and introduce everyone first.

Ryan BATCHELOR: Ryan Batchelor, Member for Southern Metropolitan Region.

Georgie CROZIER: Georgie Crozier, Member for Southern Metropolitan Region, Shadow Minister for Health and ambulance services.

The CHAIR: And we will do the online guys as well.

Jacinta ERMACORA: Jacinta Ermacora, Member for Western Victoria Region.

Sarah MANSFIELD: Sarah Mansfield, Member for Western Victoria.

Rachel PAYNE: Rachel Payne, Member for South-Eastern Metropolitan Region.

Renee HEATH: And Renee Heath, Member for Eastern Victoria Region.

The CHAIR: Very good. So what I will do is I will just read a few things out and then we will get straight into it.

All evidence taken at this hearing is protected by the parliamentary privileges provided by the *Constitution Act 1975*, the *Defamation Act 2005* and, where applicable, the provisions of reciprocal legislation in any of the other Australian states and territories. However, it is important to note that any comments you make outside this hearing, including effective repetition of what you have said in evidence, may not be afforded the same privilege. So basically that means what you say in here, if you repeat it outside and say the exact same thing, it may not have the same protections as you have in here.

It is also important to note that any action which seeks to impede or hinder a witness or threaten a witness for the evidence they would give or have given may constitute and be punishable as a contempt of Parliament. You have got nobody else with you, so that is okay.

We will record the evidence and we will provide a proof of the Hansard to you, so if there is anything that you may not have said, you can go through and correct it.

For the record, can you just say your name and any organisation that you might be representing or yourself?

Ray MICHELLE: Thank you. My name is Ray Michelle, and I am representing myself, I guess.

The CHAIR: On your own behalf.

Ray MICHELLE: Yes, on my own behalf.

The CHAIR: No worries. We have got your submission, so we will take that as read. Would you like to make any opening remarks before we ask any questions?

Ray MICHELLE: Yes, I would.

The CHAIR: Perfect.

Ray MICHELLE: Thank you. I have prepared it, so I will just read as we go. Thank you to everybody for having me today and the opportunity to appear before you. I am speaking as a former chaplain of Ambulance Victoria who served from February 2022 until my resignation in September 2023. I resigned after and during a sustained period of abuse, false allegations and retaliatory action. My experiences reflect what I believe are deep and systemic cultural and governance issues within the organisation. Today I speak not only of my own

treatment but on behalf of many staff, including paramedics, peers, supporters and fellow chaplains, who have confided in me with some of the stories but who remain silent for fear of reprisal.

Some subheadings I have put – it is a culture of retaliation and psychological harm. I was subject to multiple baseless allegations with no evidence, dates or specific witnesses. Requests for CCTV footage that were available and could have exonerated me were always denied. Despite these obvious investigation failings, I was stood down and ultimately suspended, not for misconduct but for raising concerns. Rather than receive support, I was isolated, ignored and retaliated against by senior managers within the wellbeing division. These included [REDACTED] and [REDACTED], who failed in their duty of care to act in good faith when concerns were raised, and the impact on my mental health was severe and lasting. They did offer psychological support, but when I sent in the first account, it was declined. We have a senior psychologist, [REDACTED], who is now heading up the [REDACTED] and expects staff to breach confidentiality. Therefore [REDACTED] ethics and suitability to the profession and the role must be questioned. [REDACTED] was an appointment made by [REDACTED], who was let go after the VEOHRC report, and yes, this person still remains.

There is a lack of independence and accountability. Investigations are handled by the professional conduct unit, a unit that reports to the same leadership as those under scrutiny. There is no possibility of procedural fairness, and the lack of independent oversight means those in power are effectively investigating themselves. This is Ambulance Victoria investigating Ambulance Victoria. Despite repeated concerns – including those I raised to HR, leadership and even the board of Ambulance Victoria and the minister – there were no meaningful interventions. In fact responses were often punitive, escalating to the point where even pre-approved leave and my ability to officiate at weddings were weaponised against me.

The breach of privacy and contracting irregularities – my personal and professional privacy were violated. I was removed from weddings that I was asked to officiate without explanations to the couple. I remain concerned about the legitimacy of those weddings that have occurred – about making sure that they were carried out in accordance with the rites that they were married under, but the person that had to carry those out was instructed to by [REDACTED]. Further is the awarding of the chaplaincy contracts, particularly to the network. This appears to have occurred without open tender to any other organisation that was able to provide that – or are able to – or any proper probity checks. I did request a copy of this and was told it was commercial in confidence. This suggests there are potential conflicts of interest and merits serious scrutiny. In addition to that, the senior leadership are maintaining their paramedic registrations potentially fraudulently in terms of their practice hours and clinical hours. Junior members have to sit there and witness this and yet remain silent.

This is not an isolated case. As chaplain I had and still have the privilege of supporting many AV staff in crisis – paramedics suffering from burnout, bullying, suicidal threats and poor treatment. And these are not isolated experiences. Many of them still reach out to me, fearful of speaking up internally due to the culture of fear and silence – and it has only got worse since the relationship between [REDACTED] and [REDACTED] of the union is concerned, as was evident with the quick signing of their EBA once they got rid of [REDACTED], the CEO.

In my closing remarks I urge the committee to consider the need for external independent investigations, especially into the wellbeing division and professional conduct unit and to introduce stronger whistleblower protections for all AV employees with genuine accountability for cultural reform. Without those things happening, general cultural reform in Ambulance Victoria will continue to harm the people it claims to support. The people listed today, despite all investigations, including the VEOHRC, misled the minister's office on occasion. Evidence was provided of this, and they still remain and in many cases have been promoted. I urge you to have the courage to investigate all allegations properly. As I said, Ambulance Victoria can mislead the minister's office and provide evidence and yet not act on it. Yet I say, make this inquiry count. There have been too many others that have gone nowhere. Do not be blindsided by the words and the charm – have the courage to dig deep. Thank you for welcoming me here today and for the opportunity to speak.

The CHAIR: Thank you very much as well, Ray. I will start off with some questions, and then we will circulate through the committee. Each of us has got about 2½, 3 minutes, so we will try and work within those timeframes. My first question to you is that you talked about, essentially, a situation where people are afraid to come forward and voice concerns. Why is that the case?

Ray MICHELLE: The evidence is when they have seen others speak up and what happens.

The CHAIR: So would you say that it is a systemic sort of culture in the organisation, or is it in pockets?

Ray MICHELLE: No, there will be pockets, but when you have the division that is set up to support, then therefore it is concerning for the people to say, ‘Gee, I can’t even go to those people.’

The CHAIR: Are there consequences for those people that do speak up, and what are those consequences?

Ray MICHELLE: The consequences are that they feel they become targeted. And it can be quite subtle in terms of people who have allegations put against them that someone said various things and, ‘Oh, you’re stood down while it’s investigated by the conduct unit’, all those things that never happen, but the stress that it puts those people under. And these people have paramedic degrees, and there are not too many people out there outside the ambulance service that have them. If you have got a young family and those sorts of things, you have got to zip up and shut up, because the risk of you doing anything else can put your family life at risk.

The CHAIR: Do you think it is suppressed then? Any complaints, any ideas for improvement, any suggestions that are constructive – all suppressed?

Ray MICHELLE: Well, we do not know, but you would suspect so, because even if things were investigated and we saw that they were not something that would work well, at least they had a voice. The problem is they do not have a voice at the moment – and voices happen in other ways, where people do work-to-rules or call in sick and do other sorts of things, because that is the only way they can have a voice without a voice.

The CHAIR: Okay. I will pass it on to my colleague Mr Batchelor now.

Ryan BATCHELOR: Thank you, Chair. Mr Michelle, thanks so much for your evidence and your submission. Obviously it has been a very difficult time for you. I am interested in the subject of some processes. You have got concerns about the conduct of the professional standards unit or behaviours unit – if I have not got the name right, forgive me. There are a range of things that are in place to try and provide mechanisms for people who are concerned about the conduct of organisations external to the organisation to take advantage of, through, for example, public interest disclosures, whistleblower protections, allegations of corrupt or improper conduct in the public sector. To what extent do you feel that you have been made aware of those avenues that might be available to someone who is in your sort of circumstance?

Ray MICHELLE: Personally I have not. I guess I am in a different situation and stage of life, but there are paramedics who believe that they have used the – is it the Attorney-General? There is a parliamentary process that they have used that has fallen on deaf ears, apparently.

Ryan BATCHELOR: Right. Obviously people have mechanisms to make complaints about improper conduct or corrupt conduct in the public sector – to IBAC, for example. Are you aware of any such complaints that have been made?

Ray MICHELLE: I am not. I have not been told of IBAC. I have only been told of – I am hoping I am saying this right – the Attorney-General’s office, or somewhere like that.

Ryan BATCHELOR: The ombudsman, maybe?

Ray MICHELLE: Maybe. It is one of those type places. Definitely not IBAC, because that is not one that I have been aware of, but they have said that they tried that to do some independence, and it was not successful.

Ryan BATCHELOR: One of the things that I am trying to unpack a little bit is we are getting lots of evidence about concerns about the handling of complaints, and we have had a few people coming before us giving evidence, either in written form or verbally, about what could amount to improper or corrupt conduct in Ambulance Victoria, which is a public sector agency. What I am seeking to just get to the bottom of is Parliament has established independent agencies that are designed to receive such complaints. It does not always appear that people are aware of the opportunities they have to make those complaints and the protections that might be available to them if they are a whistleblower. I am just trying to understand a little more about what is it that you as an individual in this circumstance were aware of, so we might be able to make recommendations about greater awareness raising for people such as you in the future who do face similar circumstances – how there might be better support made available for them.

Ray MICHELLE: I would say, if that is the case, when I raised issues like this to Minister [REDACTED], I think was the minister of ambulance at the time, that would have been the opportunity for that office to say ‘This is where you should be taking this.’ All correspondence, which I am happy to provide, will show you there was no indication of that at all. So the same as the board again – no indication of those other alternative methods that people, or me either, could have used. And I would have passed that on to anybody.

Ryan BATCHELOR: And nothing from Ambulance Victoria itself?

Ray MICHELLE: No, no, and based on their culture they would not. But yes, there was opportunity for I am sure it was Minister [REDACTED]’s office at the time who I wrote to and called, and they provided no direction in that way.

Ryan BATCHELOR: Okay.

The CHAIR: I might hand over to Ms Crozier now.

Georgie CROZIER: Thank you very much, Mr Michelle, for being before us. I appreciate that, and your evidence. To follow on from Mr Batchelor’s line of questioning, I want to understand a little bit more about when allegations are made against an employee, because it appears from the evidence we have received through submissions and what we have heard this morning that it is rife right across the organisation. You have just mentioned that you wrote to Minister [REDACTED], who was only the Minister for Ambulance Services for a very short time. Can you recall when you wrote to the minister? I mean, there has been a revolving door of ministers, as well as CEOs.

Ray MICHELLE: I am more than happy to provide this committee the letters that I wrote and emails should they be requested – very happy. I am saying Minister [REDACTED] because that is off the top of my head, but it may have been – it was the minister at the time, their office that I wrote to.

Georgie CROZIER: That is fine. It is just that there have been a number of ministers and the sort of abrogation of duty in terms of what is going on here. We have got multiple issues within Ambulance Victoria that have been well known for many years, and we have not really had clarity on the issues until this inquiry was established, I would suggest. I want to understand, given that you said paramedics have confided in you but fear reprisal if they speak out: over what period, and how many have confided in you about their concerns?

Ray MICHELLE: During the time I was in Ambulance Victoria that was my job for people as their chaplain. Since I left, based on the establishment of the relationship I had, they have been able to source me and feel safe to talk to people. Now, I would speak to at least one if not two a week.

Georgie CROZIER: Now, currently?

Ray MICHELLE: Oh, currently. Absolutely. Because you have got to go to a safe space, and this is the part that I am trying to explain here today. Even if you are a chaplain in the organisation remaining, or since –

Georgie CROZIER: So we are talking about dozens of people, hundreds – what sort of numbers are we talking about?

Ray MICHELLE: If I have got two a week, I would had to have spoken to at least 30 people in the last year, some of those people on more than one occasion as things had become quite stressful for them.

Georgie CROZIER: Thank you.

The CHAIR: I will ask Ms Ermacora. You can start your questioning now.

Jacinta ERMACORA: Thank you. And thank you for coming to the inquiry and telling your story. There are so many different areas I could ask questions about, so I will just get started. Ambulance Victoria has begun publishing de-identified case studies of complaint outcomes to enhance understanding and learning and to increase transparency. What is your view on that? Is that helpful? Is that a helpful strategy, and have you seen that happen?

Ray MICHELLE: Are you saying issues that have gone before the professional conduct unit de-identifying

Jacinta ERMACORA: Yes, included.

Ray MICHELLE: And send them out? I have not seen them, and I have not heard of them for the frontline staff, which is who I am in contact with. The question that they would ask is about the length of time of their investigations, and that is the thing that I would question. I had somebody the other day for whom it had been nearly 12 months while their case had been going before the conduct committee. That is not acceptable for a young person, to have that stress hanging over them, and there has got to be some accountability here for that.

Jacinta ERMACORA: So you are saying that speedier resolution of complaints would be more effective.

Ray MICHELLE: Well, of course. It stands to reason that if somebody has been accused of something and at 12 months on they still have not had an outcome, you can appreciate that would be impacting on their mental health, their family and such like. They are in many different spaces, and particularly if that is what their passion has been through their life – to get their paramedic degree and become a paramedic – whether the allegations against them are true or false, the story that comes behind that is not acceptable. Admittedly we have got the one of the man that wrote up about the accident, the crash, and he was an NPT employee, but of course he was directed to be let go by Ambulance Victoria. It is another example of somebody speaking up and just having these issues.

The CHAIR: Yes. We might pass on to Dr Heath now.

Renee HEATH: Thank you so much. Thank you, Mr Michelle. A lot of people in their evidence have spoken about how there has been an allegation made against them and then they have had to go through this lengthy process of up to two years when really there has been no evidence of their wrongdoing. I just wanted to know: once that allegation has been made, what are the steps of the process that you then go through?

Ray MICHELLE: From the time that the allegations are heard, you are told that you are down. Then you will get a letter that comes and will have a date when you are to respond, and then after that, again you hear nothing for months and months. Many requests are made, but they are saying, 'We're still investigating punitive,' as I have said. Many of these did not even need to get to that standard. There is enough CCTV to see, if someone said you changed your uniform in a public area, if that was true or not. The facts are there. Look at it – did it happen or did it not? – rather than putting an employee through such things like that.

Renee HEATH: Are other staff or team members notified that you will not be at work because you are going through an investigation?

Ray MICHELLE: No. It is complete silence.

Renee HEATH: You just disappear?

Ray MICHELLE: You just disappear, and that is exactly where the concern happened at the time.

Renee HEATH: Wow. Then if you are exonerated, what is the process then?

Ray MICHELLE: For me, I resigned in the end, because six months on they said, 'We've seen you've contacted a couple. Let's begin an investigation process again.' I thought, 'I'm tapping out.' But I am lucky enough, at 63, to have the opportunity of not needing to be in that situation. There are many young people who do not, and when they return to work, depending on the length of time, they will have some what they call three-ups, where they will ride with two other experienced people and all those sorts of things. It is like, 'Just return to work and go on.'

Renee HEATH: Thank you so much.

The CHAIR: Thank you, Dr Heath. We will now pass on to Dr Mansfield.

Sarah MANSFIELD: Thank you. We have heard from several witnesses, and there are lots of submissions that I think highlight different concerns from people who have worked in AV, either about vexatious

complaints being levelled and being unfounded complaints or having complaints that were not listened to or acknowledged, which they felt were genuine and were not handled appropriately. There are two sides of the coin that perhaps speak to some bigger structural problems and cultural problems within the organisation. In terms of changes you would like to see that you think would address some of these concerns, what would they be?

Ray MICHELLE: I think you are right. There are some on both – well, I do not think you are right; I know you are right, so that is not even a doubt. The issue is it is the independence of the people investigating, and that is the part that needs to happen. The timeliness needs to be there but also the assessment of things. If there is clear evidence of whether it did occur or did not occur, if you are going to actually put an allegation to somebody, it needs to have when it happened and all those things, not just a general ‘We’ll investigate it’, because that does nothing for the person. Whether it is vexatious or whether it is not being listened to, if we are making a complaint, it has genuineness. It needs to be independent so people can feel that they can actually not be at risk or become targeted, as in the cases that we have talked about today. It begins at the top, unfortunately.

Sarah MANSFIELD: Do you think that people working in AV have trust in the existing systems to handle complaints?

Ray MICHELLE: Absolutely not.

Sarah MANSFIELD: You have pointed out that independence and improved timeliness of investigation of complaints would be the improvements you would like to see.

Ray MICHELLE: Also validating the genuineness of them right from the beginning.

Sarah MANSFIELD: Sorry, is that my time, Joe?

The CHAIR: Yes, it is.

Sarah MANSFIELD: No worries. All right. Thank you.

The CHAIR: Thank you. And lastly, Ms Payne.

Rachel PAYNE: Thank you, and thank you for presenting to us today. I just wanted to touch on – you mentioned that in your role as chaplain you have provided support to Ambulance Victoria employees or that they have reached out to you for support. Throughout this inquiry we have heard from a few witnesses that there is concern about workplace culture. I am just wondering if you would like to anecdotally share some of the themes that you are hearing from employees around workplace culture.

Ray MICHELLE: Anecdotally, particularly there are things such as when they are on WorkCover, the process for that. If they are feeling like they are being bullied or not supported, then to speak up if they have got – and I guess many of these people are also younger people who have children and things, and there is being able to work around the balance of family life and such like. Also when things do fall over – you know, in our mental health world, every now and then people do have a moment, and we do not need to carry that label with us forever, but at that point in time we need support – I need to be able to move on from that and not have that carried with me. I also need to have my mental health respected in terms of saying if this is the allegation, let us sit down and see if it is resolvable or if there is there an ulterior motive that makes me feel like I am targeted. There is just so much of that sort of thing.

But I guess the other concern is the way that it does not feel like it is a changing door at the top: despite all the changes we still have – some of those people I have mentioned today have survived the VEOHRC, survived the investigation, survived everything, and suddenly they are becoming heads. And when they become connected in to the head of the union, their way to do things differently is perhaps a whole lot of us will call in sick or do something like that. It does not enhance the culture, but when I have got no voice, I have got to act in a way that I can.

Rachel PAYNE: Thank you.

The CHAIR: Okay. Thanks very much. That brings an end to the questioning and to this session. Ray, thanks very much for your time today and your contribution; we appreciate it. We will call this session closed. Thank you.

Witness withdrew.