

Health, Communities, Disability Services and Domestic and Family Violence Prevention Comr

From: Philip Morris [REDACTED]
Sent: Saturday, 24 November 2018 10:58 PM
To: Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee
Subject: 015 HEALTH, COMMUNITIES, DISABILITY SERVICES AND DOMESTIC AND FAMILY VIOLENCE PREVENTION COMMITTEE

[REDACTED] [REDACTED]

Submission

24 November 2018

Queensland Parliament

HEALTH, COMMUNITIES, DISABILITY SERVICES AND DOMESTIC AND FAMILY VIOLENCE PREVENTION COMMITTEE

Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2018

Dear Committee,

I hope that you change the Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2018 to make it reflect the model legislation on mandatory reporting running successfully in Western Australia. As a psychiatrist I was pleased to see our RANZCP president, Dr Kym Jenkins, support the WA model as reported in the Australian Doctor newsletter on 5 November 2018 below:

"Dr Kym Jenkins, who is the president of the Royal Australian and New Zealand College of Psychiatrists and a former medical director of the Victorian Doctors Health Program, says treating doctors should be exempt from mandatory reporting altogether. 'I'm disappointed that it isn't changing more because my experience is that we don't really need mandatory reporting. It just creates confusion for our patients,' Dr Jenkins said."

As a psychiatrist who treats medical practitioners I support the AMA in asking the federal and state governments to change the current mandatory reporting legislation to the model running in Western Australia. That legislation exempts treating doctors from mandatory reporting requirements.

Mandatory reporting can dissuade medical practitioners from seeking treatment, especially psychiatric treatment. As psychiatrists we know that it is so important to try to prevent individuals in distress and perhaps thinking of self-harm from becoming isolated. Removing barriers to treatment for our medical colleagues is a priority.

I understand from hearings of the Committee (12 November) that any registered health practitioner (eg. doctor, psychologist) staffing a doctors' (or general public) helpline would be subject to mandatory reporting requirements if a doctor contacted the helpline for assistance or guidance about where to get help. This imposition of mandatory reporting is entirely unsatisfactory for at least two reasons. It would deter a doctor from even starting the process of getting help for a medical or mental health condition and then seeking treatment. And a health practitioner staffing a helpline would only be in possession of limited information from a doctor calling a helpline for assistance and therefore would not be in a position to make an informed decision to make a mandatory report. Doctors' helplines should be exempted from mandatory reporting requirements.

The WA legislation regarding mandatory reporting has not resulted in any loss of protection for patients. Indeed it could be argued that the WA model of exempting treating practitioners from mandatory reporting of notifiable conduct if their patient is a registered medical practitioner is beneficial for the wider community of patients as it encourages doctors with mental health (and other) problems to come forward for treatment. The WA legislation

does not remove from treating doctors their professional and ethical obligations to report matters that may place the public at risk of harm; it just does not make this mandatory.

I hope the Committee will take these remarks into account and change the Bill.

Yours sincerely,

Dr Philip Morris
(www.drphilipmorris.com)