

Pages 1 through 2 redacted for the following reasons:

Cabinet - Sch 3(2)(1)(b)

Relates to show cause process - CTPI - 47(3)(b)

DOH-DL-12/13-014

Mark Wood

From: Mark Wood
Sent: Monday, 20 May 2013 12:04 PM
To: Cameron Thompson
Cc: Jake Smith
Subject: Provisional Medical Board

Cameron
As requested

The following group of 4 will be the interim committee that will perform the functions of the Queensland Board. They will be in place for 2 months to allow them to address the backlog of matters. They have been contracted for 2 days a week work as opposed to the Board which previously worked for half a day a fortnight. The group are drawn from the names we have discussed and additionally were able to provide at short notice 2 days a week or time to the Board functions

The induction process is planned for next week and is a matter I have been discussing with AHPRA. Kim Forester will be in attendance.

The appointment of this committee falls within the powers of the Medical Board of Australia to manage and appoint.

I anticipate this board would be in place for 12 months and progressively take over functions from the committee referred to above.

In summary this process will provide the safety net we require during transition.

Provisional membership of the QMING
Chair and legal practitioner
Stephanie Gallagher QC

Practitioner with surgical expertise
Professor Ian Gough

Practitioner with general medical and /or medical administrative and governance expertise
Dr Mark Waters

Community Member
Associate Professor Eleanor Milligan



~~Mark Wood~~
Principal Policy Adviser
Office of the Hon. Lawrence Springborg MP | Minister for Health
Phone: s.73 | Fax: 07 3229 0444 | Mobile:
State Health Building | 147-163 Charlotte Street | Brisbane | QLD 4000
GPO Box 48 | Brisbane | QLD 4001
Great State. Great Opportunity.

Mark Wood

From: Michael Cleary <ClearyM@health.qld.gov.au>
Sent: Thursday, 16 May 2013 7:21 AM
To: Mark Wood
Cc: Annette McMullan; Humsha Naidoo; Susanne LeBoutillier; Tony O'Connell
Subject: Fwd: Qld notifications update and request for involvement in induction

Dear Mark,

Please see attached.

Please note:

- the Queensland Boards residual members are technically not functioning and so any decision the Minister might make will not impact on the function of the Queensland Board.
- this group of 4 will be the interim committee that will perform the functions of the Queensland Board. They will be in place for 2 months to allow them to address the backlog of matters. They have been contracted for 2 days a week work as opposed to the Board which previously worked for half a day a fortnight. The group are drawn from the names we have discussed and additionally were able to provide at short notice 2 days a week or time to the Board functions
- the induction process is planned for next week and is a matter I have been discussing with AHPRA. Kim Forester will be in attendance.
- the appointment of this committee falls within the powers of the Medical Board of Australia to manage and appoint.
- as soon as you advise we will start the process of contacting the nominated members of the proposed interim Queensland Board. I anticipate this board would be in place for 12 months and progressively take over functions from the committee referred to above.

In summary this process will provide the safety net we require during transition.

A matter you may want to advise on is if the Minister wants to be part of any announcement around this. I think it is a good idea as it might provide some assurance to the community.

(Humsha, please note this information is confidential and not for further discussion)

Kind regards

Michael

Dr Michael Cleary
Deputy Director-General
Health Services and Clinical Innovation
Department of Health

m: s.73

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Begin forwarded message:

From: "Chris Robertson <Chris.Robertson@ahpra.gov.au>" <Chris.Robertson@ahpra.gov.au>

Date: 15 May 2013 6:45:29 PM AEST

To: "Michael Cleary" <ClearyM@health.qld.gov.au>

Subject: Qld notifications update and request for involvement in induction

Dear Michael,

Further to our recent discussions regarding the management of notifications about medical practitioners from Queensland we are putting in place a number of contingencies prior to the Minister making appointments to an acting QBMBA. I'd like to thank you for your assistance with potential candidates for the small group to be known as the Queensland Medical Interim Notification Group (QMING). The QMING will, we expect, be an innovative approach to ensure that notifications are managed well in Queensland under the delegated authority of the MBA and we are happy to have preliminary agreement from the high calibre individuals listed below to serve on the group for the period where the State Board is not in place.

Provisional membership of the QMING

Chair and legal practitioner	Stephanie Gallagher QC
Practitioner with surgical expertise	Professor Ian Gough
Practitioner with general medical and /or medical administrative and governance expertise	Dr Mark Waters
Community Member	Associate Professor Eleanor Milligan

We expect to have formal arrangements for engagement of this group completed in time for their first scheduled meeting on Thursday 23 and Friday 24 May. We are currently preparing an induction session that will be led by Dr Joanna Flynn AM, Chair of the MBA, Martin Fletcher CEO AHPRA and the senior members of AHPRA Queensland. I would very much welcome your involvement in meeting with the members to provide an overview of Queensland Health's perspective on the recent events that have lead to the Ministers actions to remove the QBMBA and to the development of changes to the health complaints system in Queensland. We intend to invite Dr Kim Forrester to provide her insights also. At this stage I expect that Thursday afternoon or Friday morning would be ideal times for your involvement and that of Dr Forrester. Please let me know if this would suit you and additionally if you are happy for me to make contact with Dr Forrester or if you would prefer to.

Regards

Chris Robertson

Director, National Board Services and Queensland

Phone | s.73
Email | Chris.robertson@ahpra.gov.au
Web | www.ahpra.gov.au

Australian Health Practitioner Regulation Agency
G.P.O. Box 9958 | Melbourne VIC 3001 | www.ahpra.gov.au

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RTI Release

Pages 7 through 9 redacted for the following reasons:

Cabinet - Sch 3(2)(1)(b)

DOH-DL-12/13-014

Cameron Thompson

From: Dan Harradine <Dan.Harradine@health.qld.gov.au>
Sent: Tuesday, 30 April 2013 12:29 PM
To: Cameron Thompson
Cc: Craig Brown; Sdlo Sdlo
Subject: Med Board arrangements

Cam, I know there's too much info here, but it's provided just so you can use whichever bits you want.

s73 (Legal Professional Privilege)

As I indicated on the phone, in AHPRA's release on Friday they indicated it would act to put in place interim arrangements while working with the Minister to appoint new board members.

The Department has been in discussions with AHPRA about this process, and the arrangements that have been implemented are as follows:

IMMEDIATE MANAGEMENT

- Where matters require immediate action the MBA will delegate this function to another state Board (given the fact that there are only a very limited number of remaining members on the QB MBA). In the short term this will be Victoria. This is because there are a number of immediate actions on foot that require continuation.
- The MBA is meeting tomorrow (Wednesday) and will realign the committees in Queensland that report to the QB MBA to the MBA as a short term measure to ensure that they continue to operate with appropriate authority.
- The MBA will look at bringing together the two Queensland Notification Committees into one Committee as they appear to have dealt with the backlog of notifications.

MID TERM

- AHPRA will work with the Queensland Minister to appoint a QB MBA. Michael Cleary has held discussions with your office about some potential appointees, and has also spoken with the College of Surgeons and the AMAQ. Next steps in that regard will be for Michael to talk to you/Jake/Min/whoever to determine if/when you want his people to start contacting these potential appointees to gauge their interest.

You also asked about the end date for the show cause notice. Responses to the show cause notices were required by three separate dates (because certain people received the letters at certain dates, and they each need a two week period). The notice periods end on 30 April 2013, 1 May 2013 and 3 May 2013.

Let me know if you need some more info?

Cheers,

Dan

Dan Harradine
Executive Director
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Department of Health
Level 19, Queensland Health Building
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RTI Release

Mark Wood

From: Dan Harradine <Dan.Harradine@health.qld.gov.au>
Sent: Thursday, 28 February 2013 12:33 PM
To: Cameron Thompson; Mark Wood
Cc: Sdlo
Subject: Fwd: Confidential - Report recommended by the Hon Chesterman SC
Attachments: 1147_001.pdf

Dear Cameron and Mark,

Attached for your information is a copy of the Hunter report.

As discussed, the Department will commence a briefing process to ensure there is covering advice to the Minister with this report. I anticipate that will be available early next week.

Cheers,

Dan

>>> Michael Cleary 12:24 pm Thursday, 28 February 2013 >>>
CONFIDENTIAL
Dear Dan

Please see attached report.

Kind Regards
Michael

Dr Michael Cleary
Deputy Director-General
Health Services and Clinical Innovation
M: s.73

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>>> "Jeff Hunter" <jhunter@qldbar.asn.au> 28/02/2013 12:08 pm >>>
Dear Dr Cleary,

Please see the attached correspondence.

Regards,

Jeff

s.73 - irrelevant information

JEFFREY HUNTER SC

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Lucas Chambers

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BRISBANE QLD 4000

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28 February 2013

Dr Michael Cleary
Deputy Director General
Health Service & Clinical Innovation Division
Queensland Health
GPO Box 48
BRISBANE QLD 4001

Dear Dr Cleary,

Review recommended by The Hon Richard Chesterman QC

Pursuant to a letter of 11 December 2012, the Hon Lawrence Springborg MP, Minister for Health asked me to undertake a review of certain files of the Medical Board of Queensland, the Queensland Board of the Medical Board of Australia and the Australian Health Practitioners Regulation Agency ("AHPRA") to determine whether criminal charges should be laid.

703 files were initially identified as potentially meriting consideration. Of those, I examined files in respect of 85 medical practitioners. I have identified a number of cases concerning the patients of six medical practitioners that in my opinion ought to be the subject of a police investigation.

The identification of each case as one that should be examined by the police should not be taken as suggesting that there exists, at present, admissible evidence that establishes a prima facie case in respect of any criminal offence. A decision about whether a particular practitioner should be charged can only be made once an investigation has been completed.

Herewith please find my report.

With compliments,



J R Hunter SC

Pages 14 through 46 redacted for the following reasons:

Documents refused in full - exempt matter - CTPI - s.47(3)(b)

DOH-DL-12/13-014