My name is Jennifer Anne Cole and I worked for the Qld State Government from 2007 until I was made redundant in 1012. I have worked for TAFE, Department of Communities, Disability Services and Qld Health. During this time I experienced several restructures. In all previous restructures my job security was maintained, even though my job description or role was altered.

My position as Principal Program Officer, Older Persons Health with the Townsville Hospital and Health Service was 'de-established' in 2012 due to cost cutting measures. I was summoned before a panel of three executive members of my Institute with no prior warning and no appointment made. I was given a choice of having a support person with me but given the absence of notice there was no union member available. However a work colleague came with me. I was given no opportunity to have input into the decision and how it would be implemented. There was no transparency about the decision as to which positions were targeted and no information given as to why my position had been chosen. They also did not assure me that the decision was not a reflection on my job performance. I had to ask this question. No timelines were given.

In theory the process allowed me to choose to stay with the organisation in another role. However there was only one other position available at my level (A08) and that was entirely inappropriate for my qualifications, skills and experience. So I really had no choice but to accept the Voluntary Redundancy. Throughout this process there was very little communication from the Executive to those facing Voluntary Redundancy. At an earlier stage they did make themselves available for interview. I went along and was given incorrect information in response to my questions. Overall the whole process was handled very badly with very little communication, misinformation and no transparency as to how decisions were made.

The impact on me personally is that now I will be unable to save for my retirement in the next few years, which was my intention. As such I will probably have to rely on the pension to supplement my retirement income instead of being a self-funded retiree. I will have to either re-train for a different career or look for a position outside of my specialist area. Some of the work I was doing will be continued by others but it is doubtful that this will happen as this work is outside their scope of practice and additional to their already heavy workload. Much of the work I was doing will just not happen any more. This is to the detriment of older people in the health system. Most importantly I was developing much needed services for people with dementia. This will probably not happen now to the extent needed. We have an ageing population and need to devote more not fewer resources to address the future needs of older people.

I know of approximately four other people who have accepted a Voluntary Redundancy and three who have accepted a re-deployment within Townsville Hospital and Health Service. I also know of several businesses in Townsville who are suffering due to public servants loosing their jobs.

There is clearly a conflict of interest when the state government, my employer, has the ability to legislate to make its own workers redundant. This situation should be remedied.