

### Chronology - Health Rights Commission and Mrs Vicki Lester

1. At 11.04 am on 21 February 2005 Mrs Lester lodged a telephone complaint with the Health Rights Commission. She spoke with HRC Intake Officer, Ms Susan McAnany. Mrs Lester relayed a history of having a hysterectomy 12 years ago and a laparoscopy undertaken by Dr Patel at Bundaberg in September 2003, following which surgery she ended up with a staph infection and multiple abscesses. She detailed ongoing complications and subsequent treatment at Bundaberg Base Hospital following this surgery as well as the referral by her general practitioner to another public hospital for surgery. She expressed concern that she had presented to Bundaberg Base Hospital 4 times in the last week and despite having been informed that they needed to operate immediately, was repeatedly discharged. She also expressed concern about being placed with the original surgical team of Dr Patel at Bundaberg despite having requested to be placed under the care of another team of surgeons.  
  
The call lasted approximately 60 minutes. Mrs Lester was obviously upset. Ms McAnany offered to contact the Hospital on her behalf to relay her concern that she be placed under the care of another team of surgeons. Mrs Lester agreed.
2. Ms McAnany left a message for Dr Keating, the Director of Medical Services, to return her call. At 1.49pm on 21 February 2005 Dr Keating returned the call. Ms McAnany advised Dr Keating that Mrs Lester had contacted the HRC in relation to a complaint about the health service she had received under the surgical team of Dr Patel and that because of her treatment and the complications, she had lost confidence in Dr Patel and his team. Ms McAnany advised Dr Keating that Mrs Lester had asked on a number of occasions to be changed to another surgical team. Dr Keating advised Ms McAnany that due to the complicated nature of a person's condition it may not be in the best interests of the person to have the specialist changed. Ms McAnany advised Dr Keating that the HRC was an independent body which attempted to resolve complaint issues as informally as possible and that the HRC would direct Mrs Lester to write a letter of complaint to the Hospital detailing her concerns. Dr Keating advised that Dr Patel was currently on 2 weeks holiday, however he would look into the matter.
3. At 2.55pm on 21 February 2005 Ms McAnany telephoned Mrs Lester. She advised Mrs Lester that she had spoken with Mr Keating the Director of Medical Services and that he had agreed to review her case, however Dr Patel was currently on 2 weeks leave. Ms McAnany advised Mrs Lester of direct resolution (that is, in the first instance complainants should forward their complaint to the health service provider and attempt to resolve their concerns directly with their provider), and asked Mrs Lester to contact the Commission if further clarification was required. Ms McAnany does not recall saying and does not believe she said that Dr Patel had "suddenly gone on holidays" for 2 weeks. Ms McAnany may have expressed frustration to the effect that when you try to sort things out, people are away. However, in light of the fact that Dr Patel was absent for 2 weeks, this enabled Mrs Lester the opportunity to formalise with the hospital her matters of complaint and her concern that she not be operated on by the Patel surgical team.
4. On 7 March 2005 Ms McAnany returned a telephone call from Mrs Lester. Mrs Lester advised that she had forwarded a letter of complaint to the hospital 10 days ago and had not received any response. She advised that she would forward a copy of the letter of complaint to the HRC. Ms McAnany advised that the HRC would not take any action until the provider had a reasonable opportunity to respond. Typically the HRC allow public hospitals approximately one month from receipt of a patient complaint in which to thoroughly investigate the matter of the complaint and provide a full response. It is possible that Ms McAnany said words to the effect that as the hospital had only received the complaint 10 days ago, they should be allowed another 3 weeks in which to respond.

Mrs Lester also advised that she currently had a new general practitioner, Dr Gills, who had just returned to practice and had previously cared for her. Dr Gills had said that he did not want her to go to Bundaberg Hospital for surgery as they did not have the necessary expertise, and that she would need to go to Brisbane for further surgery. Mrs Lester also advised that she was concerned about ending up in Bundaberg Hospital and being treated by the same surgeon (Dr Patel). Ms McAnany said to Mrs Lester that she (Mrs Lester) had informed the hospital in writing that she no longer wished for Dr Patel to care for her and that she (Ms McAnany) had notified Dr Keating of Mrs Lester's request not to have that surgeon care for her in the future. Ms McAnany advised Mrs Lester that she should again inform the hospital of this in the event she was admitted. Ms McAnany also advised Mrs Lester to have her general practitioner (Dr Gills) contact the hospital and advise them of Mrs Lester's wishes.

5. Ms McAnany denies saying to Mrs Lester that because she was a public patient, she could not avoid being treated by Dr Patel. Such a statement is inconsistent with the various steps taken and recommended by Ms McAnany to inform the hospital of Mrs Lester's concern that she be treated by a different surgical team. Such a statement is also inconsistent with Ms McAnany's knowledge that public patients are entitled to request that they not be treated by a specific doctor or doctors.
6. Ms McAnany was a clinical nurse of 17 years experience prior to commencing with the Health Rights Commission as an Intake Officer in March 2004. She was during the period 1988 - 2004 a clinical nurse in neo-natal intensive care at the Mater Mothers Hospital. The intensive care ward at that hospital deals with both public and private patients. Ms McAnany is well aware from her experience as a clinical nurse that whilst as a public patient you are not able to choose your doctors, you are entitled to request that you are not treated by specific doctors.
7. On 4 April 2005 the HRC received, under cover of a letter from Mrs Lester dated 31 March 2005, a copy of Mrs Lester's letter of complaint to Dr Keating (undated but apparently sent on or about 25 February 2005).
8. At 3.30pm on 11 April 2005 Ms McAnany telephoned Dr Keating and advised that Mrs Lester had not received a response to her complaint. Dr Keating advised that her case was very complicated however, a response would be provided. Ms McAnany asked Dr Keating how long he would require. Dr Keating indicated within the month. Ms McAnany has no recollection of Dr Keating saying that he was "flat out" and had not had time to investigate the complaint fully, but he may have done so.
9. Following this conversation, Ms McAnany telephoned Mrs Lester on 11 April 2005. She advised Mrs Lester that Dr Keating had said he would provide a written response to the complaint, however, as the matter was complicated, he would require more time and that she should have a response within the month. Ms McAnany advised Mrs Lester to contact HRC if she did not obtain a response, and asked Mrs Lester to obtain a copy of her medical records from Bundaberg and Rockhampton Hospitals.
10. Shortly after 11 April 2004 the HRC made a decision to place Mrs Lester's complaint in assessment. On 14 April 2005 Mrs McAnany telephoned Mrs Lester to advise that her complaint would be progressed to assessment and that Ms McAnany would forward to Mrs Lester an authority for release of information to be signed and returned to HRC. Mrs Lester asked if she had to wait for a response from the hospital. Ms McAnany advised Mrs Lester that the hospital would be asked to provide a response directly to the HRC and that another officer would contact Mrs Lester shortly in relation to her complaint, it having progressed to the formal assessment stage.
11. Ms McAnany denies having said in this (or any other) conversation "I will just tell you quietly, he's denying it". At the stage of Ms McAnany's involvement, all that the HRC had received was a copy of Mrs Lester's written complaint to Dr Keating and Dr Keating's advice that the

matter was complex and that he would require additional time in which to respond. The complaint traversed a range of issues and events in relation to Mrs Lester's dealings with Bundaberg Base Hospital and Dr Keating had not, to that time, provided any response to those issues or events.

12. On 14 April 2005 Ms McAnany wrote to Mrs Lester enclosing an authority for release of information as to her medical treatment and for access to her medical records. A signed authority dated 26 April 2005 was received by the HRC from Mrs Lester on 28 April 2005.

Since that time Ms McAnany has had no further involvement in the matter, as it has proceeded through the HRC's assessment process.