

**1. Real examples of how the abuse is allowed to continue.**

- a) At the end of April beginning of May, I took [REDACTED] on a tour of the Heatherton site. She mentioned to me, her friend who was an Auditor, had told her about a small room a back of site at Heatherton site. This room was used to 'lock clients in'. While walking around the site, [REDACTED] and I came across a small room. She exclaimed, 'this looks like the room which her friend had described.' This room was the size of a large cupboard. I said this "couldn't be true" and surely 'people would not put people in there'. She said that it was and this was exactly what had been described. She went on to say these stories 'regarding putting clients in cupboards' were notorious and 'common knowledge' in the Disability sector and many people knew about it.
- b) [REDACTED] (My previous Manager) had assured me [REDACTED] would receive a full handover of what I reported on the 21 of April 2015; I asked [REDACTED] about the 'Box' and if it had been reported to DHHS? She said that she did not believe that it would be reported. I asked if I needed to put in an Incident Report to ensure it was? [REDACTED] said, the organisation was addressing this, and I "didn't need to". I took this to mean [REDACTED] would be making a future report and it would be addressed by the Organisation. I was only made aware this had not occurred while raising my concerns with the Disability Commissioner.
- c) On the 29<sup>th</sup> of May 2015, I notified [REDACTED] of a staff to client assault that had occurred at the workplace, based on what had been reported to me. Instead of filling in an Incident report, [REDACTED] asked me to wait for the staff to fill in the reports. On the 1<sup>nd</sup> of June 2015 I emailed two incident reports regarding 3 staff assaulting a client. At this time I still did not have the fax number from the DHHS to submit this directly myself. These reports were not submitted to DHHS and when I followed this up with DHHS, [REDACTED] claimed never had received the reports. I submitted the Incident Reports again on the 4<sup>th</sup> of June 2015. In an email, I was asked to change the Incident Categories. I refused to do as by this time I had already described the incident to members at DHHS and they agreed what was described was a Category One. The following week [REDACTED] started to allude there were 'staff complaints' about me and then on the 9<sup>th</sup> of June 2015 [REDACTED] changed my job role and increased my responsibilities in a new induction plan. This new induction plan included shortened and unrealistic work timelines.
- d) By mid June, and in later discussions held with [REDACTED] about the abuse she said, "abuse is everywhere, it is in every organisation and it is even at DHHS". I agreed with this statement and I added in this case we held positions to manage the people who participated in this abuse and

set the standard. She said to me that if I can't handle this abuse and 'I need to ask myself if I could really handle this job.' I replied, "for me to do my job, I need to be able to manage this abuse and manage the people who are abusing." No further strategy was discussed.

In this conversations [REDACTED] also stated staff had complained I had stopped them from using restraints and they did not know how to "work" with clients unless they were using "restraints". I said to [REDACTED] "If staff did not know how to work with clients without 'restraining' them, the staff should not be working with clients." [REDACTED] did not respond.

## 2. Fraud

- e) Actual 'evidence' is tampered with during these complaints and discussions. This includes: denying receiving incident reports, denying receiving work cover claims, medical certificates, denying receiving staff records, job applications notes, work records are deleted and other general workplace information is tampered with. Information is shared with the intention of being misleading. The purpose of this is to protect the Autism Spectrum brand and it's people.

## 3. Other Departments

- f) I have tried to engage with other departments and authorities in the hope further support would be available to address these issues. These departments and the their response often surprise me.

One example is:

I received a letter from Work Safe notifying me of their initial assessment following my complaint. [REDACTED]

I am not sure how this could be the outcome given the extent of what I have been describing. My original complaint was very broad. In this case and even though I specifically requested the assessor to attend the Heatherton work site, as reported to me this was not done.

I have asked for feedback in relation to this assessment and I was referred to the team leader. I spoke with the team leader as stated in the letter to do so, who later sent an email to raise this matter to the CEO of Work Safe. My questions remain unanswered. I have no doubt the process was followed to gather the information, this highlights how the system supports abuse and other departments are unable or unwilling to exercise its authority. Information regarding this processes, what was done and information shared by the organisation should also be made available to the complainant. This has clearly not offered nor to I have a clear picture of events.

Lastly, there are not enough protections for complainants. I am not doing this for me. I am doing this for the remaining clients and staff at the site. I hope people will see the need for change and assist.

#### **4. Recommendations**

- g) Better and more genuine attempts to resolve issues. If there are complaints about Abuse and the history of abuse, a stronger level of protection and actions from other Departments to protect the interest of the clients/staff. A coordinated approach between departments in these care environments would be more efficient. Cross-referencing of information would assist in false claims being made and therefore being sufficient addressed.
- h) If a Work Cover claim is accepted based on bullying this should be a trigger to a Work Safe to begin an investigation. It should not rely on the person who was bullied to bring the complaint.
- i) Better protections for complainants, which includes protections around employment, employment matters and superannuation. Removing people who complain does not stop the abuse. It just stops the abuse from being reported.
- j) Changes to other Legislations, which includes grater protections for Whistleblowing Powers and protections for Whistle-blowers. These protections should include protection for employment, access to compensation and superannuation.

#### **5. Conclusion**

I have not benefitted nor have I received any reward for raising these issues. The only reason why I am doing this is because people who know more and should be doing more: aren't. This story should be documented because it highlights serious issues with the current disability services' system. There should be a complete overhaul of the disability and special education sector as it is completely failing clients, children, family and good staff. I want to ensure the public is made aware of the standard of care; people at the service have been experiencing. I want to highlight how the system supports abuse and abusive practices. Complainants are 'got rid of, threatened and punished' for raising these concerns. This whole story is not okay with me and so I will continue to work towards abuse prevention for people with disabilities in this country.

Karen Burgess