Medical complaints process in Australia Submission 3

I wish to make a submission to the senate inquiry on medical complaints.

I have been a registered medical practitioner since 1982. I have been working in private general practice in NSW since 1986

Currently AHPRA deals with complaints referred by the HCCC in NSW. There is no adequate protection against false complaints at all.

There is inadequate warning to complainants that they are required to provide true information only. When a complaint or part of a complaint is found during investigation to be untrue no action is taken against the complainant.

Indeed the doctor can still be referred on for disciplinary action even when an investigation has found the complaint to contain major false statements.

Complaints against doctors can be used as weapons to get at them for personal reasons. For example in divorce and custody cases ex spouses have been known to write accusatory letters to AHPRA. Instead of discarding these the HCCC follows up with detailed investigations. When the investigation leads nowhere, instead of taking action against the ex spouse for making a false or distorted complaint they leave the complainant untouched.

Indeed the doctor has it on record for ever that a complaint has been against him.

These records of accusations are presented on the doctor's record as if they were convictions. Even if they were unproven accusations only. Even if they were accusations that were proved to be false. The rules must change with regard to keeping accusations forever on a doctor 's record after they have been investigated.

There is a policy with APRAH that if a number of complaints have been made made against a doctor then that doctor is guilty. The concept of "complaint prone doctors" has been taken too far. This is a false premise. This is contrary to natural law. It is quite possible for a vindictive person to engineer a number of people to make a false complaint against a doctor and destroy that doctor. This is especially the case in a small town. Country doctors can be run out of town or struck off by a vendetta of false complaints. AHPRA needs to prevent this by taking serious action when a complaint proves false. It is different if it cannot be proved. But currently false statements by complainants are simply ignored by AHPRA and doctors remain threatened by the accusations.

In the past when it was one word against the other the doctor was believed now things have swung full circle and the doctor is always considered guilty.

This is a breakdown in natural law. This does not protect the public. The doctors, people who do most for the public are the least protected under the attitude of AHPRA. There have been a number of doctors who have suicided while under investigation by AHPRA.

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Measures need to be in place demanding absolute and total truth when a complaint is made against a doctor. False complaints need to be declared as such not glossed over by AHPRA. False complainants need to be prosecuted.

Otherwise we will end up with anyone who wants to destroy a doctor out of jealousy or revenge or to discredit for family court cases has a field day This is the reality that exists now.

Patients with borderline personality institute truth distortion campaigns which can ruin a doctor's reputation and are fueled by the current complaints system where there is no prosecution or even proper warnings for false statements. A doctor can be destroyed especially if sex or drugs is the topic of a false accusation.

The Health Care Complaints Unit needs a complete review regarding its policies of bias against doctors; its gender bias against males which statistics confirm; its ignoring of false statements by complainants; its readiness to refer doctors to the Medical Council when investigations have proved a complaint cannot be verified or even outright false; its keeping of accusation records as if they were proven convictions. Doctors need to be consultants for the HCCC. Currently there are no doctors in the HCCC because it is assumed they would be biased in favor of doctors. The result is the HCCC is biased against doctors and displays ignorance in assessing the medical aspect of complaints.

The cost of a false complaint runs into thousands for the taxpayer. The emotional cost could result in a doctor closing his practice. Country doctors are most at risk because of their isolation and these are just the doctors the public needs to retain.

If the aim is to protect the public then doctors need to be protected from false complaints so that they can serve the public.