

QUEENSLAND**COMMISSIONS OF INQUIRY ACT 1950****BUNDABERG HOSPITAL COMMISSION OF INQUIRY****STATEMENT OF ADJUNCT ASSOCIATE PROFESSOR LEONIE JOY HOBBS**

1. I, **LEONIE JOY HOBBS**, (Registered Nurse) Acting Executive Director of Women's & Newborn Services, Royal Brisbane & Women's Hospital, Herston Road, Herston Qld, 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 to the statement of Dr Mark Mattiussi dated 18 July 2005 and marked "MPM 1".
4. Dr Buckland also appointed Dr John Wakefield, Dr Mark Mattiussi 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 section 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 to a statement of Dr Mark Mattiussi and marked 'MPM 2'. That document also incorporates a written authorisation from Dr Buckland pursuant to section 57(4)(a)(ii) directing that Dr Gerry 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 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. I was not involved in the interview of Dr Peter Miach on 21 April 2005. This was conducted by Dr Mattiussi, Dr Peter Woodruff and Dr John Wakefield.

Allegation 1 – Access to of the file of Dr Miach without authority

10. I was not involved in the review of the personnel files of the senior medical staff and visiting medical officers. That review was conducted by Dr Mark Mattiussi. 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.
11. 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

12. 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 in Dr Miach's registration.

13. Dr Miach was interviewed before his personnel file was examined. I could not reveal to Dr Miach the subsequent finding of the anomaly with his registration due to the effect of section 57 HSA.

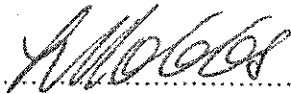
Allegation 3 – Dr Miach’s registration details to Mr Parnell

14. 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

15. 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 **19 July 2005**.



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**Adjunct Associate Professor Leonie Joy Hobbs,
A/ Executive Director Women’s & Newborn Services
Royal Brisbane & Women’s Hospital
Queensland Health**