

Submission
No 235

**INQUIRY INTO TEACHER SHORTAGES IN NEW SOUTH
WALES**

Name: Name suppressed

Date Received: 31 July 2022

Partially
Confidential

Submission Portfolio Committee No.3 Inquiry into Teacher Shortages in NSW (2022)

Dear Committee

Thank you for the opportunity to make a submission concerning teacher shortages in New South Wales.

Overview

I am a qualified Secondary teacher and have registration and approval to teach granted by the NSW Education Standards Authority (NESA). I submit that current critical teacher shortages are a result of the Department of Education mandate for all school-based staff to receive two doses of any SARS Cov2 mRNA (Covid 19) injection (vaccination). Staff were coerced to accept this medical treatment as the human right to work was under threat if the order was refused. This contempt for the law by Department of Education (DOE) executive staff and the Minister of Education, The Hon. Sarah Mitchell MLC, violated the right to informed consent, a principle enshrined in laws and conventions. DOE executive staff and the Minister for Education justified this unlawful mandate by signing a Public Health Order. It must also be noted that all injections considered vaccinations for SARS Cov2 are still only provisionally approved. Ongoing harassment of “non-compliant” staff ensued after the deadline date on the mandate of 5 November 2021.

Additionally, the unlawful treatment of DOE staff and the resultant sacking of non-compliant teachers will result in continued and severe shortages as thousands of teachers have sought alternate careers.

Relevant Events

On the 24 September 2021, the NSW Department of Education (DOE) notified staff that the mandatory order for all school-based staff to have two doses of the SARS Cov2 messenger RNA therapy, reference in their correspondence as a “vaccination”, had been signed. The Public Health (COVID 19 Vaccination of Education and Care Workers) Order 2021 for mandatory vaccinations required staff to receive these injections by 5 November and upload their private medical vaccination status into the Vaccination Attestation and Confirmation System (VACS). Yvette Cachia, Chief People Officer, DOE announced this decision with the order to inform our Principal if we were not going to be vaccinated.

Letter of Duress sent 24 September 2021

I sent a response to Ms Georgina Harrison, Secretary, DOE and CC'd Barnaby Joyce MP, Mr Peter Flannery, my Director of Learning (DEL) and my Principal Ms . My letter expressed my concern that I was under economic duress and being coerced to take a medical treatment. This economic duress negated my right to informed consent in receiving a vaccine or any medical procedure. This right to informed consent is protected by numerous laws, regulations and policies including:

- The Commonwealth Constitution s.51(xxiiiA) which prohibits civil conscription into medical and dental services.
- The Biosecurity Act 2015 (Cth) s.95 prohibits the use of force for vaccination.
- The Biosecurity Act 2015 (Cth) s.92 prohibits required vaccination or treatment without an individual Biosecurity Control Order with stringent requirements.
- Article 6 of the UNESCO statement on Bioethics and Human Rights, Section 1, states “Any preventative diagnostic and therapeutic medical intervention is only to be carried out with the prior free and informed consent of the person concerned, based on adequate information. The consent should, where appropriate, be express and may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice.”
- Nuremberg Code, Article 1, states “The voluntary consent of the human subject is absolutely essential” and “it is a personal duty and responsibility which may not be delegated to another with impunity.”
- The Siracusa Principles, adopted by the UN Economic and Social Council in 1984 provide authoritative guidance on government responses that restrict human rights for reasons of public health or national emergency. These Principles state that measures taken to protect the population that limit people’s rights and freedoms must be lawful, necessary, and proportionate.
- Section 83.4 of the Criminal Code Act 1995 (Cth), which relates to interfering with political liberty, states any person who, by violence or by threats or intimidation of any kind, hinders or interferes with the free exercise or performance, by any other person of any political right or duty shall be committing an offence.
- United Nations International Covenant on Civil and Political Rights Article 7 – states “No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation.”

I also outlined the relevant safety data available on the Covid 19 injection. All available mRNA injections are still only provisionally approved.

Correspondence attached – “Burkhardt Duress Letter Harrison 24 September 2021”

Ms Georgina Harrison did not respond, but she did request the Covid19 Task Force to respond on her behalf. No issue raised in my correspondence of 24 September 2021 was addressed. Instead, the DOE Covid Taskforce responded with: “Activities and operations in NSW schools are being conducted in line with guidance and advice from the Australian Health Protection Principal Committee guidelines and NSW Health, as applicable. As employers, NSW Government agencies are responsible for keeping all employees safe, which includes complying with Public Health Orders.” They included advice on where to get the vaccination.

Correspondence attached: “Letter from Covid Taskforce 15 October 21”

Risk Assessment Request

I also requested of my Principal, a Risk Assessment from her and our Director of Learning (DEL). There is no Risk Assessment, and after they had investigated, I was informed that “the legal obligation to be vaccinated is not dependent upon the outcome of a risk assessment” and “I am bound by the constraints of the public health order and departmental guidelines”.

Risks assessments help identify potential hazards so informed decisions can be made to minimise risk. No in-depth data collection and analysis was made by the DOE to understand the nature of the

virus on different demographics or the safety and efficacy of the provisionally approved mRNA therapies, despite independent international studies.

Correspondence attached: “Burkhardt Risk Assess Response from DEL 27 Oct 2021”

Memorandum of Advice sent by Raymond J Broomhall of Michael Kerby Chambers on instruction from 25 000 educators affected by SARS Cov2 mRNA “vaccination” mandate. 4 November 2021

National Education United, a grassroots organisation, was established to support educational staff mitigate the lawless imposition of forced medical treatment to access work. These workers had been abandoned by the Teacher’s Federation Union in NSW. At this time the organisation numbered over 36 000 people. The Memorandum of Advice outlined the violations perpetrated on DOE staff under the International Covenant on Civil and Political Rights (ICCPR), Article 7 (a covenant effected by The Australian Human Rights Commission Act (Cth) 1986), the Criminal Code Act 1995 and the Crimes Act 1900. Thousands of Memorandums were sent to Principals and DOE executive staff. I did not receive a response from my Principal or from Yvette Cachia, Chief People Officer on whom I served the Memorandum of Advice.

(Correspondence attached: “Burkhardt AFL and Broomhill correspondence 4 November 2021”

Failure of the NSW Department of Education to source latest research and advice on the treatment and virulence of SARS Cov2.

The inability – or perhaps refusal - of policy makers to take advice from the best minds in the world on the issue of SARS Cov 2, its virulence and best treatment is disturbing. According to Dr Jay Bhattacharya, Stanford University professor of medicine and epidemiological research, Dr Martin Kulldorff, epidemiologist at Harvard and Dr Sunetra Gupta from Oxford University, the strategy to control SARS Cov2 by finding all cases and isolating people to reduce the cases to zero will not work in the case of this disease. This is because it is impossible to know how many people have had the disease. They advocate a policy of Focused Protection as the death rate is low for people under 70, at 0.05%. Under 70 years old you have a 99.95% survival rate. General health affects the death rate for under 70’s so health issues will affect some people making them vulnerable. Extremely low death rates with co-morbidity factors are reported in Australia. For most people, Covid is a mild flu, not a death sentence. Moreover, the devastating effects of lockdown have shown to have lifelong consequences on the education of our children due to learning loss, have plunged 100 000 000 more people into poverty and created unprecedented levels of mental illness. Furthermore, the policies of vaccination passports and mandatory vaccination is tearing families and communities apart. (*What happened: Dr Jay Bhattacharya on 19 months of COVID*, 22 October 2021, <https://www.youtube.com/watch?v=zG7XZ2JXZqY>).

“The most compassionate approach that balances the risks and benefits of reaching herd immunity, is to allow those who are at minimal risk of death to live their lives normally to build up immunity to the virus through natural infection, while better protecting those who are at highest risk. We call this Focused Protection. (The Great Barrington Declaration (Oct 2020), <https://gbdeclaration.org/>)

Another of the many medical professions working tirelessly to expose the truth of the nature of SARS Cov2 and appropriate treatments, is Dr Peter McCullough, the most published Medical Professor in the world. He addressed the Texas Senate on March 12, 2021 drawing attention to lack of support by governments for very successful therapeutics. He prescribes off-label use of conventional medicine to avoid two bad outcomes – hospitalisation and death. Dr McCullough was involved with an international team of doctors to document therapeutic treatments for Covid 19. *Pathophysiologic Basis and Rational for Early Ambulatory Treatment* was published in the American Journal of Medicine on August 8, 2020. It was peer reviewed and heavily cited. (Peter

McCullough, MD testifies to Texas Senate HHS Committee, March 12, 2021. (<https://www.youtube.com/watch?v=QAHi3IX3oGM>). Dr McCullough has also, with colleagues, compiled safety data on mRNA therapies. These “vaccines” have had more adverse reactions than all other vaccines combined. (Dr Peter McCullough: Therapeutic Nihilism and Untested Novel Therapies, 78th Annual Meeting of the Association of American Physicians and Surgeons, 5 October 2021, <https://rumble.com/vnc5yk-dr.-peter-mccullough-therapeutic-nihilism-and-untested-novel-therapies-aaps.html>) It is becoming apparent that these vaccines cause many health issues and data is being collected on vaccine induced myocarditis, spontaneous miscarriage and crippling body pain and trembling.

Ongoing treatment of staff by DOE due to refusal to submit “vaccination” mandate

Professional and Ethical Standards Misconduct Investigation – 7 December 2021

I was advised that Professional and Ethical Standards of the DOE:

- is investigating allegations that you have failed to comply with the directions from Ms Cachia dated 22 October 2021 and 1 November 2021 and that you do not meet a condition of your employment as set out in the Secretary’s determination.
- cancelled my temporary contract effective 8 November 2021.
- will pay four (4) weeks payment in lieu of notice. as a risk management action pending the outcome of the investigation into your non-compliance with Ms Cachia’s directions and the condition of your employment as set out in the Secretary’s determination, I have temporarily withdrawn your approval to teach for the Department.

On the 14 January, the Director of Professional Ethical Standards (PES) DOE NSW advised me of the following:

- “employment as a temporary teacher was ceased as of 8 November 2021 as you failed to attest that you were vaccinated in accordance with the Public Health (COVID-19 Vaccination of Education and Care Workers) Order 2021 (the Education PHO), the Teaching Service Act 1980 – Determination No.1 2021 – COVID-19 Vaccination Evidence (the Vaccination Determination) and directions issued by the department on 22 October 2021 and 1 November 2021.
- PES has decided to not progress an investigation into your failure to attest your vaccination status.
- a notation will be made on my personnel file that notes you have not had a vaccine attestation confirmed and your approval to work will remain temporarily withdrawn until an attestation has been made.

Correspondence attached: “Letter of Allegation 7 December 2021” and “Letter of Notification 17 November 2021”

Impact of Mandates – financial, social, health and family

Impact is far reaching. I have not been in a classroom since 14 October 2021. I have no income and have sold my assets to survive which were security for my future. I have limited superannuation accumulated over the past 9 years. At 57 years of age, retraining in another industry presents problems. I have lost six months income, and the contract for the 2022 teaching year which was suggested for my consideration by the Head Teacher at my school of employment prior to the mandate, was of course withdrawn.

I was harassed at school when it was revealed that I would not be accepting the mRNA therapy as ordered by DOE executive. In addition, I live in a small country town and professional teachers in the district know who the “unvaccinated” teachers are. This will inevitably affect my work

opportunities if mandates are lifted – which was supposed to be the case from 18 July 2022, but this date continues to change.

The mask mandate in Term 4, 2021 was also problematic for me, as I was instructed that I must wear a mask whilst teaching. Two weeks of teaching in this way caused me to have panic attacks as I often felt dizzy, gasped for breath and my lungs and airways became dry and irritated. My doctor wrote a medical certificate for three weeks leave to enable recovery of my lungs and avoid further stress. I was then dismissed.

It is evident that the Department of Education had not planned for the continued dialogue with staff affected by the sudden mandate. Professional and Ethical Standards dropped my investigation and Human Resources paid my contract till the end of January instead of the four weeks pay in lieu. This pay adjustment illegitimated my case with the Industrial Relations Commission as my contract had been paid out.

Sincerely Yours