



Off-Field Behaviour

– is a professional ever off-duty?

Part One - Medico

Our Topic is Drawn from Sport



Israel Folau mural by artist Scottie Marsh - Botany View Hotel, July 2019

‘Grossly unfair’: Burgess fumes over sanctions for drug use, intimidating Roosters rival



By Adam Feingly

Updated March 28, 2022 — 6:20pm, first published at 1:19pm



Sam Burgess has been fined \$50,000 by the NRL. PHOTOGALLERY

<https://www.smh.com.au/sport/nrl/sam-burgess-south-sydney-rabbitohs-fined-50-000-over-drugs-intimidation-incidents-20220304-p5a1w9.html>

Burgess free to play until “sexual touching” incident resolved in court

Fox Sports 28 March 2022



Dragons forward George Burgess will be eligible for selection while awaiting his day in court.

Getty



NRL SafePlay Code

- *“Demonstrate the greatest levels of respect, protecting the rights, dignity and worth of every person regardless of their gender, ability / disability, sexual orientation, cultural background or religion”*



RA Code of Conduct

- *“Not to conduct themselves in any manner, or engage in any activity, whether on or off the field, that would impair public confidence in the [...] integrity and good character of participants”*



AFL Players Code of Conduct

- *“Players must, at all times and while in public, behave in a manner which upholds and promotes the highest standards of integrity and dignity. AFL Players must not behave in any way so as to bring AFL Football, the AFL, AFL Clubs or the AFLPA into disrepute.”*

8.1 Introduction

“In professional life, doctors must display a standard of behaviour that warrants the trust and respect of the community. This includes observing and practising the principles of ethical conduct.”

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



This code was endorsed by all Australian State and Territory medical boards and the Australian Medical Council. It has been adopted by the Medical Board of Australia after careful consideration to ensure it is consistent with the Health Practitioner Regulation National Law Act 2010 (the National Law). It is issued under a JP of the National Law.



Questionable Behaviour – but not while “practicing their profession”

How is the Question Raised ?

- Complaints
- HCCC investigations
- Self notification
- Mandatory notification
- Police
- Coroner

“Off-Field” Offences



- Drive with prescribed content of alcohol (PCA) {low-, mid- and high-range}
- Possess prohibited drug
- Drive with THC, methamphetamine or ecstasy present (in saliva)
- Use a carriage service to access child pornography
- Film another person’s private parts
- Film another person engaged in a private act

Charges involving family violence { AVO / assault / aggravated assault }

Charges involving possession, registration and safekeeping of firearms

NSW's Co-Regulatory System



Chelmsford Private Hospital Royal Commission (1988-90)

Medical Board long-standing (1838) – HCCC newly conceived (1995)

All complaints managed by agreement between the two entities.

Principal reason for NSW abstaining from the National Law of 2010.

- in NSW previous Health Boards became Councils

NSW's Co-Regulatory System



(Legal)



(Medical)

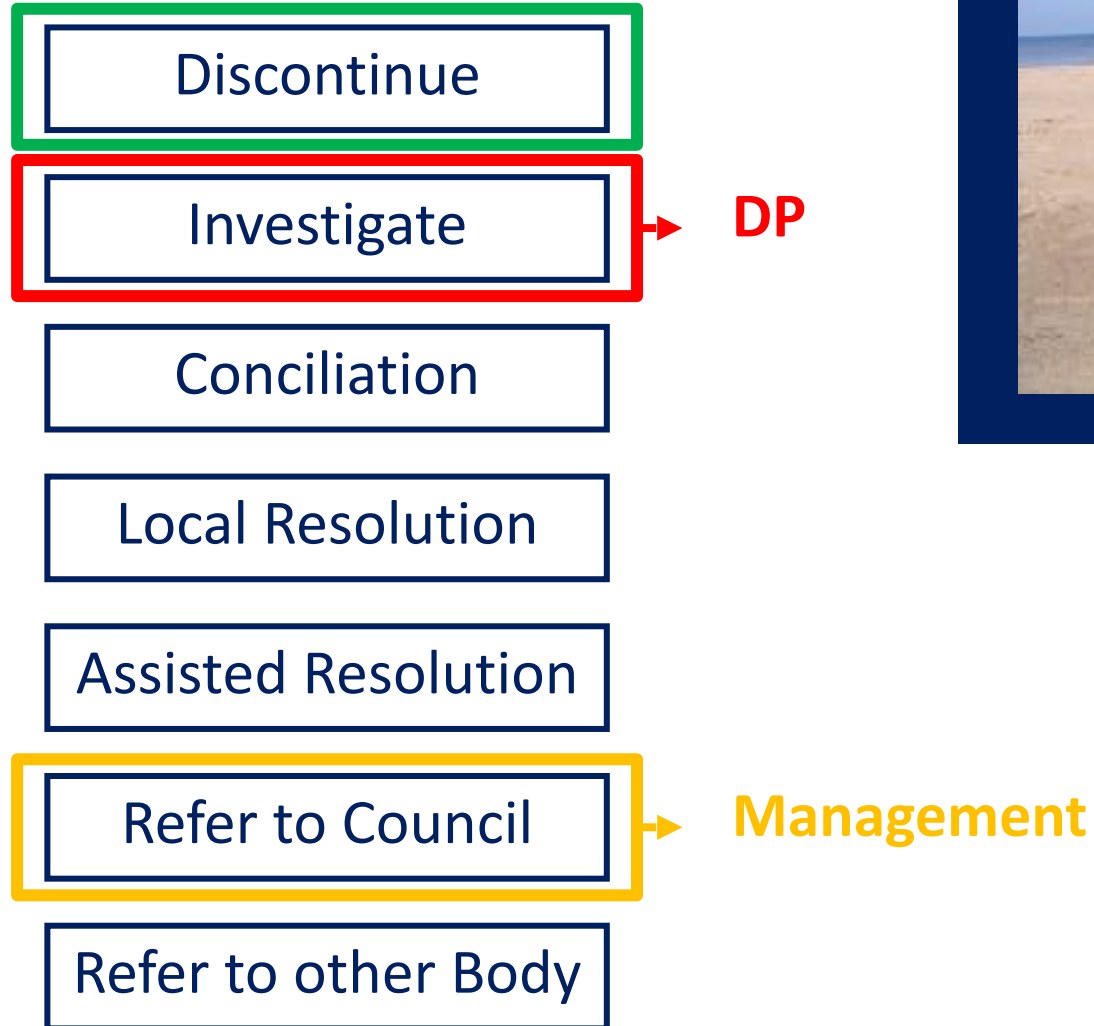


Guard dog



Guide dog

Actions Available to the HCCC



Council Functions

Health

Conduct

Performance

Immediate Action {under s150}



power to impose conditions and suspend registration



Health Practitioner Regulation National Law (NSW) No 86a of 2009
Subdivision 7 - Powers of a Council for protection of the public [NSW]

- (1) A Council must, if at any time it 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 —
 - (a) by order suspend a registered health practitioner's or student's registration; or
 - (b) by order impose on a registered health practitioner's registration the conditions relating to the practitioner's practising the health profession the Council considers appropriate; or
 - (c) by order impose on a student's registration the conditions the Council considers appropriate.



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Three pieces of fiction based on true cases ...

- Harriette
- Dick
- Tom

Is immediate action required, on what basis, and what form should it take?

Harriette

Harriette is a SRMO at St Vincent's Hospital.

Harriette self-notified the Medical Council that she has been charged with the possession of a banned substance – cocaine (a charge carrying a potential sentence of >1 year in gaol).

She was seen to get into a car that the police suspected was being used as a point-of-sale for drugs.

She was stopped shortly after she got out of the car, and found to be in possession of one gram of cocaine.



{Depositphotos}



{Wordpress}

Would your reaction be different if she was ...

a medical student ?

a senior staff specialist?



{Irish times}



{Getty Images}

Dick is an experienced consultant surgeon.

One afternoon, when he is not rostered on-call, he is in the middle of a family celebration when he is rung by an anaesthetist colleague.



{Encanto}



{Dreamtime}

She is giving an anaesthetic for one of his fellow surgeons, who is in trouble, and looking for someone to help him out of a very difficult situation.

Should he go in to help?

Dick left the family function and headed for the hospital.

Which the Council found out about when Dick was reported as having been charged with low-range PCA.



{Dreamtime}



Medico Legal Society 2022 NSW Police

Would it make a difference ...

if Dick is one of only a small cadre ?



{NSW Health}

or if he works at a tertiary referral hospital ?



{NSW Health}



{Dreamtime}

... and being so angry that he kicked his wife's dog across the room.

The dog sustained a fractured rib as a result.

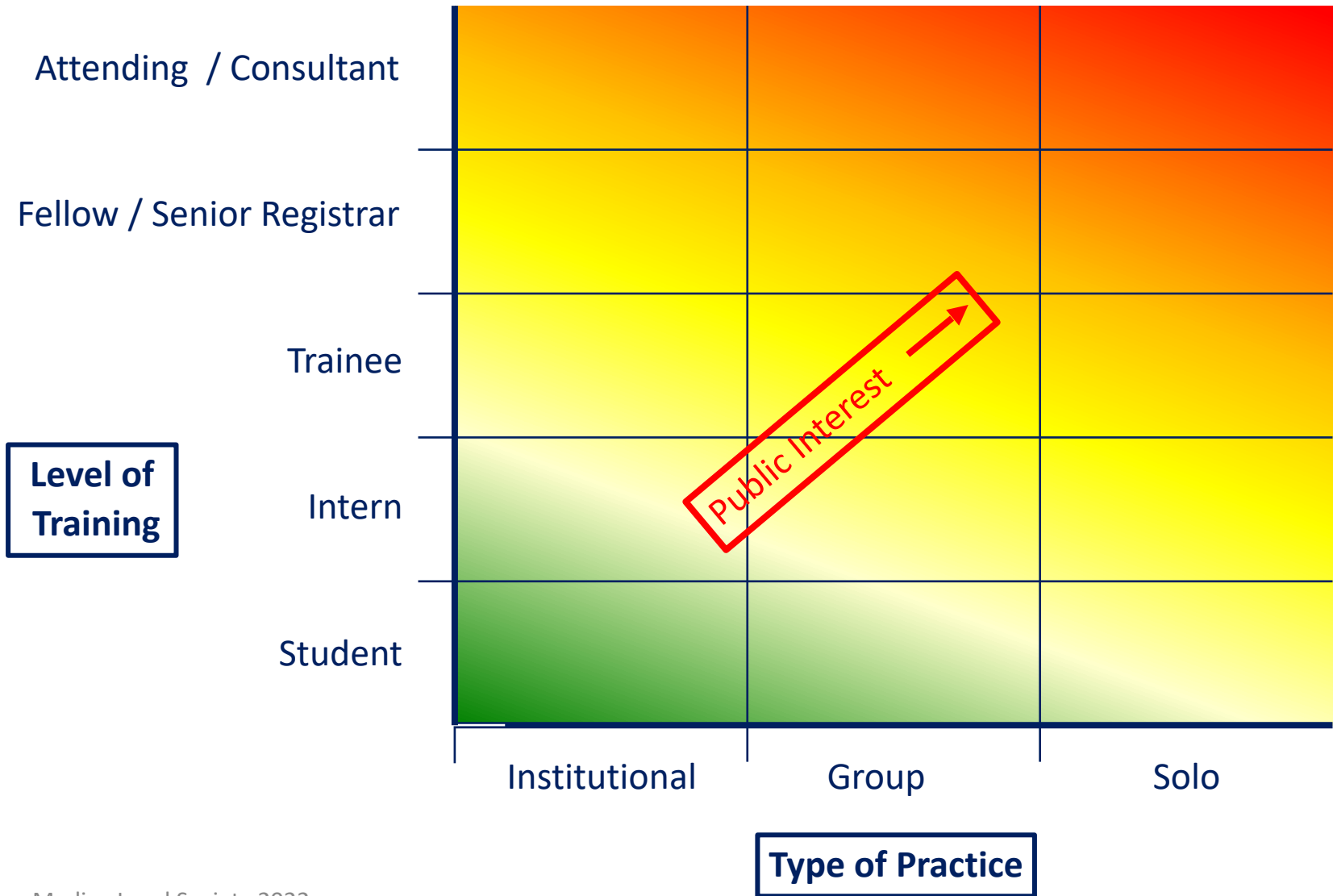
Tom is a GP working in the Sydney CBD.

AHPRA has been notified that he has been charged with assault, arising from a domestic incident involving his wife.

He is accused of a loud verbal harangue ...



Particulars of practice



But ...



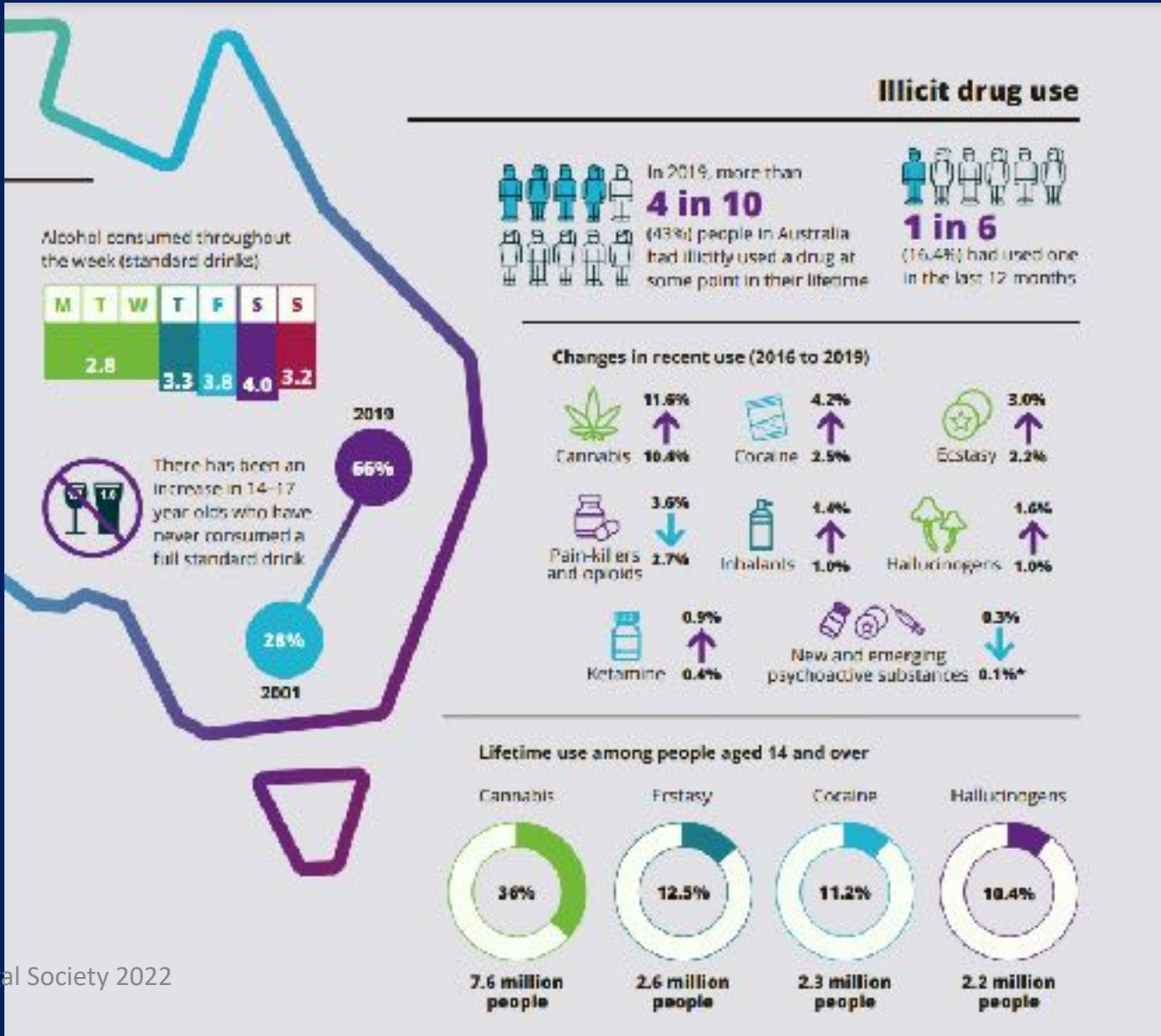
- are “standards of behaviour” absolute or conditional ?
- just where do you draw the public interest line ?

Off-Field Behaviour

– is a professional ever off-duty?

Over to Cameron

Extra slides for discussion



The AHPRA Drug Screen Panel

Amphetamine-like substances

- amphetamine
- penzylpiperazine
- ephedrine
- methylamphetamine
- MDA
- MDMA
- phentermine
- pseudoephedrine

Anaesthetic agents

- ketamine
- norketamine
- propofol

Anxiolytic agents

- zolpidem
- midazolam

Benzodiazepines

- alprazolam
- clonazepam
- diazepam
- flunitrazepam
- nitrazepam
- oxazepam
- temazepam
- and/or metabolites

Cannabinoids

- cannabis metabolites
- synthetic cannabinoids

Cathinone analogs

- piperazine

Cocaine metabolites

Hallucinogens

- LSD
- nor-LSD
- NBOMe derivatives

Opiates

- 6-acetylmorphine
- codeine
- morphine

Opioids

- fentanyl
- norfentanyl
- hydromorphone
- methadone
- oxycodone
- pethidine
- norpethidine
- tramadol