



AUSTRALIAN MEDICAL ASSOCIATION  
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Dr Martin Laverty  
Secretary General  
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Dear Martin,

### **Re. Motion for AMA National Conference Agenda**

On Tuesday 5 July last the Victorian State Council passed a motion calling for the following motion to be placed on the AMA National Conference Agenda:

#### **Call for AHPRA Royal Commission**


*Because of AMA Victoria's perceived abject failure of the recent Senate Review of AHPRA to address the multiple areas even remotely in which AHPRA and the Medical Board of Australia are dysfunctional and requiring urgent, major reform, other than the recommendation re the Western Australian model for mandatory reporting, National Conference calls upon AMA Ltd to take all such actions that will convince the Government to hold a Royal Commission into AHPRA and the Medical Board of Australia. The following are some of the areas of concern that must be addressed by the Terms of Reference of the Royal Commission: -*

- 1. There be a presumption of innocence in investigation of all practitioners.*
- 2. The objectives of the National Registration and Accreditation Scheme under the National Law be amended to mandate that AHPRA has a duty of care to the Registrant and in particular to minimize the mental health impacts and financial effects on the health practitioner under investigation.*
- 3. The identity of health practitioners under investigation be protected to minimize potential reputational and opportunity loss.*
- 4. AHPRA and the Medical Board of Australia must offer confidential support by an independent mental health professional to any health practitioner under investigation.*

5. *A requirement that all investigations to be completed within 6 months, except in exceptional circumstances.*
6. *Treating practitioners be exempt from Mandatory Reporting obligations, consistent with the Western Australian legislation, to ensure that impaired practitioners can seek appropriate medical care without fear of mandatory reporting.*
7. *AHPRA staff require and should receive training to understand the medico-legal environment and, in particular in addiction medicine and toxicology.*
8. *The sensitivity of urine drug and hair screening be brought into line with other professions to avoid false positives and thus potential unintended consequences.*
9. *All investigations must include specialist medical professionals with relevant expertise in the subject matter under consideration.*
10. *In the interest of quality assurance, AHPRA be mandated to conduct an annual survey of health practitioners and that these results be made public.*
11. *A health practitioner whose medical registration was cancelled, and that period has now been served, have their registration reinstated no later than 3 months after that time.*
12. *All reprimands published by AHPRA be reviewed after 5 years.*
13. *All inquiries to, and by Compliance or Investigation Officers of health practitioners are acknowledged and responded to within 7 days.*
14. *Medical practitioners undergoing mandatory urine drug and hair screening protocols should have their screening process clinically reviewed after 4 months.*
15. *Any notification deemed vexatious by the Registrant, must be urgently examined by the Review Committee and if considered to be so, then the Complainant formally sanctioned.*
16. *At all and any reviews of a medical practitioner, the practitioner should have the right to be personally present and to be legally represented. They, or their legal representative, must have the full and unfettered right to support their case. The review decision to then be informed to the medical practitioner within 14 days.*

On behalf of the Council, I am now making that request. I look forward to receipt of your confirmation that the motion has been added to the National Conference Agenda.

Yours sincerely,



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