

My Director ended my employment at [REDACTED] because she decided that my Mental Illness was preventing me from performing my work responsibilities. At the time I was suffering from anxiety, and was in regular consultancy with my Psychologist and Psychiatrist and was using a low level Zoloft to manage my symptoms. I managed this condition successfully without impact on my work performance. In fact the only occasion where the Director came into my office for the sacking was the first time ever I had received this feedback. All preceding annual Performance Appraisals were contrary to what I expected from her – as they were all good. In addition , I had two financial audits conducted by a public company that found my financial management was okay and not lacking anything .

What followed was not support from the Hospital but rather a contest of my claim for Work- Cover. (I was unable to return to the workplace due to the breach of trust and the bullying.)

Almost two years later the Hospital paid me a paltry 13 weeks salary for the period I was away, which was used to pay for my legal costs .

So the issues for the Commission are considerable if this casew is to be prevented in the future:-

1. Establish a separate “complaints body” (similar to the powers vested with the Health Complaints Commissioner).
2. Each “crediantialled” workplace to be provided with a person to liaise with the person with MH condition and that “complaints body”.
3. Separate budgets need to maintained to carry the responsibility of costs – no matter whatby the Govt (not the Agency) because once money comes into the picture then all progress is halted.

This is my story....

In the weeks leading to my sacking at [REDACTED] I was experiencing high levels of anxiety that was a result of intimidation, bullying and harassment that ultimately led to me experience the form of anxiety that once triggered deprived me of the ability to work, speak coherently and caused a number of other physical problems that prevented me from working.

Observing the behaviour from [REDACTED] there is little doubt that they have serious flaws in the way they managed this issue.

- I have **never ever** received a warning or even a hint that my performance was at odds with what I had been doing.
- On the contrary all reports (written and verbal) to me had been nothing short of exemplary.
- Whilst I could have challenged them at any stage I did not do it as I was under shock that this was occurring to me(I had had the misfortune of acting this very style of dismissal for my manager only 8 months earlier on my staff! I had to do this under instruction from Ms XXX “secure the staff member’s resignation after warning her about her work 3 times.
- The notes from Ms XXX admit that I would have been performance managed out - (even though there was only positive reports in existence for my performance)

Some of the unresolved questions we must surely ask ourselves is did something really happen to trigger the response that led to the cessation of work by myself or did I fear the consequences of Performance Management that the Manager, Carer services will lead you to believe that resulted in the greatest acting performance I would have to pull off to cataclysmically destroy my employment relationship with the [REDACTED] and indeed my future employability using knowledge and skills I had developed in a lifelong career.

If you are to consider the statements made by the Manager and three other testaments for my performance in the period 2015-

2016 you should in all fairness consider some of the facts in which the context of these elaborate claims are hidden.

Some of facts are :-

1. I have managed a number of grant programs (\$10m) and have acquitted all budgets satisfactorily each year.
2. I have had to undergo several Audits all which has given my reporting and management of funds the tick of approval.
3. I have also had two annual performance appraisals undertaken by my Manager [REDACTED] both have no mention whatsoever of the sorts of claims being made. Instead all her reports of my performance have been quite the opposite with recommendations only for me to undertake a feasibility to make changes in the way we could decipher improved transparency in the recording and reporting of costs.
4. I have never received any work related warning that one would expect to receive to justify the behaviour of senior staff towards me in the month prior to my ceasing work.

During this period I prepared extensive financial reports (monthly) and specific reports to the following stakeholders:-

1. Commonwealth Grant Providers (grant acquittals)
2. State Government
3. Audits on my Financial management processes (subsequently validated by Stakeholder Financial Services staff)
4. External Auditors (this was done twice 14/15 & 15/16)
Both reports noted major flaws in the data base system and recommended urgent attention to remedy the data base.##

The database system lacked controls and allowed any staff to adjust the budgets and costing without tracing and my

review of the system was that it could not be trusted for reporting

The environment was not without stresses (except when the Manager mentioned above got involved) and so it was a massive departure for me to experience the level of behaviour in the month of July 2016 that culminated with my exacerbation of anxiety to the point where I needed to seek professional help.

Interesting, my lawyer who has been acting for me suggested that the [REDACTED] had confirmed that they believed I still had my job available to me and that he understood some of the people involved in this debacle had received a stern talking too.

The [REDACTED] waited in silence until 28/6/17 and then issued a letter not reinstating my contract beyond 1/7/17.

The [REDACTED] have yet to apologise for their handling of this situation and continue to hold crucial information to me about final salary adjustments and as yet I do not have specific Payroll data to lodge tax returns

Your contribution

Should you wish to make a formal submission, please consider the questions below, noting that you do not have to respond to all of the questions, instead you may choose to respond to only some of them.

1. What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?

Commence education of the subject in Primary school

Create and maintain public awareness - all media to be supported

Make it mandatory to employ a MH Wellness coordinator in all workplaces – especially at [REDACTED] where I experienced the worst experience.

2. What is already working well and what can be done better to prevent mental illness and to support people to get early treatment and support?

There is no review of things when they go wrong or pear shaped . Cover up and shame by the organisation or forced cash settlements are used.

3. What is already working well and what can be done better to prevent suicide?

Again whilst lip service exists for a structure that blatantly discriminated against a Parkinsons sufferer . The outcome was obvious as there were people in power collaborating with HR to ensure that I did not return to work.

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| 4. What makes it hard for people to experience good mental health and what can be done to improve this? This may include how people find, access and experience mental health treatment and support and how services link with each other. |
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| 5. What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this? |
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| 6. What are the needs of family members and carers and what can be done better to support them? |
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7. What can be done to attract, retain and better support the mental health workforce, including peer support workers?

8. What are the opportunities in the Victorian community for people living with mental illness to improve their social and economic participation, and what needs to be done to realise these opportunities?

9. Thinking about what Victoria's mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change?

10. What can be done now to prepare for changes to Victoria's mental health system and support improvements to last?

11. Is there anything else you would like to share with the Royal Commission?

My experience with [REDACTED]

See attached

