



Aboriginal and Torres Strait
Islander health practice
Chinese medicine
Chiropractic
Dental
Medical
Medical radiation practice
Nursing and Midwifery
Occupational therapy
Optometry
Osteopathy
Pharmacy
Physiotherapy
Podiatry
Psychology

Australian Health Practitioner Regulation Agency

Private and Confidential

19 February 2014

Mr Roger Bates

Via Email: rjrbs@hotmail.com

Dear Mr Bates

Notice of Board decision to take no further action

I refer to the letter advising you of the assessment of the notification about Dr Una Stephenson (the practitioner).

On 3 February 2014, the Queensland Medical Interim Notifications Group (the Committee) decided to take no further action under section 151 of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law).

The Committee decided this because:

- a. The basis of the Committee's 'reasonable belief' is that it has taken into account all known considerations including:
 - i. The allegations contained in the notification information by you and the accompanying attachments received by AHPRA on 5, 13, 16, 17, 18, 19 and 22 December 2013.
 - ii. The practitioner's response to the notification and the accompanying attachments received by AHPRA on 14 January 2014.
 - iii. The practitioner's notification history.
- b. The Committee reasonably believes that the notification is lacking in substance, as
 - i. It is considered reasonable that the practitioner did not attend your Hearing on 1 December 2002.
 - A. You were placed on an Involuntary Treatment Order (ITO) by the Cairns and Hinterland Hospital and Health Service (the Health Service) on 30 July 2002. After receiving treatment, you had a Mental Health Review Tribunal Hearing (the Hearing) on 2 December 2002 in which your ITO was revoked.
 - B. The practitioner states that, at the time of the Hearing, she was a consultant psychiatrist with the Health Service.
 - C. The practitioner states that, at the time of the Hearing, the Health Service did not require the consultant psychiatrist to attend Hearings as these were attended by your case officer. The practitioner states that, in this instance, your case officer did attend.
 - D. The Act does not indicate that the patient's psychiatrist must attend the Hearing.
 - E. There is no information to support the claim that the practitioner's non-attendance at the Hearing indicates that she abused or failed to comply with the provisions of the Act.

Australian Health Practitioner Regulation Agency

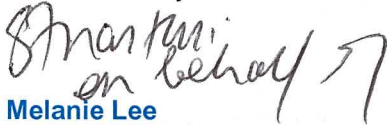
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- ii. There is no information to support the claim that the practitioner colluded to stop you from exposing details of a corruption scandal.
 - A. The patient has not provided any details of how the practitioner was involved in the alleged corruption.
 - B. It appears, from the documentation provided by you, that you have raised allegations of corruption about, and to, several other entities, including, but not limited to, the South Australia Police, the National Archives of Australia, the Australian Press Council, the Australian Competition and Consumer Commission, and several parliament members. It is noted that the allegations of corruption between these organisations is outside the legislative jurisdiction of AHPRA and the National Boards.
- c. Based on the information available to it, the Committee was of the opinion that the practitioner's conduct was of standard which might be reasonably expected of the practitioner by the public of the practitioner's professional peers.

Thank you for taking the time to raise your concerns. This matter has now been closed.

If you have any queries, please contact AHPRA on 1300 419 495 or qld-notifications@ahpra.gov.au quoting the reference number below.

Yours sincerely



Melanie Lee

A/Manager, Notifications

Reference Number: 00271831.sr

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