

COMMISSION OF INQUIRY NO. 1 OF 2005
MEDICAL BOARD OF QUEENSLAND

This is the annexure marked "**JPO-10**" mentioned and referred to in the Statement of **JAMES PATRICK O'DEMPSEY** dated this 17th day of May 2005.

OFFICE OF HEALTH PRACTITIONER

REGISTRATION BOARDS

Submission To: Mr Jim O'Dempsey, Executive Officer

Prepared and Submitted by: Mrs Robyn Scholl, Assistant Registrar

Subject: Dr Henry Andy

Files: 1001772

- On 9 October 2000, an application was received from Dr ^{ANDY}Henry seeking registration to fill an area of need in a rural practice situated in Tully. The application was accompanied by certified copies of his medical degree and academic transcript from Lyceum – Northwestern College of Medicine, Phillipines, correspondence from the University of Otago confirming Dr ^{ANDY}Henry was an elective student from 17 March 1999 to 24 April 1999 and functioned as a Trainee Intern, IELTS certificate, two references and CV.
- On 6 November 2000, correspondence was forwarded to Dr Andy indicating the Board had declined approval of conditional registration to fill the area of need position described.
- On 18 October 2001, a further application was received from Dr Henry to fill an area of need at Fraser Coast Health Service District. With this application, Dr Henry provided assessments for the period 5/8/01 – 31/9/01 during which he was a medical observer at Fraser Coast Health Service District.
- On 28 November 2001, an authorized Board member approved area of need registration for a period of 12 months for Dr Andy to fill an area of need at Fraser Coast Health Services District – unsupervised country relieving not permitted. This was confirmed by the Board at its meeting on 18 December 2001. Registration commenced on 3 December 2001.
- On 22 April 2002, correspondence was received from Fraser Coast Health Service District indicating Dr Andy had ceased employment and the District could not support continued registration. Some deficiencies in knowledge and skills were identified, considered to be of a nature and degree to preclude continued employment as a Junior House Officer.
- On 24 April 2002, Dr Andy advised he had ceased the approved activity and provided a copy of his pass in the AMC MCQ exam held 5 & 8 October 2001.
- On 7 October 2002, Dr Andy applied for special purpose registration to fill an area of need at Bundaberg Base Hospital as a Junior House Officer.

- On 8 October 2002, a facsimile was received from the Director of Emergency Medicine, Mackay Base Hospital indicating Dr Andy worked at that hospital from 15/7/02 – 13/8/02. Dr Sadleir indicated his impression over the 4 week period was generally favourable. His overall performance and willingness to learn indicate very good potential for him to work competently as a junior house officer.
- On 30 October 2002, correspondence was forwarded to the Medical Superintendent, Mackay Base Hospital, seeking clarification of Dr Andy's status at that hospital during the period 15/7/02 – 13/8/02.
- Response received 1 November 2002 clarified that Dr Andy was an observer at the hospital and that he was not employed or remunerated by Queensland Health. It was indicated that while Dr Andy's time as an observer was deemed to be satisfactory, Mackay Base Hospital could not employ him and continue to supervise him as staffing was limited.
- On 12 November 2002, the Board approved that Dr Andy be approved special purpose registration to fill an area of need in a supervised setting at Bundaberg Base Hospital from 12 November 2002 – 12 January 2003.
- On 10 December 2002, the Board noted the response received from Mackay Base Hospital providing an explanation as to the nature of Dr Andy's status during the period 15/7/02 – 13/8/02 at the hospital and resolved to take no further action.
- On 12 December 2002 a further application was received from Dr Andy. Provisional special purpose registration for the period 13/1/-3 – 18/1/04 was authorized and approved by the Board at its meeting on 14 January 2003.
- On 17 February 2003, verbal advice was received that Dr Andy had ceased practice on 15 January 2003 as it was discovered he did not possess the correct working Visa.
- On 5 August 2004, a Certificate of Standing was issued to the Medical Council for Kenya. This certificate indicated there were no disciplinary proceedings in progress and he was not the subject of investigation by the Board.
- There have never been any questions raised regarding Dr Andy's qualifications.

Robyn Scholl
Assistant Registrar

Date: 20 April 2005

COMMISSION OF INQUIRY NO. 1 OF 2005
MEDICAL BOARD OF QUEENSLAND

This is the annexure marked "**JPO-11**" mentioned and referred to in the Statement of **JAMES PATRICK O'DEMPSEY** dated this 17th day of May 2005.

OFFICE OF HEALTH PRACTITIONER REGISTRATION BOARDS
Professional Standards Unit

Briefing Note To: Minister for Health

Prepared by: Fiona Jackson, Complaints Coordinator

Submitted by: Jim O'Dempsey, Executive Officer

Date: 20 April 2005

- On 22 October 2003, Dr Darren Keating, Director of Medical Services, Bundaberg Health Service District wrote to the Complaints Unit of the Medical Board of Queensland advising that Ms KM, a patient of the Bundaberg Base Hospital had made a written complaint about Dr Qureshi's actions during a physical examination of her. Dr Keating advised that he interviewed Ms KM on 20 October 2003 and Ms KM alleged that during an examination of her calf, Dr Qureshi rubbed his hand up and down the inside of her right leg several times reaching up into her thigh area and that when he was examining her chest she pulled her t-shirt up above her breasts without her permission, played with her left breast and then began rubbing his hands between her breasts saying that she needed a chest massage. She also alleged that Dr Qureshi finished his examination with touches to face and hair.
- Dr Keating advised that he discussed the incident with Dr Qureshi on 20 October 2003 and that measures had been implemented to ensure he had a chaperone present when consulting female patients.
- Dr Keating also advised that a complaint about the manner in which Dr Qureshi conducted a breast examination had been made by another patient who attended the Department of Emergency Medicine on 27 August 2003 and that this was discussed with Dr Qureshi on 28 August 2003 who was then provided with counselling about conducting examinations of that nature. Dr Keating advised that the complainant in that matter did not wish the matter to progress any further.
- On 15 December 2003 the Complaints Unit for the Medical Board of Queensland received further correspondence from Dr Keating advising that a further complaint had been made by a patient, Ms AM about Dr Qureshi on 8 December 2003. Ms AM complained that during an examination Dr Qureshi repeatedly stroked her head and hair and that sometime later, when she was sleepy and drowsy she sensed Dr Qureshi bending over her and kissing her on her left cheek several times before placing his hand down her chest. Dr Keating advised that Dr Qureshi was interviewed on 9 December 2003 and denied the allegations. Dr Keating advised that he had reinforced the requirement to have a chaperone present when examining any female patients, removed Dr Qureshi from the on-call roster and that administrative action had begun in relation to the incidents.
- On 24 December 2003, Dr Keating provided additional information and supporting documents about some of the matters he had reported.
- The details of these complaints were discussed with Dr Keating and staff from Audit and Operational Review, Queensland Health.

- On 3 February 2004 the Board's Complaints Advisory Committee resolved to ask Dr Qureshi to show cause as to why conditions should not be imposed on his registration and to recommend the Board investigate all three matters.
- On 24 February 2004 the Board resolved to investigate complaints from Dr Keating pursuant to section 53 of the *Health Practitioners (Professional Standards) Act 1999*.
- On 13 April 2004 Mr Michael Schafer, Director, Audit and Operational Review, Queensland Health advised that the matter has been referred to the Crime and Misconduct Commission (CMC) on 29 January 2004 and that the CMC intended to report the allegations to the Queensland Police Service (QPS). Mr Schafer advised that QPS had subsequently advised that Dr Qureshi had fled the jurisdiction and was overseas, the QPS had issued a warrant for Dr Qureshi's arrest in relation to numerous charges of sexual assault, raised a "Passenger Alert", and notified Australian Immigration and Interpol of the outstanding warrant.
- On 25 May 2004 the Board resolved to initiate an investigation if Dr Quershi attempted to re-register in Queensland.
- On 23 July 2004 Dr Keating advised the Board that Dr Qureshi's employment at Bundaberg Hospital was terminated on 14 March 2004 and that disciplinary action had been taken against Dr Qureshi in relation to absence from duty without approved leave and reasonable excuse.
- The investigations commenced by the Board have been closed on the basis that Dr Qureshi is no longer registered in Queensland.
- The Board has subsequently responded to requests from other jurisdictions for information about Dr Qureshi's registration status and has advised those jurisdictions that the Board understands there is an outstanding warrant for his arrest.

Jim O'Dempsey
Executive Officer

COMMISSION OF INQUIRY NO. 1 OF 2005
MEDICAL BOARD OF QUEENSLAND

This is the annexure marked "**JPO-12**" mentioned and referred to in the Statement of **JAMES PATRICK O'DEMPSEY** dated this 17th day of May 2005.

OFFICE OF HEALTH PRACTITIONER

REGISTRATION BOARDS

Submission To: The Hon Gordon Nuttall MP
Minister for Health

Prepared and Submitted by: Mr Jim O'Dempsey, Executive Officer
Medical Board of Queensland

Subject: Final Results of Primary Audit of Special Purpose Registrants

Recommendation

- A. The Minister note that the primary audit of 1670 registrants has identified no other special purpose registrant who has fraudulently obtained registration when there were sanctions on their registration in another jurisdiction.

Purpose

1. To report to the Minister on the audit methodology and the results of the primary audit.

Background

Audit Methodology

2. The audit methodology is constituted by two parts each having two phases, as follows:

2.1 Primary Audit

PHASE ONE – A team of experienced staff was established to undertake a physical review of each of the 1670 registrant files. This team was responsible to (a) ensure the Certificate of Good Standing (or its equivalent) was filed, had not been altered and that any attachments referred to in the Certificate were on file, and (b) determine that the Certificate supported the decision to register the applicant; and (c) refer any files with identified issues of any nature to the Executive Officer.

PHASE TWO – All files with identified issues were reviewed by the Deputy Registrar, Assistant Registrar and the Executive Officer.

2.2 Secondary Audit

PHASE ONE - A software program was developed to undertake an internet search for records of disciplinary action against current special purpose registrants.

PHASE TWO – The results of the internet search will be reviewed to

identify any undisclosed disciplinary action related to the practice of medicine. Where this is unclear the identified website address will be accessed and reviewed. It is at this stage where the Board may need to seek further information directly from the overseas regulatory authority.

Results of Primary Audit

3. As at 5.00pm, 18 April 2005, 1670 files had been reviewed through Phase One processes. Of the 1670 files, 350 files were referred for Phase Two review.

The Phase Two review was completed by 5.00pm on 18 April 2005. The review identified no issues in relation to fraudulent Certificates. The only issues identified were: (a) in relation to the time gap between provision of the Certificate on application and the date of registration; and (b) clarification as to whether the authority issuing the Certificate or its equivalent was acceptable to the Board.

In regard to the first issue, the time gap was generally no more than two months and relates to the Board's previous practice of not considering that the person was registered until they had been interviewed by a Board member. Special purpose registrants generally do not leave their country of origin until they are advised they will be registered. This explains the gap between the provision of the Certificate on application and the date of registration.

In regard to the second issue, all Certificates were issued by authorities acceptable to the Board.

Secondary Audit

4. Phase One of the secondary audit returned 6,283 "hits" using the search parameter "disciplinary action". A random sample of 10% of these hits has identified no disciplinary action in relation to medical practice.
5. Phase Two of the secondary audit has commenced and is expected to be completed by 22 April 2005.

Other Matters

6. The Minister should note that the primary audit has identified that the initial decision to register in all cases is supported by an accurate Certificate of Good Standing or its equivalent. This report does not address the case where disciplinary action is taken against a person in another jurisdiction who is already registered in Queensland. This occurs regularly, particularly between the States and Territories and with foreign jurisdictions. On receipt of such notification the Board takes all necessary action consistent with its powers under the *Health Practitioners (Professional Standards) Act 1999*. In particular, s.311 of that Act provides that the Board may match any sanction imposed by a foreign regulatory authority. The Board has received notification in one such case which is currently being assessed.

Jim O'Dempsey
EXECUTIVE OFFICER
18 April 2005

COMMISSION OF INQUIRY NO. 1 OF 2005
MEDICAL BOARD OF QUEENSLAND

This is the annexure marked "**JPO-13**" mentioned and referred to in the Statement of **JAMES PATRICK O'DEMPSEY** dated this 17th day of May 2005.

OFFICE OF HEALTH PRACTITIONER**REGISTRATION BOARDS**

Submission To: The Hon Gordon Nuttall MP
Minister for Health

Prepared and Submitted by: Mr Jim O'Dempsey, Executive Officer
Medical Board of Queensland

Subject: Final Results of Secondary Audit of Special Purpose Registrants

Recommendation

- A. The Minister note that the secondary audit of 6232 Internet entries in regard to the 1670 registrants has identified no other special purpose registrant who has fraudulently obtained registration when there were sanctions on their registration in another jurisdiction.

Purpose

1. To report to the Minister on the final results of the secondary audit of special purpose registrants.

Background

2. In my report of 18 April 2005 I advised you that the methodology for the secondary audit was as follows:
 - 2.1 PHASE ONE - A software program was developed to undertake an internet search for records of disciplinary action against current special purpose registrants.
 - 2.2 PHASE TWO - The results of the internet search will be reviewed to identify any undisclosed disciplinary action related to the practice of medicine. Where this is unclear the identified website address will be accessed and reviewed. It is at this stage where the Board may need to seek further information directly from the overseas regulatory authority.

Results of Secondary Audit

3. As at 5.00pm, 21 April 2005, all 6232 Internet entries had been assessed. Of these entries, 59 were identified for further assessment by a Deputy Registrar. Of these 59, 12 entries were identified for investigation through a search of the individual source website.

4. No cases were found of disciplinary findings or action in relation to a current special purpose registrant.
5. Because of the search criteria, the vast majority of the entries did not relate to an actual registered practitioner but to another person, or a place name, with a name common with one of the registrants' names.
6. A number of persons with the same surname as a registrant were found to have been subject to disciplinary proceedings, but either the person had a different Christian name to the practitioner or was disciplined in a field unrelated to medical practice such as sports.
7. In addition, some websites contained documentation of the minutes of meetings of overseas medical authorities wherein: (a) the medical practitioner was listed as being qualified for registration; but (b) the reference to 'disciplinary action' occurred elsewhere in the minutes and was in relation to other persons.

Jim O'Dempsey
EXECUTIVE OFFICER

22 April 2005

COMMISSION OF INQUIRY NO. 1 OF 2005
MEDICAL BOARD OF QUEENSLAND

This is the annexure marked "**JPO-14**" mentioned and referred to in the Statement of **JAMES PATRICK O'DEMPSEY** dated this 17th day of May 2005.

MEDICAL BOARD OF QUEENSLAND

Report To: The Hon Gordon Nuttall MP
Minister for Health

**Prepared
and Submitted By:** Mr Jim O'Dempsey, Executive Officer
Medical Board of Queensland

Subject: **Supplementary Report on Remedial Actions to be
Implemented by the Medical Board**

Recommendation

- A. The Minister note that AMA has agreed with the direction proposed to you by the Medical Board and that there are no outstanding issues.**

Purpose

1. To provide the Minister with a supplementary report, subsequent to consultation with the Australian Medical Association ('AMA') on the remedial actions to be implemented by the Board.

Background

2. On 15 April 2005, Dr Mary Cohn, the Chairperson of the Board, provided you with a report on the registration of Dr Jayant Patel and advised that, subsequent consultation would be undertaken with the AMA in regard to the remedial actions documented.
3. On 18 April 2005, Dr Cohn and Mr O'Dempsey met with Dr David Molloy, Dr Steve Hambleton and Mr Kerry Gallagher of the AMA. It should be noted that the AMA fully supported the remedial actions proposed to the Minister, had some additional suggestions for improvement and a number of concerns that needed to be addressed. These were as follows:
 - (a) Suggested that recruitment agencies should be required to submit all documentation in a standard form to assist the Board in its assessment of applications for special purpose registration.
 - (b) Suggested that all international medical graduates applying for registration be required to have their qualifications certified through the US Educational Commission for Foreign Medical Graduates but questioned whether there was an Australian organization which could provide this service.
 - (c) Expressed concern that the national registration initiatives recently approved by the Australian Health Ministers may 'water down' the stricter

registration regime for special purpose registration to be introduced in Queensland.

- (d) Suggested that if the initial period of direct supervision identified any issues in regard to clinical competence of the registrant, the registrant be required to undertake an assessment at the skills development centre located at the Royal Brisbane campus.
 - (e) Agreed to support the proposal negotiated between the Board and Queensland Health that where Queensland Health employed an area of need registrant as a senior medical officer and required that person to undertake specialty activities such as surgery, pathology, anaesthetics, cardiology, etc. a special regime of supervision and reporting would be implemented. This regime would require the registrant to be supervised by a nominee of the relevant College for 1-3 months under conditions imposed on their registration and for the College supervisor to provide a report directly to the Board on the outcomes of that supervision. This regime will provide civil, criminal and administrative protection to the supervisor in providing reports to the Board as detailed in s.272, *Medical Practitioners Registration Act 2001* ('the Act'). Should such reports identify any issues in regard to clinical competence of the registrant, the registrant will be required to undertake a further clinical assessment.
 - (f) Suggested that all special purpose registrants be required on a mandatory basis to undertake continuing medical education with the relevant College. For example, an area of need general practitioner with the Royal Australian College of General Practitioners, or where they are required by Queensland Health to undertake specialty activities, with the relevant specialty College.
 - (g) Suggested that special purpose registrants be required on approval of their registration to immediately lodge an application for Australian Medical Council ('AMC') certification examinations and to have substantially completed the certification process within four years.
 - (h) While supporting an amendment to s.273(1) of the Act to increase the penalty applying should it be proven that an applicant for registration has provided the Board with a false and misleading statement expressed concern that such individuals would still maintain registration.
4. Given the outcomes of consultation, the Board has updated the remedial actions documented in its report to you of 15 April 2005 to address the matters raised in paragraphs 3(a), (d), (e), (f) and (g). The updated document on remedial actions is placed at attachment (A). It should be noted that amendments and additions to this document are highlighted in bold.
5. In regard to paragraph 3(b), the AMA concern was satisfactorily addressed by the Board's advice that:

All special purpose registrants would require such certification of their qualifications and the AMC was to introduce, by July 2006, the same certification process for all those applying to sit the AMC certification examination. In addition, there was no Australian organisation which could provide this service.

6. In regard to paragraph 3(c), the AMA concern was satisfactorily addressed by the Board's advice that:

The decision of the Australian Health Ministers did not provide for special purpose registration to be portable and, as such, applications for special purpose registration would continue to be made to the medical regulatory authority in each State and Territory. The AMA was further advised that all medical regulatory authorities wished to implement the stricter regime which has been proposed to the Minister.

7. In regard to paragraph 3(h), the AMA concern was satisfactorily addressed by the Board's advice that:

Section 149 of the Act provided that the Board may cancel a special purpose registration if the registrant was registered because of a materially false or misleading representation or declaration. In addition, the AMA were advised that similar provisions apply to both general and specialist registration.

Mr Jim O'Dempsey
Executive Officer
Medical Board of Queensland

18 April 2005

Remedial Actions the Board Will Initiate

9. Immediate Actions – The immediate actions the Board will initiate are as follows:
- 9.1 The Board will require all applicants to arrange for the registering authority in their training jurisdiction and all jurisdictions in which they have been registered to provide directly to the Board a Certificate of Good Standing or its equivalent. The only exception to this will be the General Medical Council of the United Kingdom as Certificates of Good Standing from this jurisdiction are printed on security stationery.
 - 9.2 The Board will develop and implement a software driven process for searching the internet to assure no undeclared disciplinary action has been taken against applicants in other jurisdictions.
 - 9.3 A staff training workshop will be delivered on the procedures for reviewing the Certificates of Good Standing and for notifying a senior officer of the outcome of the review.
 - 9.4 The Board will notify the registering authority in Oregon, USA, of Dr Patel's fraudulent actions when he applied for registration in Queensland.
 - 9.5 The application for registration procedure will be amended to require all recruiting agencies to provide certification to the Board that reference checks have been undertaken and the results of such checks are included in the application package. **In addition, recruitment agencies will be required to submit all application documentation in a standard form to assist the Board in its assessment of applications for special purpose registration.**
10. Short Term Actions – The short term actions the Board will initiate are as follows:
- 10.1 The application for registration procedure will be amended to require all recruiting agencies to provide certification from the US Educational Commission for Foreign Medical Graduates International Credentials Service that the qualification of the applicant is verified.
 - 10.2 The Board will seek the Minister's approval to amend the *Medical Practitioners Registration Act 2001* as detailed in paragraphs 11 and 12 below.
11. Medium Term Actions – The medium term actions the Board will initiate are as follows:
- 11.1 The outcomes of the Registration Review Project approved by the Board at its meeting of 12 April 2005 will be implemented. In this regard, by July 2006: (a) the staffing structure will be reorganized to introduce one registration team, led by a senior manager, which will be responsible for quality registration processes; (b) a new registration and registrant management software package will be designed and implemented at a cost

of \$1 million; and (c) the model registration procedures developed in the project will be implemented.

- 11.2 The Board, together with the Australian Medical Council and the Medical Boards in all other States and Territories, will continue to negotiate through the commonwealth, a national approach to the assessment of area of need applicants consistent with the following guidelines:

Pre Registration

- . International computer-administered screening examination (to be implemented from July 2006)
- . On-line primary source verification of all qualifications (to be implemented from July 2006)
- . English language proficiency (was implemented from May 2004)
- . Review experience and background including relevant College assessment of experience
- . Assess evidence of fitness for registration, including character, certificates of good standing and references
- . Assess job description according to categories based on level of decision making, clinical profile, available supports and supervision
- . Individual assessment of fitness for the described position and, based on that assessment, require a clinical interview or a clinical examination

Post Registration

- . **Initial period under direct supervision (1-3 months). If any issues in regard to clinical competence of the registrant are identified, the registrant will be required to undertake an assessment at the skills development centre located at the Royal Brisbane campus. In addition, the employer will be immediately advised to review the registrant's employment status and the Board will consider any action necessary in relation to their registration status.**
- . **If the special purpose registrant is employed by Queensland Health as a senior medical officer undertaking specialty activities, a condition will be placed on registration requiring the registrant to be supervised by a nominee of the relevant College for 1-3 months and for the College to provide a report directly to the Board on the outcomes of that supervision. It should be noted that this regime will provide civil, criminal and administrative protection to the supervisor in providing reports to the Board. Should such reports identify any issues in regard to clinical competence of the registrant, the registrant will be required to undertake a further clinical assessment and Queensland Health will be immediately advised to review their employment status and the Board will consider any action necessary in relation to their registration status.**
- . Mandatory professional development and training within a defined period about such matters as the legislative framework applying in the jurisdiction, Aboriginal health, Womens' Health, cross cultural

training, Health Insurance Commission requirements and working in the Australian health care system.

Completion of the Australian Medical Council ('AMC') examination or specialist recognition within a defined period of years from initial area of need registration. **In this regard, each special purpose registrant will be required, on approval of their registration, to immediately lodge an application for AMC certification examinations and to have substantially completed the certification process within four years. In the alternative, for specialist recognition, the registrant will have to immediately lodge an application to complete the College program and to have substantially completed the College certification process within four years.**

Standardized work reports after one month, three months, six months and twelve months from the initial date of registration

Amendments to the *Medical Practitioners Registration Act 2001*

12. The Medical Board of Queensland is funded only by the fees it receives for registration. The Board receives the same application fee for special purpose registration as it does for general registration and does not receive an application fee for renewal of special purpose registration. However, it is significantly more expensive to the Board to process an application for special purpose registration and for renewal of that registration in comparison to applications from an Australian or New Zealand graduate or from an applicant holding certification from the AMC. It is recommended that the Minister consider seeking an amendment to the *Medical Practitioners Registration Regulation 2002* to provide for an increase in the application fee for special purpose registration and to introduce an application fee for renewal of that registration. Such an increase and new fee will assist the Board in funding the immediate, short term and medium term actions to be initiated.
13. Section 273(1), *Medical Practitioners Registration Act 2001* currently provides a sanction of \$3,750 as a maximum penalty should it be proven that an applicant for registration has provided the Board with a false and misleading statement when applying for registration. This does not appear to be an adequate **financial** disincentive to fraudulent activity **and** it is recommended that the Minister consider seeking an amendment to this section to increase the maximum penalty. **It should be noted that concurrent with such prosecution the Board can take action under s.149 to immediately cancel the registration which was obtained because of a materially false or misleading representation or declaration.**

COMMISSION OF INQUIRY NO. 1 OF 2005
MEDICAL BOARD OF QUEENSLAND

This is the annexure marked "**JPO-15**" mentioned and referred to in the Statement of **JAMES PATRICK O'DEMPSEY** dated this 17th day of May 2005.

OFFICE OF HEALTH PRACTITIONER

REGISTRATION BOARDS

Submission To: Medical Board of Queensland

Prepared and Submitted by: Mr O'Dempsey

Subject: Proposal for Implementing Changes to Special Purpose Registration and Related Matters

It is recommended that:

- A. a complaint and summons be issued alleging that Dr Patel breached s.273(1), *Medical Practitioners Registration Act 2001*.**
- B. the Board approve the Terms of Reference placed at attachment (B).**
- C. the Board endorse establishment of a Special Purpose Registration Assessment Unit and approve inclusion of the estimated costs in the request for transitional funding.**
- D. the Board endorse increasing the resources for the Professional Standards Unit and approve inclusion of the estimated costs and additional legal costs in the request for transitional funding.**
- E. the Board endorse the progression of the Registration Review Project outcomes and approve inclusion of the estimated costs in the request for transitional funding.**
- F. the Board approve continuance of the current media strategy and approve inclusion of the estimated costs in the request for transitional funding.**
- G. the Board approve the engagement of Junior and Senior Counsel to represent it at the Commission and approve inclusion of the legal costs in the request for transitional funding.**
- H. the Board note the results of the secondary audit.**
- I. the Board note that the request for transitional funding will be made by close of business on 27 April 2005.**

Purpose

1. To raise for Board consideration a range of proposals for implementing changes to special purpose registration and related matters ensuing from the report to the Minister on the registration of Dr Jayant Patel. These are as follows:
 - (a) Prosecution of Dr Patel.
 - (b) Establishment of a Steering Committee for implementation.
 - (c) Establishment of a special purpose assessment unit.
 - (d) Increased resources for the Professional Standards Unit.
 - (e) Progression of the Registration Review Project outcomes.
 - (f) Continuance of the current media strategy.
 - (g) Preparation for the Commission of Inquiry.
 - (h) Results of secondary audit.
 - (i) Transition funding from Queensland Health.

Background

2. In his statement to Parliament on 18 April 2005, the Minister endorsed the Board's recommendations as detailed in its report of 15 April 2005 and the supplementary report of 18 April 2005. Copies of these reports are provided in attachment 13 of the Board's Agenda. In addition, attached (A) for the Board's information is the Minister's publication *A plan for healthier patient care* ('the Plan').
3. In considering the Minister's plan, the Board should note that a grant is to be provided to it by Queensland Health to ensure the new registration process is fully implemented. However, there are related matters ensuing from this issue which should also be funded. These will be addressed in this submission.

Prosecution of Dr Patel

4. Dr Patel has clearly breached s.273(1) of the *Medical Practitioners Registration Act 2001*. The detail of this breach is provided in attachment 13 of the Board's Agenda. While s. 273(1) currently provides a maximum penalty of only \$3,750, it would be in the public interest for the Board to initiate a complaint and summons alleging the breach.
5. Such a prosecution would demonstrate to the public that the Board will not tolerate any applicant providing false and misleading statements on application for registration. It would also contribute to enhancing public confidence at this time.

Establishment of Implementation Steering Committee

6. Implementation of the immediate, short term and medium term actions detailed in the Board's report to the Minister requires a concentrated effort to ensure quality implementation. It is for this purpose that establishment of a Steering Committee ('the Committee') is proposed.

7. It should be noted that the Committee will be responsible for directing the implementation and considering staff plans for recommendation to the Board.
8. Establishment of such a Committee with the Terms of Reference (including membership) proposed will also demonstrate to stakeholders that the Board is absolutely committed to implementing the changes and that such changes are being progressed as a matter of urgency.
9. Attached (B) for Board consideration are the draft Terms of Reference for the Committee.

Establishment of Special Purpose Assessment Unit

10. An enhanced focus on the assessment of special purpose registrations will be necessary. In addition, an increase in resources for this assessment will be critical given the changes to be implemented. Consequently, it is proposed that the Office establish a Special Purpose Registration Assessment Unit ('the Unit'). This proposal is not inconsistent with the outcomes of the Registration Review Project as the single registration team to be established was to include a unit of this nature.
11. The Unit will be constituted by an experienced team of administration officers (3 FTE AO3's) and led by an experienced senior officer (AO6). In addition to processing all applications for special purpose registration, the team will be responsible: (a) for monitoring registration conditions imposed by the Board; and (b) developing implementation plans and documentation for the Committee's consideration.
12. The staffing for the Unit will be in addition to the current team supporting the Board at a salary and non salary cost of \$321,326 for the period from 3 May 2005 to 30 June 2006.

Increased Resources for the Professional Standards Unit

13. The Board should note that there will be a significant flow on effect in terms of complaints assessment, investigations and disciplinary action ensuing from the Minister's Plan. In this regard, I agreed to establish a hotline for the Medical Board. Such agreement was on a number of bases, being: (a) it was important for the Board to be aware of complaint matters to inform its reporting responsibility to the Minister and to manage media enquiries; and (b) it would assist in enhancing public confidence in the Board.
14. The Board hotline was announced by the Minister on 18 April 2005 and was advertised in *The Courier Mail* and the major regional dailies on 21, 22 and 23 April 2005. For the initial two days (20 and 21 April) the Board received 83 calls as follows:

<u>Category of Call</u>	<u>20/4/05</u>	<u>21/4/05</u>
Complaint about Dr Patel	3	1
Complaint about other doctors (asked to write to Board)	12	9
Complaint about other doctors (referred to HRC)	4	8
Complaint about public hospital	9	4

Complaint about private hospital	-	-
Enquiry re Royal Commission	1	-
Enquiry about registration status	1	15
Role of hotline	1	-
Miscellaneous	5	1
General comments about doctors and hospitals	3	5
Complaint about dentists (asked to write to Dental Board)	-	1
	39	44

15. It will be critical that the Professional Standards Unit can progress assessment of complaints, investigations, disciplinary action and monitoring of conditions/undertakings ensuing from the increased number of complaints currently being received, the number of which is expected to continue to grow for the foreseeable future. If these additional resources are not put into place, the backlog of investigations which the Office has successfully cleared will re-emerge. The Board cannot afford delays to occur in assessment, investigation or disciplinary action in the current climate.
16. The resources necessary are an additional Investigation Officer (AO6), an additional Complaint Intake Officer (AO3), a Co-ordinator (Monitoring) (AO6), a Co-ordinator (Investigations) (AO6) and an increase in the Co-ordinator (Disciplinary Proceedings) hours from 0.4FTE to 1FTE. The additional salary and non salary costs for these resources for the period 1 June 2005 to 30 June 2006 is \$478, 058.
17. There are other resource costs that should also be addressed in addition to the increase in resources referred to in paragraph 15. In this regard the Board should note that: (a) I have approved an increase in classification for Investigation Officers (from AO5 to AO6) ensuing from the review of those positions; (b) the primary reason for this increase in classification is to match the classification of similar positions in other public sector organizations; (c) such an increase will ensure that the Office does not waste its investment in developing investigation officers only to lose them to other agencies who are paying a higher salary; and (d) the hotline, which is to be open for at least a month, has been staffed by 2 FTE (AO3) staff members.
18. The additional salary and non salary costs for the resources detailed in paragraph 17 are \$57,552, being \$48,934 in additional salaries for Investigation Officers for the period 1 July 2005 to 30 June 2006 and \$8,618 for hotline staff for the period 20 April 2005 to 20 May 2005.

Progression of the Registration Review Project Outcomes

19. The Office had not intended to commence implementation of the single registration team structure until April 2006. However, it will be necessary to commence that implementation earlier by appointing two key positions, being the Manager (Registrations) and the Co-ordinator (Business Process Improvement) from July 2005. This is primarily because the Executive Officer will be contributing significant time to the Commission on behalf of the Board. As a result, he will not be available to directly lead the development of the new information system, registration business processes and transition of the staffing structure.

20. In addition to the issues detailed in paragraph 19, the Board and the Office cannot risk any delays in implementing the review outcomes given the Minister has endorsed this direction. Such implementation will also enhance the profession's confidence in the Board as it delivers more modern services through the world wide web.
21. The two staff positions necessary to progress the Review outcomes will be in addition to current staffing levels at a salary and non salary cost of \$203, 953 for the period from 1 July 2005 to 30 June 2006.

Continuance of Media Strategy

22. As the Board is aware, I have engaged BBS Public Relations to manage the media issues ensuing from this matter. This has been a successful strategy, particularly given the intense media scrutiny over the last week.
23. It will be important to maintain this strategy through a media adviser as the Commission of Inquiry is announced and conducted. However, the Office requires more internal resources to liaise with the media adviser in developing and implementing a media plan for the next 6-12 months. This strategy will include enhancing the confidence of the public in international medical graduates.
24. It is proposed to establish an additional position of Manager (Media Relations and Marketing) at a salary and non-salary cost of \$96, 249 for the period 1 July 2005-30 June 2006. This position will be increasingly necessary as I will be devoting a significant amount of time to representing the Board at the Commission. Such a position was also recommended from the Registration Review Project as marketing of new registration services (BPay and Internet) will be crucial to their uptake and hence the projected decrease in the cost of registration processing.
25. The costs for the continued engagement of a media adviser are estimated to be \$40,000 for the period 25 April 2005 to 30 June 2006.

Preparation for the Commission of Inquiry

26. The Board should note that on the Premier's announcement that he would be establishing the Commission, I immediately instructed Mr McCowan (Gilshenan and Luton) to brief Senior and Junior Counsel to represent the Board. Mr Ralph Devlin has accepted the brief to act as Senior Counsel and Ms Cathy McMillan has accepted a brief to act as Junior Counsel.
27. Mr McCowan has also been instructed to schedule a meeting between myself and Counsel on Wednesday 27 April 2005 to review the Terms of Reference and plan the work which will be necessary in preparing the Board's submissions to the Commission. It should be noted that: (a) the plan is being prepared for Board consideration; and (b) the Premier has indicated he will announce the Terms of Reference after the Cabinet meeting on 26 April 2005.
28. The cost of such representation is currently being estimated by Mr McCowan on the basis that the Commission will be conducted over six months and will hold hearings for three of those months. On receipt of that costing, funding should be sought from Queensland Health on the basis that the Board will receive insufficient fee income to have legal representation.

29. Such funding from Queensland Health will be critical as, in its absence, the Board will have to reduce or delay services to fund legal representation. An increase in legal costs budget will also be necessary given the increase in the number of complaints as detailed in paragraph 15. The sum of \$100,000 will be included in the request for funding from Queensland Health to cover this expected increase in legal costs for investigation and disciplinary matters.

Results of Secondary Audit

30. Attached (C) is a copy of the Report to the Minister detailing the final results of the secondary audit. The Board should note that the audit found no disciplinary actions taken against any of the 1,670 current special purpose registrants.
31. Attached (D) for the Board's information is the media release which was sent to the television stations, radio stations, *The Courier Mail* and all major regional daily newspapers. The Board will note that one of the aims of this release was to enhance the public's confidence in international medical graduates.

Transition Funding from Queensland Health

32. Should the Board endorse the proposals contained in this submission, a letter will be sent on Wednesday 27 April 2005 to Dr Steve Buckland, Director General, seeking the required funds.
33. The request for transitional funding will include the costs detailed in this submission, the legal cost estimate which is to be provided by Mr McCowan, \$97,385 for lease costs to accommodate the additional staff, and \$35,593 for furniture and equipment for those staff.
34. An exploration of costs for the clinical interviews, clinical assessments, and direct supervision detailed in the Report to the Minister has also been undertaken to inform the request for transitional funding. This is because the legislation does not currently provide an authority for the Board to charge the applicant for such costs and until the legislation is amended, it may be necessary for the Board to directly fund these activities in order that they can be implemented as soon as possible.
35. The costs for clinical interviews have been estimated on the basis of two interviewers conducting two days of interviews per week at a cost of \$1,500 each per day. Given that it will take at least three months to establish this process, funding of \$286,000 will be sought for the period 1 August 2005 to 30 June 2006.
36. Transitional funding has not been included for clinical assessments as it is expected that Queensland Health will be able to undertake these through the Skills Assessment Centre at no cost to the Board. This matter will be clarified through negotiations with Dr Buckland when the transitional funding is sought.
37. Transitional funding has not been sought for the direct supervision as there is currently no basis for estimating the costs to be incurred. However, Dr Buckland will be advised of this exclusion and requested to note that the Board may require an additional grant once the costs have been identified.

- 38 Dr Buckland's Executive Manager has assured me that funding approval and payment of those funds will be progressed as a matter of urgency.

Jim O'Dempsey
EXECUTIVE OFFICER

22 April 2005

A plan for healthier patient care

promoting a *healthier* Queensland

1 Caring for the patients of Bundaberg

For those patients and families who have concerns about their treatment at the Bundaberg Hospital, an experienced Patient Liaison Team is now in place. The team will deal directly with patients and families, and ensure those patients needing further treatment receive priority care.

In addition to the support being offered by Queensland Health, an experienced Health Rights Commission officer is in Bundaberg to further assist those people with concerns about their health care and treatment.

2 Bundaberg Hospital Services Review

A full review of clinical services at Bundaberg Hospital has commenced.

The team will work with patients, staff and the community to determine what has occurred, give assistance where possible, and identify areas for improvement.

The review team includes:

- Professor Peter Woodruff, vicepresident Royal Australasian College of Surgeons
- Dr John Wakefield, Director, Queensland Health Patient Safety Centre
- Dr Mark Matiussi, Manager, Logan-Beaudesert Health Service
- Leonie Hobbs, Senior Nurse, and Australian Council of Health Care Standards surveyor.

Information gathered during the February 2005 Clinical Audit into services at the hospital will also be provided to the review team. The completed report will be provided to the Minister for Health by the end of June 2005 and will be publicly

available.

An acting District Manager has been appointed to lead and direct health care delivery in the Bundaberg Health

Service District. Dr Michael Daly is a respected doctor and administrator, and currently works as Director of Medical Services at West Moreton Health Service District based at Ipswich Hospital. Michael has also worked at Mt Isa, Maryborough, Toowoomba, Princess Alexandra and

The Prince Charles hospitals.

3 Overseas trained doctors working in Queensland

The Australian Medical Association (Qld) has committed the specialist colleges

to work with Queensland Health to verify the skills and competencies of all doctors who have trained overseas and are currently practising

in Queensland. This will include those

doctors who work in private practice and in the public health system.

This initiative has been endorsed by the Queensland and federal presidents of the Australian Medical Association.

4 Changes for new overseas trained doctors

To ensure Queenslanders receive quality, experienced health care, the Queensland Medical Board will make

a number of changes to the doctor registration system. These include:

- The provision of a Certificate of Good Standing to the Queensland Medical Board from its equivalent body in all jurisdictions where they have worked
- Develop and implement software program to ensure no undeclared disciplinary action in other jurisdictions

- Require all recruitment agencies provide to the Board, reference checks, a report and certification from the US

Educational Commission for Foreign Medical Graduates International Credentials Service.

Queensland will have the strongest doctor registration system in Australia.

This initiative has been endorsed by the Queensland and federal presidents of the Australian Medical Association.

5 The Queensland Medical Board

A grant has been provided to the Queensland Medical Board to ensure

the new registration process is fully implemented. The functions and structure of the Queensland Medical Board will be changing in the near future.

6 Concerned about your health care

To speak with the Bundaberg Hospital patient liaison officers or provide information to the Bundaberg Health Services Review team, contact:

Phone: 4150 2777

Mail: GPO Box 48
Brisbane Q 4001

Internet: http://www.health.qld.gov.au/bundaberg_review/default.asp

If you have concerns about health care and treatment you have received

from an individual doctor, the **Queensland Medical Board Hotline** is

available on 1800 456 841. or <http://www.medicalboard.qld.gov.au/>

DRAFT TERMS OF REFERENCE

- Committee:** Special Purpose Registration Steering Committee
- Committee Purpose:** To assist and advise the Board on implementation of the Special Purpose Registration initiatives detailed in the Board's Report to the Minister dated 15 April 2005 and in the Supplementary Report to the Minister dated 18 April 2005
- Membership:** Dr Mary Cohn (Chairperson)
Dr Gerry FitzGerald
Mr Jim O'Dempsey
- Quorum:** A quorum for the Committee is 2 members
- Frequency of Meetings:** Fortnightly from 3 May 2005
Monthly from 3 August 2005
- Distribution of Agendas:** 3 working days prior to the meeting
- Special considerations:** Members to disclose any interest that could conflict with the proper performance of their duties about consideration of any matter before the Committee
- Delegations:** Nil
- Accountabilities:** The Committee's accountabilities are as follows:
1. Direct staff planning for implementation of the Special Purpose Registration initiatives
 2. Review staff plans developed under (1) for recommendation to the Board.
 3. Monitor progress and provide monthly reports to the Board
 4. Consider policy issues and recommend appropriate action to the Board
 5. Consider matters referred by the Board

OFFICE OF HEALTH PRACTITIONER**REGISTRATION BOARDS**

Submission To: The Hon Gordon Nuttall MP
Minister for Health

Prepared and Submitted by: Mr Jim O'Dempsey, Executive Officer
Medical Board of Queensland

Subject: Final Results of Secondary Audit of Special Purpose Registrants

Recommendation

- A. The Minister note that the secondary audit of 6232 Internet entries in regard to the 1670 registrants has identified no other special purpose registrant who has fraudulently obtained registration when there were sanctions on their registration in another jurisdiction.

Purpose

1. To report to the Minister on the final results of the secondary audit of special purpose registrants.

Background

2. In my report of 18 April 2005 I advised you that the methodology for the secondary audit was as follows:
 - 2.1 PHASE ONE - A software program was developed to undertake an internet search for records of disciplinary action against current special purpose registrants.
 - 2.2 PHASE TWO – The results of the internet search will be reviewed to identify any undisclosed disciplinary action related to the practice of medicine. Where this is unclear the identified website address will be accessed and reviewed. It is at this stage where the Board may need to seek further information directly from the overseas regulatory authority.

Results of Secondary Audit

3. As at 5.00pm, 21 April 2005, all 6232 Internet entries had been assessed. Of these entries, 59 were identified for further assessment by a Deputy Registrar. Of these 59, 12 entries were identified for investigation through a search of the individual source website.

4. No cases were found of disciplinary findings or action in relation to a current special purpose registrant.
5. Because of the search criteria, the vast majority of the entries did not relate to an actual registered practitioner but to another person, or a place name, with a name common with one of the registrants' names.
6. A number of persons with the same surname as a registrant were found to have been subject to disciplinary proceedings, but either the person had a different Christian name to the practitioner or was disciplined in a field unrelated to medical practice such as sports.
7. In addition, some websites contained documentation of the minutes of meetings of overseas medical authorities wherein: (a) the medical practitioner was listed as being qualified for registration; but (b) the reference to 'disciplinary action' occurred elsewhere in the minutes and was in relation to other persons.

Jim O'Dempsey
EXECUTIVE OFFICER

22 April 2005

22 April 2005

MEDIA RELEASE

Audit Clears Queensland's Overseas Trained Doctors

Overseas trained doctors registered in Queensland have been given a clean bill of health in a sweeping internet audit and review of their registration papers, the Medical Board of Queensland announced today.

The two-tiered audit of overseas trained doctors on the Special Purpose Registry found that no doctor had falsified or altered their registration documents, and an Internet audit found no disciplinary actions taken against doctors in other countries.

Medical Board of Queensland Executive Officer Jim O'Dempsey said the audit findings confirmed that the case of Dr Jayant Patel, who lodged fraudulent registration documents, was an isolated case.

"This week we completed an internet audit for disciplinary action against overseas trained doctors. The search found 6,232 'hits' but these related to items such as conference papers or even being suspended from an equestrian event," he said.

"This audit has shown that the Dr Jayant Patel case was an isolated incident.

"Unfortunately by being a liar and a fraud, Dr Patel has sullied the names of all 1,670 overseas trained doctors, who were honest in submitting their applications.

"All these doctors have medical qualifications from universities recognised by the World Health Organisation. This is the Board's prerequisite for registration in Queensland.

"But we must also ensure that overseas trained doctors meet the standards expected by Queenslanders, which is why the Board last week introduced a series of new measures making Queensland's registration system the toughest in the country.

"We are also introducing stricter supervision of overseas trained doctors once registered.

"All registrants will be directly supervised for 1-3 months. Those undertaking specialty activities such as anaesthetics, obstetrics and surgery, will be supervised by an external supervisor nominated by the relevant College, in addition to their immediate work supervisor. This will provide a more independent supervision model.

"Supervisors will report on the clinical competence of the registrant after one month, three months, six months and twelve months.

"Registrants must also complete the Australian Medical Council's examination or the relevant specialty College certification within four years of their initial registration."

Under the new registration measures, "Certificates of Good Standing" will not be lodged by doctors themselves, and must now come directly from the medical authorities in every jurisdiction that a doctor has trained and worked in. This will provide a complete registration and disciplinary history of applicants.

Recruitment agencies will have to provide evidence to the Board that they have conducted mandatory reference checks on doctors, and internet checks will be run.

ENDS.

For further information or to obtain a fact sheet about the Board please contact:

Amanda Newbery 0400 22 52 32