



**Queensland
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Queensland Health

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A BRIEFING TO THE MINISTER

BRIEFING NOTE NO: BR017812

REQUESTED BY: Lorraine Bettinson

DATE: 9 January 2003

PREPARED BY: Dr John Allan, Director of Integrated Mental Health Services
Ms D Fawcett, Manager of Integrated Mental Health Services
Through
Dr A Johnson, Acting District Manager, Townsville Health
Service District

CLEARED BY: Ms V Coughlin-West, Acting Zonal Manager, Northern Zone

**DEPARTMENTAL
OFFICER ATTENDING:** N/A

DEADLINE: 13 January 2003

SUBJECT: Unqualified Practitioners

MINISTER'S COMMENTS:

Wendy Edmond MP
Minister for Health and
Minister Assisting the Premier on Womens Policy

This brief is
incomplete - while
the RANZCP opinion
is provided, the
Medical Board of
Qld position & views
must be included as
it significantly affects the
start of this issue

PROPOSE:

To update the Minister in relation to the situation where an unqualified psychiatry registrar was working within the Mental Health Unit Townsville Health Service District.

BACKGROUND:

- Dr Vincent Berg applied for appointment to a Psychiatry Registrar position within the Mental Health Unit of the Townsville Health Service District in late 1999. The appointment was for the year 2000 medical intake.
- Dr Berg stated that he was Russian born and had Russian qualifications in the field.
- He stated that he had fled Russia because of political and religious persecution and claimed to have refugee status and had been in Australia since December 1992.
- He claimed to have changed his identity since moving to Australia because of concerns for his security.
- Dr Berg was granted conditional registration by the Medical Board of Queensland to undertake approved training in psychiatry under section 17C(a) of the Medical Act 1939.
- Advice and references were also sought from Dr Petchovsky of the Gold Coast with whom Dr Berg was working in an observation role.
- Dr Berg took up a position as a Psychiatric Registrar at the Mental Health Unit of the Townsville Health Service in January 2000.
- In early August of 2000, the newly appointed Executive Director of Medical Services Dr Andrew Johnson discussed issues relating to clinical and behavioural problems relating to Dr Berg with Dr John Allan, Director of the Mental Health Unit.
- Dr Allan and Dr Johnson met with Dr Berg regarding a Performance Management Plan for Dr Berg which commenced in August 2000.
- In spite of this plan, Dr Berg's clinical and behavioural problems continued for the rest of his term and he was not re-employed in 2001.

KEY ISSUES:

- During an unrelated conversation with the Registrar of the Royal Australian and New Zealand College of Psychiatrists on Thursday 28 November 2002, it was discovered that the College had investigated Dr Berg's qualifications and had discovered that his claimed psychiatric qualifications were false. Dr Berg had identified that both his undergraduate and postgraduate qualifications were from the Voronezh State University.
- The RANZCP have provided the following advice

"Dr Berg's application for Advanced Standing/Specialist Assessment via the Australian Medical Council was considered by the Fellowships Board Training and Examination Exemptions Sub-committee on 20 September 2001. As part of the standard RANZCP assessment process, applicants' overseas psychiatric qualifications are confirmed with the relevant College/University or Authority. The Voronezh State University in Russia were contacted first by email and then by fax and post to verify Dr Berg's qualification in psychiatry. Dr Berg submitted qualifications in a name he now no longer uses, attaching a Statutory Declaration dated 1 August 2001 stating the change of name to Vincent Victor Berg.

The Voronezh State University replied informing the RANZCP that they did not produce the diploma indicated in our letter and moreover the educational program stated was not in

existence at that time. The Voronezh State University reiterated this statement again in writing after reviewing the faxed documents, adding that they were crude forgeries.

The Australian Medical Council were notified of the above on 16 October 2001 and subsequent discussions with the AMC lead the College to contact the Queensland Medical Board on 23 January 2002 about the veracity of information and documentation submitted by Dr Berg for Advanced Standing/Specialist Assessment with the RANZCP."

- The Townsville Health Service had not been previously informed of these findings.
- During the time Dr Berg was employed in Townsville he had seen patients in his capacity as a Psychiatry Registrar within the Acute Mental Health Unit, the Community Mental Health Unit, the Dual Diagnosis Unit (formerly Mosman Hall) in Charters Towers and had also seen patients in the Emergency Department through involvement with the intake assessment team.
- Upon becoming aware of this information the Townsville Health Service District developed and instituted an audit process. It was seen as imperative to ensure no patients were at clinical risk because of these concerns. The Audit was conducted by the THSD Director of Mental Health Services under the auspices of THSD Executive Director Medical Services.
- A total of 259 patients were identified as having been seen by Vincent Berg during his period of employment, ten of these resulted in Vincent Berg signing Mental Health Act documents which we have been advised remain valid as he was a registered Medical Practitioner at the time. It is believed that this is a reasonably accurate number of patients collated from a range of different sources however it is possible that a small number of clinical files and therefore patients seen by Vincent Berg may have been missed. We would estimate this to be no more than 10 patients.
- Of the 259 patients:
 - Six (6) have died – the audit did not directly attribute any of these deaths to Vincent Berg
 - Ten (10) patients have been identified as "highest priority" relating to clinical risk and assessed as a "potential serious adverse event" and require immediate clinical follow up
 - Forty (40) patients have been identified as "high priority" and will require clinical follow up, as a matter of urgency
 - Leaving 203 patients where the audit identified either there was an issue that does not affect their current position or there are no particular issues. It is not possible to guarantee that other issues do not exist for some of these patients, which are not discernible from reading clinical file notes.

Identified Risks:

- There is potential for adverse media comment when the clinical review process commences.
- Although the process has been thorough, there may be patients who have been missed in the audit process.

BENEFITS AND COSTS:

N/A

ACTIONS TAKEN/REQUIRED:

A senior Psychiatrist audited the clinical file/s of each of these 259 patients. A rating was recorded as to the clinical necessity/priority of follow up. As necessary, a second opinion from another

psychiatrist has been sought. Following this exhaustive process, it is the clinical opinion of the psychiatrists involved, that 50 patients require urgent clinical review for possible changes to their treatment.

PLANNED STRATEGY FOR CINICAL FOLLOW UP

Highest Priority and High Priority Patients:

- The 50 patients or their relative be contacted by telephone by the Director of Mental Health Services and assessed as to their relative urgency / necessity for physical follow-up, and invited to appointments with a psychiatrist as required.
- The focus of these telephone contacts will be to establish whether actual harm has occurred and whether a formal assessment is required to review treatment.
- An attempt will be made to contact all these patients over a two-week period.
- A suitable time to commence this strategy would be the week beginning 27th January 2003.

Other actions required:

Many clinical staff maintain that there exists an ethical obligation on Queensland Health to inform patients that they have been receiving care from a person whose qualifications to provide that care have been found to be invalid. This raises serious concerns about the potential for adverse public comment. Direction is sought from GMHS as to whether any of the patients subject to this audit are to be informed of the validity of Vincent Berg's claimed qualifications.

DRAFT MEDIA RELEASE:

N/A