Sexual Abuse - Seeking Compensation

In October 1996, Archbishop George Pell announced a range of initiatives to respond to allegations of sexual abuse made against priests, lay persons and religious who are or were under the control of the Archbishop of Melbourne. One of these initiatives is the formation of a Compensation Panel, which will provide recommendations, binding on the Archbishop, to make ex gratia compensation payments to victims of sexual abuse within the Archdiocese.

The Panel is intended to offer applicants a forum in which they can seek fair, just and speedy ex gratia compensation in settlement of their claims, in an informal and cost effective manner.

The maximum payment that can be recommended by the Panel is $50,000 per person. In formulating its recommendations, the Panel will rely on findings of fact made by the Archbishop's Independent Commissioner, Mr Peter O'Callaghan QC. The Panel will also consider medical and other information submitted to it by applicants and, in addition, it may conduct its own enquiries.
HOW TO SEEK COMPENSATION

1 To seek compensation an applicant will need to complete the “Application for Compensation” form attached to this brochure. Completion of the form will affect the applicant’s legal rights, and applicants are encouraged to seek independent legal advice before completing the application.

2 The Panel will consider the application for compensation only after it has received a report from the Independent Commissioner following his investigation of the complaint. The Commissioner will not report to the Panel unless the applicant has consented to this. A “Consent to Independent Commissioner” form is attached to this brochure. The Commissioner will provide a copy of his report to the applicant on request.

3 After the Panel receives the application and the report from the Commissioner, it will invite the applicant to provide it with material relating to the consequences of the abuse on the applicant. Some notes about this material:

- The Panel will rely exclusively on the report of the Independent Commissioner as to the facts surrounding the abuse. An applicant who wishes to supplement the Commissioner’s report on such facts will need to raise this with the Commissioner.

- The Commissioner’s report will usually not deal with the impact of the assault on the applicant. Consequently, applicants will be asked to provide this material to the Panel. They may wish to place before it medical or other reports. Applicants who have sought assistance through Carelink may also authorise Carelink to provide information directly to the Panel. (Carelink cannot provide any information to the Panel without that authorisation. A “Consent to Carelink” form is attached to this brochure).

- In some circumstances applicants may be asked to undergo medical or other examinations or to provide additional information.

- Ordinarily all material for the Panel should be provided in writing, although in appropriate cases meetings will be arranged.

4 In considering the issue, the Panel will not be bound by the compensation principles that apply in court. It will make its decision on all material presented to it. Essentially it will have regard to the physical, mental and spiritual effects of the assault on the applicant.

5 The Panel will formulate its recommendation to the Archbishop as to the ex gratia payment to be made. The applicant will be advised of that recommendation.

6 If the recommended amount is acceptable to the applicant in full settlement of his or her claims against the Archbishop and the Archdiocese of Melbourne, this amount will be paid by the Archdiocese upon the applicant signing an adequate release and discontinuing any pending legal proceedings.

7 If the recommended amount is not acceptable to the applicant, the applicant may pursue other remedies, but in the course of so doing, may not rely on what has transpired before the Panel. All matters that have transpired before the Panel remain confidential.
APPLICATION FOR COMPENSATION FORM

I, ........................................................................................................................................................................

(Full Name)

of .........................................................................................................................................................................

(Address)

apply for ex gratia compensation from the Archbishop and Archdiocese of Melbourne in respect of sexual abuse
committed against me as found by the Independent Commissioner appointed by the Archbishop, and I make this
application upon the following basis:

(a) the amount of compensation (if any) will be determined by the Compensation Panel that has been appointed by
the Archbishop,

(b) the Archbishop will offer to me such an amount as may be recommended to him by the Panel, provided I execute
appropriate releases and discontinue any relevant legal proceedings,

(c) if I reject the amount offered to me by the Archbishop, the Archbishop acknowledges that any rights that I may
have to commence or continue legal proceedings against him are unaffected by my application for compensation,

(d) neither I nor any person acting on my behalf, or any member of the Panel, or the Archbishop or any person acting
on behalf of the Archbishop or the Archdiocese, will (save as required by law)

(i) disclose to any person,

(ii) rely or seek to rely in any arbitral or judicial proceeding (whether or not such proceeding relates to the subject
matter of this application) on

any communication, statement or information, whether oral or documentary, made or provided in the course of or in
relation to the Panel's deliberations,

(e) I will not call any member of the Panel as a witness or subpoena or demand the production of any records, notes
or the like made by or for the Panel in the course of or in relation to its deliberations,

(f) I and each member of the Panel and the Archbishop and his advisers will, unless otherwise compelled by law,
preserve total confidentiality in relation to all matters arising in the course of or in relation to the Panel's
deliberations, whether documentary or oral, that may be provided to the Panel or to me,

(g) I irrevocably waive any rights that but for this provision I may have had to seek judicial review of any act or
omission of any member of the Panel.

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(Signed) ........................................................................................................................................................................

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(Witness)

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(Date) ........................................................................................................................................................................

(Full name and address of witness)

Please send to: Compensation Panel, Archdiocese of Melbourne, Optus House Level 36 Suite 35, 367 Collins Street, Melbourne Vic 3000.
CONSENT TO INDEPENDENT COMMISSIONER FORM

Notes:

1 Before seeking ex gratia compensation from the Compensation Panel, you need to have made a complaint to the Independent Commissioner. If you have not yet made a complaint, please telephone the Commissioner’s office on (03) 9631 7244 for further information.

2 To help assess your claim for such compensation, the Panel will obtain a report from the Commissioner containing his findings as to the facts relating to your complaint. If you have not already done so, you will need to give the Commissioner your consent to him disclosing information about you to the Panel. You may give him your consent by completing this form.

TO: Independent Commissioner
    Mr P J O’Callaghan QC

I, .................................................................

(Full Name)

of .................................................................

(Address)

wish to make an application to the Compensation Panel. I authorise you to communicate to the Compensation Panel and its members all information about me that they may request or require to assist them in assessing my claim for compensation. This request includes, without limitation, both information that I have provided or disclosed to you and information about me that you have obtained from other sources. I authorise you to prepare a report for the Panel as to the circumstances of my claim and to communicate that report and the material on which it is based to the Panel.

I authorise you to conduct such further investigations into my claim as you may consider appropriate or as the Panel may request.

☐ Tick box if required. I ask you to forward to me by ordinary mail at the address shown above a copy of the report that you prepare for the Panel.

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(Signed)

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(Witness)

..................................................................................................................................................
(Date)

..................................................................................................................................................
(Full name and address of witness)

Please send to: Compensation Panel, Archdiocese of Melbourne, Optus House Level 25 Suite 30, 157 Collins Street, Melbourne Vic 3000.
CONSENT TO CARELINK FORM

Notes:

1. If you have not sought treatment or counselling through Carelink, this form does not apply to you.

2. If you have sought treatment or counselling through Carelink, you may wish to authorise Carelink and anyone to whom Carelink has referred you to provide information about you to the Compensation Panel to assist the Panel in formulating its recommendations about the ex gratia compensation that you should receive. Carelink will not disclose any information about you to the Panel unless you consent.

3. It is up to you to decide whether you want Carelink or anyone to whom Carelink has referred you to provide information to the Panel. If you want it to, you should complete this form.

4. If you have sought treatment or counselling other than through Carelink, you may wish to contact your treatment provider and ask them to prepare a report for the Panel.

TO: Carelink (including any external professionals to whom I have been referred by Carelink)

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(Full Name)

of

(Address)

I am making an application to the Compensation Panel. In support of that application I wish the Panel to be provided with a professional report about my condition, the treatment, counselling and support that I have received and such other matters as Carelink and the Panel consider appropriate. I request that Carelink prepare or arrange for the preparation of a report and provide it to the Panel.

I authorise Carelink (including any external professionals to whom I have been referred) to disclose to the Compensation Panel and its members all information about me that they may request or require to assist them in assessing my claim for compensation. This request includes, without limitation, both information that I have provided or disclosed to Carelink and external professionals and information that they have obtained from other sources.

I authorise Carelink and external professionals to conduct such further enquiries into my condition as they consider appropriate or as the Panel requests.

☐ Tick box if appropriate. I ask Carelink to forward to me by ordinary mail at the address shown above a copy of the report prepared for the Panel.

(Signed) (Witness)

(Date) (Full name and address of witness)

Please send to: Compensation Panel, Archibald House Level 25 Suite 35, 367 Collins Street, Melbourne Vic 3000.
Please forward all completed forms or enquiries about compensation to:

Compensation Panel
Archdiocese of Melbourne
C/- Mr P.J. O'Callaghan Q.C.
ODCW, 18/15
205 William Street
MELBOURNE 3000

Telephone (03) 9225 7979
Fax (03) 9225 7114