

# INVESTIGATION REPORT

## REGARDING THE EMPLOYMENT & MANAGEMENT PROCESS OF FOUR UNREGISTERED INDIVIDUALS EMPLOYED IN INTERN POSITIONS AT THE CAIRNS BASE HOSPITAL

Investigation Officer: Dr Jeannette Young  
Chief Health Officer

Report: 1 May 2007

Period of Investigation: 17-27 April 2007

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# 1 Executive Summary

This investigation report is in relation to allegations that four individuals were employed and commenced work as medical interns at the Cairns Base Hospital without being registered with the Medical Board of Queensland and that inaccurate information relating to the issue was provided to the Director General and the Minister.

My key finding is that I found no evidence of any adverse patient outcomes due to the employment of any of the four individuals whilst unregistered.

However, having considered the evidence gathered by the end of day two of the investigations, it became apparent that there may be suspicions of misconduct, involving three Queensland Health employees.

In that regard, in accordance with departmental policy, the Ethical Standards Unit within Queensland Health, the Health Quality and Complaints Commission and the Crime and Misconduct Commission were briefed via telephone conference on 19 April 2007.

On 20 April 2007 the investigation was formally handed over to the Ethical Standards Unit in the presence of the Crime and Misconduct Commission and the Medical Board of Queensland.

Despite having to cease my investigation at that point, I have been able to gather sufficient information regarding systemic and other management practices relating to the employment of the four individuals at the Cairns Base Hospital. I have not identified the names of any individuals in my report as I was unable to interview any of the key individuals as they may be subject to further investigation.

On the basis of the factual findings to date, it is also my opinion that it is open to the Director-General to accept my recommendations as outlined in Section 7 of this report.

Dr Jeannette Young  
Chief Health Officer  
Queensland Health

Date of Report: 1 May 2007

## 2 Terms of Reference

By memorandum Dr Jeannette Rosita Young, Chief Health Officer, was appointed as Investigator pursuant to Part 6, of the Health Services Act 1991, by the Director-General.

The appointed members of the investigative team also included:

- Ms Lyndel Jones - Acting State-wide Recruitment Co-ordinator;
- Ms Brooke Anderson - Principal Policy Officer, Office of the Chief Health Officer; and
- Ms Yvonne Li - Program Manager, Corporate Office Human Resources Branch.

The Director-General determined that the scope of the investigation would be to ascertain the following matters related to the employment and management process of four unregistered individuals employed in intern positions at the Cairns Base Hospital.

The appointments authorised an investigation into the following issues which forms the basis of section 6 – Evidence and Analysis:

1. The recruitment process which led to the paid employment in January 2007 of 4 individuals in intern positions who were not registered with the Queensland Medical Board;
2. The role the Queensland Health 2007 Intern Recruitment Program (Intern2007) played in the recruitment of the 4 individuals;
3. The reason why Latitudes Medical Recruitment agency was engaged to assist with the recruitment process and what information was provided by Latitudes;
4. The management and human resources action taken on discovery of non-registration, including supervisory arrangements and patient contact management that was put in place;
5. All records of patients who came into contact with the four individuals; and
6. The source and accuracy of information provided to the Minister and Director General about the incident and its follow-up.

The Investigation will also produce the following recommendations (section 7 of this report):

1. Recommendations to improve human resource and medical recruitment processes;
2. Recommendations about the role of the Queensland Health 2007 Intern Recruitment Program (Intern2007);
3. Recommendations about the status of medical observers in Queensland Health facilities and their scope of practice;
4. Recommendations about the process that should occur when an employee is found to not be appropriately registered;

5. Recommendations about any actions that should be taken for breach of any Queensland Health policy or law of the State of Queensland;
6. Recommendations for systems and strategies to be implemented to ensure accurate provision of information to the Minister for Health and the Director General at all times; and
7. Recommendations for processes to be put in place to ensure public accountability are met in a transparent and ethical manner when delivering health services.

### 3 Events leading to the Investigation

Following the 2006 Queensland Health Junior Medical officer recruitment drive, four of the initial applicants for Cairns Base Hospital intern positions withdrew unexpectedly and four additional applicants were sourced. These were all International Medical Graduates. The four applicants commenced work on the 15 January 2007, however to date, only one applicant has been registered with the Medical Board of Queensland.

Concerns relating to these individuals were reported to the Director of the Northern Clinical Governance Unit on 23 February 2007 and the issue was raised in Parliament on 8 March 2007. The Acting Minister for Health was briefed and a response to a Question on Notice and a Possible Parliamentary Question was prepared. It became evident in April 2007 that further corroborating information was required by the Minister and Director-General to ensure that the department had followed the requisite processes and that no patient had been placed at risk as a result of the actions of these unregistered individuals. To this end the Chief Health Officer and a team were appointed to review the issues in the Cairns Base Hospital and make recommendations.

The sequence of major events leading to the review is as follows:

- In late 2006 appointment letters were received by the four individuals with an additional letter going to two of the individuals all signed by the Acting Executive Director of Medical Services. These letters were sent to:
  - Person 1 dated 25 August 2006 and 25 September 2006;
  - Person 2 dated 3 October 2006;
  - Person 3 dated 28 September 2006 and 3 October 2006; and
  - Person 4 dated 18 September 2006.
- 30 October 2006 – Medical Administration referred Person 2 to Latitudes Medical Recruitment Agency for ‘registration and visa processing’.
- 5 December 2006 – The Deputy Director of Medical Services withdrew Person 2’s offer of employment.
- 5 January 2007 – Brief to Minister Robertson from the Acting Executive Director of Medical Services advising reinstatement of Person 2 and informing of Person 2’s successful completion of a medical assessment and subsequent offer of appointment pending final approval of conditional registration.

- 8 January 2007 – Orientation week for Persons 1, 3 and 4.
- 8 January 2007 - Memo by Deputy Director of Medical Services to Director of Medicine and the Director of Orthopaedics regarding Persons 1 and 3 reinforcing supernumerary status and the need for supervision.
- 15 January 2007 – Employment contracts commence and all four individuals commence work in the wards. Within half an hour of being on the ward, Person 3 ceases duties at the request of a consultant due to difficulties communicating in English. Person 3 does not return to any clinical duties prior to cessation of employment on 23 March 2007.
- 18 January 2007 – Person 4 registered by the Medical Board of Queensland following referral to Latitudes Medical Recruitment Agency for ‘registration and visa processing’.
- February 2007 – Email sent from one of the Nursing Directors highlighting to the Executive Director of Nursing Services that nurses in the orthopaedic ward have to work with a person who will be unregistered for the entire term. The orthopaedic nurses bring to the attention of the Executive Director of Nursing Services that they are working with an unregistered ‘intern’ who has written some pharmacy prescriptions. The Executive Director of Nursing Services was also made aware that the individual had not passed an English test.
- 23 February 2007 - Concerns were raised at the Northern Area Clinical Governance Council. The Acting Executive Director of Medical Services informed the Area Director of Clinical Support that the individuals were having no clinical contact and were in the role of observers.
- 23 February 2007 – The Area Director of Clinical Support advised that the three remaining unregistered individuals should be removed from the ward and placed on an education program.
- 24 February 2007 – Media article published in Cairns Post “Foreign medics on hold”.
- 26 February 2007 - Brief to Minister Robertson from District Manager to inform the Minister about Intern Registration Issues and subsequent media articles in the Cairns Post of 24 February 2007. Included information that 12 of the 18 doctors identified in the article as unregistered were in fact registered. 3 of the doctors were not working at Cairns Base Hospital.
- 3 March 2007 – Person 1 and 3 sit IELTS – International English Language Test.
- 7 March 2007 – Persons 1, 2 and 3 suspended with pay and handed show cause notices why they should not be suspended without pay.
- 8 March 2007 – Persons 1, 2 and 3 all confirm with the Director of Clinical Support that they had complied with the direction on medical observer status.
- 12 March 2007 – All three individuals are suspended without pay.
- 20 March 2007 – Person 3 mutually ceases employment with Queensland Health for failing the IELTS test and failing to gain professional registration.

- 16 April 2007 – Person 2 is terminated by the District Manager for failing to gain professional registration.
- 17 April 2007 – Chief Health Officer commences investigation into the employment and management of the four unregistered individuals employed in the Cairns Base Hospital as medical interns.

## 4 Management of the Investigation

The Chief Health Officer and her team undertook investigations at the Cairns Base Hospital from 17-19 April 2007 inclusive.

To gain information consistent with the Terms of Reference, the team had interviews with the following staff in April 2007 on Level 4 of the Cairns Base Hospital:

|          |  |
|----------|--|
| 17 April | Admin Officer in Medical Administration        |
| 17 April | Executive Director of Nursing                  |
| 18 April | Director of Clinical Training                  |
| 18 April | Registered Nurse - Medicine                    |
| 18 April | Medical Education Officer                      |
| 18 April | Area Director of Clinical Support              |
| 18 April | Director of Medicine                           |
| 18 April | Previous Acting District Manager               |
| 18 April | Director of Orthopaedics                       |
| 18 April | Senior Admin Officer in Medical Administration |
| 18 April | Patient Complaints Officer                     |
| 19 April | Registered Nurse - Orthopaedics                |

All interviewees were provided with a letter requesting they attend for interview, the instrument of appointment and the terms of reference as signed by the Director-General on 17 April 2007. Interviewees were also offered the opportunity to have a support person present.

The methods of evidence gathered by the investigators consisted of taking notes whilst interviewing each respondent and witnesses. These notes were then transcribed into 'records of interview' (ROI). Each interviewee was then provided with a copy of the record of interview for their own review. Each interviewee was asked to review their ROI and make any corrections to the ROI, sign off a hard copy of the statement as a true and accurate record of the interview and return it to the investigators. Each interviewee was given the opportunity to revise, make additions to or retract any matter in their ROI's before signing a final hard copy of the statement. Where relevant I will refer to evidence provided in individual statements, in my findings and reasons, if they have influenced me in making these findings.

The investigation team also reviewed medical records, personnel and recruitment files and interrogated databases to gather sufficient information to direct further enquiries. These databases provided information on Outpatients department attendances, emergency

department attendances, operating lists, radiology, pathology and pharmacy orders/requests, patient incidents and complaints, and deaths and coroners' cases.

Using the gathered information, the investigation team:

- Reviewed medical records;
- Reviewed personnel and recruitment files; and
- Interrogated databases.

The Medical Board of Queensland records of the four individuals were sourced via the Health Quality and Complaints Commission as were the Latitude records.

Intern2007 Programme provided all copies of documents related to their involvement.

The Chief Health Officer asked the Executive Director of Nursing Services at Cairns Base Hospital to send out an email on 17 April 2007 to all nurses at Cairns Base Hospital requesting that if any nurse has any specific issue they would like to bring forward to the investigation team to please contact the team. Two nurses who were subsequently interviewed came forward.

Following the first two days of interviews and research I contacted the Director-General who referred me to the Director of the Ethical Standards Unit. He advised that I not proceed to interview the Acting Executive Director of Medical Services, the Deputy Director of Medical Services or any of the four individuals appointed to the intern positions. Nor should I seek to interview other Queensland Health employees or people external to Queensland Health until further assessment by the Ethical Standards Unit.

On 19 April 2007, together with a representative from the Health Quality and Complaints Commission, I participated in a telephone link up with the Queensland Health Ethical Standards Unit and the Crime and Misconduct Commission. I articulated my concerns that I had uncovered to date and requested guidance in terms of any suspected official misconduct.

I was provided with preliminary advice that all allegations of suspected official misconduct would be further managed by the Ethical Standards Unit with close monitoring by the Crime and Misconduct Commission and the Health Quality and Complaints Commission. The Ethical Standards Unit would refer issues of professional misconduct to the Medical Board of Queensland.

I provided an Interim Report to the Director-General on 20 April 2007 who referred the matter to the Senior Director Assurance and Risk Advisory Services

That day, 20 April 2007, the investigating team participated in a meeting with:

- Senior Director Assurance and Risk Advisory Services;
- Officers from the Ethical Standards Unit;
- A representative from the Crime and Misconduct Commission;
- A representative from the Health Quality and Complaints Commission
- Representatives from the Medical Board of Queensland; and
- Representatives from Corporate Office Human Resources Branch.

At this meeting it was determined that as there were suspicions of misconduct, officers from the Ethical Standards Unit would continue the investigation of this matter. My role in providing the Director-General with recommendations as previously instructed in the Terms

of Reference, were to proceed utilising the evidence I had before me. It is my opinion there is sufficient evidence before me to provide meaningful recommendations to address the issues expressed in the Terms of Reference.

## 5 Standard of Proof

As is customary in an investigation of this type, the opinions offered in this report are formed on the 'balance of probabilities' (i.e. the civil standard of proof). That is, a fact is proven to be true, on the balance of probabilities, if its existence is more probable than not, or if it established by a preponderance of probability (*Rejlek v Mc Elroy* (1965) 112 CLR 517).

However, the seriousness of an allegation made, the inherent unlikelihood of an occurrence of a given description, or the gravity of the consequences flowing from a particular finding are considerations which must affect the answer to the question whether the issue had been proved to the reasonable satisfaction of the inquirer (*Briginshaw v Briginshaw* (1938) 60 CLR 336).

Where it has been necessary to resolve apparent conflicts in the evidence of the parties on a given issue, I have indicated on what basis I have resolved such conflicts (eg. consistency, probability, witness credibility, etc). I have documented the investigation process accurately and considered the accuracy, specificity, objectivity relevance, clarity and consistency of the evidence gathered. Any inferences derived from hearsay evidence are clearly stated.

## 6 Evidence and Analysis

Each of the Terms of Reference is dealt with as follows:

1. The recruitment process which led to the paid employment in January 2007 of four individuals in intern positions who were not registered with the Queensland Medical Board.

### Evidence

Following the 2006 Queensland Health Junior Medical officer recruitment drive, four of the initial applicants for Cairns Base Hospital intern positions withdrew. Evidence has been provided that Cairns usually recruited 18 interns. Due to the graduation of increased numbers of Queensland University and James Cook University medical graduates, they were allocated 24 interns to commence at the start of the 2007 year. Medical Administration staff were told by the Acting Executive Director of Medical Services to find four new interns otherwise Cairns Base Hospital would lose the funding for those four intern positions. Cairns Base Hospital staff accessed the website of the centralised Queensland Health 2007 Intern Recruitment Program. They selected Person 1 and Person 4 who had applied to the Intern Recruitment Program for Intern positions prior to the closing date. Person 2 and Person 3 applied after the closing date. It is not known whether the Intern Recruitment Program supplied the Curriculum Vitae's of Person 2 or Person 3 or whether the District received them from another source. All four were International Medical Graduates. This is the first time Cairns Base Hospital has recruited interns who are International Medical Graduates.

The four individuals were sent letters of appointment, with two receiving a second letter, by the Acting Executive Director of Medical Services to temporary positions of Intern-Resident Medical officer with the Cairns Health Service District on the following dates:

- Person 1 dated 25 August 2006 and 25 September 2006;
- Person 2 dated 3 October 2006;
- Person 3 dated 28 September 2006 and 3 October 2006; and
- Person 4 dated 18 September 2006.

All the appointments were temporary full time, 80 hours per fortnight. Person 4's appointment commenced on 8 January and the other three were effective from 15 January 2007. All were to continue until 14 January 2008.

The medical interns commencing salary was \$53,774.00 per annum.

Person 1 and Person 3's appointment letters clearly articulated that they may not commence employment until their Medical Board of Queensland Registration had been verified by Medical Administration. Person 2 and Person 4's letter did not contain the same paragraph in the letter however Clause 8 of all individuals' employment contracts specified that:

“in keeping with legal requirements it is mandatory that all staff requiring professional registration to practice provide proof of current registration, or eligibility for registration, both on commencement of employment and thereafter on an annual basis as per your award. Medical Staff are required to provide proof of registration to this office prior to commencement of duties. Medical staff are also required to provide proof of qualifications in the form of original documents or copies certified by a Justice of the Peace, Commissioner for Declarations or Notary Public. Appointees who are not registered in Queensland will need to obtain a registration form from the Medical Board of Queensland”

All four individuals were referred to Latitudes Medical Recruitment Agency to assist with “registration and visa processing”.

Latitudes provided documentation to the Queensland Health Medical Registration Team in the Recruitment, Assessment, Placement, Training Support Program (RAPTS):

Person 2 - 14 November 2006  
Person 4 - 14 November 2006  
Person 1 - 28 March 2007

The role of the Registration Team is to provide support to Queensland Health facilities seeking to register doctors and to ensure that applications are complete before forwarding them to the Medical Registration Board.

Completed registration applications (including referee checks) were then passed on to the Medical Board of Queensland for registration:

Person 2 - 28 November 2006  
Person 4 - 15 December 2006  
Person 1 - 29 March 2007

On 1 December 2006 a brief was forwarded to the Director-General's office from the Executive Director of Medical Services, Princess Alexandra Hospital regarding the standing down of Person 2 as an observer at the Princess Alexandra Hospital due to allegations of her having suspect qualifications.

On 5 December 2006 the Deputy Director of Medical Services, withdrew Person 2's offer of appointment.

Following the withdrawal the Acting Executive Director of Medical Services agreed to arrange a clinical assessment of Person 2.

On 20 December 2006 the Cairns Base Hospital Director of Clinical Training and one of the Emergency Department Consultants undertook a clinical assessment of Person 2's medical skills.

The assessment was deemed adequate by the Director of Clinical Training and the Emergency Consultant; therefore Person 2 was again made an offer of appointment.

Persons 1, 3 and 4 commenced the Intern orientation program at Cairns Base Hospital on 8 January 2007.

Person 2 did not participate in the Intern Orientation Program.

On 8 January 2007 the Deputy Director of Medical Services sent a memorandum to the Director of Medicine and the Director of Orthopaedics regarding Person 1 and 3's supernumerary status and the need for supervision.

The four individuals commenced paid employment in intern positions on 15 January 2007.

### Analysis

Prior to appointment, an appropriate selection process needs to occur. This does not appear to have taken place. I was not provided with any evidence of an interview process other than with Person 2 who attended for a clinical assessment. For example, it does not appear anyone thought to check whether all four individuals had demonstrated English competence. Person 3 was removed from the ward within 30 minutes of commencement due to poor English and went on to fail the IELTS.

However, although this is poor practice it was not irretrievable until the four individuals commenced work without having obtained registration with the Medical Board of Queensland.

It is clear, as demonstrated by their letters of appointment, the intention was the four medical interns would not be permitted to commence work until they fulfilled a mandatory term of the employment contract, that is, to gain registration with the Medical Board of Queensland.

It is clear that none of the four held themselves out to the hospital as having been registered. Despite that they were all allowed to commence their appointment.

From the evidence obtained through interviews and perusal of memoranda, it is clear the relevant clerical staff in Medical Administration, the Acting Executive Director of

Medical Services, the Deputy Director of Medical Services, the Director of Clinical Training, the Medical Education Officer and the relevant consultants were aware the four individuals were not registered when they commenced work on the wards.

As evidence that the four individuals may have been led to believe that they could work as interns despite not being registered with the Medical Board of Queensland:

- All four were given appointment letters as interns – these do not appear to have been retracted except for Person 2 who was then reoffered appointment as an intern;
- All except Person 2 were orientated to the Hospital as part of the Intern Orientation Program;
- All were appointed against Intern positions although some rearrangement took place with Person 2 to allow additional supervision. None of the positions appeared to be supernumerary in that they continue to have interns in the positions;
- All four signed AUSLAB Pathology Management System Enquiry User Access Requests as interns;
- All four were entered into the payroll system and paid as interns;
- All four were on the intern roster; and
- All four were given identification cards as interns.

As evidence that the four individuals were told they were to work as “observers”:

- A memo was sent from the Deputy Director of Medical Services on 8 January 2007 to the Director of Orthopaedics and the Director of Medicine regarding Person 1 and Person 3 reinforcing their supernumerary status and the need for supervision; and
- The Director of Orthopaedics and the Director of Medicine both stated that they knew the relevant interns allocated to their units – Person 1 to Orthopaedics and Persons 2 and 3 to Medicine were only to work as observers. However, Person 1 occupied an Intern position in a busy unit. Person 2 was more supervised. Person 3 was removed within 30 minutes of commencement on the ward.

### Findings

On the balance of probabilities, based on the evidence available, I am of the opinion it is open to the Director-General to be reasonably satisfied that:

1. The initial recruitment process was poor in that it did not adequately assess the competence of the four applicants to take up an intern position.
2. The medical interns commenced employment as interns without professional registration.
3. An inadequate process was put in place to ensure the four unregistered individuals did not work as doctors.

## **2. The role Queensland Health 2007 Intern Recruitment Program (Intern2007) played in the recruitment of the four individuals.**

### Evidence

The Queensland Health 2007 Intern Recruitment Program (Intern2007) is the program through which all Queensland Health interns are recruited. The Medical Advisory Unit provides strategic and high level project management of the program. The Recruitment Support Team which is part of the Queensland Health Shared Service Provider provides tactical and transactional administrative support.

Central to the program is an E-Recruitment Module which is an on-line application system accessed from the Queensland Health Website. All applications must be made through the website i.e. written applications are not accepted. The System also enables facility staff to access applicants' information on line and perform certain administrative tasks eg successful and unsuccessful emails.

In the E-Recruitment Module, the applicant is asked to provide answers to a number of questions on line with mandatory fields and from this self reported information, the system determines their priority category based on predetermined criterion. Applicants assessed as Priority 1 (graduates of Queensland Universities who are Australian Citizens or permanent residents) are guaranteed an offer. However, for applicants who are rated as Priority 2 to 8, the module states:

- a. "Once the applicant resubmits their application (confirming preferences) health care facilities will access the resubmitted application on-line and conduct their own merit selection process.
- b. Health care facilities will make an offer on-line and the applicant will accept or decline position."

The Queensland Health 2007 Intern Recruitment Program "Guide for Recruiters" also contains several specific instructions regarding the responsibilities of the "recruiters" as follows:

Pg 3 - "As Co-ordinators and Recruiters you will be responsible for the manual selection of applicants for intern positions not filled by Priority 1 applicants."

Pg 8 - Screen shot which includes the following – "The Intern E-Recruitment module is a tool designed to assist facilities manage the recruitment of interns. This tool does not negate the requirements of recruitment policy. The success of the Intern Campaign relies on recruiters using this tool as agreed through the Medical Advisory Committee".

Pg 33 - "P2 to P8 applicants are required to provide details of referee/s and a brief statement detailing why the applicant would like to work in Queensland Health. This information is to assist Co-ordinators and Recruiters when conducting their own selection process for P2 to P8 applicants".

The E-Recruitment Module also clearly advises applicants that they must be eligible for registration with the Medical Board of Queensland.

## **The Four Individuals**

The Recruitment Support Team advise that their electronic records indicate that Person 1 and Person 4 both applied on line through the Intern Recruitment Program before the advertised closing date. The system assessed them both as Priority 8. It appears their applications were accessed on line by the District after it became clear that Cairns required four more interns to meet their requirements.

The Recruitment Support Team advise that electronic records and emails between the District and the Intern Program indicate that Person 2's details were manually added to the database after the closing date. Manual data entry after the closing date was only done at the request of a District when they provided advice they would be appointing the intern (the Medical Advisory Unit reports this was required by Directors of Medical Services Advisory Committee). However it is unclear whether the Administrative Officer responsible for the program had previously sent Person 2's application as a late applicant outside the database itself or whether the application had been received through some other source.

Similarly with Person 3, electronic records indicate that the application was manually added after the closing date.

The Medical Advisory Unit advises "there has always been an expectation which is communicated in the Guide for Recruiters, as well as verbally at various meetings, that the Executive Director Medical Services is responsible for ensuring an applicant is suitable for appointment as an Intern. The Recruitment Support Team can only ever select an applicant in the system upon the advice of a recruiter. The role of The Recruitment Support Team is to allocate the applicant pool for consideration and then make offers when authorised to do so. At no time do they ever determine whether a candidate is suitable for selection."

### Analysis

It appears the role of the Intern Recruitment Program is to provide tactical and transactional administrative support without determining whether a candidate is suitable for a position. That is the role for the employing facility to determine and assess.

### Findings

On the balance of probabilities, based on the evidence available, I am of the opinion it is open to the Director-General to be satisfied that the Intern Recruitment Program conducted themselves within the scope of their responsibilities.

3. The reason why Latitudes Medical Recruitment agency was engaged to assist with the recruitment process and what information was provided by Latitudes

### Evidence

Some evidence was sourced via the Health Quality and Complaints Commission as they have the power to obtain documents from an agency external to Queensland Health.

## Why was Latitudes engaged?

- While most of the larger Districts undertake the administrative arrangements for migration requirements and registration themselves, a number of Districts use an Agency to assist with this aspect of medical recruitment;
- In the case of Cairns, it was usual practice to utilise Latitudes to assist with medical pre-employment migration and registration requirements for international medical graduates.
- The Cairns District had never employed an international medical graduate as an intern previously and considered that Latitudes' expertise was valuable in "getting doctors registered as quickly as possible"; and
- Latitudes has a Service Agreement with Queensland Health to provide Recruitment Services for Medical Practitioners. All four individuals were referred to Latitudes.

## What information was provided by Latitudes?

- The Queensland Health Medical Registration Team in The Recruitment, Assessment, Placement, Training Support Program received documentation from Latitudes on Person 2 and Person 4 (both received 14 November 2006) and on Person 1 (received 28 March 2007);
- Latitudes provided the MISP Application and the SPE application (completed by the employer) for each applicant to the Registration Team. In the case of Person 1 and Person 4, there was further communication with Latitudes regarding the clarification of the requirement to provide referee checks;
- Completed registration applications (including referee checks) were then passed on to the Registration Board (Person 2 on the 28 November, Person 4 on the 15 December and Person 1 on the 29 March); and
- The Medical Registration Team has no record of receiving documentation regarding Person 3 from Latitudes. The Medical Registration Team member dealing with interns recalls a conversation with Latitudes advising that they had not forwarded the application because they were waiting for the results of the English Test.

## Analysis

It is clear that the immigration and registration process required to employ International Medical Graduates is complex. Latitudes is employed to assist with the process. When the District became concerned about Person 2's qualifications and withdrew her appointment, advice should have been obtained from Queensland Health Human Resources and the Legal Unit.

## Findings

On the balance of probabilities, based on the evidence available, I am of the opinion it is open to the Director-General to be reasonably satisfied that it is appropriate for a District to seek assistance with processes related to Immigration and Registration from an external agency.

4. The management and human resources action taken on discovery of non-registration, including supervisory arrangements and patient contact management that was put in place

I did not find evidence of a “discovery of non-registration”. From the evidence obtained through interviews, I formed the view, that there is a basis to suspect that the directly involved staff in Medical Administration and the medical staff on the relevant wards knew the four individuals were not registered. Therefore there was time for the District to put in place adequate processes to ensure appropriate supervision and patient contact management procedures prior to commencement of the four individuals on the wards. It is my view this was not done to an adequate level.

## Evidence

### Restrictions as observers

Prior to commencement on the wards the four individuals were given verbal instructions to act as observers and not as medical interns. According to the witnesses interviewed, these instructions were repeated to them on numerous occasions over the next few weeks. In particular Person 1 was told on a number of occasions following instances after he had apparently written pharmacy prescriptions.

There is also evidence that on 8 January 2007 the Deputy Director of Medical Services sent a memo to the Director of Orthopaedics and the Director of Medicine regarding Person 1 and Person 3 reinforcing their supernumerary status and the need for supervision.

However, there is clear evidence to indicate that Persons 1, 2 and 4 ordered pathology tests, radiology investigations and wrote in the medical records. Despite repeated instructions to only “observe”, evidence has come to light to indicate that:

### Person 1

- Undertook unsupervised clinical assessments;
- Signed entries in the medical record with his signature followed by the initials “RMO”;
- Signed surgical procedure consent forms with his signature and the designation “RMO” under the part of the consent form headed “DOCTOR’S STATEMENT”;
- Completed and signed discharge summaries with his signature and the delegation “RMO”;
- Ordered pathology investigations;

- Ordered radiology investigations;
- Wrote pharmacy prescriptions at least one of which ended up being presented to a pharmacy external to the hospital;
- Completed medication charts;

Person 2 - Appeared to be clinically supervised, however:

- Signed entries in the medical record with their signature without any form of designation i.e. did not write “RMO” but also did not write “observer”; and
- Ordered pathology investigations.

Person 3 – did not order any pathology or radiology and did not make any entries in any patient charts that I was able to discover.

Person 4 – ordered pathology and radiology investigations and made entries in the patient’s medical records, they were registered on 18 January 2007 three days after commencing work. As a registered nurse, they would have been aware of the importance of being registered prior to practicing as a health professional.

### The Suspensions

On Friday 23 February 2007 the Acting Executive Director of Medical Services informally notified the Area Director of Clinical Support there were three non-registered individuals working on the wards as observers. The Area Director of Clinical Support advised that the three individuals needed to immediately be removed from the ward and placed on an education program.

On Monday 26 February 2007 Person 1 and Person 3 met with the Acting Executive Director of Medical Services and were told not to attend the wards. In fact Person 3 had not attended the wards since 15 January 2007, instead sitting in on some consultations with senior medical staff in outpatients.

On Thursday 1 March 2007 Person 2 met with the Acting Executive Director of Medical Services and was told not to attend the wards.

Person 1 has confirmed to medical staff at Cairns Base Hospital that they did not attend the wards after 1 March 2007.

Person 2 has confirmed to medical staff at Cairns Base Hospital that she did not attend the wards after 1 March 2007 other than on 7 March 2007 when she provided a translation service.

On Friday 2 March 2007 the Acting District Manager was notified that three individuals were employed by the hospital as interns despite not being registered with the Medical Board of Queensland.

The Human Resources Unit advised the Acting District Manager on Wednesday 7 March 2007 to commence suspension of the three individuals. All three were suspended from work with pay on 7 March 2007 with 48 hours to show cause why they should not be suspended without pay for failing to be professionally registered with the Medical Board of Queensland.

Following consideration of all three employee's individual responses, the then Acting District Manager suspended all three without pay on 12 March 2007 (Person 2's letter is erroneously dated 7 March 2007).

## Current Employment Status

### Person 2 - terminated

On 10 April 2007 Person 2 was given 48 hours to show cause why they should not be terminated from the Cairns Base Hospital given their failure to produce any evidence that they have obtained professional medical registration with the Medical Board of Queensland. On 16 April 2007, the District Manager terminated Person 2's employment.

### Person 3 - employment ended mutually

On 21 March 2007 a meeting was held with Acting Executive Director of Medical Services regarding Person 3's failure to register with the Medical Board of Queensland. It was noted at that meeting that Person 3 had not passed the International English Language Test. It was agreed at that meeting that Person 3 would mutually cease employment with Queensland Health on 23 March 2007.

Person 1 - in the process of being terminated by the District through a show cause process. Person 1 made an application for registration with the Medical Board of Queensland and it was listed to appear before the Board on 24 April 2007. Person 1 was provided with written instructions to advise the District Manager as to the outcome of the Board's decision. Person 1 was advised that anything other than full registration would result in termination of employment. Person 1 is currently being asked to show cause why Person 1 should not be terminated as the Medical Board of Queensland has yet to register Person 1 professionally as a doctor.

## Analysis

There is evidence that provides a basis to suspect that the Acting Executive Director of Medical Services and the Deputy Director of Medical Services were both aware that the four individuals were not registered when they were allowed to commence on the wards. I do not believe that the process put in place informing the four individuals and the teams they were allocated to that they could only work as observers was adequate. It is clear that Persons 1, 2 and 4 carried out some if not all the roles an Intern would usually be expected to do. It is only when the nurses started asking what the individuals could do and when the Area Director of Clinical Support became involved that limits were placed on the role of the remaining two individuals who were not registered and were working on the wards. Once the District Manager became aware of the issue, appropriate suspension processes were put in place given that the individuals of concern were no longer on the wards.

## Findings

On the balance of probabilities, based on the evidence available, I am of the opinion it is open to the Director-General to be reasonably satisfied that:

1. The four individuals should not have commenced work on the wards until they had obtained registration with the Medical Board of Queensland.
  2. An inadequate process was put in place to ensure the individuals were appropriately supervised and only worked as observers until they became registered.
  3. Person 4 became registered three days after commencing work on the wards.
  4. Person 3 was taken off the wards within 30 minutes of commencement following which they did not carry out the work of an Intern.
  5. There is evidence to suggest that Person 1 signed documents using the designation “RMO”, ordered investigations and carried out other functions of an intern. This matter has been referred to the Ethical Standards Unit for investigation. The Ethical Standards Unit has referred Person 1 to the Medical Board of Queensland.
  6. Person 2 ordered pathology investigations but did not sign documents using a designation indicating they had medical registration.
  7. The payroll system allowed individuals who are not registered to be paid as medical practitioners.
  8. When Human Resources discovered the three individuals were unregistered, appropriate steps were put in place to commence suspension of the employees.
5. All records of patients who came into contact with the four individuals

## Evidence

The investigation team gathered the following information relating to patient records:

- records from the ORMIS<sup>1</sup> database which indicated the names of medical practitioners in the operating room during surgery for the relevant period;
- records from the Emergency Department database which indicated who assessed the patient on presentation to the department during the relevant period;
- copies of all pharmacy prescriptions made by any of the four individuals for the relevant period;
- copies of all pathology requests made by any of the four individuals for all patients for the relevant period;

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<sup>1</sup> Operating Room Management Information System  
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- copies of all radiology requests made by any of the four individuals for all patients for the relevant period;
- copies of the medical record for all patients in the relevant medical units for the relevant period;
- a list of deaths in Cairns Base Hospital for the relevant period including those reported to the Coroner;
- A list of all reported incidents in the hospital during the relevant period; and
- A list of all complaints received by the hospital pertaining to the relevant period.

### Analysis

Beyond determining that none of the deaths or incidents was due to Person 4, I did no further review of any of the Medical Charts related to the person. I did this on the basis that as they were registered three days after commencement they were capable of practising medicine in the three days not registered. Of course they should not have been working as a doctor during those three days but given they did quickly become registered there is no question of their credentials being able to be registered.

I did not find any evidence of Person 3 having been involved in the care of a patient.

At this point in the investigation, I can confidently say that based on the information reviewed by me, there have been no adverse patient outcomes. I have specifically examined all deaths over the period and all reported incidents and patient complaints and not found any evidence of involvement by any one of the four unregistered individuals. However, it is my intention that the review of each patient medical record continue so that the Director General and the Minister can be completely satisfied that no adverse outcome has occurred. This is an extensive body of work involving over 900 charts and is to be completed over the following week.

### Findings

On the balance of probabilities, based on the evidence available, I am of the preliminary opinion it is open to the Director-General to be reasonably satisfied that there have been no adverse patient outcomes due to the employment of one of the four individuals whilst unregistered.

6. The source and accuracy of information provided to the Minister and Director General about the incident and its follow-up

### Evidence

What information was provided to the Minister of Health?

On 1 December 2006 a brief was prepared by the Executive Director Medical Services, Princess Alexandra Hospital informing the Director-General of the standing down of a medical observer Person 2 after the Princess Alexandra Hospital was anonymously alerted

the individual did not have recognised medical qualifications. Person 2 had been observing for two weeks at the Princess Alexandra Hospital and did not have direct patient contact.

On the 2 January 2007, a brief was prepared by the Acting Executive Director of Medical Services, Cairns Base Hospital for the Minister of Health informing him that Person 2 had satisfactorily completed a clinical assessment at Cairns Base Hospital and would be appointed in January 2007 when it was expected would be granted medical registration in Queensland. The brief also identified that an initial offer of employment to Person 2 was withdrawn on 5 December 2007 because there were doubts raised regarding the authenticity of their medical degree. It was also identified that Person 2 had only passed the theory component of the Australian Medical Council examination and that the Centre for International Graduates had raised concerns about her clinical skills.

On 26 February 2007, a brief was prepared by the Acting District Manager Cairns Base Hospital for the Minister of Health in response to a media article in the Cairns Post on 21 February 2007 claiming 18 individuals were unregistered. The brief informs the Minister that 12 were registered; 3 remain unregistered and were student observers under direct supervision of senior consultants with no direct responsibility or patient contact. Of the 3 remaining, it claimed they were not working at Cairns Base Hospital. The brief also informs the Minister that a review of the processes had commenced at that time though there was no evidence of this review.

On 5 March 2007, the Acting Executive Director of Medical Services, Cairns Base Hospital was requested to prepare a response to a Possible Parliamentary Question by Parliamentary and Ministerial Services, Queensland Health. This response was used by the Acting Minister for Health the Hon. Desley Boyle to respond to a Question Without Notice 470 on 8 March 2007. The Acting Minister for Health informed the parliament that three international medical graduates were awaiting provisional registration and had been granted student observer status under the direct supervision of senior medical officers. The parliament was further informed that the individuals had no direct responsibility for clinical treatment or patient contact and would not have that responsibility until their qualifications had been confirmed by the Medical Board of Queensland of Queensland.

On 8 March 2007, a brief was prepared by the Acting District Manager Cairns Base Hospital for the Minister of Health in response to a request for an issues brief and informed the Minister that the three individuals were issued with a show cause notice why they should not be suspended without pay.

In the record of interview of the Executive Director of Nursing Services Cairns Base Hospital, she indicates that the issue was raised by her with Acting Executive Director of Medical Services on 22 February 2007. She stated that they were writing in charts, and giving orders.

From the records of interview of both the Director of Medicine and the Director of Orthopaedics, they were aware the individuals were unregistered and it is evident that both senior consultants did not directly supervise the individuals. It is evident that Person 1, 2 and 4 have to varying degrees ordered radiology and pathology tests during the period they were unregistered. At the time of this report it has become evident that Person 1 also completed prescription forms and consent forms.

## Analysis

It would appear based on an analysis of the evidence, that the information in both the brief prepared by the Acting District Manger Cairns Base Hospital on 26 February 2007 and the response to the Possible Parliamentary Question prepared by the Acting Executive Director of Medical Services on 5 March 2007 were false and did mislead the Acting Minister of Health. This resulted in the Minister making statements in Parliament that were not accurate.

## Findings

The available evidence provides a basis to reasonably suspect that the Acting Executive Director of Medical Services did mislead the Minister and the Director-General, and for the Director-General to refer this issue to the Ethical Standards Unit. In addition, I am also of the opinion that it is open to the Director-General to reasonably suspect that the Deputy Director of Medical Services may also have been involved in the preparation of the brief and for the Director-General to therefore also refer this issue to the Ethical Standards Unit.

## 7 Recommendations

My key finding is that at this point I have not found any evidence of any adverse patient outcomes due to the employment of any of the four individuals whilst unregistered. However, I have made a range of recommendations that Cairns Base Hospital will need to implement to ensure such a situation does not arise again.

Pursuant to the Terms of Reference the recommendations are as follows:

### 1. Recommendations to improve human resource and medical recruitment processes

#### Recommendations specifically related to Cairns Base Hospital

- Immediate Audit of Medical Registration status at Cairns Base Hospital followed by audits to occur at a minimum at the start of each year and following the annual registration renewal period at the end of June. To be conducted by the Northern Clinical Governance Unit. This audit is to confirm every individual paid under a medical award has appropriate registration with the Medical Board of Queensland.
- All medical graduates seeking appointment as an Intern at Cairns Base Hospital who have graduated from a University outside Queensland are to go through a formal recruitment process including at a minimum interview and referee checks.
- The Medical Board of Queensland Registration transcript confirming registration to be sighted and the registration number noted before an individual is authorised to be paid as a medical officer by the Cairns Base Hospital.

## Recommendations related to State wide responsibilities

- Cairns Base Hospital used a recruitment agency to progress immigration and registration processes. The Director-General should consider whether a centralised unit should provide this support to districts unable to develop the expertise within their own resources.
- The requirement for appropriate recruitment practices including validation of registration be made part of all Director of Medical Services position descriptions and included as part of their letter of appointment and any performance appraisal and development process.

### 2. Recommendations about the role of the Queensland Health 2007 Intern Recruitment Program (Intern2007)

The Guide for Recruiters and the web site should more clearly state that it is the responsibility of the facility to undertake required pre-employment checks including registration.

The Recruiters Manual and the Website should also more clearly state that:

- Applicants referred through the E-Recruitment Modules have not been filtered or screened other than the automatic prioritisation done by the E- Recruitment Module; and
- It is still the responsibility of the facility intending to employ the intern to validate information provided by the intern in relation to pre-employment requirements such as registration before commencement and to take action to ensure this occurs.

### 3. Recommendations about the status of medical observers in Queensland Health facilities and their scope of practice

Observers are to be registered with the Medical Board of Queensland either under section 132 “Postgraduate study or training” or section 133 “Supervised training to prepare for clinical examination”. A clear state-wide policy is to be developed by the Patient Safety Centre to clearly delineate the scope of practice of observers. Observers should be able to be clearly identified by other staff and patients through, at a minimum, a clear identification badge stating “observer”.

### 4. Recommendations about the process that should occur when an employee is found to not be appropriately registered

Any individual working as a medical officer who is later found to not be registered should be immediately suspended until they provide evidence of current registration with the Medical Board of Queensland. They should not remain in a clinical area.

## **5. Recommendations about any actions that should be taken for breach of any Queensland Health policy or law of the State of Queensland**

There was sufficient evidence to halt the investigation and refer three Queensland Health employees to Queensland Health Ethical Standards Unit for assessment of suspected official misconduct and also the same three Queensland Health employees to the Medical Board of Queensland for possible professional misconduct.

The three employees are:

1. Acting Executive Director Medical Services, Cairns Base Hospital
2. Deputy Director Medical Services, Cairns Base Hospital
3. Person 1 - employed by Cairns Base Hospital as an Intern although not registered with the Medical Board of Queensland

## **6. Recommendations for systems and strategies to be implemented to ensure accurate provision of information to the Minister for Health and the Director General at all times**

There is sufficient evidence that inaccurate information was provided to the Minister and Director General. It will be up to a further investigation to determine whether the information was deliberately inaccurate or the result of a lack of diligent performance of any individual's duties as a Director of Medical Services.

All Directors of Medical Services should at time of appointment whether permanent or temporary undergo a formal orientation program that includes information about the importance of keeping the Director General and Minister informed in a timely and accurate way. It needs to be stressed that it is the responsibility of anyone providing information to the Minister or the Director General that they must confirm its accuracy. The requirement to provide timely and accurate information should be made part of all Director of Medical Services position descriptions and included as part of their letter of appointment and any performance appraisal and development process.

## **7. Recommendations for processes to be put in place to ensure public accountability is met in a transparent and ethical manner when delivering health services**

This is an important factor in the provision of public health services. The public is entitled to be confident that it is receiving accurate information about the care individuals are receiving in the public health system. This issue should also be addressed in an orientation program for Directors of Medical Services and included in position descriptions, letters of appointment and performance appraisal processes.