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Legal & Regulatory Services – Legal Services
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RE: Mandatory Reporting Under the Health Practitioner Regulation National Law

Thank you for the opportunity to provide a submission to this discussion paper. We recognise it is a difficult issue to find consensus on but one that is in vital need of a uniform and improved approach across the nation.

Recommendation:

Our position is that options 3 and 4 have merit to them. We favour option 3 slightly over 4 and would consider a hybrid between 3 and 4 as a viable option:

- report on impairment only if deemed to pose current or future risk/harm (1st part of option 3) + report on conduct only if deemed to pose current risk/harm (2nd part of option 4)

Option 1 (current) is not considered adequate and Option 2 (WA model) lacks evidence and was generally viewed as too relaxed.

Regarding students, we would support the same reporting requirements as for medical practitioners.

Other Considerations:

Professional and ethical obligations remain strong throughout the medical profession; however, the current environment of public accountability requires more defined measures and responses to prevent a loss of confidence in the profession.

The definition and nature of impairment needs to be clarified and clearly communicated along with the threshold for reporting - currently it seems there is discretion about interpretation of the terminology. This would be a key educational component of any new laws.

Currently, the pool of treating doctors is low. It is not generally known that they are protected under National Law and the perceived or real risks of consequences are a disincentive. Good communication with treating practitioners and educating them about the changes would be required.

Thank you again for the opportunity to be part of this consultation and we are more than happy to provide further input in the future to finalise changes to the mandatory reporting model.

Yours sincerely,

DR CATHERINE FERGUSON, FRACS
COLLEGE VICE PRESIDENT