

Entry Permit Holder Report

SafeWork SA

Application ID 23236587

Entry Permit Holder	
Full Name:	Elizabeth Dooley
Permit Number:	ET-24-01021
Union Represented:	South Australian Salaried Medical Officers Association
Worksite Entered	
Business Name:	NALHN Forensic Community Mental Health
Industry:	Other Health
Address:	116 Reservoir Road, Modbury SA 5092
Date workplace entered:	20/03/2026

I Elizabeth Dooley am of the opinion that the PCBU has contravened the WHS legislation relating to:			
	Suspected Contravention	More information	Was the contravention rectified?
PCBU Alleged Contravention 1	Not maintaining safe systems of work	Workers reported an exponential increase in forensic mental health patients living in the community who are legally mandated to be supervised by the Forensic Community Mental Health Service to manage their risks and remain safe and well. There are currently 215 such patients, plus 36 such patients who are in prison awaiting a bed at James Nash House JNH and not receiving the required level of care.	No

		<p>These patients have been found either mentally incompetent for an offence, which means that probably because of their psychosis or their disabilities, they didn't know what they were doing, or they might have been found unfit to stand trial, and that's most commonly with intellectual disability.</p> <p>60percent of these patients have mental illness, 20percent have dual disability mental illness plus disability, 20percent have primary disability. About 40percent of these patients have committed sexual offences or severe violent offences or homicide.</p>	
PCBU Alleged Contravention 2	Not maintaining safe systems of work	<p>Workers reported it is an extremely risky environment. In general, most patients have a treatment-resistant psychotic illness, some sort of cognitive impairment, a substance use disorder, personality difficulties and substantial sociodemographic disadvantage like homelessness. Workers reported the risks of reoffending are substantial, as patients are often breaching conditions to take treatment or follow psychiatrist's instructions.</p> <p>There is only one full-time psychiatrist responsible for overseeing the supervision of all these patients. They advise the Courts about breaches in conditions and changes in patients' risk situations. They work with a 0.5 FTE registrar and 5.2 FTE mental health clinicians. Their role is to provide treatment and ensure patients are complying with their supervision conditions.</p>	No
PCBU Alleged Contravention 3	Not maintaining safe systems of work	<p>Workers report the service is extremely strained. There is no time to do head of unit duties, or non clinical work. Efforts to reduce psychiatrist workloads have failed as there is no one else to do the work. Workers report they feel like giving up, personally vulnerable and extremely stressed, they don't see any hope for anything better in the future. One worker commented regarding the full time psychiatrist, I really don't know</p>	No

		<p>how she's done it and hasn't had a complete mental breakdown. The case load for the 5.2 FTE clinicians is unevenly spread, with some individual caseloads at the full-time equivalent of 76 patients. Workers report these case loads are unsustainable, and maximum caseloads should be 25 patients per 1.0 FTE. Workers report they don't currently have enough resources to be able to detect when things are starting to go wrong and are often responding to crises after they happen, after someone has reoffended, or already ended up psychotic and unwell in hospital.</p>	
PCBU Alleged Contravention 4	Not maintaining safe systems of work	<p>Workers report worry about their personal liability and that a lot of what they are doing is indefensible because there are no safe systems of work. Workers report that something is going to go wrong and it's just a matter of time.</p> <p>Workers report they know re-offending in their patients is completely predictable as they are aware of the risk, yet they don't have the resources to be able to do anything about it. Workers report national standards on the delivery of mental health care are not being met.</p> <p>Workers feel they have no control over their work, there are no safe systems of work, and there is no model of care. Workers report they arrive at work and just wait for the onslaught of what is going to go wrong today. Workers described the service as rapidly kind of failing.</p> <p>Workers report there are numerous patients who have not even been allocated to a clinician because we don't have enough resources and staff.</p>	No
PCBU Alleged Contravention 5	Not maintaining safe systems of work	<p>Workers report feeling panicked most of the time, completely overwhelmed most of the time, it is just the sheer volume of work that is flooding in at all times, after hours and time sensitive. Workers report the biggest thing causing stress at the moment is that</p>	No

		<p>they have been raising and escalating these concerns for years, and more intensely over the last six months, and there has been no action or very little action.</p> <p>Workers report the employer is putting both patients in the community, but also the community itself at risk. There is a direct risk that if we do not have the resources to manage this increasing cohort of community based patients, that they will be unsupervised and they will reoffend and someone in the community will be hurt. The whole purpose of our service it to try to prevent this stuff happening, so this sits extremely heavily on me as the only clinician here because I worry about what could happen and if I don't action it, there's no one else to action it.</p>	
PCBU Alleged Contravention 6	Not maintaining safe systems of work	<p>Workers report they sent a crisis management proposal to the employer's executive recently, which was endorsed by the divisional director. The executive rejected this plan, suggesting the team focus on flow. Workers report feeling hopeless and very worried about their professional liability.</p>	No
PCBU Alleged Contravention 7	Not maintaining safe systems of work	<p>Workers reported the number of forensic community patients in prison awaiting a bed at James Nash House had doubled from 20 to 40 in 6 months, and no increase in staffing.</p> <p>Workers reported this is a very complex, high-risk patient cohort. One Registrar is allocated 1.5 days per week, and another doctor just 1 day per week, to manage and treat this cohort.</p> <p>Workers reported in their other workplaces, they were allocated 10 patients to manage over 3 days per week.</p> <p>Workers reported they did not have either time or practical resources for example they don't have access to allied health. In one instance, a worker reported, the whole afternoon I was just writing updates to court. So my whole</p>	No

		<p>day I wasn't actually able to see patients.</p> <p>A worker reported, it's horrific. These patients, I wouldn't even say they're getting a very basic level of appropriate care. They're pretty much all getting substandard, disgusting levels of care. They're definitely not getting rehabilitation.</p>	
PCBU Alleged Contravention 8	Not maintaining safe systems of work	<p>Workers reported most of these patients could be released at any Court day, its unpredictable. Often we will write recommendations to the court which are not followed, so they may be released with no accommodation, and we don't have capacity to follow them up. We don't have time to make contingency plans for any of these patients, so our workload just gets pushed aside to deal with that transition to community and its just happened so many times we're months behind regular work and things get missed.</p> <p>Workers reported they had drafted a crisis management plan for forensic patients in prison, but it had not been endorsed.</p>	No
PCBU Alleged Contravention 9	Not maintaining safe systems of work	<p>Workers reported moral injury in knowing these patients were not guilty of a crime, sometimes with the IQ of a three-year-old and having to make the decision to place patients in prison and at risk of assault because there is no room at JNH. Workers reported these patients could end up in solitary confinement because they became distressed or had mental health issues. One worker reported, this is an Oakden situation, some nights I'll just come home from work and cry because the situation is just so dire.</p> <p>The EPHs notified the PCBU prior to and following the entry.</p>	No
PCBU Alleged Contravention 10	Not maintaining a safe work environment	<p>Workers advised of multiple issues with the physical working environment at the Forensic Community Mental Health building at Modbury.</p> <p>Air conditioning system is inadequate creating temperatures that are either too hot or too cold to work in. Workers</p>	No

		<p>understand a report to Safework has been made about this issue but it is unresolved.</p> <p>The High Risk room has a temporary air conditioner which is too loud and must be turned off when seeing patients. Workers described this as leading to phenomenally hot temperatures inside the room. Workers report the swipe card is slow to activate the second door, and doctors do not always have background information on patients, creating risk of a doctor being trapped with a dangerous patient in the room.</p> <p>2nd High Risk room contains objects which may be used by patients as projectiles.</p> <p>Level 2 has black mould in the ceiling. The ceiling leaks during rain. A bee infestation occurs twice per year. The elevator breaks regularly, locking people inside.</p>	
PCBU Alleged Contravention 11	Not maintaining a safe work environment	<p>The Desk Space for registrars is inadequate it is in open plan and so no ability for private conversation, patient related discussion, and constant interruption.</p> <p>The physical discomfort and stress of working in this environment is causing workers distress, anxiety and psychosocial harm.</p>	No