

# HEALTH PROGRAM



## PARTICIPANT'S HANDBOOK

(January 2011, with amendments May 2021)

## **FOREWORD**

### **THE HEALTH PROGRAM**

This handbook has been compiled to provide you with information about the Council's Health Program and to assist you in your involvement with the Program.

The principal role of the Medical Council of NSW is to protect the public of New South Wales by ensuring that all doctors in the State are fit to practise medicine.

The Health Program (sometimes referred to as the Impaired Registrants Program) is established under the Health Practitioner Regulation National Law (NSW) to enable the Council to deal with impaired doctors and medical students. The Program functions in a supportive and non-disciplinary manner, however as it is backed by the National Law, some aspects of the Program are mandatory. Most participants come to welcome the structured and transparent approach that the Program provides.

A strong, secondary objective of the Health Program is to maintain the participation of impaired doctors/students in practice/training when it is safe to do so. The Program also aims to ensure that an impaired student's transition into the medical workforce is as smooth and supported as possible.

The Council believes that the Health Program provides a positive framework to address health issues in a way that is protective of the public and fair to the profession. We hope that the information in this Handbook assists you to make the most of the Program.

If at any time, you have questions or require further information regarding the Health Program, please contact the Council's Principal, Monitoring on 02 9879 2200.

# TABLE OF CONTENTS

## **SECTION ONE**

<b><u>THE HEALTH PROGRAM</u></b> .....	<b>3</b>
<b><u>OVERVIEW AND DEFINITIONS</u></b> .....	<b>3</b>
<u>What constitutes impairment?</u> .....	3
<u>What about medical students?</u> .....	3
<b><u>THE PROCESS</u></b> .....	<b>4</b>
<u>What can you expect if the Medical Council receives a notification about you?</u> .....	4
<u>The role of the medical indemnity insurer and the importance of seeking support</u> .....	4
<u>What happens if you are referred for an assessment by a Council Directed Health Assessor?</u> ....	4
<u>If you cannot attend the appointment with the Council Directed Health Assessor?</u> .....	5
<u>What is an Impaired Registrants Panel (IRP)</u> .....	5
<u>What happens after an IRP?</u> .....	6
<u>Will my employers be notified?</u> .....	6
<u>Urgent action pursuant to Section 150 of the National Law</u> .....	6
<b><u>AFTER AN IRP: THE MONITORING PROGRAM</u></b> .....	<b>8</b>
<u>How does the Monitoring Program work?</u> .....	8
<u>Subsequent visits to the Council Directed Health Assessor</u> .....	8
<u>Treating Practitioners</u> .....	9
<u>The Council Review Interview (CRI)</u> .....	9
<u>Distribution of CRI reports</u> .....	10
<u>Exit Interviews</u> .....	10
<b><u>COMPLIANCE WITH CONDITIONS</u></b> .....	<b>11</b>
<u>Importance of complying with conditions</u> .....	11
<u>Breach of conditions</u> .....	11
<u>Critical compliance conditions</u> .....	11
<u>Critical impairment conditions</u> .....	11
<u>Review of conditions</u> .....	12
<b><u>PROGRESS IN THE PROGRAM</u></b> .....	<b>13</b>

## **SECTION TWO**

<b><u>PRESCRIBING AND SELF-ADMINISTRATION OF DRUGS</u></b> .....	<b>15</b>
<u>The Council's Policy</u> .....	15
<u>Restoration of Schedule 8 Prescribing Authority</u> .....	15
<u>Medical Council Policy: Return of Schedule 8 Prescribing Authority</u> .....	16
<u>Alternative methods of analgesia</u> .....	16
<u>Coping without dangerous drugs in the workplace</u> .....	16
<u>Schedule 4 Appendix D - Special consideration</u> .....	16
<u>Illicit Drugs</u> .....	17

## **SECTION THREE**

<b><u>USEFUL INFORMATION</u></b> .....	<b>18</b>
<u>Contact details - support services</u> .....	18
<u>Contact details - professional groups</u> .....	19
<u>Contact details - Medical Council of NSW</u> .....	20
<u>Map of Gladesville Hospital</u> .....	21

## **SECTION FOUR:**

<b><u>POLICIES, PROCEDURES AND RESOURCES</u></b> .....	<b>22</b>
--	-----------

---

**SECTION ONE:****THE HEALTH PROGRAM*****Overview and definitions***

The Health Program is designed to be non-disciplinary and non-adversarial and is conducted under the provisions of the Health Practitioner Regulation National Law (NSW) (the National Law). It is aimed at protecting the public while allowing participants with health issues to remain active in medical practice or training.

The Program is based on notifications by the doctor themselves or from third parties. It manages practitioners who are suffering from psychiatric illness, problems with the abuse of alcohol or the self-administration of addictive drugs and occasionally, physical illness. Psychiatric illness and drug and alcohol abuse are of greatest concern to the Council.

**What constitutes impairment?**

Impairment has a specific, statutory definition in the National Law as follows;

*impairment*, in relation to a person, means the person has a physical or mental impairment, disability, condition or disorder (including substance abuse or dependence) that detrimentally affects or is likely to detrimentally affect—

- (a) for a registered health practitioner or an applicant for registration in a health profession, the person's capacity to practise the profession; or
- (b) for a student, the student's capacity to undertake clinical training—
  - (i) as part of the approved program of study in which the student is enrolled; or
  - (ii) arranged by an education provider.

**What about medical students?**

The impairment provisions of the National Law also apply to medical students. The primary objective of the Program as it applies to medical students is public protection. The Council also aims to ensure that the student's transition into the medical workforce is supported.

Under the provisions of the National Law, the Council may require a medical student to undergo a medical examination where it has concerns that the student may suffer from an impairment. In the case of medical practitioners, registration conditions are entered into voluntarily. The significant difference in the case of medical students is that conditions can be imposed by the Council. The Impaired Registrants Panel is required to consider whether it is in the interest of the public to impose conditions on the student undertaking clinical studies, or to prohibit the student from undertaking clinical studies.

---

## ***The Process***

### **What can you expect if The Medical Council receives a notification about you?**

If you have notified yourself or the Council has received a notification about you, the Council first consults with the Health Care Complaints Commission (HCCC) to ensure that the notification does not raise issues more appropriately dealt with in the disciplinary pathway.

If no issue of professional conduct is raised by HCCC, the notification is referred to the Council for management under the Health Program and the HCCC takes no further part.

Following referral, the Council's Case Management Committee considers the notification, and if further action is required, will require an independent assessment of your health status by a Council Directed Health Assessor (Health Assessor).

### **The role of the medical indemnity insurer and the importance of seeking support**

If the Council contacts you about a notification, you are encouraged to ring your medical indemnity insurer for support and advice. Your insurer is experienced in complaints management and will help you through the process.

It is important to seek personal support if you need it. Talk with your family or a trusted friend about what is happening and how you are feeling, consult with your general practitioner, and consider using support services for information and assistance such as the [Doctor's Health Advisory Service](#), the [Medical Benevolent Association of NSW](#), [beyondblue](#) and [Lifeline](#).

### **What happens if you are referred for an assessment by a Health Assessor?**

A Health Assessor is a registered health practitioner appointed by the Council for their skill in a particular specialty (or sub-specialty). Their role is to make an independent assessment about the extent and nature of your impairment and whether participation in the Health Program is appropriate.

Prior to the initial appointment, the Council will provide the Health Assessor with copies of any information that is relevant to the notification. Health Assessors are aware of the Council's responsibility for public protection and will recommend action to the Council on that basis. The assessment is medico-legal rather than a therapeutic consultation. It is very important that you are candid with the Health Assessor and provide accurate and complete information at the appointment.

The Council will meet the cost of the assessment and future consultations as required.

If you enter the Health Program, you will generally see the same Health Assessor for periodic review and oversight of your progress. These interviews take place at the request of the Council or in compliance with a condition on your registration. If you require clarification of any aspect of your participation in the Program, please contact the Council Secretariat in the first instance, rather than the Health Assessor.

The Council considers the Health Assessor's report and recommendations in deciding whether to convene an Impaired Registrants Panel (IRP or Panel). In the event that the concerns raised in the health notification do not require the involvement of the Council no further action will be taken.

---

### **What if you cannot attend the appointment with the Health Assessor?**

It is important that you let the Council know as soon as possible if you have a good reason why you cannot attend so that the appointment can be changed.

Failure to attend an assessment without alerting the Council will be viewed with concern. If you fail to attend for medical examination reasonably requested by the Council, then the National Law provides that the failure may constitute evidence that you do not have sufficient physical and mental capacity to practise the profession.

For medical students, failure to undergo the examination as required by the Council may result in your registration being suspended until you undergo the examination.

### **What is an Impaired Registrants Panel (IRP)?**

An IRP is an inquiry convened under Part 8 of the National Law and has the responsibility of inquiring into impairment matters that come to the Council's attention.

When an IRP is convened, you are notified and asked to attend. It is important to seek advice and support from your medical indemnity insurer if you are asked to attend an IRP. Your insurer can help you prepare for the IRP and accompany you on the day. Alternatively, you may bring another advisor or a support person, who may be a family member or friend.

The Panel consists of two or three members appointed by the Council and may include both doctors and lay members who are experienced in working with practitioners experiencing health problems. IRPs are generally held at the Council premises and last approximately three to five hours.

At the IRP, the Panel will talk to you about the nature and extent of your health problem and its impact on your practice of medicine. Toward the end of the hearing, the Panel is likely to adjourn to discuss the matter. The Panel may do any one or more of the following:

- (a) counsel you or recommend that you undertake specified counselling;
- (b) recommend that you agree to conditions being placed on your registration;
- (c) recommend that you are suspended from practising medicine for a specified period;
- (d) make recommendations to the Council as to any action that the Panel considers should be taken in relation to the matter.

Where a Panel forms an opinion that conditions are required, it will formulate the conditions before reconvening the hearing. On return from its adjournment, the Panel will explain to you the implications of their recommendations and the reasons behind it. If conditions or suspension are proposed, this will be discussed with you and you will be given an opportunity to respond.

Any recommendations by the Panel with respect to conditions will form part of a document known as a *Voluntary Agreement to Conditions of Registration*. This document sets out your responsibilities under the conditions as well as your rights in dealing with the Council. It is important that you read and fully understand this document before you sign it. Questions regarding conditions or suspension should be addressed to the Panel.

Under the National Law, conditions arising from an IRP can only be imposed with your voluntary agreement. However, the National Law provides that should you fail to agree, the Council may recommend that the matter which was the subject of the initial referral, be dealt with as a complaint against you. If you fail to attend an IRP, the Council may hold a hearing in your absence and make findings as deemed appropriate.

---

Where the Panel believes your impairment is of such concern that you should not practise, it may recommend to the Council that you be suspended from the practice of medicine for a specified period. This is to ensure that you receive urgent treatment and do not treat patients during that time. In that case, you would be asked to sign an acknowledgment of that notice. The Panel may also recommend actions that will assist in the Council's subsequent decision to lift the suspension. The Inquiry will then adjourn, reconvening prior to the expiry of the specified suspension period to examine any new information obtained in the meantime. Where the Panel's concern has eased sufficiently, you will be asked to agree to conditions being imposed upon your registration and will be permitted to return to work.

Unlike conditions, suspension may be imposed on a practitioner without agreement where the Panel feels that it is warranted, and the Council endorses the Panel's recommendation. By virtue of the National Registration Scheme, registration conditions or suspension arising from the Council's Health Program are applicable throughout Australia.

### **What happens after an IRP?**

The Panel will prepare a report following the IRP detailing the content of the Inquiry and its recommendations. The report is then considered and endorsed by the Council's Case Management Committee or its delegates.

Copies of the IRP report are forwarded to you, your treating practitioners, and Health Assessor and any other parties specified by the Panel or you.

### **Will my employers be notified?**

The National Law requires that the practitioner's employers are advised of the conditions on their registration by the National Board. After informing the National Board of the conditions, the Council will write to your employer informing them of all conditions on your registration. The Council exercises as much discretion as possible in the provision of sensitive information regarding your health to employers.

If the Panel wishes to be more directive regarding the provision of information to particular individuals, they may recommend conditions as appropriate.

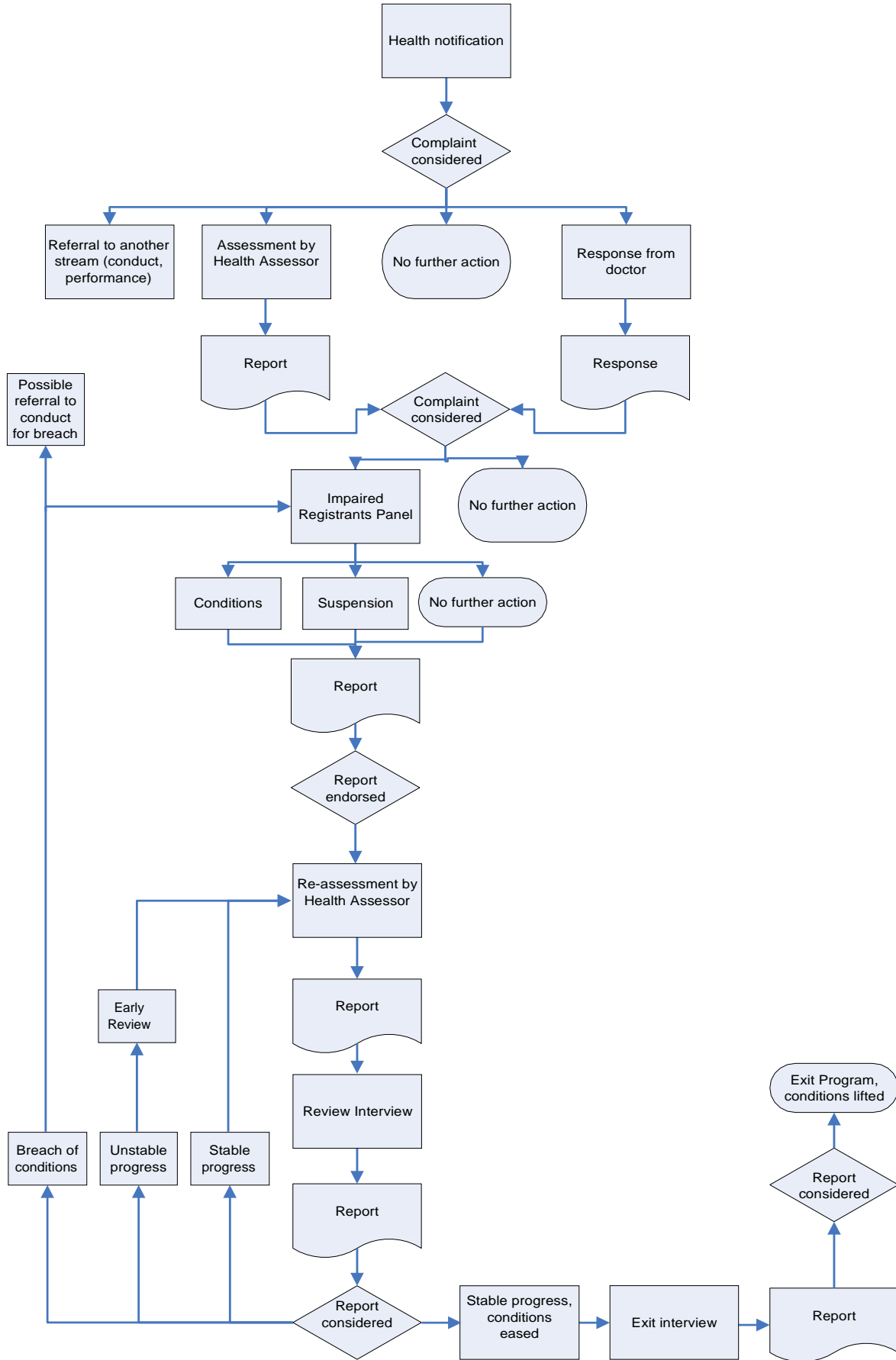
The Council has found the majority of employers to be supportive and positive in their attitudes to doctors who are experiencing health problems. In the Council's experience, registration conditions as a result of health problems have seldom been an obstacle to appropriate employment.

### **Urgent Action Pursuant to Section 150 of the National Law**

The Council may resolve to convene proceedings under section 150 of the Health Practitioner Regulation National Law (NSW) if at any time the Council is satisfied it is appropriate to do so for the protection of the health or safety of any person or persons (whether or not a particular person or persons) or if satisfied the action is otherwise in the public interest.

Such proceedings are convened promptly and are heard by two or three delegates appointed by the Council. The purpose of the proceedings is to decide whether further action is required to ensure the public is protected. The proceedings can impose conditions, suspend your registration, refer a complaint to the HCCC, recommend a subsequent Impaired Registrants Panel Inquiry hear the matter, or take no further action.

A flow chart of the Health Program's process is included on the following page to assist you in understanding the Council's processes.





---

## ***After an IRP: The Monitoring Program***

### **How does the Monitoring Program work?**

The Council monitors your progress through reports received from Health Assessors, Council Review Interviews and your compliance with the conditions on your registration.

Generally, monitoring occurs over a period of several years with a gradual easing of conditions until the Council is satisfied that you no longer require conditions. While this may be difficult for participants, it is important to appreciate that the Council requires objective evidence of your recovery and also receives early warning of any deterioration in your health status.

Conditions can be categorised into two basic types. They are:

1. Conditions that protect the public through a restriction in the scope or extent of your practice (e.g. withdrawal of Schedule 8 prescribing rights, supervision). These conditions are available on the public register;
2. Conditions relating to improving your health (e.g. maintaining a relationship with a treating psychiatrist), and conditions providing a monitoring framework (e.g. attending a Council Review Interview). These conditions are generally referred to but not specified on the public register.

It is the Council's expectation that you will eventually exit the Program when you can demonstrate that you have complied with the conditions on your registration, made the necessary changes to your lifestyle, developed good support networks and recognised the value of early intervention and treatment of your illness.

### **Subsequent visits to a Council Directed Health Assessor (Health Assessor)**

The Health Assessor's role is to provide the Medical Council of NSW with an independent assessment of your health without intruding on the therapeutic relationship between you and your treating practitioners. Attendance with the Health Assessor also provides you with an opportunity to discuss your progress, any difficulties you may be experiencing and your conditions of registration.

The Health Assessor will prepare a report that will be provided for the information of Reviewers prior to the Council Review Interview. Any recommendations the Health Assessor makes regarding your health or conditions will be discussed at this time.

It is your responsibility to make the required appointment with the Health Assessor prior to a Council Review Interview. Generally, your appointment with the Health Assessor should occur approximately four weeks before the Council Review Interview to allow enough time for the report to be received by the Council. The report is an essential component of the Council Review Interview process. It is in your interests to ensure that you attend early enough so the report is received by the Council.

Whilst it is your responsibility to arrange appointments with the Health Assessor, the Council will meet the professional fees. Failure to attend the Health Assessor's appointment prior to your Council Review Interview will be viewed as a breach of your conditions.

If there is a reason why you cannot attend the Health Assessor within the specified time frame, please provide the Council with a written explanation. Please be aware the Council does not consider work commitments to be an acceptable explanation for failure to attend your appointment.

## **Treating Practitioners**

The Council generally requires you to maintain a relationship with a treating general practitioner (GP). This relationship is essential in demonstrating that you are managing your health appropriately rather than self-treating. A relationship with a GP provides a central point from which your health care can be coordinated and removes the need to self-prescribe and treat.

The frequency of attendance for treatment is at the discretion of you and your GP.

Most Health Program participants will also be required to attend for ongoing treatment with a relevant practitioner of their choice who has recognised expertise to provide effective treatment. This may be a psychiatrist, a specialist in drug and alcohol problems, a physician or a number of such treating practitioners.

You may already be receiving treatment from a specialist. In that case, the Health Program will simply formalise this existing arrangement and provide your treating practitioner with relevant information.

If you have not entered treatment, the Council will require details of the name and address of the treating practitioner of your choice as soon as practicable. This will enable the Council to forward any relevant documents to the treating practitioner.

The Council will not nominate a treating doctor for you and usually does not require any form of regular reporting from the treating doctor. The frequency of treatment should be at the discretion of you and your treating practitioners. This model has been developed so as not to intrude on the therapeutic relationship between you and your treating practitioners.

The Council does, however, require you to authorise your treating doctors to inform the Council of a failure to attend for treatment, termination of treatment or if there has been a significant deterioration in your health status. This is an important precautionary measure in case there is a lack of insight on your behalf due to a recurrence of an illness or a failure to take responsibility for improving your health.

## **The Council Review Interview**

The Council Review Interview is an essential component of the Health Program. It provides the Council with an opportunity to review your progress and compliance with your conditions, discuss present circumstances, future options, and make recommendations on whether to ease or maintain your conditions.

The Council Review Interview also provides you with an opportunity to clarify any matters relating to your conditions, to relay any requests to the Council's Case Management Committee and to demonstrate your continued commitment to your rehabilitation.

Council Review Interviews are generally held at the Council and are of approximately one-hour duration. The length of time between interviews will vary depending on your state of health, progress and the level of compliance with conditions. Generally, interviews are held within six months of your initial attendance at the Council and may be scheduled more frequently if the Council is of the view that this is necessary.

The Reviewers are provided with a briefing prior to the interview that contains relevant reports such as that from the Health Assessor, correspondence from you, and information relating to your involvement in any other Council processes. The briefing allows the Reviewers to familiarise themselves with your history. You will also be provided with a copy of this briefing.

The Council will write to you advising the date and time approximately six weeks in advance of the Interview. You must confirm your attendance by contacting the Council. If attendance at the time and/or date scheduled for the Council Review Interview is problematic, you should contact your Monitoring Program Officer as soon as possible to request that an alternative date be arranged. A request to change the Council Review Interview time or date will only be granted in exceptional circumstances. Work commitments are not considered to be an exceptional circumstance.

Failure to attend for the scheduled Council Review Interview without good reason will be viewed as a breach of conditions. If this occurs, you will be required to provide a written explanation for your absence which the Council will consider.

If you wish to raise a matter at a forthcoming Council Review Interview, please notify your Monitoring Program Officer in writing no less than four weeks prior to the date. The correspondence will be forwarded to the Reviewers as part of the briefing allowing them time to consider the matter.

### **Distribution of Council Review Interview Reports**

A report is prepared by the Reviewers following your attendance at the Council Review Interview. The report is then submitted to the Council's Case Management Committee for consideration and endorsement. After the Committee has endorsed the report, you will be sent a copy. It should be noted that new or altered conditions of registration do not come into effect until the Committee endorses the report. Until that time, you should continue to comply with the existing conditions of your registration. In some cases, the recommendations of the Reviewers will be noted but not endorsed by the Committee.

Copies of the reports prepared following an Impaired Registrants Panel or Council Review Interview are forwarded to your treating doctor, the Health Assessor and any other practitioner that may be involved in your treatment. This is done in accordance with the conditions of your registration.

Reports may be forwarded to other parties if specified in your conditions of registration or as requested by you.

### **Exit Interviews**

The Health Assessor and Reviewers will recommend that you exit the Health Program when:

1. You have recovered and/or treatment goals have been met
2. There has been consistent compliance with conditions of registration
3. You have demonstrated long-term stability and insight regarding your health and impairment
4. You have support mechanisms and strategies in place should your health be affected in the future

Where the Council's Case Management Committee determines that exit from the Program is appropriate, you will be asked to attend an Exit Interview at the Council, generally at your next interview. The Exit Interview provides a vehicle for reflection on your time on the Program but also plays a crucial role in the Council's efforts to improve the quality and efficiency of its processes. Constructive criticism is therefore encouraged.

You will be provided with a set of questions prior to the interview. These questions will be addressed at the interview.

---

## ***Compliance with conditions***

### **Importance of complying with conditions**

Conditions are imposed to satisfy the Council that you are safe to practise medicine and require you to take responsibility for your own health. It is therefore critical that you are completely compliant with the conditions. If you fail to comply, the Council cannot be assured that you do not present a risk to the public health and safety. Appropriate action will then be taken to restore the Council's confidence. This may include action under Section 150 of the National Law.

If you are unsure of the obligation created by a condition or have difficulty complying with a condition it is important that you ask for clarification and seek assistance from your Monitoring Program Officer as soon as possible.

### **Breach of conditions**

If you fail to meet the requirements of your conditions without reasonable cause, or where you show evidence of using substances prohibited by your conditions, then the Council may view this as a breach of your conditions.

Where a breach of conditions arises primarily in the context of your health problem it will indicate to the Council that further restrictions may be necessary to ensure safe clinical practice. However, in the event of wilful, deliberate or repeated breaches, it may further indicate that you are unfit to practise medicine and that suspension may be necessary.

If a student fails to comply with conditions imposed by an order of the Council, the Council may, at the recommendation of an Impaired Registrants Panel, by order in writing, prohibit the student undertaking clinical studies or clinical placement.

### **Critical Compliance Conditions**

Occasionally, participants in the Health Program will have critical compliance orders or conditions imposed on their registration by the NSW Civil and Administrative Tribunal or a Professional Standards Committee. Should the Council receive information indicating that a participant has breached a critical compliance condition, the Council must convene proceedings pursuant to Section 150 of the National Law.

If the evidence indicates that the condition has been contravened, the participant will be suspended. The Council must also refer a complaint to the NSW Civil and Administrative Tribunal, which must cancel the registration of the participant if satisfied that a contravention of the critical compliance condition has occurred.

### **Critical Impairment Conditions**

Critical impairment conditions may be imposed on the registration of a participant by an Impaired Registrants Panel Inquiry or Section 150 proceedings. Unlike critical compliance conditions, a breach of a critical impairment condition does not automatically result in Section 150 immediate action being taken.

A breach of a critical impairment condition will result in mandatory referral to the Health Care Complaints Commission (HCCC). The HCCC and the Council will then consult to determine how the matter is to be managed and may involve investigation by the HCCC or referral of the matter to the Council for its management.

---

## **Review of Conditions**

Section 152K of the Health Practitioner Regulation National Law (NSW) provides that:

### **152K Review of conditions [NSW]**

- 1) A registered health practitioner or student who agrees to conditions being imposed on the practitioner's or student's registration, or to have the registration suspended, may by written notice to the Council ask--
  - a) that the conditions be altered or removed; or
  - b) that the suspension be terminated or shortened.
- 2) On receipt of the request, the Council must require an Impaired Registrants Panel to review the matter and give a written report to the Council on the results of its review.
- 3) If the Panel recommends that the Council refuse to alter or remove any of the conditions, or refuse to terminate or shorten the suspension, the Council may do so.
- 4) The Council must give the health practitioner or student written notice of its decision.
- 5) The Council may specify in the notice a period in which a further request by the practitioner or student under this section is not permitted.
- 6) The Council may refuse a request that the conditions be altered or removed, or that the suspension be terminated or shortened, if it is made during that period.

If you wish to request a review of your conditions (or suspension) of registration, please forward a written request to the Council.

You should state that a review is being sought under s152K of the Health Practitioner Regulation National Law (NSW) and provide clear reasons for making the request. The Council will then convene an Impaired Registrants Panel to consider the matter.

In general, the Health Program is designed to enable a gradual easing of conditions contingent on continuing compliance and improvement in your health status.

The Council Review Interview provides a mechanism for reviewing your progress. The Reviewers recommend to the Council any variation or alterations of the conditions they feel appropriate. For this reason, an Impaired Registrants Panel and subsequent Council Review Interviews will always include a condition for regular review by the Council.

---

## ***Progress in the Program***

The Medical Council of NSW adopts a non-disciplinary approach to impaired practitioners and is aware of the need to facilitate and support appropriate treatment and to provide a number of pathways for impaired practitioners. These pathways are determined by the nature of the impairment, its duration, other comorbidities and complications and the context within which the practitioner works.

The Council has set out a framework for dealing with impaired practitioners throughout the duration of their time within the program and defines parameters to be considered at each critical decision point, in order to achieve satisfactory and consistent decisions.

The critical decision points that the Council faces in relation to practitioners are notably:

1. Entry to the Program
2. Easing conditions
3. Approving employment
4. Dealing with breaches of conditions
5. Referring to the Conduct stream
6. Allowing return to work following suspension
7. Exit from the Health Program

While the Council is not directly involved in the treatment of impaired practitioners, it expects that you will seek and comply with appropriate treatment and develop a treatment plan in conjunction with your treating practitioner. In developing a treatment plan, you should consider the decision parameters outlined below.

The parameters also assist the Committee, Council and the Tribunal in their dealings with impaired practitioners.

The decision parameters are:

### **1. Nature and natural history of your illness**

It is neither feasible nor desirable to adopt a rigid, one-size-fits-all approach. Much is known about the natural history of the conditions that commonly result in a practitioner being considered impaired, and decisions should reflect this knowledge. The Council recommends that you find out about your own health issue, including its general course and best treatment.

While the Council is not directly involved in your treatment, it expects that you will seek and comply with appropriate treatment and develop a treatment plan in conjunction with your treating practitioner.

### **2. Compliance with conditions**

The dual aims of conditions are to protect the public and, where possible, to allow you to remain in the medical workforce. It is only through compliance with conditions that the Council can be assured that these objectives are met.

No consideration is given to easing any condition unless you have been fully compliant with all conditions for a period of at least 12 months.

### **3. Personal support**

Personal support and engagement with the community are recognised as positive predictors of recovery from all disorders, but particularly from addiction. They demonstrate insight on your part, significantly increase the chances of early identification of illness or relapse and provide an environment in which recovery or stabilisation can occur.

**4. Professional support**

Participants who have supportive professional relationships and work environments are much more likely to manage satisfactorily without the Council's involvement. Those that work in solo practice or are secretive about their impairment require closer supervision by the Council.

**5. Insight and motivation**

Your self-awareness and insight into your impairment and circumstances are a critical factor when considering your progress through the Health Program.

Insight is, to a large extent, the most important factor distinguishing illness from impairment. An ill doctor who is insightful and practises within their capability is not necessarily impaired. An ill doctor who lacks insight into the impact of their illness on their practice is clearly impaired and should enter or remain on the Health Program.

You are advised to familiarise yourself with those sections of the document that are relevant to your circumstance.

**Application of these decision parameters**

The decision parameters:

1. Are given explicit consideration at every critical decision point relating to a practitioner's progress through the Health Program
2. Guide Council Directed Health Assessors in their reports to the Council.
3. Guide Council Reviewers in their reports to the Committee.
4. Guide the Committee in their decision making.

---

**SECTION TWO:**

## ***Prescribing and Self-Administration of Drugs***

### **The Council's Policy**

Schedule 8 and Schedule 4D Prescribing Authorities are available to all registered medical practitioners and do not relate in any way to their need to prescribe S8 or S4D drugs.

As a result of Impaired Registrants Panel or a Council Review Interview, it may be recommended that authority to prescribe, possess, supply or administer drugs of addiction and/or restricted drugs may be withdrawn, partially withdrawn or restored.

Both the Medical Council of NSW and the Pharmaceutical Regulatory Unit (PRU) may be involved with the restriction, withdrawal and restoration of these authorities. Under the Poisons and Therapeutic Goods Act, the withdrawal and restoration of Schedule 8 authorities are gazetted and therefore public knowledge. In contrast, restrictions to an authority although legally enforceable are confidential between PRU, the practitioner and the Council.

Practitioners may have their Schedule 8 prescribing authority withdrawn by PRU on the basis of their prescribing behaviour or because of self-administration. Practitioners may also elect to restrict their authority because of perceived problems with access or the demands of their patients.

Where a condition is imposed which requires that a practitioner's prescribing authority be withdrawn, **the practitioner must approach PRU immediately and voluntarily relinquish their authority**. Practitioners will be required to inform PRU of the circumstances that gave rise to the request for the withdrawal. The Council will seek confirmation from PRU that this has occurred within a short time frame.

Practitioners who are found to be self-administering S8 or S4D drugs are managed through the Health Program. The doctor generally has a condition on their registration which withdraws their authority to prescribe and administer Schedule 8 drugs.

In addition, conditions precluding prescription for self-medication and self-administration of drugs are imposed. These conditions are monitored through the Council's Drug Screening Policy and Participant Procedure.

The Council is aware that addiction problems are often life-long and that many practitioners feel that it is easier for them to not have to deal with situations where addictive drugs are available. The decision to return a Prescribing Authority therefore must recognise the balance between the clinical needs of the practitioner's patients and the best interests of the practitioner.

### **Restoration of Schedule 8 Prescribing Authority**

The Council can only make a recommendation for action under the Poisons Act; the decision to act on the recommendation remains with PRU. Although the Council will write to PRU it will be necessary for you to apply to the PRU directly for a variation of the drug authority.

As participants pass through the Health Program with clear drug screens, there is usually an expectation that their Schedule 8 Authority will be returned. This expectation appears to relate to:

- a belief that return of Schedule 8 Authority is their right
- a belief that return of Schedule 8 Authority is a reward for their compliance and rehabilitation
- a belief that return of Schedule 8 Authority marks the end of an unhappy chapter in



- their career with the restoration of 'clean' registration
- real or perceived need.

### **Medical Council Policy: Return of Schedule 8 Prescribing Authority**

1. Unless there is a demonstrable need for the return of Schedule 8 Authority, it will be withheld, or limited to prescribing oral Schedule 8 drugs. In some circumstances, it may be appropriate to limit authority to prescribing but not supplying, possessing or administering Schedule 8 drugs. It is still possible to have full registration in this case.
2. Full or partial restoration of Schedule 8 Prescribing Authority will only be considered after the practitioner has shown full compliance with conditions and the Council's drug screening program. This usually required a 18 month period of compliance with thrice weekly urine drug screening followed by 12 month period of random urine drug screening. This must be in association with full compliance with all other conditions of registration.
3. Consideration will be given to returning full or partial Schedule 8 Prescribing Authority on the request of the practitioner concerned. Practitioners should be clear about their reasons for seeking access to Schedule 8 drugs and be prepared to explain these reasons to the Council.
4. Practitioners may be required to undertake a course approved by the Council on analgesic prescribing and demonstrate changes in prescribing behaviour prior to restoration of Schedule 8 Prescribing Authority. Even if not required, both these courses are highly recommended.
5. Practitioners who feel that they do not require or prefer not to have their Schedule 8 Prescribing Authority returned may nevertheless be concerned about regaining unconditional registration.

A participant can exit the Health Program with all conditions lifted while their Schedule 8 Prescribing Authority remains fully or partially withdrawn by PRU.

PRU will seek the Medical Council's view of any subsequent application to restore Schedule 8 Prescribing Authority. The Council will base its recommendation on the participant's history with the Council, compliance with conditions, their involvement in other Council processes and their stated reasons for seeking restoration of their authority. PRU will be the final decisions makers in relation to whether an authority is restored.

### **Alternative methods of analgesia**

Participants who have had their prescribing authority withdrawn or restricted should familiarise themselves with current prescribing guidelines. Narcotic analgesia may often be avoided by prescribing according to accepted guidelines for pain management. If you are in this situation, you are advised to take steps to inform yourself about current best practice in prescribing.

### **Coping without dangerous drugs in the workplace**

Participants are advised to enter into a cooperative arrangement with a colleague, or transfer the care of affected patients, where necessary. Under no circumstance should a participant possess, prescribe or administer Schedule 8 or Schedule 4 Appendix D drugs where their authority to do so has been withdrawn.

---

**Schedule 4 Appendix D - Special consideration**

It is the Council's policy that where Panels (or another Hearing constituted by the Council) considers it unacceptable for a practitioner to maintain prescribing rights of Schedule 4D drugs, those rights should be withdrawn through PRU.

The Council does, however, recognise that the Schedule 4D category of drugs includes substances that have a variety of beneficial therapeutic uses. Should a practitioner require access to prescribe, possess or administer specific drugs included in Schedule 4D for the continuation of their practice, they should apply in writing to the Council for support to PRU for the return their authority.

Support will be forthcoming from the Council only in the event that the application is reasonable and unlikely to place either practitioner's or the public's health and safety at risk.

**Illicit Drugs**

In addition to the abuse and self-administration of prescription drugs, practitioners using and abusing illicit drugs often come to the notice of the Council.

The condition prohibiting the self-administration of drugs prohibits not only the self-administration of prescription drugs, but also the self-administration of any illicit substance or street drug. These substances are listed in Schedule 1 of the Drug Misuse and Trafficking Act. The schedule includes marijuana, cocaine, amphetamines (including ecstasy), heroin and other illicit drug

---

**SECTION THREE:*****USEFUL INFORMATION*****Contact Details - Support Services****Doctors Health Advisory Service**

The Doctors Health Advisory Service is a confidential 24 hour referral and advice and support service for medical practitioners experiencing problems with their health.

Website: <http://www.dhas.org.au/>

Address: Level 2, 69 Christie Street, ST LEONARDS 2065

Telephone: (02) 9437 6552

**The Northside Group**

The Doctors in Recovery Group meets at 8pm every Monday night (excepting public holidays). It convenes in the day patient centre.

Website: <https://www.northsidegroup.com.au/>

Address: Northside Group

(inpatient and day programs located at St Leonards Clinic and Wentworthville Clinic)

Telephone: (02) 9433 3555 (St Leonards)  
(02) 8833 2222 (Wentworthville)

**Alcoholics Anonymous**

Website: <http://www.aa.org.au/>

Address: National Office of AA 48 Firth Street, ARNCLIFFE NSW 2205

Telephone: 1300 222 222

**Medical Benevolent Association**

The Medical Benevolent Association (MBA) is a not for profit organisation providing emotional and financial support to Medical Practitioner's and their families in time of distress. The MBA employs a trained social worker to act as an adviser to Medical Practitioners.

Website: [www.mbansw.org.au](http://www.mbansw.org.au)

Address: The Medical Benevolent Association,  
Level 6, 69 Christie Street ST LEONARD NSW 2065

Telephone: (02) 9987 0504

---

## Contact Details – Professional Groups

### **Health Care Complaints Commission**

The Commission deals with complaints about all health services and providers in NSW.

**Website:** <https://www.hccc.nsw.gov.au/>

**Mailing Address:** Level 12, 323 Castlereagh Street (corner of Hay St)  
SYDNEY NSW 2000

**Telephone:** 02 9219 7444

### **Australian Health Practitioner Regulation Agency**

Responsible for registration of medical practitioners in Australia

**Website:** <https://www.ahpra.gov.au/>

**Mailing Address:** GPO BOX 9958  
MELBOURNE VIC 3001

**Telephone:** 1300 419 495

### **Pharmaceutical Regulatory Unit – Department of Health**

Responsible for all drug prescribing – including Schedule 8 & Schedule 4D prescribing authorities.

**Website:** <https://www.health.nsw.gov.au/pharmaceutical/Pages/about-us.asp>

**Mailing Address:** Locked Bag 2030  
St LEONARDS NSW 15902059

**Telephone:** (02) 9391 9944

**Email:** [MOH-PharmaceuticalServices@health.nsw.gov.au](mailto:MOH-PharmaceuticalServices@health.nsw.gov.au)

Pharmaceutical Regulatory Unit, *Drugs of Addiction (Schedule 8)* [online], available from:

<https://www.health.nsw.gov.au/pharmaceutical/Pages/drugs-of-addiction-sch8.aspx>

Pharmaceutical Services, *Prescribed Restricted Substances (Schedule 4 Appendix D drugs)* [online], available from:

<https://www.health.nsw.gov.au/pharmaceutical/Pages/sch4d.aspx>

### **Good Medical Practice: A Code of Conduct for Doctors in Australia**

To access the Code of Conduct, please see the Medical Board of Australia website [www.medicalboard.gov.au](http://www.medicalboard.gov.au)

## Contact Details - Medical Council of New South Wales

Contacts: *Principal, Monitoring*  
(02) 9879 2200

Street address: Building 45  
Gladesville Hospital Grounds Off Punt Road  
Gladesville NSW

Postal address: PO Box 104  
Gladesville NSW 1675

Telephone: (02) 9879 2200  
Facsimile: (02) 9816 5307

E-mail: [mcnsw@mcnsw.org.au](mailto:mcnsw@mcnsw.org.au)

Office hours: 9.00am to 5.00pm  
Monday to Friday (excluding Public Holidays)

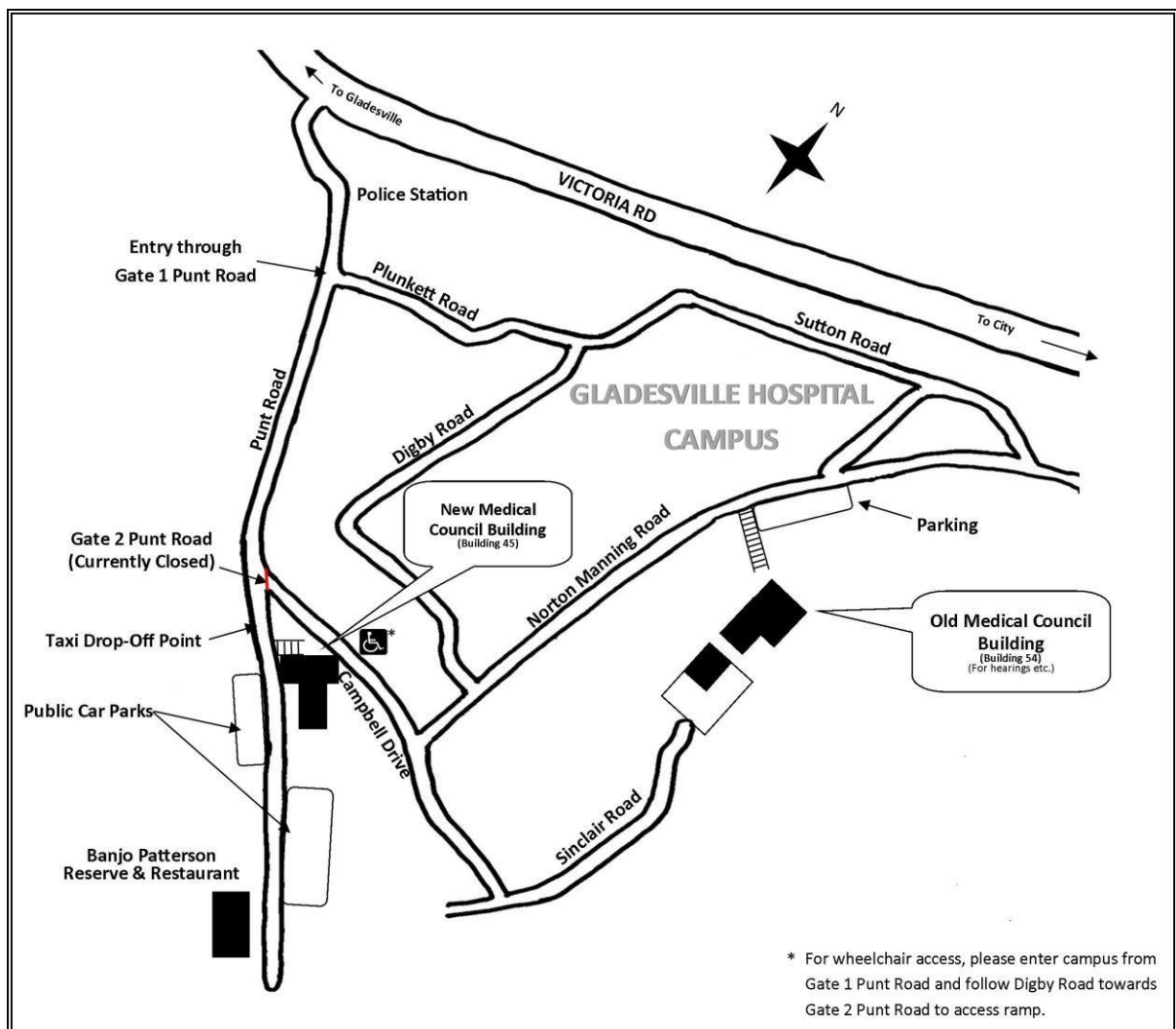
## Map of Gladesville Hospital

The venue of each hearing is detailed in the correspondence forwarded prior to the hearing.

### Public Transport

There are buses operating from the city to the Gladesville Hospital Grounds - via Victoria Road.

For bus routes and timetables please see <https://transportnsw.info/>



**SECTION FOUR:**

***POLICIES, PROCEDURES AND RESOURCES***

1. [Drug Screening Policy](#)
2. [Participant Procedure: Drug Screening](#)
3. [Alcohol Screening Policy](#)
4. [Participant Procedure: Breath-testing for alcohol](#)
5. [Supervisor Procedure: Breath-testing for alcohol](#)
6. [Participant Procedure: EtG screening](#)
7. [Participant Procedure: CDT screening](#)
8. [Compliance Policy – Supervision](#)
9. [Supervisor Approval Position Statement](#)
10. [Health Practitioner Regulation National Law \(NSW\)](#)