

Submission to Senate Committee inquiring into the conditions of employment of state public sector employees and the adequacy of protection of their rights at work as compared with other employees.

(Submissions should be received by **15 February 2013**. The reporting date is **17 June 2013**.)

After 18 years of public service, I was made redundant by Queensland Health on 30 September, 2012.

I was one of the first Queensland Health staff to lose my job in North Queensland, because at the time I was a 'surplus officer'. My role as North Queensland manager of public affairs had been restructured in 2009 after the state election and machinery of government changes. My role changed from an AO8 manager of nine staff—coordinating health and disaster communication, media liaison, graphic design and briefings, and reporting to a local area health manager - to an AO8 media manager with no team, reporting directly to Brisbane. The decimation of my former role and apparent disregard of my expertise in health and disaster communication led me to relinquish my role in 2010 and become a surplus officer within Queensland Health. This meant I could retain my employment with the department while seeking another permanent role.

I spent my two and a half years as a surplus officer building my skills in disaster management and outbreak control, while seeking a permanent role in the department. I worked as planning officer for six months in the dengue emergency operations centre, helping to coordinate control of the 2009 dengue epidemic which affected 1000 people and killed one. I then managed the public health response to pandemic influenza in North Queensland for six months. My other roles included developing disaster plans for North Queensland health services, incident controller for a malaria outbreak in the Torres Strait, operations officer for the public health response to the 2010-11 southeast Queensland floods (I was handpicked for this role), public health incident controller after Tropical Cyclone Yasi, and a 6-month project assessing the risk of communicable diseases in the Torres Strait, including the Torres Strait-PNG Treaty Zone. Given my expertise in public health and my management experience (in both Canberra and Queensland), I was asked to act as the Senior Director of Tropical Regional Services, Queensland Health—with a staff of 150 across four provincial cities—five times during my time as a surplus officer.

During this time, I was offered four or five permanent roles in Cairns, but in spheres outside of my expertise. I elected not to take up these positions, but to retain my surplus officer status and await a more suitable position.

On 6 August 2012, I received an email which I first thought was spam:

>>> Payroll\_Master\_Data\_Validation 6/08/2012 4:18 pm >>>

Dear Ms Spencer

The Public Service Commission recently released Directive 04/12 - Early retirement, redundancy and retrenchment relating to employees requiring replacement. You have been identified through Recruitment Services and HR Services as an employee covered by the requirements of this

Directive. Please find attached documentation

to commence this process.

Regards

Payroll & Establishment Services

With no prior warning, this email informed me that—effectively—I was going to be made redundant. For as much as the government asserted these redundancies were voluntary, the truth for me was this: if I did not accept a redundancy, I would be placed in a statewide pool of government officers (termed ‘employees requiring placement,’ or ERPs) for up to four months while a suitable position was sought in any department . As I had been surplus for more than two years already, I knew the chances of me finding a role in Cairns at my level (I had also elected to seek positions at a lower level) were exceedingly slim. The government’s target was to lose 14,000 positions, and if a fair proportion of those joined the pool of ‘employees requiring placement’, my chances of finding a permanent role in Cairns within four months were next to zero. I therefore consider this a forced redundancy—in logical terms, there is very little about it that is voluntary.

The process that followed was the worst human resource management and internal communication I have ever seen. For one at the peak of her career, who had dedicated such a significant amount of time to improving the health of Queenslanders, the redundancy process was extremely traumatic. Even as I write, four months after my redundancy, tears come to my eyes at the injustice I feel. All I ever wanted to do was serve the public and I have been denied that opportunity.

I complained to the Director-General, Health Minister and Premier about the poor (and rather callous) way in which I was first notified of my impending redundancy. The replies from the Minister and Premier are attached ; I never heard from the D-G.

Around this time I was matched to a new position at A08 level in the Cape York Hospital and Health Service—board secretary. I was interviewed for this position, but was not successful. I was however offered a temporary position at a higher level, which I agreed to consider.

I knew the board secretary position would also become available in the Cairns and Hinterland HHS, and as a QH surplus officer, I should have been offered a skills assessment to see if I was a suitable match, but this never occurred. By chance, a colleague notified me that this vacancy had already been sent to the Public Service Commission to find a match in the ERP pool, thereby bypassing the Queensland Health process of seeking a suitable local surplus officer. Despite repeated inquiries of People and Culture (HRM) staff in the Cairns and Hinterland HHS, and in Corporate Office, no-one was able to tell me why I was never matched to this position. I contacted the Public Service Commission who advised me that there must have been an ‘error’ in the Queensland Health surplus officer process. The outcome: I was denied the possibility of a permanent position in Queensland Health in Cairns.

The next HRM blunder was the advice I received about taking up a temporary position with QH after being ‘offered’ a redundancy. Around this time, Queensland Health changed its HR policy so that surplus officers could not be placed in temporary positions (which is how I had been employed since becoming surplus). Corporate Office HR staff advised that I could take up the temporary position offered by Cape York HHS, but I would still be made redundant from my permanent position, and would have to pay back part of my redundancy package (as per Government Directive 04/12, excerpts at . The severance portion of the redundancy package is two weeks pay for each year of service (18 years in my case); the other components are 12 weeks incentive payment for taking redundancy on initial offer, plus leave entitlements.

Further inquiries revealed that were I to take the temporary position in Cape York, no guarantee could be given that I would receive any kind of severance payout at the end of the temporary contract. And of course I would be out of a job.

My choice appeared to be either take the redundancy package (36 weeks severance plus 12 weeks incentive = 48 weeks pay, plus leave entitlements), or take up the temporary job and pay back the

severance payout (36 weeks, minus 20 days grace period offered by the government for redundant staff re-employed by the government). So for eight months I'd have to pay back everything I earned while temporarily employed. And either way, I would no longer be eligible for QSuper's Defined Benefits Scheme.

Given the complexities of my situation, I sought legal advice (at a cost of \$250 an hour). The lawyer advised that I should take the redundancy, ensure a clear separation from QH and that my payout was in the bank, before taking up any temporary position with government and negotiating paying back the severance portion (HR staff could give me no information on how this might be done).

So I accepted the redundancy and was celebrating/commiserating the end of my public service life with colleagues on my last day when the head of HR rang from Brisbane to say I could not take a redundancy and then a temporary job. I argued this, since Government Directive 04/12 says QG staff can indeed be reemployed by government. But she would not accept this.

A couple of weeks later I met with the manager of the Cape York HHS, who gave me a letter prepared by the head of HR confirming her belief that I could not be re-employed by Queensland Health. The manager nonetheless wished to employ me and negotiated for me to be sub-contracted to QH through a non-government organisation. I did this work for two and a half months before accepting part-time work with a university.

During the redundancy process, the lack of effective HR management, communication and advice was appalling. Before seeking legal advice, I sought information about unfair dismissal remedy (not applicable to Queensland public sector employees) and then information about workplace rights from the Queensland Industrial Relations Commission. Unfortunately, the Newman Government abolished the Workplace Rights Office in June 2012:

<http://www.archivessearch.qld.gov.au/Search/AgencyDetails.aspx?AgencyId=11497>:

Agency ID	11497
Title	Queensland Workplace Rights Office
Agency Type	Statutory authority
Start Date	2/7/2007
<b>End Date</b>	<b>29/6/2012</b>
Date Notes	N/A

Abstract

Responsible for the functions of the Queensland Workplace Rights Ombudsman, which include facilitating and encouraging fair industrial relations and work practices in Queensland.

Last month, QH re-employed me for two weeks to help manage the dengue fever outbreak in Cairns, as many experienced disaster management and outbreak control staff had been made redundant. The Office of the Chief Health Officer approved my re-hiring through a recruitment agency (i.e. sub-contracted to government again), meaning the government paid me my AO8 hourly rate, plus a significant hourly rate to the recruitment agency.

I was one of the first in my workplace to be made redundant, and as an occasional acting director of 150 public health staff, was able to support some of the 65 others made redundant late last year. The change management was non-existent and to see so many careers and health services abolished in such a callous manner was soul-destroying.

I consider myself relatively fortunate—I have 11 hours work a week at university for six months, and can afford to spend the rest of my year finishing my Masters degree in Public Health. Some of my redundant friends and colleagues have not been so fortunate—the highly-qualified Indigenous nutritionist who may have to relocate her family to Perth for work; the highly-regarded public health physician who has dedicated 20 years of her working life to improving Indigenous health suddenly seeking a job at 58; the public health manager with little kids and a big mortgage who has taken on a short-term project in the Northern Territory away from his family. The Queensland population will suffer when the abolition of preventative health programs begin to take their toll on rates of obesity and chronic disease.

Last week we buried the man who recruited me all those years ago to Queensland Health and who

made such a difference to the lives of so many in Australia, Professor Ross Spark. He also recruited me to my university job, where I hope to carve out a new career in public health with an employer who values my expertise. When I lost my QH job and was feeling particularly bitter about it, he told me this little story, which I tell to others who are made redundant:

Think of yourself as a lion tamer, and Queensland Health is the lion. You have lots of interesting, challenging times together while you're trying to tame the beast. You might even think of yourselves as friends, but one day, the lion is going to turn around and bite your head off. The thing is, you shouldn't take it personally. After all, it's a wild animal.