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5 August 2026

Jana Gazarek
Chief Executive, Bayside Health Peninsula
Via Email Only: customer.relations@phcn.vic.gov.au

Laura Collister
Chief Executive Officer, Wellways Australia
Via Email Only: enquiries@wellways.org

Tennille Bradley
Chief Executive Officer, Frankston City Council
Via Email Only: info@frankston.vic.gov.au

Cr Sue Baker
Mayor, Frankston City Council
Via Email Only: crbaker@frankston.vic.gov.au

CC:

The Hon. Harriet Shing MP
Minister for Health and Ambulance Services, Victoria
Via Email Only: minister.health@health.vic.gov.au

The Hon. Georgie Crozier MP
Shadow Minister for Health, Victoria
Via Email Only: georgie.crozier@parliament.vic.gov.au

The Hon. Paul Edbrooke MP
Member for Frankston
Via Email Only: paul.edbrooke@parliament.vic.gov.au

Re: Staff Safety, Occupational Violence and Parking Crisis — Frankston Mental Health and Wellbeing Local Consortium and Surrounding Health Services

Dear Ms Gazarek, Ms Collister, Ms Bradley and Mayor Baker,

We write jointly to all four of you, and to the Minister and Shadow Minister for Health, because the crisis facing frontline health and community service workers in Frankston cannot be resolved by any one of you acting alone. It sits across a health service, a community services provider, a local council and a state government. Every party addressed in this letter holds part of the solution. We need a collaborative partnership to ensure our members and their colleagues are no longer walking to and from their cars in fear, forced to move their vehicles every two hours or risk a fine while caring for some of the most vulnerable people in the Frankston area.

The Nurses Professional Association of Australia (NPAA) has surveyed staff working across Frankston health and community services. We have received responses from registered nurses, allied health clinicians, lived experience and peer workers, administrative staff and managers working out of Peninsula University Hospital, the Tarnbuk Centre, the Frankston Mental Health and Wellbeing Local

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consortium, Wellways Frankston, Windana, FaMDAS, Rosebud Hospital and community mental health services across the Frankston CBD and Nepean Highway precinct.

Two entirely separate workforces, surveyed separately by two different organisations, have described the same streets, the same car parks, the same fear and the same absence of action. That should remove any remaining doubt that this is a systemic problem rather than an isolated complaint.

PART 1: The Geelong Precedent — This is Solvable, and it has just been Partially Solved

In June and July 2026, NPAA surveyed our membership at the University Hospital Geelong following an attack on two nurses walking to their cars after a night shift. Within weeks of advocacy to Barwon Health, the City of Greater Geelong and the Victorian Government, the following was committed to or completed:

- 21 new lights installed in key pedestrian and parking areas, with lighting now confirmed as meeting ISO standards
- CCTV upgrades, including the internal system upgraded to 24/7 active monitoring of staff car parks, plus four new Victoria Police-monitored cameras funded and in procurement
- Increased security presence during afternoon, evening and overnight shift change periods
- A trial of dedicated PM shift parking at the Bellarine Street Multistorey Car Park, commencing the week of 20 July 2026
- A new Security and Emergency Management Coordinator appointed to oversee patrols and safety response
- A commitment from the City of Greater Geelong to explore a council partnership, including exploring access to council-managed parking

We place this on the record for one reason. When a health service, a council and the State Government accept that they share the problem and act together, measurable change follows in a matter of weeks. There is no reason Frankston should receive less. Our members in Frankston are describing risks of the same order, in a precinct with the highest demand for alcohol and drug services in metropolitan Melbourne and the highest rate of rough sleeping of any local government area in Victoria.

PART 2: Member Accounts

The following accounts are drawn from our survey responses. All have been de-identified. They are presented in the members' own words.

Assault, threats and occupational violence

> *I was unfortunately assaulted at work on shift in our intake space by a local homeless man who didn't have adequate access to support and services such as food and amenities. I had to take 2 weeks of stress leave as he would remain in the community and continued attacking staff for approx. 1 week. The response by the police was poor and the response from my org was average but there was little support for myself and my mental health, just support along the lines of removing access to staff (switching to telehealth etc.). I still feel fearful walking to and from work and being at work, and not having access to nearby safe and secure parking also compounds this.*
> — Frankston Mental Health and Wellbeing Local

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> *Due to increasing violence, we removed tea/coffee from the welcome area, and intake staff were expected to deny access to people wanting the toilet. On the same day, someone attended, and due to the missing amenities, caused property damage and assaulted a staff member. I felt extremely unsafe about being expected to deny someone access to an unlocked toilet. These changes were drafted up and implemented unsafely.*
> — Frankston Mental Health and Wellbeing Local

> *I have had my car broken into and a few months ago we needed security to walk to and from our cars. Our homelessness acute service shut their doors all the time and people have nowhere to go. We have had people stalk us and abuse us regularly at front desk. We also get significant abuse over the phone. We have had so much staff apply for work cover.*
> —Frankston, three years in the role

> *I have now resigned and so happy to never go back. Worry about my colleagues still there.*
> — Registered nurse, Frankston Public Surgical Centre, reporting violence several times a week

> *Staff and community members not to stop thinking that violence in mental health is just part of the job.*
> — Registered nurse, Tarnbuk Centre

One registered nurse working across the Tarnbuk Centre and Bayside Health reported experiencing verbal abuse, physical assault or attempted assault, being followed or pursued, threatening behaviour from people under the influence of drugs or alcohol, and property damage, on a daily basis, and has made or considered a WorkCover claim as a result.

Walking to and from vehicles

> *I've been yelled at, stared at and warned to not come any closer… and sworn at/threatened simply from walking past someone. All of this is happening just from the car park and on the short and isolated walk by Kananook creek to my work building. I feel unsafe, and at times, at possibly serious risk of harm, particularly if I am alone. This behaviour I have observed happens both in the mornings and in the late afternoon/night and has happened when I am alone and when I am with someone, it is difficult to avoid. The fear surrounding this behaviour was heightened after the member of the public was attacking and stalking our workplace, in which I found myself feeling cautious and on edge all the time, no matter where I was within Frankston.*
> — Staff member, Frankston Local / Wellways

> *There are some moments that I've felt uneasy walking the 1km to my car from Tarnbuk. I've bought myself a 'Kepler' alarm (it lights up and makes a tremendous sound) as I was feeling much less safe returning to my car after work. Particularly in the dark.*
> — Clinician, Tarnbuk Centre

> *I am required to pay $20 per shift to park at Bayside, as my role does not allow me to leave my desk every two hours to move my vehicle. I also feel unsafe leaving the clinic, particularly after previous incidents. In the past, I was required to take out an*

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> *Intervention Order against a client due to stalking behaviour. As a result, when walking to my car, I remain on the phone with my husband to help me feel safe.*
> — Frankston

> *I am always hypervigilant when I am walking on Nepean highway especially in the evening hours and on Saturday.*
> — Registered nurse, Frankston Mental Health and Wellbeing Local

> *As all day parking in the vicinity of my workplace is virtually non-existent, especially after 7am, I make use of public transport. However, there are a significant number of substance affected and homeless people, often asking for money, along that walk to and from the train station which is sometimes a bit scary. Significantly more so at this time of year, winter and dark. I truly wish there was more accommodation available for these poor souls.*
> — Allied health clinician, Tarnbuk Centre / 411 Nepean Highway

> *Due to my medication, I am not physically able to comfortably walk to the all-day parking areas. Even when arriving at 7am (1.5 hours before my start time), I am only able to secure nearby all-day parking on Fridays. On other days, I am required to pay $20 to park at Bayside… I sometimes feel unsafe leaving the clinic after dark, and have previously been approached by individuals who appeared to be substance affected while walking to my car.*
> — Frankston

One lived experience clinician reported being assaulted and stalked on the train on two separate occasions, with police involved on both, and separately being the victim of an attempted car theft which she did not report because she managed to scare the offenders off with the assistance of a member of the public. She notes there are approximately 20 all-day spaces for around 50 staff at her site, a 400 to 500 metre walk, with shifts finishing at 5pm in winter darkness.

Parking fines issued while providing clinical care

> *I have received five parking fines as a result of being unable to move my car within the required timeframe while seeing vulnerable clients. It is not appropriate or safe for me to interrupt a session, particularly when supporting a suicidal client, in order to move my vehicle. I have requested reviews of these fines; however, none of these appeals have been successful. This is an everyday issue.*
> — Clinician, Frankston CBD

> *As a working parent I'm unfairly discriminated against with regards to the parking restrictions around Tarnbuk. After school drop off there's no way to get to work in time to secure one of the very few all day parking places around our office — even arriving as I do at 8:20am. As such, in my work supporting people managing suicidal distress I'm not always able to dash out and move my car every two hours when my phone alarm goes off. So far I've been lucky, but of my team I'm the only one of us who hasn't had multiple parking tickets for this reason. We are being unfairly penalized for the nature of our work — supporting some of Frankston's most vulnerable citizens.*
> — Tarnbuk Centre

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> *I have received car parking fines while engaged in mental health duties with clients… Client appointments can often run overtime. I do not feel it appropriate or professional to interrupt a client in order to move my car. The nature of my work can mean supporting mental health crises, a situation that is beyond my control.*
> — Clinician, Frankston

One member has accumulated approximately $400 in fines this year, including on occasions when she did not feel safe leaving the building to move her vehicle. Another reported receiving fines on 12 March, 13 April and 4 May while conducting Intensive Recovery Team outreach across Rosebud, Hastings, Frankston, Seaford, Frankston South, Rye and Crib Point, and has since been required to park approximately a 20-minute walk from the office. She notes the cumulative stress "has also impacted my health, contributing to a recent illness that required time off work."

A manager has quantified the operational cost directly: clinicians lose approximately 10 to 15 minutes each time they move a vehicle, which across an eight-hour shift equates to up to 45 minutes of lost clinical time per clinician per day, excluding entitled breaks. As she notes, this "directly impacts consumer care." A team leader adds that some clinicians "have legitimate safety concerns that prevent them from parking further away from the office. There have been instances where clinicians have been targeted or threatened by clients, making it necessary for them to park in close proximity to the workplace."

The service gap driving this

> *I have worked in Frankston and the Mornington peninsula for over 10 years. Since the pharmacotherapy clinic shut down, Frankston had become a home for the unwell. Our crisis housing closes early and this leaves nowhere for the most vulnerable to go. We have no pharmacotherapy. I have called police frequently on lunch breaks when confronted by members of public. Our office has been destroyed and closed down by members of public for giving out coffee and tea. We have now stopped coffee and tea. Our staff have had cars broken into and the only public parking we have around our office is 2 hour parking leaving staff having to constantly move their cars around.*
> — Registered nurse, Frankston

> *There is no security at this site. Recent code grey requiring transport out, no medication on site to deescalate situation.*
> — Registered nurse, Frankston Public Surgical Centre

Frankston Healthcare, the private clinic on Young Street opposite Frankston railway station that provided more than ten per cent of Victoria's pharmacotherapy services, closed in January 2024 after its remaining prescriber could not be replaced. The public clinic that absorbed part of that caseload operates three days a week. Members report that the former clinic site is now a location of visible open drug use, on the route staff walk between the railway station and their workplaces.

PART 3: What We Are Asking of Each Party

We have set out below what we believe each party can reasonably deliver. We ask that you treat these as complementary rather than alternative, and that you speak to one another rather than responding in isolation.

Frankston City Council (Ms Bradley and Mayor Baker)

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We acknowledge the Council engaged constructively with Wellways earlier this year. Council officers

We ask Council to now:

- Designate a Mental health and community service worker parking area within the Frankston CBD and Nepean Highway precinct. We understand a council-owned car park adjacent to the Frankston Local sits largely unused through the working day, with the first two hours free before paid parking applies. Members have identified it as an immediately viable option. This could be made available to eligible workers either free of charge or for a low daily fee of around $5, with improved lighting and CCTV installed.
- Introduce a Frankston Health and Community Worker Parking Permit, or reinstate four-hour parking on the streets recently reduced to two hours, including Gould Street, O'Grady Avenue, Ebdale Street and sections of Nepean Highway; and
- Waive or review the fines already issued to clinicians who were providing care to people in crisis, including suicidal clients, at the time of the infringement. Members report that every appeal lodged on these grounds has been refused.

Bayside Health Peninsula (Ms Gazarek)

- Fund and operate a staff shuttle service connecting Peninsula University Hospital, the Tarnbuk Centre and the Frankston CBD precinct to designated staff parking, as Barwon Health has been asked to do in Geelong and as Ipswich and Cairns Hospital in Qld has done;
- Increase security presence at the Tarnbuk Centre and community mental health sites, particularly across afternoon, evening and shift-change periods. Members at one site report there is no security presence at all, and no medication on site to de-escalate a code grey;
- Review the process by which safety-related operational changes are risk-assessed with frontline staff before implementation, with specific reference to the removal of amenities and the instruction to deny toilet access, which staff have told us was "implemented unsafely" and was followed the same day by property damage and an assault on a staff member; and
- Provide meaningful post-incident support, counselling, WorkCover navigation and structured debriefing, rather than responses limited to withdrawing staff from contact. Members rating the current management response described it as "poor" or "very poor," and one has resigned outright.

Wellways Australia (Ms Collister)

- Formally support this advocacy alongside NPAA, so that Council and the State Government receive a single, unified position from the sector rather than separate approaches that are easier to defer;
- Support your Frankston staff to escalate the parking fines issued while they were delivering clinical care, and consider reimbursing those already incurred pending resolution; and
- Confirm your organisation's support for a designated parking area and shuttle arrangement, so Council can see that demand is shared across employers in the precinct rather than attributable to one.
- Permanent security presence onsite.

The Victorian Government (Minister Shing, and Shadow Minister Crozier for oversight)

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- Fund the restoration of adequate pharmacotherapy capacity in Frankston, including additional operating days and prescriber capacity at the public clinic, to close the gap left by the Frankston Healthcare closure in January 2024;
- Fund extended-hours community mental health, alcohol and other drug, and homelessness outreach services for Frankston and the Mornington Peninsula. Members consistently identify the early closure of crisis and homelessness services as the direct cause of the aggression they encounter;
- Review AHPRA regulatory settings that are deterring doctors and nurse practitioners from working in pharmacotherapy; and
- Apply to Frankston the same expectation of measurable action recently demonstrated at University Hospital Geelong, including lighting, CCTV, security presence and parking access.
- Increased funding to support increased security presence on-site.

Conclusion

Our members are not asking for sympathy, and they are not asking for a parking concession as a convenience. They are asking to be able to walk to their cars without an alarm in their hand or a spouse on the phone. They are asking not to be fined for staying with a suicidal client. They are asking that the violence they absorb daily not be treated as an ordinary feature of the job.

One of our members has already resigned. Another has moved her working life around the problem. Others have taken stress leave, lodged WorkCover claims, or obtained intervention orders against people they were employed to help. Every one of those outcomes was preventable.

Geelong demonstrates what happens when the responsible parties stop deferring to one another. We ask each of you to respond in writing within 14 days, setting out what your organisation will commit to and by when.

Yours sincerely,

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