

**E-mail Message**

**From:** [Help Desk WHS.Help \[EX:/O=COMCARE AUSTRALIA/OU=COMCARE/CN=RECIPIENTS/CN=OHS.HELP56450890\] Notify \[SMTP:notify@comcare.gov.au\]](#)

**To:**

**Cc:**

**Sent:** 8/1/2014 at 10:52 AM

**Received:** 8/1/2014 at 10:52 AM

**Subject:** FW: WHS concerns at Manus Island [SEC=UNCLASSIFIED]

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**Attachments:** Letter of complaint G4S 2013.docx

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For entry as an 'other trigger'.

WHS Help Desk | National Assessment and Analysis Team | Regulatory Services Group

Comcare - PUTTING YOU FIRST

GPO Box 1993, Canberra ACT 2601

1300 366 979 | [www.comcare.gov.au](http://www.comcare.gov.au)

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"<http://www.comcare.gov.au/>"[www.comcare.gov.au](http://www.comcare.gov.au/).

Working to improve our service, we want your feedback - [HYPERLINK](#)

"mailto:WHS.help@comcare.gov.au"[WHS.help@comcare.gov.au](mailto:WHS.help@comcare.gov.au)

From: [REDACTED]  
Sent: Wednesday, 8 January 2014 10:28 AM  
To: Help Desk WHS.Help  
Subject: WHS concerns at Manus Island

To whom it my concern,

My name is [REDACTED] and I work as a Supervisor for G4S Australia at Manus Island In PNG. I have attached some information on the concerns I have in regards to health and safety issues we have over there. I have spoken to management numerous times in regards to this. Unfortunately I have had no positive response. I hope you can have a look at the concerns and address me as to what to do next.

Regards  
[REDACTED]



Dear Sir/Madam

I would like to bring to your attention some serious safety and health concerns that I have been subjected to whilst working for G4S on the island of Manus and at Port Moresby. During my six months of employment I have been put at risk in both Health and Safety situations. Some of the issues that have confronted me are:

**Malaria:** Although we have been vaccinated and are on daily tablets we are still confronted with bites from mosquitos due to inappropriate clothing issued and incorrect procedures to decrease the breeding of the insects. Irregular fogging is being completed with some accommodation arrears not being fogged at all.

**Gastro/Food poisoning:** This is an ongoing concern with me getting a bad bout [REDACTED] that kept me in bed at home for two weeks. They are not using appropriate hygiene stations. Pump action hand soap which is normal domestic soap is being watered down. I was told by my Manager [REDACTED] that this does not affect the soap and wartering the product down was acceptable. After my conversation with the manager two days later I walked past the cleaning station and there was no hand soap at all to wash your hands. After informing him two cakes of soap were placed on the wash station. This station is used by around 300 people a day. Hand towel dispensers are not functional and put people at risk due to hand contact. Many staff from different countries are not being trained correctly on hygiene as is the same with detainees. Hand sanitiser is rarely available. Food areas are constantly contaminated by Flies/Insects and at times the food has been served at wrong temperatures due to power failure. Our quarantine area is insufficient and you are often forgotten by medical and G4S staff Quarantined. Staff been seen eating in the communal mess area due to no organisation in regards to their meals. This is risking contamination all around them. Over 30 staff members in the last two weeks have come down with illness and that's living on the new accommodation.

**TB and other infectious diseases:** I was asked to do an escort [REDACTED] [REDACTED] which involved going to Port Moresby Hospital to look after a client who was suspected of having TB which is a highly contagious disease. On arrival I was speaking to our other Ex-pat officer who had been there for a week he informed me they had been in this detainee's room without PPE for 3 days until they found out the problem. The only access we had to gloves and masks was if we walked into the room they were on the bedside table next to the client. The doctor did confirm with me that this detainee did have TB although it was dormant and not spreadable. This is not acceptable for me and I would like tests completed back in Australia on myself. This place is not a very sterile place with many cockroaches frequently walking around the floors of the hospital.

**Fatigue/Heat stroke:** This is another risk as we are not getting the appropriate rest when rostered off. Although our accommodation has improved we still have to sleep in a room with 4 others which are on different shifts and rotations. You have constant interruptions during the day and night when you are trying to rest. . We do not get our legal requirement of 4 days of rest we only get 2 full days and 2 half days. I have also had to start my leave and fly out at lunchtime after completing night shift not giving me my required rest time. I flew for 15hrs on the 3<sup>rd</sup> December and then flew for 3hrs next day. I was told at 1500pm to work nightshift that night. Only due to my disapproval did they decide not to make me work.

As for the heat there is insufficient shelter when we are on shift during the day with fresh water sometimes scarce. Their water bottle supply is sometimes left in the sun for days on pallets before being used. Often they were running out due to the barge not arriving on time. Some of the guard postings are in full sun for the 12hr day shift and if it rains you may be lucky and get an umbrella. We get supplied supplements in our medical kits although once these are gone there are no more available.

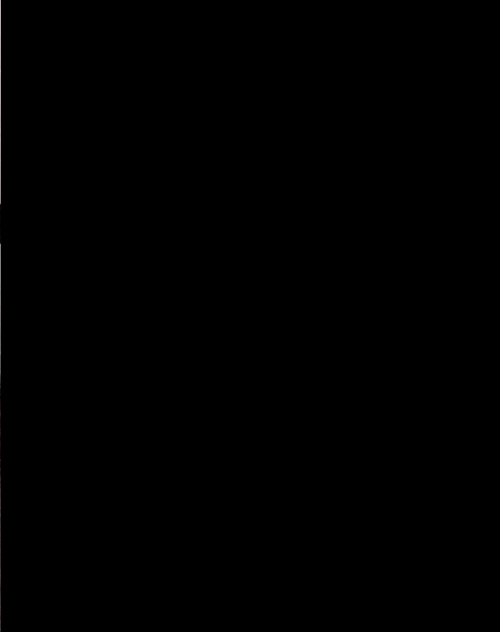
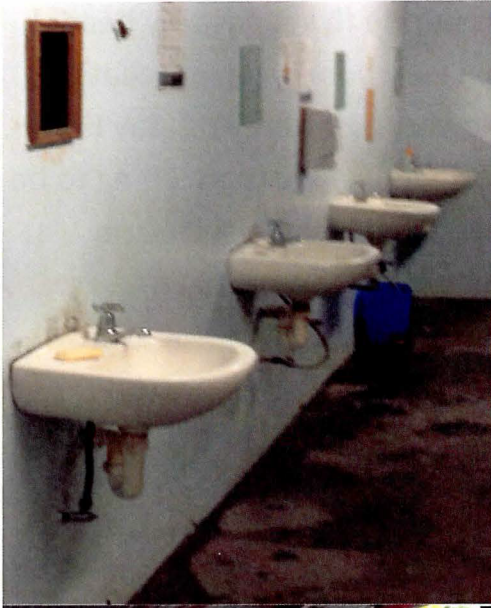
**Assault/Death:** We are called to many incidents throughout the centre which put us at risk of assault, serious injury or Death. I was called out to an incident [REDACTED] which involved the PNG Army and the PNG local police. On arrival I was confronted with an angry mob of PNG Army members that



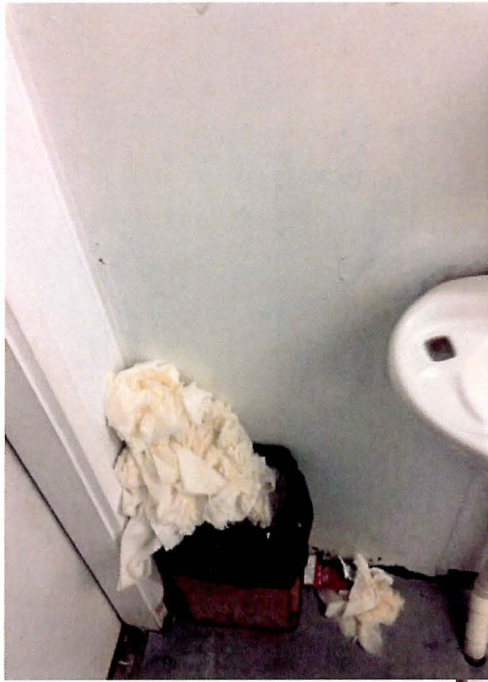
proceeded to yell abuse at us and throw rocks at us one flying past my head. I retreated back to the compound and assisted in a very poorly run evacuation which escalated the risk as the detainees became very agitated. This day I actually feared for my safety and was very concerned how we were going to be kept safe if the incident did escalate. Other codes called include self-harm issues which involve blood spills etc. One incident a detainee cut hi arm very badly and there were staff involved that had no appropriate PPE. Not even gloves are available at all times. After this incident staffs were seen to be washing their bloodied hands in the basin used to wash your hands before you go and eat.

Flight cancellations/Family time lost: One of the most important issues is losing family time due to G4S going for the cheaper option with flights and not getting us home on time. Last rotation I lost two days from flights being cancelled and not being booked. Not acceptable as my family are more important than my job. This has put me into some very stressful situations and now [REDACTED] currently feel that G4S is putting me at risk working in PNG. I would like you to return me to Australia so I can have full tests on TB and any other disease this Detainee at the hospital has had to clear me of any concern. over the time these diseases can arise. I would also like G4S to answer some questions in regards to the topics I have mentioned above and what they plan on doing about the issues before I return to the island.



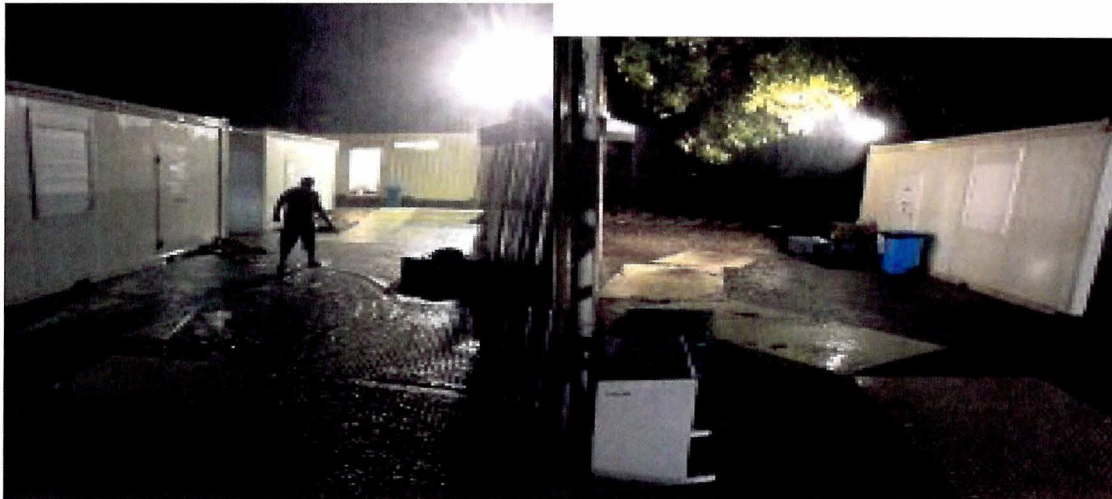












As it is difficult to take photos on the island due to our contract arrangements it is hard to actually show all the hot spots on the compound. Some of these pics show the lack of sanitising equipment we have and the lack of cleaning going on at the centre. As mentioned there is not sufficient hand cleaning dispensers and they are now using caked of soap. Also there are no blood spill kits around. The sink in the pictures caters for over 300 staff members a day and people have been seen washing blood of their hands and washing their feet in the sink. The blood in the bin is human blood from a client who self harmed. The drain contains an open pit that runs raw sewage into the ocean. Temporary flooring is placed down made out of crates and panel board to stop us from walking in mud. This becomes very slippery in the rain. We were also accommodated in what they call the swamp. As you can see in the pictures heavy rain was frequent which made it difficult to get to toilets and showers all the safety flooring they provide floats away. There is no cover in the swamp area to walk to the toilets etc. Most now sleep on the ship which although is cleaner still causes fatigue due to sleeping in a room with four others. Still there is minimal hand sanitising stations and it now caters for 500 plus people.

I hope this gives you an insight as to the conditions. I would like to meet up and discuss further if you feel I have a case.

Regards


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E-mail Message

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**From:** [Greg Zadro \[EX:/O=Comcare Australia/OU=COMCARE/cn=Recipients/cn=Zadro.Greg\]](#)  
**To:**   
**Cc:**  
**Sent:** 17/1/2014 at 3:16 PM  
**Received:** 17/1/2014 at 3:16 PM  
**Subject:** Concerns regarding Work Health and Safety on Manus Island  
[SEC=UNCLASSIFIED]

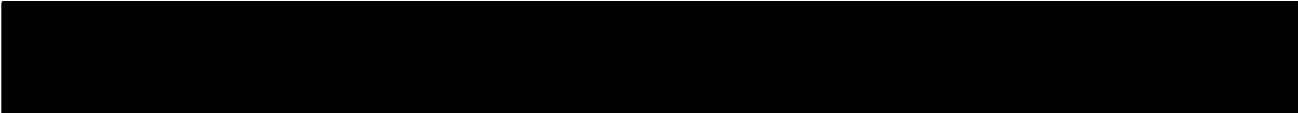
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Good afternoon 

Thank you for your recent email regarding WHS concerns that you have at the Manus Island Regional Processing Centre (MIRPC). I am writing to advise that I have been tasked with following up on these concerns.

As you may or may not be aware, in my capacity as an Inspector appointed under s156 of the Work Health and Safety Act 2011, I recently travelled to Manus Island to carry out Inspections of the MIRPC and associated facilities. Whilst this visit was initially intended as a preliminary inspection in order to familiarise myself and Comcare with the day to day operation of the facility, a number of issues of concern, including those that you have raised, were noted and brought to the attention of the Department of Immigration and Border Protection (DIBP) through the resulting Inspector Report. As a result, a number of recommendations for improvement were made for the consideration of DIBP.

I am monitoring the progress of the DIBP corrective actions that have been developed in response to these recommendations. The specific issues you have raised will be under consideration during the planning of any future visits to the MIRPC.

If you have any further questions, please feel free to contact me.

Greg Zadro

Regional Service Queensland | Regulatory Services Group  
Inspector Appointed under Work Health and Safety Act 2011

Comcare

GPO Box 1993, Canberra, ACT 2601

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## E-mail Message

**From:** OHSHELP [SMTP:IDF.HEALTH.AND.SAFETY@IMMI.GOV.AU]  
**To:** OHS.NATIONAL.OFFICE@IMMI.GOV.AU  
[SMTP:OHS.NATIONAL.OFFICE@IMMI.GOV.AU], Notify  
[SMTP:notify@comcare.gov.au]  
**Cc:**  
**Sent:** 6/12/2013 at 12:13 PM  
**Received:** 6/12/2013 at 12:13 PM  
**Subject:** Incident Report from the Department of Immigration

**Attachments:** DIBP\_Incident\_Report.PDF

Please find attached a notifiable incident report from the Department of Immigration and Border Protection. The report is provided in accordance with Section 38 of the Work Health and Safety Act 2011.

If this notifiable incident involves a DIBP worker, the following actions are required by the supervisor and worker involved in the incident.

Action required by supervisor

You are required to immediately review this incident report (attached below) and:

1. take all practicable risk mitigation actions to reduce the likelihood of this incident escalating or occurring again; and
2. ensure that any injured/ ill persons are/ have been provided with the necessary medical assistance, including injury management support for staff members

Action required by worker

You are required to immediately review this incident report (attached below) and:

1. take all practicable risk mitigation actions to reduce the likelihood of this incident escalating or occurring again; and
2. discuss the incident with your manager and ensure issues are escalated to appropriate business areas (property, Health and Safety etc); and
3. seek necessary medical assistance and ensure injury management support has been provided/requested.

Records of all actions taken in response to the incident must be kept (maintenance requests, emails etc). It is also required that a relevant SES officer be advised of all incidents that have been notified to Comcare.

For further assistance contact:

Email: OHS.National.Office@immi.gov.au

Telephone the HR Service Centre: (02) 6196 0444

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## Incident Report

### 1. Details of person conducting the business or undertaking (PCBU) which gave rise to the incident

Company / Department / Authority Name:	DEPARTMENT OF IMMIGRATION AND BORDER PROTECTION
Australian Business Number (ABN)	33380054835
Business Address	6 CHAN STREET
Town / Suburb	BELCONNEN
State	ACT
Postcode	2617

### Person with management or control (PWMC) of the workplace where the incident occurred (2a)

As above       Other

### 2. Previous notification of this incident

Has this incident been notified to Comcare previously, by telephone or in writing (fax or email)?

Yes       No

Reason for subsequent notification	
If 'other', what is the reason	
Method of first notification to Comcare	
Date first notified to Comcare	
Comments - include Comcare reference number if known	

### 3. Details of Incident:

DIBP reference number	00009089
Date of Incident	4 December 2013
Time of Incident	
Type of incident	Serious Personal Injury
Serious injury or illness type	Treatment as inpatient in a hospital
Was immediate treatment required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Dangerous incident type	



Was serious risk immediate or imminent  Yes  No

**Where did the incident occur?**

Workplace Known As	Manus Island Offshore Processing Centre
Street address	
Town/suburb	
State	ZOFF
PostalCode	
Country	PG
Describe the exact location	
Describe the sequence of events leading to the incident - include what activity was being performed and the details of any plant, vehicles or substances	On Wednesday 4 December, IHMS confirmed that the above mentioned transferee was diagnosed as having contracted Typhoid. The transferee was at the Pacific International Hospital at time of diagnosis, having medically evacuated from the Manus facility
Activity being performed when incident occurred	Transferee

**4. Details of persons who died, suffered serious injury/illness, or were involved in a dangerous incident**

**Person 0001**

Title	
First name	
Last name	
Date of birth	
Residential address	
Town/suburb	
State	
Postcode	
Occupation (if relevant)	
Telephone number	
Email address (if known)	
Injury/illness details	Typhoid

Where was person taken for treatment

Details of treatment received or needed

Employer (if relevant)

## 5. Action taken or proposed action to prevent a recurrence of a similar incident

What action was taken immediately following the incident to prevent a recurrence?

Describe any longer term action taken or proposed to prevent a recurrence

## 6. Disturbance/preservation of incident site

Has the site where the incident occurred been disturbed?

Yes

No

Don't know

Has a Comcare Inspector arrived at the site or authorised disturbance of the incident site?

Yes

No

Don't know

Inspector's name

Inspection Date Authorised

Inspection Time Authorised

Has the incident site been disturbed for one of the reasons set out in section 39(3) of the WHS Act?

Yes

No

Don't know

Primary reason for disturbance

How was the site disturbed?

Source of contamination unknown

## 7. Details of person completing this form

Title

Miss

First Name

Gabrielle

Last Name

KEWLEY

Telephone No

Email Address

OHS.NATIONAL.OFFICE@IMMI.GOV.AU

## 8. Contact person for further enquiries



Title	Ms
First Name	Katrina
Last Name	Ashcroft
Telephone No	[REDACTED]
Email Address	OHS.NATIONAL.OFFICE@IMMI.GOV.AU

**9. Person responsible for implementing longer term remedial action**

- As in 7 above       As in 8 above