

**Health, Communities, Disability Services and Domestic and Family Violence Prevention  
Committee Inquiry:**

**Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2017**

**SUBMISSION**

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I provide this submission to the inquiry of the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee (the Committee) into the Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2017 (the Bill), to present as evidence for Committee's consideration a statement of my personal experiences, including the direct impacts I have witnessed upon a health practitioner, during and after being subjected to investigation by a health authority so empowered under the *Health Practitioner Regulation National Law Act 2009* (the Law).

This submission bears direct relevance to the Bill, because the Bill as tabled will provide additional powers to those health authorities established and/or empowered under the Law and some of those proposed additional powers, in my view, will only serve to increase the potential for health practitioners, subjected to such investigation under the amended Law, to suffer impacts similar to, and most likely even worse than, those I have witnessed, those powers without doubt being and becoming even more so, excessive, unwarranted, unfair and harmful.

**IMPACT STATEMENT**

**What is the name of the health practitioner (the practitioner) I witnessed being investigated?**

[REDACTED]

**By what authority empowered under the Law was the practitioner investigated?**

APHRA

**Was the practitioner investigated as a consequence of a notification (complaint) against them?**

Yes

**Do I feel the notification against the practitioner was vexatious, false or otherwise being without sound basis?**

Yes - I knew the complainant was a known cyber-troll who had conducted an online campaign of abuse towards here for some time already. This was one of a series of (5) five complaints all lodged by the same person [REDACTED], someone who had never seen [REDACTED] for a session or met her personally at any point.

**What did the practitioner tell me regarding how they felt while under investigation?**

That she felt traumatized, stressed, harassed, bullied, she felt lethargic & exhausted, she was anxious and under constant fear of losing her job & not being able to earn a living

**What impacts upon the practitioner did I witness affecting them during the investigation?**

In particular I noticed a significant decline in [REDACTED] health during the 2 years of investigation. She was frequently stressed and moody when her normal state was quite open and joyful. Her ability to cope with the normal things in life became much harder when she is generally and by nature a very competent and well adjusted person.

**What were the impacts upon the practitioner's family, friends and close colleagues that I witnessed and/or felt personally during and as a consequence of the investigation?**

Friends and family I saw struggle to know how to support her, watching her general health decline but also as her emotional health declined. She was the one normally supporting everyone else around her.

**How did I feel personally after witnessing the investigation process and its impacts upon the practitioner?**

The 2-year period of the investigation was very taxing on us both and the strain on the relationship became very clear, eventually being impossible to sustain.

**Do I feel the practitioner was fairly treated by being subjected to investigation as they were?**

No – in my opinion she was sanctioned and placed on supervision for something that had nothing to do with the false complaint. Given the previous history of the complainant, to be investigated for 2-years was completely out of proportion and unnecessary.

**Was the practitioner subjected to a prohibition order as a result of the investigation?**

Yes – She was required to undergo supervision and to stop her support supervising other Psychology students.

**What impacts upon the practitioner did I witness that happened as a consequence of the prohibition order?**

She was in shock after the hearing and was devastated at not being able to continue supporting the Psychology students with their supervision. She felt ashamed that such a prohibition order had been handed down.

She was required to resign from her position as [REDACTED] which caused her much distress. There was damage to her reputation and she was no longer able to attend certain conferences and meetings.

**Do I feel the practitioner was fairly treated by what was imposed upon them in the prohibition order?**

NO – the prohibition order was completely out of proportion to the findings, which were also unrelated to the lodged false complaint. The entire process was unreasonable, unjustified and a complete waste of government resources.

**Did I / do I feel those in authority who investigated and adjudicated the practitioner's case did so fairly, without bias and prejudice; and were competent, with the knowledge, experience, training and understanding required to properly perform their investigation / adjudication?**

NO – there was no investigation of who lodged the complaint and as this was a known cyber-troll with a history of abuse towards [REDACTED] and others already (and of which [REDACTED] had notified APHRA), she was treated as though guilty from the start.

**RECOMMENDATIONS**

Based on what I have witnessed regarding the practitioner nominate above and my own personal experiences, as outlined above in this submission, and my knowledge of the similar experiences of other health practitioners, I recommend that:

1. The committee recognizes the evidence submitted to the committee by health practitioners and in other submissions to this inquiry and validates all expressions in that evidence of practitioners feeling, and being witnessed to have been, unfairly treated, harmed and traumatised, their experiences in having their careers irrevocably impacted, by the harsh and overbearing powers and conduct of authorities permissible under the current Law.
2. The committee, proceeding from recommendation 1 above, accepts that the Law as implemented is producing harmful outcomes that are either not intended by the original policy intentions, or if intended by those policy intentions, are an indication that the **policy intentions were/are disturbingly wrong**, and either way accepts responsibility on behalf of all participating legislatures take immediate and assertive actions to initiate the required far-reaching reform so clearly needed.
3. The committee, with regard to the Bill before it, in examining the Bill scrutinises all provisions of the Bill to identify all clauses that may impose upon, or permit, further unfairness, harm and detriment to practitioners in addition to that which is currently permitted and occurring under the existing Law, and recommends either that the Bill not be passed in its entirety, or the removal of those clauses from the Bill.
4. The committee, as an instrument of the Parliament of Queensland, the host jurisdiction for the application of the National Law in Australia, recognizes its key responsibility, and that of the Queensland Parliament, to initiate appropriate measures to correct the significant and disturbing deficiencies of the Law and the resulting harm and detriment to practitioners as presented in the evidence before this inquiry and outlined in this submission.

5. The committee, in recognizing its responsibilities and those of the Queensland Parliament, as stated in recommendation no. 4 above, recommends in its report to the House on this Bill that Queensland acts assertively and urgently to call for a royal commission, as a matter of priority, to review the Law and the operations of all health authorities that are established by and empowered under the Law in all participating jurisdictions of Australia.

In making my submission I note that I am willing for my submission to be made public under parliamentary privilege



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