

QUEENSLAND

COMMISSIONS OF INQUIRY ACT 1950

BUNDABERG HOSPITAL COMMISSION OF INQUIRY

STATEMENT OF DR JOHN GREGORY WAKEFIELD

- 1 I, DR JOHN GREGORY WAKEFIELD, Executive Director of Queensland Health Patient Safety Centre, Block 6, Level 5 Royal Brisbane and Women's Hospital, Herston Queensland 4029, acknowledge that this written statement by me is true to the best of my knowledge and belief.
- 2 This statement is made in response to a Notice of Allegation from the Commission dated 27 June 2005 and received by me on 28 June 2005.

Appointment as Investigator under Part 6 Health Services Act

- 3. On 14 April 2005 I was appointed by Dr Steve Buckland the Director General of Queensland Health as an investigator under section 52 of the Health Services Act ("HSA"). A copy of the appointment document is attached and marked "MPM 1" to the statement of Dr Mark Mattiussi signed 18 July 2005.
- 4 Dr Buckland also appointed Dr Mark Mattiussi, Assoc. Prof. Leonie Hobbs and Assoc. Prof. Peter Woodruff as investigators under the same instrument.
- 5 The appointment of myself and the other investigators was to conduct a review of the clinical services at Bundaberg Hospital. Our report was to be provided to Dr Buckland and to Dr Gerry Fitzgerald the Chief Health Officer
- 6. One of the powers I have as an investigator is to call for and examine documents relevant to the instrument of appointment as set out in sec 56 HSA.
- 7. One of the responsibilities I have as an investigator is the observance of the confidentiality and non disclosure of information that comes into my knowledge or possession during the course of my investigation. This duty is set out in section 57 HSA. I am not at liberty to disclose such information without the force of law or the written direction of the Director General.

Terms of Reference of Review of Clinical Services at Bundaberg Hospital.

- 8. The 'Terms of Reference' of the review were established by Dr Buckland on the advice of Dr Gerry Fitzgerald. The 'Terms of Reference' were as follows:

1. Examine the circumstances surrounding the appointment, credentialing and management of Dr Patel.
2. Review the clinical cases of Dr Patel where there has been an identified adverse outcome or where issues related to his clinical practice have been raised
3. Analyse the clinical outcomes and quality of care across all services at Bundaberg Hospital. Compare with benchmarks from other states or other like hospitals and identify any areas requiring further review to these systems.
4. Review the Risk Management framework as it relates to the provision of direct services at Bundaberg Hospital to determine its effectiveness. Make recommendations in relation to improvements to these systems.
5. Examine the way in which the Service Capability Framework has been applied at Bundaberg Hospital to determine that the scope of practice is appropriately supported by clinical services
6. Consider any other matters concerning clinical services at Bundaberg that may be referred to the review by the Director-General.
7. Should the review team identify other areas of concern outside the scope of these Terms of Reference, the Director-General is to be consulted to extend the Terms of Reference if considered appropriate.

A copy of the instrument establishing the Terms of Reference is attached and marked 'MPM 2' to the statement of Dr Mark Mattiussi signed 18 July 2005. That document also incorporates a written authorisation from Dr Buckland pursuant to section 57(4)(a)(ii) directing that Dr Geny Fitzgerald was authorised to receive information from the investigators.

### **The Bundaberg Hospital Review**

9. The Bundaberg Hospital Review Report was released by Dr Buckland to the Commission on the 29 June 2005. The Report sets out in section 2 the methodology of the review. Appendix B is a schedule of the persons interviewed by the review team. Dr Peter Miach was interviewed on the 21 April 2005 by myself, Dr Peter Woodruff and Dr. Mark Mattiussi. This interview was conducted during the course of the review team's first site visit to Bundaberg Hospital between 19 April 2005 to 22 April 2005.
10. During the course of the second site visit to Bundaberg Hospital between 9 May 2005 to 13 May 2005, I am aware that Dr Mark Mattiussi conducted a review of all of the personnel files of the senior medical staff. I did not personally conduct this review. However, Dr Mattiussi did discuss with me, his concerns arising from the review of the personnel files. As a member of the Review Team, I was aware that personnel files were being reviewed by Dr Mattiussi and believed this to be consistent with the stated Terms of Reference.

### **Allegation 1 – Access of the file of Dr Miach without authority**

11. I regarded the Terms of Reference as including in their scope an examination of Bundaberg Hospital's medical workforce. During the course of a discussion between all the review team members and Dr Buckland prior to the first site visit, he instructed us that he expected the review team to examine the qualifications

and registration status of all of the doctors at Bundaberg Hospital, to ensure there were no similar concerns as to the qualification and registration of those doctors.

12. All of the senior medical staff personnel files were reviewed. No member of the senior medical staff was singled out. I regarded the instrument of appointment and the Terms of Reference as providing the investigators with clear authority to conduct such an examination. I fully support the actions of Dr Mattiussi in the conduct of the review of the medical staff personnel files.
13. I did not act outside of the Terms of Reference, dishonestly abuse my position or violate Dr Miach's privacy without due cause or authority.

**Allegation 2 – Publication of Dr Miach's registration details**

14. I did not include the details of Dr Miach's registration in the interim report by way of a deliberate attempt to embarrass Dr Miach. The details were included to report a finding of an anomaly of Dr Miach's registration.
15. Dr Miach was interviewed before his personnel file was examined. I could not reveal to Dr Miach the subsequent finding of an anomaly with his registration due to the effect of section 57 HSA.

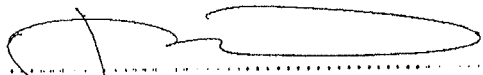
**Allegation 3 – Dr Miach's registration details to Mr Parnell**

16. I have never met nor spoken to Mr Parnell. I did not provide Mr Parnell with any information about Dr Miach.

**Allegation 4 – Interim report information to Mr Parnell**

17. I have never met nor spoken to Mr Parnell. I did not provide Mr Parnell with any information about the interim report.

Signed at Brisbane on 20 July 2005 .



DR JOHN GREGORY WAKEFIELD  
Executive Director  
Patient Safety Centre  
Queensland Health