

Mr Trevor Ruthenburg MP
Chair, Health and Community Services Committee
Parliament House
George St
BRISBANE QLD 4000
hcsc@parliament.qld.gov.au

20 June 2013

Dear Mr Ruthenburg

Re: *Health Ombudsman Bill 2013*

Thank you for the opportunity to provide a submission to the inquiry into the *Health Ombudsman Bill 2013*. As Associate Professor in General Practice and Rural Medicine at the School of Medicine (James Cook University- JCU), I believe this Bill has several flaws and it requires significant amendments. I have practiced in remote Western Australia as a general practitioner, have 14 years of experience as a public health physician working on federal health policies, and now teach medical students at JCU.

I have seen the submission of AMA Queensland to this inquiry and strongly support it. In addition to my support for the AMA Queensland submission, I refer you to the following vital extracts from that submission:

- A Health Ombudsman run model will not provide impetus for health services to improve quality in order to reduce health complaints.
- I have concerns about the unilateral ability of the Health Ombudsman to exercise power to take immediate action without sufficient checks and balances to ensure that the system upholds the basic principles of natural justice.
- There are particular provisions within the Bill, which provide powers to the Minister to require information. There is a lack of transparency around the purpose for which information is requested and how it will be used.
- The current provision allowing the Health Ombudsman to establish committees and panels of clinicians to provide advice is inadequate to ensure the Health Ombudsman receives the level of expertise and clinical input necessary to give practitioners confidence that the system is fair.
- The best way to protect the public from practitioners who are suffering impairment is to enable practitioners to seek treatment before a public health or safety issue arises, without fear of losing their registration and employment. AMA Queensland is deeply troubled by the declining numbers of practitioners in Queensland seeking treatment from their peers since the introduction of the requirement for mandatory notification for health practitioners treating health practitioners.

The public interest is paramount to medical professionals and is the basis for why we teach the attribute of altruism to medical students from the first year they enter University. A stronger regulatory environment (which does not uphold the principles of natural justice) undermines the 'social contract' between medical professionals and our society and promotes the loss of altruism. Medical students are taught the importance of professionalism and the social contract but the 'heavier hand' of regulatory authorities as exemplified by this Bill will encourage questions about the value of altruism above other attributes in the practice of medicine.

The AMA submission describes amendments to the Bill and I encourage the Health and Community Services Committee to consider those amendments and further discussion with the AMA.

If you have any further questions regarding this submission, please contact me at [REDACTED] or [REDACTED]

Yours sincerely

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