

**From:** [REDACTED]  
**To:** [Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee](#)  
**Subject:** Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2018.  
**Date:** Monday, 26 November 2018 1:42:03 PM

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Mr Aaron Harper MP  
Chair  
Health, Communities, Disability Services and Domestic and Family Violence Prevention  
Committee

Dear Mr Harper,

It has come to my attention through my learned colleagues that an Enquiry by the QLD Government closes today into the issue of Mandatory Reporting for Health Professionals.

I have been a patient myself and have been the doctor for other health professionals, both medical and in other disciplines. I am a medical practitioner with general and specialist registration. In my work I often supervise junior doctors and colleagues from other disciplines as well, and so I am acutely aware of the pressures of the job and have experience both in seeking and providing medical treatment.

I believe that current mandatory reporting legislation in Queensland both fails in its intent to protect the public, and poses an unnecessary risk to the health of medical and other professionals.

Currently, a doctor working in a high stress position should they start to suffer and develop a health condition, not only has to worry about the potential embarrassment which comes from being treated by a colleague, but also the potential that their doctor may be obligated by law to make a report to our regulatory body, AHPRA, which can be done without their knowledge.

The regulatory body itself I would submit is unfit for this purpose in any case, but that is another discussion.

Those of us who have been reported to AHPRA before by and large go through a long, stressful, drawn out process where we are asked to make numerous submissions to the body, which is a further stressor. Health professionals who are the subject of a report to their regulatory body report high levels of stress and anxiety. Most complaints are resolved without action against the subject, but the threat of withdrawal or suspension of registration (and therefore our income) is a significant one.

We have a perfect storm – people with access to lethal means of self harm, in high stress environments, who are subject to potential withdrawal or proceedings against them which pose a direct threat to their income.

Medical groups and the mainstream media even talk about an epidemic of doctor suicides. Just about every doctor knows a colleague who has suicided.

I submit that the threat of a mandatory report poses yet another barrier to seeking necessary and potentially life saving treatment.

The legislation as it stands in Western Australia is much more fit for purpose and should be the model upon which Queensland's legislation is based.

Kind regards  
Stephen Dick