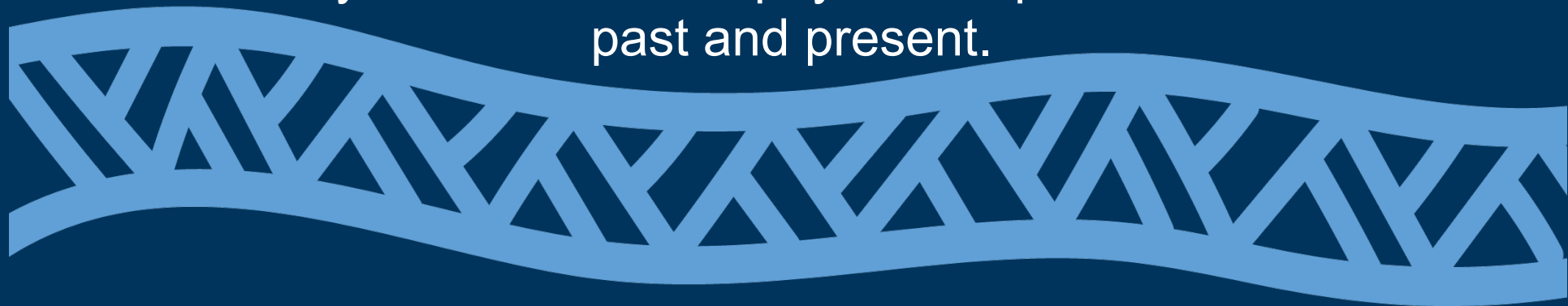


**Introduction**  
**Adjunct Professor Danforn Lim**  
**Chair, Chinese Medicine Board of Australia**

# Acknowledgement of Country



We acknowledge the Traditional Custodians of the land we are meeting on for their continuing connection to land, sea, community and culture. We pay our respects to their Elders past and present.





# Managing complaints and your wellbeing

**Matthew Hardy, National Director, Notifications**

**Susan Biggar, National Manager, Regulatory Experience and Engagement**

July 2024

# Why do we regulate health practitioners?



# What regulation means to patients?

“

I notified Ahpra because of ... the experience we had with a health professional ...  
and I was worried someone else might have the same experience.  
- Notifier

”

“

I didn't want an apology or compensation. I had concerns about the safety of the way these people practice. - Notifier

”

“

I generally wouldn't complain. I'm a hairdresser and I don't know much about medicine, but I was out of my business for years because of what happened to me. I was appalled that things could go so badly.  
- Notifier

”

# Meet your Board

			
<b>Adjunct Professor Danforn Lim</b>	<b>Ms Dina Tsiopelas</b>	<b>Dr Johannah Shergis</b>	<b>Mr Craig Bennett AM</b>
			
<b>Mr Luke Hubbard</b>	<b>Ms Sophy Athan</b>	<b>Ms Bing Tian</b>	<b>Ms Stephanie Campbell</b>



# What's the role of the Board?



# Why are notifications important?

## Notifications

- allow patients, peers and employers to raise concerns
- enable us to talk with a practitioner about safety and professionalism
- check there is no ongoing risk
- take protective actions where there is risk
- contribute to improving the quality and safety of healthcare.





# Practitioners' experience of a notification ...

“

Of course there's anxiety.  
It feels like your performance is being attacked.

”

“

I was just devastated.  
I had no idea what was going on.

”

“

I distinctly remember feeling very alone.  
I was terrified to speak to anyone about it.

”

# One practitioner's experience of a notification



# From fear to facts to improve practitioner wellbeing



# Managing complaints and your wellbeing: Takeaways

1. Many (good) practitioners receive a notification
2. Very few notifications are 'career-ending' for practitioners
3. If you do receive a notification, having support is very important
4. The Board wants you to look after your physical and mental health





# How do we hear from notifiers and practitioners?

Over 14,000 survey responses

60% of responses are from practitioners



119 semi-structured interviews with notifiers and practitioners



# The two groups see the experience differently

# Practitioners



## Notifiers

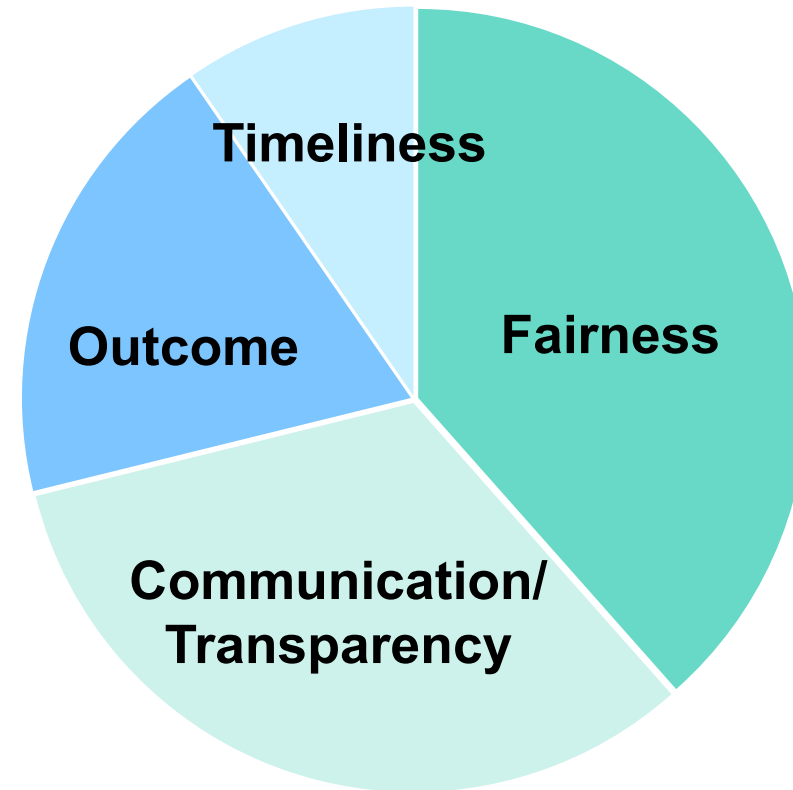


# What matters to practitioners and notifiers?

**Practitioners**



**Notifiers**



How Can We Make Health Regulation More Humane?

A Quality Improvement Approach to Understanding Complainant and Practitioner Experiences

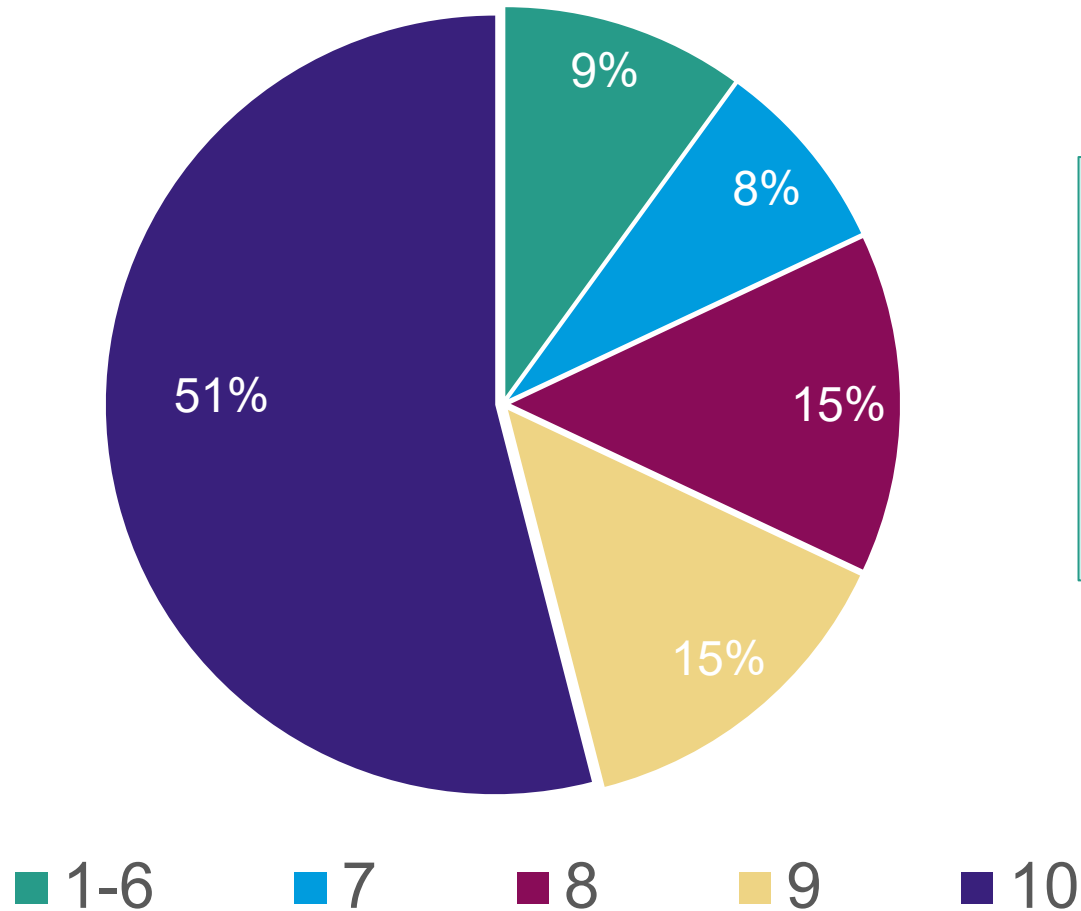
Susan Biggar, Louisa M. Lobigs, Martin Fletcher, *Journal of Medical Regulation* (2020) 106 (1): 7-15

# What have we heard about practitioner wellbeing?



# Practitioner stress

How stressful was the investigation for you? (1-10 scale)



89% rated the experience as a 7-10

# Aims of the work

*International Journal for Quality in Health Care*, 2023, **35**(4), 1–12  
DOI: <https://doi.org/10.1093/intqhc/mzad076>  
Advance Access Publication Date: 26 September 2023  
Original Research Article

OXFORD

## **‘Virtually daily grief’ – understanding distress in health practitioners involved in a regulatory complaints process: a qualitative study in Australia**

Susan Biggar<sup>1,\*</sup>, Anna van der Gaag<sup>2</sup>, Pat Maher<sup>1</sup>, Jacinta Evans<sup>1</sup>, Lakshmi Bondu<sup>1</sup>,  
Manaan Kar Ray<sup>3</sup>, Rachel Phillips<sup>4</sup>, Anne Tonkin<sup>5</sup>, Catherine Schofield<sup>6</sup>, Kym Ayscough<sup>1</sup>,  
Matthew Hardy<sup>1</sup>, Sarah Anderson<sup>1</sup>, Eva Saar<sup>1</sup>, Martin Fletcher<sup>1</sup>

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Handling Editor: Prof. David Greenfield.

### **Abstract**

Protection of the public is the paramount aim for health practitioner regulation, yet there has been growing concern globally on the association between regulatory complaints processes and practitioner mental health and wellbeing. The objective was to understand the experience, particularly distress, of health practitioners involved in a regulatory complaints process to identify potential strategies to minimise future risk of distress. Semi-structured qualitative interviews were conducted with health practitioners in Australia who had recently been through a regulatory complaints process, together with a retrospective analysis of documentation relating to all identified cases of self-harm or suicide of health practitioners who were involved in such a process over 4 years. Data from interviews and the serious incident analysis found there were elements of the regulatory complaints process contributing to practitioner distress. These included poor communication, extended time to close the investigation, and the management of health-related concerns. The study found external personal circumstances and pre-existing conditions could put the practitioner at greater risk of distress. There were found to be key moments in the process—triggers—where the practitioner was at particular risk of severe distress. Strong support networks, both personal and professional, were found to be protective against distress. Through process improvements and, where appropriate, additional support for practitioners, we hope to further minimise the risk of practitioner distress and harm when involved in a regulatory complaints process. The findings also point to the need for improved partnerships between regulators and key stakeholders, such as legal defence organisations, indemnity providers, employers, and those with lived experience of complaints processes. Together they can improve the support for practitioners facing a complaint and address the stigma, shame, and fear associated with regulatory complaints processes. This project provides further evidence that a more compassionate approach to regulation has the potential to be better for all parties and, ultimately, the wider healthcare system.

**Keywords:** health practitioner distress; self harm; suicide prevention; health professional regulation; complaints handling

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Understand contributors to distress in health practitioners undergoing a complaints process

Recommend improvements

Take actions



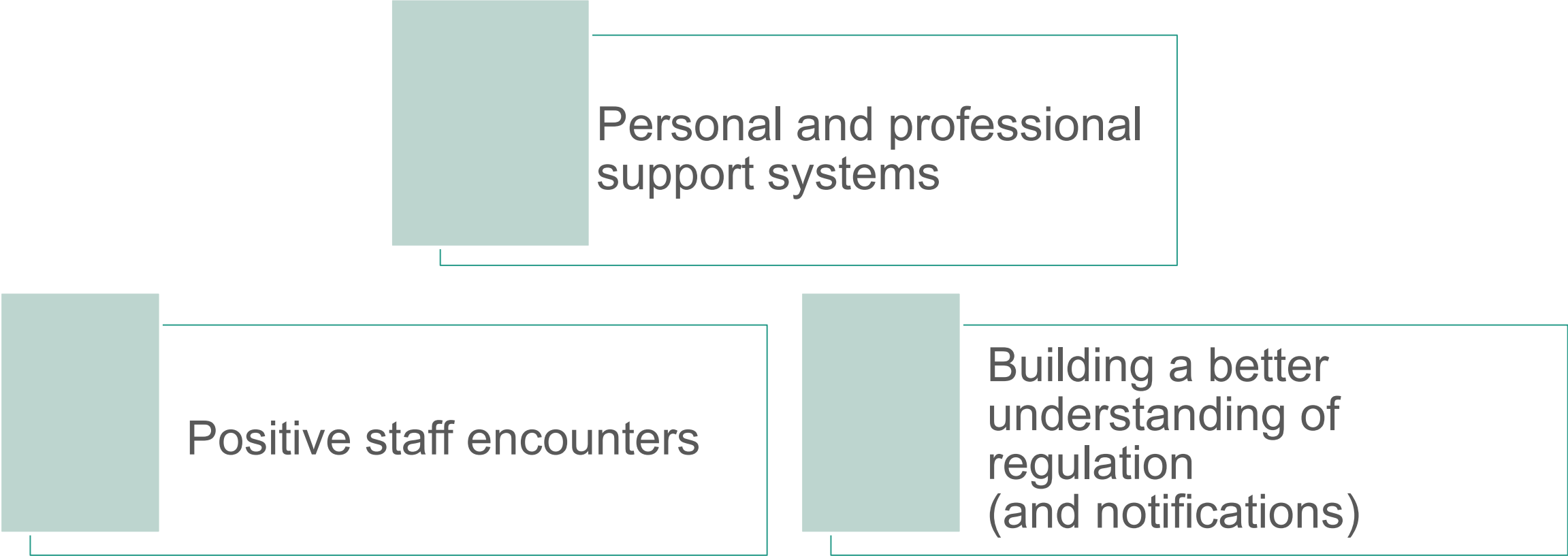
# Results: What contributed to distress?

1. 'Insult' of the complaint

2. Communication problems

3. External factors and pre-existing conditions

# What protected against distress?



Personal and professional support systems

Positive staff encounters

Building a better understanding of regulation (and notifications)

# What practitioners say about support

“ —

Because of having the support, with family and with [partner], the process wasn't too hard at all.”

‘The medical indemnity service ... they were back to me pretty quickly, they were very supportive, so it wasn't a problem.’

— ”

“ —

‘Talk to a colleague, family member or treating GP.’

# Protective: Positive staff encounters

*'It wasn't as traumatic as I thought. The whole team were really good and very clear with what they needed to know ...*

*At no time did I feel that I was, like, victimised or anything like, it was all very considerate ... to where I was at the time.'*

Mentoring

Guidance

Tailored  
help

Wanted more from staff  
(or someone)

Questions  
answered

Phone  
check-ins

# Managing complaints and your wellbeing: Takeaways

- 1. Many (good) practitioners receive a notification**
2. Very few notifications are 'career-ending' for practitioners
3. If you do receive a notification, having support is very important
4. The Board wants you to look after your physical and mental health





# Notifications - some data



**68%**

concerns are  
raised by patients  
or relatives

**21%** about the  
treatment  
provided

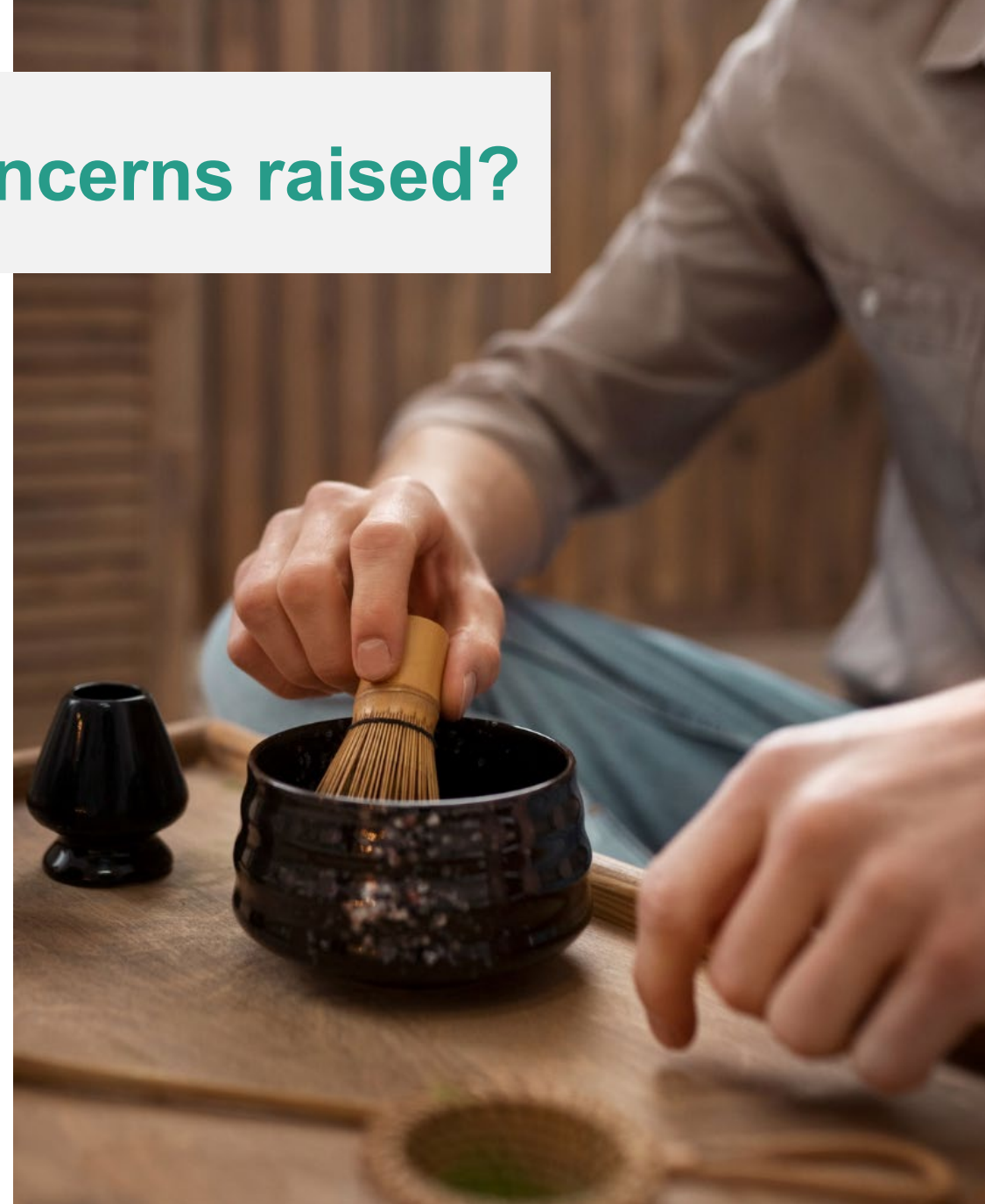
**15%** about not  
meeting legal  
obligations

**74%**

result in no action  
being taken

# What are the most common concerns raised?

- **Clinical care:** not explaining risks or documenting consent
- **Not meeting legal obligations:** not undertaking enough *professional development*, not ensuring adequate insurance
- **Boundary issues:** making comments of a personal or sexual nature to a patient or undertaking intimate examinations of patients without appropriate consent





# Case study 1



Image by xb100 on Freepik

A patient complained to the Board that a Chinese medicine practitioner

- prescribed Chinese herbs that caused them pain
- showed a lack of care to his concerns when he complained to the practitioner directly, and
- did not make records or issue receipts.

The practitioner provided a response to the complaint that included

- a signed consent form outlining the treatment and risks and benefits from treatment
- clinical records
- copies of emails exchanged with the complainant.

When Ahpra presented the information to the Board, the Board decided no action was required, because the practitioner had evidence of good practice

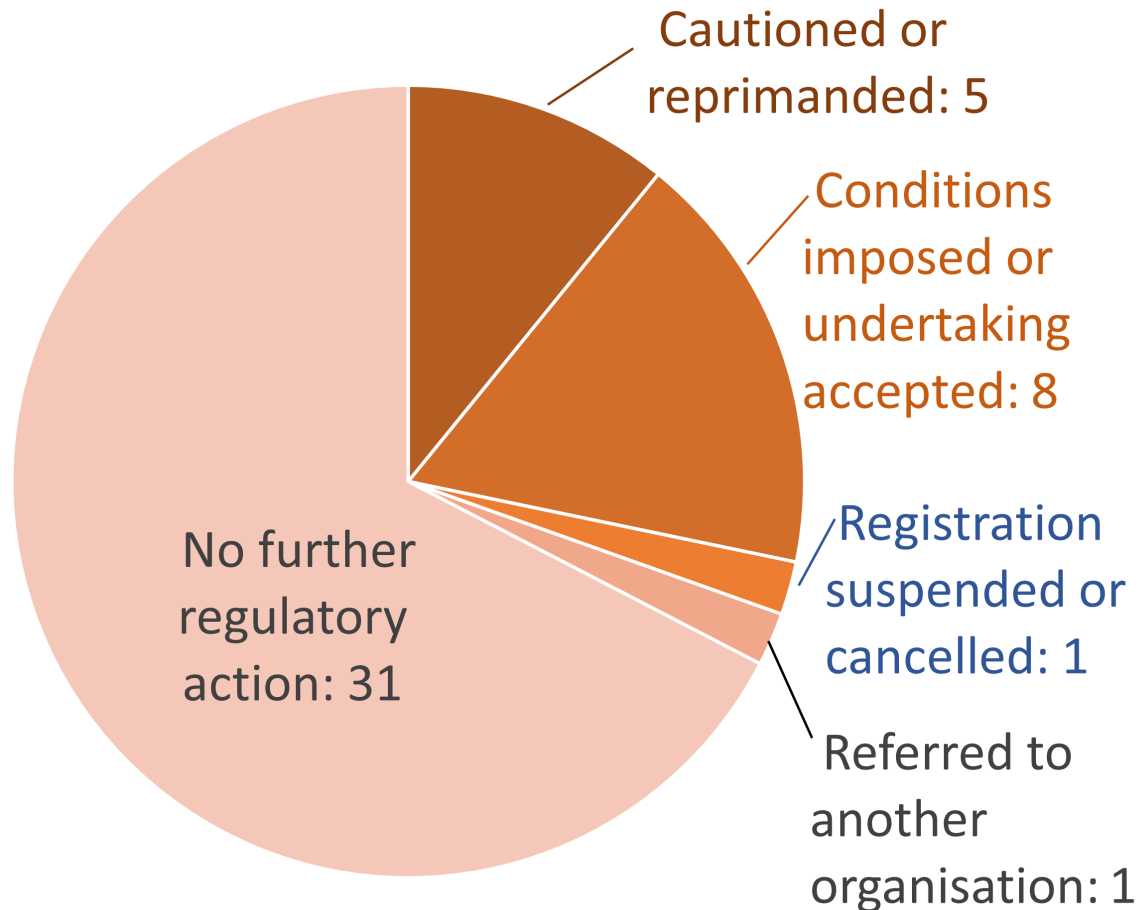
# Managing complaints and your wellbeing: Takeaways

1. Many (good) practitioners receive a notification
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# When the Board needs to take action ...

## Notifications outcomes, Chinese medicine practitioners, last 2 years





## Case study 2



A patient complained that following treatment by acupuncture, they developed a pneumothorax

The patient told Ahpra:

- they were not warned that this was a risk of treatment
- when they raised concerns with the practitioner, the practitioner did not recognise that the symptoms were likely because of pneumothorax

On review of a response and records, it was clear that the patient had not been appropriately warned of the risks of treatment. The practitioner did not provide appropriate advice to urgently seek treatment after symptoms indicated pneumothorax.

The Board decided to impose conditions requiring the practitioner to make changes to their consent processes, recordkeeping and undertake further education about risks from treatments.

# Managing complaints and your wellbeing: Takeaways

1. Many (good) practitioners receive a notification
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- 3. If you do receive a notification, having support is very important**
4. The Board wants you to look after your physical and mental health





**The value of support:**  
the lived experience



# Supporting your wellbeing during a notification

- Indemnity insurer
- Friends, family and peers
- Legal representative
- Your doctor (GP) or psychologist, if needed



# Support services are available (Ahpra website)

## TEN – The Essential Network for Health Professionals

PRACTITIONER SUPPORT

### Support for all professions

The Essential Network (TEN) for Health Professionals is designed by health professionals, for health professionals, and provides support to navigate burnout and maintain good mental health.

## TIS National

### Translating and Interpreting Service

13 14 50

The Translating and Interpreting Service (TIS National) is an interpreting service provided by the Department of Immigration and Border Protection.



# Advice from other practitioners

“

‘Get help from your indemnity insurance and support from peers.’

‘Seek independent counselling for support if your professional association doesn’t provide that.’”

‘Contact your colleagues, family for support. Speak with the Ahpra staff who are managing your notification.’”

“

‘Talk to other practitioners. You are not alone ...Support from peers will help.’

“

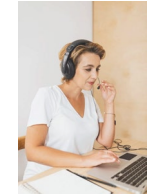
‘Talk to your indemnity provider... and trusted friends and peers.’

# Improving practitioners' notifications experience

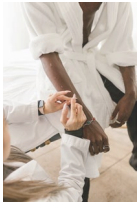
- Closing the matter without contact with practitioner where possible
- Changing method of engagement (phone vs letter)
- Improving timeframes and updates
- Case discussions and strengthening practice
- **Coming soon:** practitioner portals



# Know what is happening



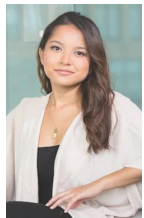
**The concerns**



**Where you practise**



**Your type of practice**



**Your regulatory  
profile**

Information Gathering

Written response

Case (peer-peer) discussion

Health records

Third party information (eg.  
employer or supervisor)

Independent assessment

Witness statements

Formal interview

# Managing complaints and your wellbeing: Takeaways

1. Many (good) practitioners receive a notification
2. Very few notifications are 'career-ending' for practitioners
3. If you do receive a notification, getting support is very important
4. **The Board wants you to look after your physical and mental health (and a few words about mandatory notifications)**





# Your health is important: the code of conduct

Maintaining your own health and wellbeing is built into the practitioner code of conduct

## 9. Maintaining practitioner health and wellbeing

**Principle 9:** It is important for practitioners to maintain their health and wellbeing. This includes seeking an appropriate work-life balance.

### 9.1 Your health

Good practice includes that you:

- a. attend a general practitioner or other appropriate practitioner to meet your health needs
- b. seek expert, independent, objective advice when you need healthcare, and be aware of the risks of self-diagnosis and self-treatment
- c. understand the importance of immunisation against communicable diseases and take appropriate precautions to limit the spread of infectious diseases to yourself and others
- d. are immunised against any relevant communicable diseases
- e. conform to the relevant state/territory legislation on self-prescribing, if you can prescribe
- f. recognise the impact of fatigue and the risks associated with long working hours on your health and ability to care for patients safely
- g. be aware of and seek assistance from any relevant practitioner health program if advice or help is needed, and
- h. do not rely on your own assessment of the risk you pose to patients if you know or suspect that you have a health condition or impairment that could adversely affect your judgement, performance or the health of patients. In this case:
  - consult a medical or other practitioner as appropriate about whether, and in what ways, you may need to modify practice, and follow the treating practitioner's advice, and
  - be aware of your responsibility under the National Law to notify the National Boards/Ahpra in relation to certain impairments.

### 9.2 Other practitioners' health

Health practitioners have a responsibility to help their colleagues maintain good health.

Good practice includes that you:

- a. give practitioners who are patients the same quality of care provided to other patients
- b. take action, including a mandatory or voluntary notification to Ahpra, if you know or reasonably believe that a registered health practitioner is putting patients at risk of harm by practising with an impairment. The [Ahpra website](#) has further information on raising concerns about a practitioner via a [voluntary notification](#), and the thresholds for making a mandatory notification in the [Guidelines: Mandatory notifications about registered health practitioners](#)
- c. recognise the effect of fatigue on the health of colleagues, including those under supervision, and facilitate safe working hours wherever possible.



# Mandatory notifications



## Mandatory notifications: What you need to know

### What is a mandatory notification?

Notifying us about a concern that a health practitioner may be putting public safety at risk is called a 'notification'.

Anyone can make a voluntary notification about a health practitioner, but by law, registered health practitioners, employers and education providers must make a mandatory notification in some limited circumstances. Mandatory notifications help to protect the public by ensuring that Ahpra and the National Boards are alerted to any potential risks to the public.



### Guidelines:

Mandatory notifications about  
registered health practitioners

March 2020

Fewer than 6% of all notifications  
are mandatory notifications



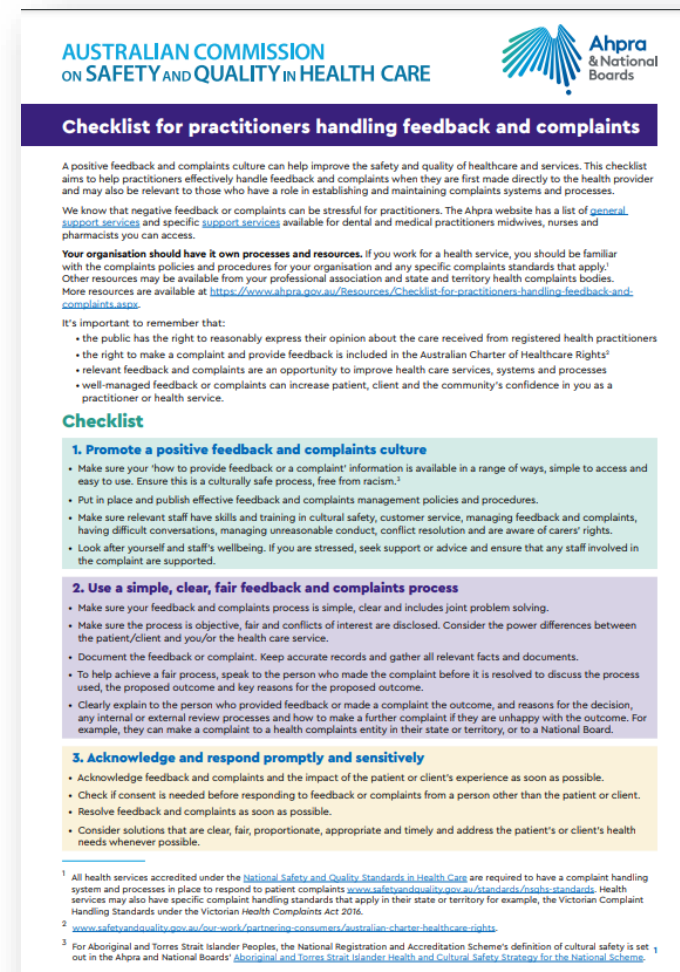
## Case study 3 - Health-related matter

- The practitioner advised us they had experienced a mental health breakdown resulting in them being admitted to hospital. They were diagnosed with depression and anxiety.
- A member of our health management team was assigned the case.
- The practitioner stated that the breakdown was situational and related to a negative work environment. They had good supports in place and were actively engaged in treatment.
- Treating practitioners indicated that they had a long-standing treating relationship with the practitioner. The treating practitioner had no concerns about their fitness to practice.
- The Board decided that no action was necessary as the practitioner was appropriately managing their health.
- The notification was closed.

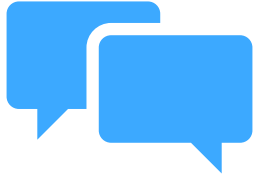
# Be prepared to respond to a notification



- Continuing professional development (CPD) targeting areas that are the most common areas for notifications in your practice area
- Pay attention to Board publications
- Patient-centred care, consent, experience
- Adopt best-practice policies for patient feedback and complaints



# Advice for when a concern is raised



## The dos:

- Accept we are contacting you because we need to prepare relevant advice for a delegate – not because we have accepted you've done something wrong
- Engage (with Ahpra, indemnity providers) – together we will be the best sources of information about what is likely
- Get support (family, friends, close peers, doctors health programs)



## The don'ts:

- Don't expect the worst outcome
- Don't keep it to yourself
- Don't avoid talking to your indemnity insurers
- Don't attempt to make a notifier withdraw a notification or complaint
- Don't change patient records or documents
- Don't expect that the notification will be closed in a few days



# Protect the public and support practitioner wellbeing



- Our primary role is to protect the public.
- We aim to protect the public and support the wellbeing of practitioners involved in our processes.