



7 November 2016

Ms Toni Matulick
Committee Secretary
Senate Legal and Constitutional Affairs Committee
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Parliament House
Canberra, ACT, 2600

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Dear Members of the Select Committee

RE: Response to AMA Submission to the Select Committee

IHMS welcomes the opportunity to provide a response to the written submission made by the Australian Medical Association.

IHMS is contracted by the Commonwealth of Australia, represented by the Department of Immigration and Border Protection, to provide primary and mental health care services, broadly comparable to Australian community standards, to asylum seekers residing within the Regional Processing Centres (RPCs) on Manus Island, Papua New Guinea and Nauru.

General practitioner, nursing and mental health care clinics are open at the RPCs seven days a week. There is also after-hours medical staffing to respond to any after-hours medical emergencies. On Nauru, the medical team also includes obstetricians, midwives and medical officers with paediatric training.

Refugees settled in the Manus Island and the Nauru community access IHMS primary and mental health services at the IHMS settlement health clinics located at the East Lorengau Refugee Transit Centre and the Republic of Nauru Hospital. Additional health services including emergency and specialist care is provided by the local hospitals at these locations.

Primary mental health care is delivered by IHMS multi-disciplinary teams of experienced mental health staff. Primary mental health commences with mental health screening and the Psychological Support Program which underpins the provision of mental health services. As is considered best practice in Australia, IHMS has moved increasingly to a model of mobile treatment, assertive outreach and early intervention programs to improve detection of mental health problems and to enable more effective intervention. This means that patients are not limited to receiving care within the clinic setting.

To supplement the on-site primary health care service, IHMS provides specialist services via visiting specialists, tele-health consultations with specialists based in Australia, second opinions from specialists



based in Australia who review clinical records, and referral for specialist opinions at Pacific International Hospital in Port Moresby in line with Australian Government policy.

In addition to providing first line health care, IHMS also undertakes health-promotion and disease-prevention activities, assisting people with chronic conditions to manage their own health. Vector control is also provided on Manus Island.

Requests for Medical Records

In its submission the AMA expresses its frustration with obtaining written consent from asylum seekers and refugees in order to request the release of their medical records to the AMA.

IHMS is subject to the strict requirements of Australian privacy legislation when dealing with the personal information of its clients.

Asylum seekers and refugees on Manus Island or Nauru may request a copy of their IHMS medical record directly from the IHMS clinic or IHMS settlement clinic at site. IHMS does not have authority to release records which are the property of the hospitals of the respective host nation, and as such, any request for these hospital records must be made directly to the hospital.

Requests from third parties such as the AMA, for the IHMS medical record of an asylum seeker or refugee currently residing in Manus Island or Nauru must be accompanied by a legally valid signed and dated consent form.

We note that it is not IHMS who grants consent, it is the patient. The statement on page six of the AMA's submission that "IHMS do not consent to share any health related information" is not correct. IHMS will share the medical record of a patient with the AMA if the AMA provides a legally valid signed and dated consent form from that patient, providing the authority for IHMS to share that patient's personal information with the AMA. To share such information without a legally valid consent form would bring IHMS in breach of the *Privacy Act 1988 (C/th)*. IHMS processes on average approximately 40 requests for medical records from third parties per month.

Patient privacy and confidentiality

The AMA has in its submission cited a number of individual cases, acknowledging that the information provided cannot be independently verified. IHMS follows a clear and ethical client confidentiality and privacy policy and, where there may be IHMS involvement, we will not comment on these individual cases without being able to properly identify the patient and receive their consent to discuss their case in an open and transparent way. However IHMS is concerned that the AMA has chosen to use a series of emotive quotations to imply unsatisfactory medical treatment rather than providing a systematic, professional discussion of the



cases as would normally be undertaken by medical professionals. IHMS is willing to discuss these individual cases, or any other case which the AMA wishes to raise involving IHMS staff or services directly with AMA clinicians, contingent on the AMA providing a legally valid consent from the patient authorising IHMS to do so. IHMS will not however comment on matters which are outside the control of IHMS such as transfer policy and the provision of specialist services to refugees.

Standard of Care

IHMS is contracted to provide a standard of care to asylum seekers residing at the Regional Processing Centres on Manus Island and Nauru which is broadly comparable to Australian community standards.

The standard of care IHMS is contracted to provide to refugees residing on Manus Island and Nauru is a standard equivalent to the local standard of care.

AMA call for independent oversight

IHMS welcomes external comment and review as a means to continuously improve and adapt the service we provide in these challenging environments. IHMS is quite possibly the most scrutinised health service provider in Australia, and we meet regularly with stakeholders including the Independent Health Advice Panel, the Ombudsman, the International Red Cross, the various UN bodies, the Office of the Australian Information Commissioner, representatives from the Australian medical colleges and advocacy groups. We have on many occasions requested a meeting with the AMA, with a meeting confirmed to take place in the near future to discuss the issues it has raised in its submission.

Yours sincerely

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