

## STATEMENT OF LUKE ASHFORD

1. I am employed as a Ranger Team Leader with Parks Victoria. I have held this position for five years. Prior to this role, I served 12 in the military since the age of 19 years. I also work as a fire fighter within Forest Fire Management Victoria as part of my current role with Parks Victoria.
2. My current role involves managing a team of five ranger staff that focus on environmental land management. Additional to my primary role, I am also an Advanced Authorised Officer (**AAO**) with Parks Victoria. This requires me to be trained in and maintain currency in Client Interaction Defensive Tactics, use of Operational Defensive Safety Equipment (OC spray, baton and handcuffs), relevant legislation and powers and Use of Force with a heavy focus on the identification of risk, making risk assessments, negotiation and conflict de-escalation. The AAO role requires me to plan and participate in localised compliance operations and multi-agency investigations and participate in high level state wide, multi-agency compliance and enforcement operations. I have never exercised my statutory powers of arrest.

### Appointment to the Hotel Quarantine Program

3. On the 15<sup>th</sup> April 2020, an internal email from Anthony Maxwell, Critical Incident Management Team, Incident Controller (**Parks Victoria**) was sent to Authorised Officers (**AOs**) within Parks Victoria seeking an expression of interest for secondment to Department of Health and Human Services to assist with the government's COVID-19 response.
4. Three AOs from my work centre volunteered. Prior to commencing, there was a delay of about six weeks due to what I understand to be uncertainties around whether AOs from Parks Victoria, as public sector employees, could be slotted into this role, or whether we required a formal secondment to the Department.
5. During this period, there was a lot of misinformation about what role AOs would be performing. The general idea at the time was that we would be assisting Victoria Police to conduct door knocks and spot checks at the homes of people who had returned from overseas and were required to self-isolate.
6. On 28 April 2020, I received a letter of offer from the Department appointing me as an AO to the Hotel Quarantine Program (the **Program**) under the *Public Health and Wellbeing Act 2008 (Act)*.

### Hotel Quarantine Program

7. During my time with the Program, I worked at the Crown Promenade, Crown Metropol, Mercure

Welcome, Grand Chancellor, Novotel on Collins, The Pullman and the Pan Pacific Hotel. In my experience, every hotel delivered the Program differently. There did not seem to be a consistent way that things were done, or even consistency in what needed to be done.

8. There was never a standard or practiced approach with regard to how an AO would (or ought to) perform their role.
9. With the bigger hotels, two AOs and possibly an AO Team Leader would be rostered on each shift. However, in smaller hotels, such as the Grand Chancellor or the Novotel on Collins, there would only be one AO. Towards the end of my secondment, the number of AOs at each hotel was reduced. I believe this is because there were not enough to meet the demand due to the stand downs of the AOs that were deemed close contacts at the outbreak hotels, but it could have been for another reason. I don't know.
10. Prior to starting as an AO, I was only required to do a one-hour training session on using the Department's COVID-19 Compliance Application (the **App**), and a one-hour session on equity and diversity. There was an AO laptop and smart phone for each hotel but I used the App on my usual work iPad as it ran better. No other training or induction was given prior to commencing this first shift or subsequently. There was no training in infection control and I had no prior training from my previous roles. Everything I know about COVID-19 is from Channel 9 and the ABC.

### **Working at the Pan Pacific Hotel**

11. On 25 May 2020, I had my first shift with the Program at the Pan Pacific Hotel. It was a Monday evening shift from 3pm to 11pm. I recall it was very busy with a large number of detained guests. At this time, I still did not know what my AO role would involve. I had no clue what I would be doing.
12. Notwithstanding that I had not been issued with my AO identification, and should not have been allowed into the hotel, I walked straight into the Pan Pacific hotel. No one stopped or challenged me. I wandered around for about 15 minutes. I did not know where I was supposed to be. There was no-one in an official capacity to instruct me on where to go or how the Program works.
13. After a time, I located the 'set up' area in the executive lounge. It was quite a good set up. I received a 10-minute shift 'hand over' from a female AO who was originally from New Zealand. I was provided with a Department AO quarantine procedure document that was a draft. This document had been printed and left at the AO desk. I still didn't know what I was meant to be doing.
14. The procedure document was drafted in very broad terms. There was really no level of detail so

as to provide instruction on how I should perform my role (or with regard to how Program operated) or even what my role was.

15. Throughout my time as an AO this document was constantly revised and updated. It was originally very short and lacking in detail when I started. It continually grew as new drafts were released and was quite long when I left. A Department Commander would send an email advising of the updates and we were required to implement the changes straight away. It was like “here’s the procedure, have a read and away you go”.

### **Personal Protective Equipment (PPE)**

16. In terms of hygiene practices, at the entry of the executive lounge, the green zone within the Pan Pacific Hotel, there was a sign directing people to disinfect hands before entering the ‘green zone’. PPE was not allowed to be worn in the green zone. This area was for staff that were managing the detainees within the hotel.
17. I did not receive any training in relation to the proper use of PPE but I personally always wore a mask. I know that when new arrival intakes came to the hotel there would often be Department staff not wearing masks.
18. In my experience of the Program, PPE was generally available. However, on one occasion, we ran out of large gloves at the Mercure Welcome Hotel. The Mercure Welcome and Pullman hotels are close to each other and share the same basement. I went across to the Pullman Hotel to get some larger gloves. The Department Team Leader at the Pullman Hotel had a crack at me for taking their PPE. Other than that, I would not say I ever experienced a shortage of PPE.

### **Fresh-air breaks**

19. At each hotel there were inconsistencies in the procedure in place for fresh-air breaks. In some hotels, AOs were responsible for organising them. In other hotels, nurses performed this function.
20. Generally speaking, the mental health nurse was charged with prioritising which detainees were scheduled fresh-air breaks. Any remaining places would be allocated to the remaining detainees and often smokers got priority. Priority also went to anyone who called up. In this regard, those that were insistent on getting fresh-air breaks got them more frequently and more quickly.
21. My practice was to allocate fresh air-breaks floor by floor to ensure to ensure each level had the opportunity. In my experience, other AOs and nurses appeared to choose people randomly.

## Temporary Leave Permits

22. Although AOs were responsible for approving Temporary Leave Permits, whether leave was granted was heavily influenced by the DJPR representative, the Department AOs and the Department's 'Team Leaders'. In my experience, approvals were given solely on compassionate grounds rather than enforce the quarantine, which was more in-line with my thinking and why we were there.
23. There was no other training or instruction.
24. On average, there would be around 4-5 people with temporary leave, per hotel per shift. Some AOs would sign off on a single Temporary Leave Permit covering a two-week period until the procedure changed requiring a permit each day. AOs generally had to rely on security guards to let us know when detained guests had returned to the hotel. Some security guards were responsive and performed this task well, others we had to chase up to find out if the person had returned. By this time, it could be hours after they were due back.
25. When I started with the Program, temporary leave was being granted for the whole day. In my first couple of shifts at the Pan Pacific Hotel, I recall there was one woman who was given a Temporary Leave Permit to visit her mother in respite from 8am until 5pm every day. The Department of Jobs Precincts and Regions paid for her taxi there and back. There was no way of knowing if she attended the prescribed address or maintained the conditions of her temporary leave. Towards the end of my secondment, the conditions for granting temporary leave become more restrictive. The time permitted for leave was reduced to a maximum of 2 hrs plus travel time.
26. At the Crown Promenade, a Temporary Leave Permit came to my attention that allowed a woman to travel to her home to visit her sick father. It had been approved a few times. I had caught this woman lying to me about a few things before so this all triggered alarm bells for me and I made some enquiries. When I asked the woman about the circumstances of the request, I believe she lied to me. I had doubts about her leave request, so I asked the Department AO Team Leader to ask Victoria Police to do a spot check to ensure she was at the designated location and was following the conditions of the Temporary Leave Permit. My concerns were just dismissed. I was told by the Department Team Leader that Victoria Police would not want to deal with it.

## Intake and Exit

27. Intake and exit were the busiest times during shift. Sometimes the exit information was provided last minute from Department of Jobs Precincts and Regions. The Department's and the Department of Jobs Precincts and Regions' exit lists would never match. We would have to cross check them and fix all the errors to fill out the end of detention notice and to input the data into the

App. It was a poor system and the two departments were not communicating with each other.

28. The Department of Jobs Precincts and Regions made the on-going travel arrangements and this was not our concern.
29. I had assumed that everyone who exited had been tested and cleared of COVID-19. I did not know until later that I was interacting with people who hadn't been tested.
30. If a hotel had a COVID-19 positive case, the procedure towards the end of my secondment was to move them to the COVID-19 positive hotel. This location changed a few times throughout my secondment.

### **Supervision and review**

31. The roles of Department of Jobs Precincts and Regions and the Department, and their various officers, were never defined or explained to me. I understood the Department of Jobs Precincts and Regions representative to be the 'site manager'. They focussed on meals, intake and release of detainees and liaising with logistics. The Department Team Leaders were more focussed on welfare – calls, emails and complaints.
32. It was clear that some of the Department and Department of Jobs Precincts and Regions Team Leaders would consider themselves to be in charge. Others would come to the AOs for answers. It was different at each hotel but never clear.
33. The hotels delivering the Program were identified in groups known as City 1, 2, 3 and 4. AOs were allocated to shifts in either City 1, 2, 3 and 4. Each group had an AO Team Leader for each shift. They were not always on site, but you could report any issues or concerns to them.
34. Towards the end of my secondment, an AO Team Leader was designated to five AOs whether they worked the same shift as those five or not. That was mainly to deal with time sheets. My team leader was [REDACTED], from the City of Melbourne.
35. It was my observation that AO Team Leaders tended to be people who had been with the Program the longest. They were not necessarily the most skilled or equipped to perform the role. Due to the Stage 3 restrictions, Compliance Officers from mainly administrative roles, such as local laws officers from the City of Melbourne and Liquor and Gaming Commission were hired early on as work was reducing in their substantive roles.
36. In my experience, there was a huge gap in the ability of many AOs to read, understand and enforce the legislation. In my opinion, many AOs did not have the necessary skill set to perform

their role.

37. My colleague from Parks Victoria and I would also contact [REDACTED] from the Department in relation to any issues or concerns. We liaised with Sophie prior to starting with the Program and she was happy to be our point of contact. Sophie was the 'go to' person for everything outside the actual ins-and-outs of our AO work.

### **Complaints, issues, concerns**

38. There was no formal procedure for complaints or issues to be raised. I would approach it usually by bouncing ideas off the Team Leaders. For medical concerns, I would talk to the nurses or the mental health nurse. There was not a lot of guidance or instruction. Most of the time, you would have to think about the issue yourself and decide what to do.
39. I know there was meant to be daily reviews of detainees. In my experience, medical people performed this review by checking on them. The health and wellbeing team would call each room each day from memory, if people hadn't answered phone, they would follow up with the onsite health team.
40. I had one incident where a man had left his room and would not return. Security called me as they were not trained to deal with these types of situations. I thought they would have been. I had been told that AOs were not supposed to go to the accommodation levels. I was told that I would never have face-to-face contact with the detainees. Notwithstanding this, I responded and attended to the situation.
41. The man was aggressive, sitting on the floor and punching the ground. He could not be talked down. If I had had my usual operational equipment (that I have with me in my role at Parks Victoria) at the time, I would have had my hand on my OC spray ready for deployment. Security had no idea as to how to deal with the situation. I attempted to talk to the man and ascertain why he had left his room. The man was non cooperative and becoming very aggressive towards me. I ended up calling Victoria Police. Before they arrived, the mental health nurse persuaded the man to return to his room. During this incident, I was wearing full PPE.

### **Leaving the Program**

42. On or about the 18<sup>h</sup> June 2020, I wrote an email to Sophie informing her that I was quitting the Program as I did not believe that the Department was providing me with a safe work environment. The email stated that I was ending my secondment with DHHS immediately due to the department not being able to provide a safe work place. The previous night I also sent an email to the AO

Team Leader to detail my concerns of what had occurred. Due to no longer having access to my DHHS email account I cannot provide copies of these emails.

43. Throughout my secondment, I had been staying at the same hotel as my colleague from Parks Victoria. We would eat and socialise together when off shift. We were staying at a hotel near Parliament House and my colleague was in the next room. My colleague had worked rostered shifts at the Stamford Plaza. He received a letter advising him that he was a close contact of someone at the Stamford who had tested COVID-19 positive and that he needed to self-isolate. Given that I had been a close contact of my colleague, I asked the Department AO Team Leader that was rostered for my shift on this day what procedure applied to me and whether I also needed to self-isolate. I was told that I did not need to self-isolate and to just go to work.
44. That day, I was working at the Mercure Melbourne. We had a large intake arriving of 150 people from Delhi. At the time, I knew that the Stamford Plaza where there had been the outbreak had a lot of people who had come in from a flight from India.
45. At the start of the shift, I took the intake data from the App. There were no detainees in hotel when I arrived. I had not met the Department Team Leader who was on shift before. She was a bit unsure of how the intake procedure worked and how the large number of detainees would be processed. She was asking me a lot of questions.
46. A briefing was held with the Department, DNATA staff, the nurses, hotel management and security supervisor on how things would run. The Mercure is a small hotel and it is old. In addition to myself, there were hotel staff, security, DNATA, the Department and Department of Jobs Precincts and Regions staff all confined in a small area. There was no way we would've been meeting social distancing requirements of 1.5 metres. It was not clear who was in charge. DNATA tried to take a lead, the hotel tried to take a lead. Although the Stamford Plaza outbreak was not public, everyone was told to concentrate on PPE and hygiene.
47. Victoria Police and more security were outside. As the busses arrived with the detainees, we were all trying to rush because so many people were coming into the hotel. The buses also had difficulties accessing the hotel. In my opinion, the hotel foyer set up was not fit for purpose. The procedures started to slip with regard to how many people were in elevators at one time. We also should not have been handling the baggage, however, this was impractical. DNATA staff started doing things that they probably should not do like handling luggage.
48. While all this was going on, I noticed several people (security and hotel staff) walk straight through the front entrance, past security without wearing PPE. They walked right through the passengers who were also in the area. I confronted each of them and they said they didn't realise. I confronted them at the time and also the security at the door.

49. That was it for me. I did not feel that this was a safe environment to work in and I was concerned for my health and the health of my family. I am used to working in dangerous environments, having worked in firefighting and the military but I could not rely on the system or people around me to keep the environment safe. There was no situational awareness.
50. In the ordinary course, if a serious OH&S incident occurs within my usual work-place, there would be an alert put out straight away. This did not occur during the Program. Following the Stamford Plaza outbreak, there was no alert, no new instructions or guidance and no lessons learned. Each outbreak was treated like a secret and nothing seemed to change in terms of the Program's operation, practice and procedure. I only knew about the Stamford Plaza outbreak because of what occurred with my colleague. In my opinion, the risks were not taken seriously enough by those running the Program.

Signed at Melbourne

in the State of Victoria  
on 15<sup>th</sup> August 2020



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Luke Ashford