

'AT' and Australian Health Practitioner Regulation Agency (Freedom of Information)



Decision and reasons for decision of the National Health Practitioner Privacy Commissioner, Richelle McCausland

Applicant	'AT'
Respondent	Australian Health Practitioner Regulation Agency (Ahpra)
Reference number	NHPO/12632023
Decision date	12 June 2025
Catchwords	FREEDOM OF INFORMATION – Whether disclosure would have a substantial adverse effect on the proper and efficient conduct of the operations of an agency – Whether disclosure of personal information is unreasonable – Whether it is contrary to the public interest to release conditionally exempt documents – Freedom of Information Act 1982 ss. 47E(d) and 47F

All references to legislation in this document are to the *Freedom of Information Act 1982* (Cwlth) (FOI Act) unless otherwise stated.

Decision

1. Under s. 55K, I set aside Ahpra's decision dated 4 July 2023 in relation to document 5.
2. I substitute my decision that document 5 is to be released to the Applicant in full.

Background

3. The Applicant is a medical practitioner.
4. The Medical Board of Australia (the Medical Board) has responsibilities relating to the regulation of medical practitioners. Ahpra provides administrative assistance and support to the Medical Board in exercising its functions.
5. Notifications were made to Ahpra and the Medical Board about the Applicant.
6. On 5 March 2023 the Applicant applied to Ahpra for access to documents in the following terms:
 1. copies of notifications [notification number] and [notification number] made to Ahpra, with deidentification of the notifiers; and

2. for the period of 14 September 2022 to 3 May 2023, copies of correspondence between Ahpra and/or the Medical Board of Australia and [the Applicant's former treating practitioner (the Practitioner)], including documentation of telephone conversations, letters or other written correspondence, including the dates of the interactions.

7. Ahpra identified 5 documents relevant to the request:

- document 1 – a notification
- document 2 – summary of a notification
- document 3 – correspondence
- document 4 – a file note
- document 5 – correspondence.

8. In its decision letter dated 4 July 2023, Ahpra decided to:

- release document 2 in full
- exempt documents 1 and 4 in part under ss. 47E(d) and 47F
- exempt documents 3 and 5 in full under ss. 47E(d) and 47F.

9. The Applicant did not seek an internal review of Ahpra's decision.

10. On 13 August 2023, the Applicant sought a review of Ahpra's decision under s. 54L. When applying for a review, the Applicant stated that the outcome being sought was as follows:

I would like document 5 released to me under Freedom of Information plus any and all correspondence between [the Practitioner] and Ahpra. This would include contact with my [Ahpra] case officer and other representatives, not just correspondence directly with the [Medical Board] on or after the 14th of September.

11. On 9 October 2023 the Applicant confirmed that they were seeking a review of Ahpra's decision only in relation to document 5.

12. Accordingly, Ahpra's decision in relation to documents 1, 3 and 4 are not the subject of this review.

Scope of the review

13. The issues I have decided in this review are:

- whether document 5 that Ahpra found to be exempt in full under s. 47E(d) is conditionally exempt under that provision, and if so, whether giving access would be contrary to the public interest
- whether document 5 that Ahpra found to be exempt in full under s. 47F is conditionally exempt under that provision, and if so, whether giving access would be contrary to the public interest.

14. In a review of an access refusal decision, Ahpra bears the onus of establishing that its decision is justified or that I should give a decision adverse to the applicant.¹ However, it is open to me to obtain any information from any person, make any inquiries that I consider appropriate, and change the basis on which the decision is made.²

¹ s. 55D(1).

15. The Applicant and Ahpra were invited to make a written submission about this review of Ahpra's decision. I have considered all relevant communications and submissions received from the Applicant and Ahpra.
16. I have had regard to the object of the FOI Act, which is to give the Australian community access to information held by the Government by requiring agencies to publish that information and by providing for a right of access to documents.³

Review of the exemptions

Section 47E(d): Documents affecting certain operations of agency

17. Ahpra found document 5 to be conditionally exempt in full under s. 47E(d).
18. A document is conditionally exempt under s. 47E(d) if disclosure would, or could reasonably be expected to, have a substantial adverse effect on the proper and efficient conduct of the operations of an agency.
19. The FOI Guidelines explain that the predicted effects need to be reasonably expected to occur and that there must be more than merely an assumption or allegation that damage may occur if the document were to be released.⁴
20. The term 'substantial adverse effect' broadly means an adverse effect which is sufficiently serious or significant to cause concern to a properly concerned reasonably person.
21. A decision-maker should clearly describe the expected effect and its impact on usual operations or activities in the statement of reason.⁵

Ahpra's operations

22. Under the *Health Practitioner Regulation National Law Act 2009* (as it applies in each State and Territory) (the National Law), Ahpra and the Medical Board exercise functions relating to the regulation of medical practitioners. This includes:⁶
 - registering suitably qualified and competent persons in the medical profession and, if necessary, imposing conditions on the registration of persons in the profession
 - deciding the requirements for registration or endorsement of registration in the profession, including the arrangements for supervised practice in the profession
 - overseeing the receipt, assessment and investigation of notifications about persons who are or were registered as medical practitioners under the National Law

² ss. 55 and 55K.

³ s. 3(1).

⁴ FOI Guidelines, [6.90].

⁵ Ibid, [6.92].

⁶ For more information about the Medical Board's functions refer to s. 35 of the National Law.

- overseeing the management of health practitioners and students registered in the profession, including monitoring conditions, undertakings and suspensions imposed on the registration of the practitioners or students.
23. In general, Ahpra supports the Medical Board by collecting and assessing relevant information. Ahpra provides this information to the Medical Board and the Medical Board is the regulatory decision-maker.

Ahpra's submissions

24. In its decision dated 4 July 2023, Ahpra said:

Documents containing information relating to a practitioner's and any other third party's interactions with Ahpra are in this instance conditionally exempt from release under section 47E(d) of the FOI Act, because the disclosure of that information would, or could reasonably be expected to, have a substantial adverse effect on the proper and efficient conduct of the operations of Ahpra and the [Medical] Board for the following reasons:

- the FOI Act does not restrict the subsequent use of information released to an applicant under the FOI Act. In Australia there is case law relating to disclosure of information under the FOI Act, for example, the Administrative Appeals Tribunal (AAT) has stated that 'access to a document under the FOI Act must be considered not on the basis of the identity and the qualities of the person who seeks that access but on the basis that it may be seen by anybody. As it is usually expressed, access under the FOI Act, is access to the world at large'⁷
- information received or otherwise held by Ahpra and the [Medical] Board is held on the understanding that it will be treated in a confidential manner and used in accordance with the National Law and the *Privacy Act 1988* (Cth) (the Privacy Act). The information in this instance is considered protected information within the meaning of section 214 of the National Law. It is an offence to disclose protected information unless an exception applies.⁸ Further, permission has not been granted by a third party for [the Applicant] to have access to some of the documents
- the provision of comprehensive information by third parties is necessary to ensure that practitioners are practising in accordance with restrictions placed on their registration and the flow of information from third parties is crucial to verify that practitioners with restrictions on their registration are compliant with those restrictions and, if practising, continue to deliver safe health care to members of the public
- any reluctance by community members to share information with Ahpra, whether about a notification or a compliance activity could impact on the [Medical] Board's decision making. Given the importance of Ahpra receiving as much relevant information as possible when conducting its regulatory operations, this impact could reasonably be expected to be a substantial adverse effect on the proper and efficient conduct of the operations of the agency.

⁷ *Meschino and Centrelink* [2002] AATA 627 [23].

⁸ *Health Practitioner Regulation National Law* (as in force in each state and territory), s. 216.

25. During the review, Ahpra also submitted in relation to document 5:

[The Practitioner] has expressed an unequivocal objection to its release. Two further points bear noting:

- the document at issue postdates the termination of the treating relationship between the Applicant and [the Practitioner] by more than 3 months. There could be no expectation that incidental correspondence such as this would not be conferred with the usual quality of confidentiality which attaches to correspondence between Ahpra and third parties
- [Ahpra has] not identified any indication that the document at issue has been provided to the [Medical] Board in connection to a decision making function or has otherwise been relied on in a way that might engender a procedural fairness right of access.

Applicant's submissions

26. During the review, the Applicant provided submissions on their personal reasons for seeking to have full access to the contents of document 5, including their view of the relationship between them and the Practitioner and the impact document 5 had on them based on what they consider to be in the document.

27. The Applicant stated in their submissions:

I believe it is in the public interest as well as my own to know what [document 5] contains. I do believe it may have negatively impacted my dealings with Ahpra. I have been denied natural justice in not being provided with this information.

It is in the public interest, as it would imply that Ahpra can compel any Dr to release private health information to a quasi-government organisation without their prior consent. This fundamentally undermines the trust necessary between Doctor and Patient that forms the core of the therapeutic relationship. What is more concerning is that this was supplied, even when I had previously expressed my wishes to keep this information private.

Application of certain operations of agencies exemption

28. I have considered whether document 5 is conditionally exempt under s. 47E(d).

29. After inspecting the document, I am of the view that it was provided to Ahpra while Ahpra was exercising its functions under the National Law, namely monitoring the compliance of an undertaking made by the Applicant.

30. Third parties and practitioners must be willing to provide information necessary to facilitate Ahpra and the Medical Board's monitoring and compliance functions. This allows Ahpra and the Medical Board to determine whether regulatory action is required to manage any risks posed by the relevant health practitioner's health, conduct or performance.

31. As outlined in my decisions of 'AP', 'AA', 'AC', 'AD', 'AE', 'AF', 'AG', 'AI', 'JH', 'MS', 'AM', 'AN', 'AO', and 'AQ', 'AR', 'AS',⁹ I draw on the Australian Information Commissioner's decision in *Graham Mahony and Australian Charities and Not-for-profits Commission (Freedom of information)*[2019] AICmr 64 (31 August 2010) (Mahony). In Mahony, the request was for access to all documents relevant to

⁹ The Commissioner's decisions are published on her office's website: <https://www.nhpo.gov.au/foi-review-decisions>.

investigations conducted by the Australian Charities and Not-for-profits Commission (ACNC) into concerns relating to a particular building fund. The Australian Information Commissioner affirmed the ACNC's decision to exempt documents falling within the scope of the request. In discussing whether s. 47E(d) applied in that case, the Australian Information Commissioner stated:

The fact that s. 150-25 of the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act) protects information provided to or obtained by the ACNC under the ACNC Act from disclosure, leads me to be satisfied that the ACNC, as it contends, relies on sensitive information being provided to it on a voluntary basis and on the understanding that the information will not be disclosed to third parties. As the ACNC explained in its reasons for decision..., I accept that the rationale for this secrecy provision is to establish a regulatory regime where the ACNC can discharge its regulatory functions in an environment of trust and engagement with the not-for profit sector.¹⁰

32. It is my view that similarities can be drawn between provisions of the ACNC Act and the confidentiality provisions in the National Law. Section 216 of the National Law creates a reasonable expectation that information provided to Ahpra in relation to a notification will be treated confidentially. If Ahpra discloses the document requested by the Applicant, a reasonable person could conclude that information communicated to Ahpra in the future may not be treated confidentially. This in turn could reasonably be expected to affect how effectively Ahpra and the Medical Board can carry out their functions, as the information they are able to access may be less readily provided or more difficult to obtain.
33. I have also considered the case before the State Administrative Tribunal in *Spragg and Australian Health Practitioner Regulation Agency* [2017] WASAT 103 (26 July 2017) (Spragg). Notably, in Spragg the Tribunal considered the application of s. 47E(d) specifically in the context of Ahpra's operations. In that case, the Tribunal found that disclosure of protected information could reasonably be expected to have a substantial adverse effect on the proper and efficient conduct of the operations of the agency.¹¹ In making their decision, the Tribunal stated:

...the proper and efficient conduct of the operations of the agency are assisted by the circumstance that information provided to it by a registered health practitioner under compulsion is protected information and its disclosure is prohibited. The agencies [sic] operations are advanced when a registered health practitioner is forthright and frank in providing information when required. The Tribunal finds that the prospects of a forthright and frank answer are considerably enhanced in circumstances where the practitioner has confidence that the information provided is protected information...¹²

34. Taking all relevant factors into consideration, I am satisfied that disclosing document 5 could reasonably be expected to affect the future flow of information from third parties or treating practitioners to Ahpra and the Medical Board. Ahpra and the Medical Board rely on candid communication from relevant third parties to carry out their role in ensuring public safety.
35. In addition, the National Law imposes a duty of confidentiality in relation to protected information. I consider that release of document 5 could reasonably be expected to reduce practitioner confidence in

¹⁰ *Graham Mahony and Australian Charities and Not-for-profits Commission (Freedom of Information)* [2019] AICmr 64 (31 August 2019), [22].

¹¹ *Spragg and Australian Health Practitioner Regulation Agency* [2017] WASAT 103 (26 July 2017), [35], [75].

¹² *Ibid*, [75].

Ahpra's ability to maintain the confidentiality of protected information. This, in turn, would likely have a substantial adverse effect on the proper and efficient conduct of the operations of Ahpra and the Medical Board.

36. I consider that disclosure of document 5 would prejudice the robustness of the communication process between treating practitioners (or former treating practitioners) and Ahpra.
37. I am therefore satisfied that document 5 is conditionally exempt under s. 47E(d).
38. I am now required to consider whether it would be contrary to the public interest to give the Applicant access to the conditionally exempt document at this time.

The public interest test

39. Section 11A(5) provides that, if a document is conditionally exempt, it must be disclosed unless in the circumstances access to the document at this time would, on balance, be contrary to the public interest.¹³

40. In *Seven Network (Operations Limited) and Australian Competition and Consumer Commission (Freedom of Information)* [2019] AICmr 29 (6 June 2019) the Australian Information Commissioner explained that:

...the public interest test does not require a decision-maker to consider whether disclosure of conditionally exempt material would be in the public interest. Rather, a decision-maker must start from the position that access to a conditionally exempt document must be given, unless giving access to the document, at the time of the decision would, on balance, be contrary to the public interest.¹⁴

Factors favouring disclosure

41. The FOI Act provides public interest factors to be considered, including that disclosure would:
- promote the objects of the FOI Act (including all the matters set out in ss. 3 and 3A)
 - inform debate on a matter of public importance
 - promote effective oversight of public expenditure
 - allow a person access to his or her personal information.¹⁵
42. The FOI Guidelines also provide a non-exhaustive list of public interest factors favouring disclosure.¹⁶
43. In forming its decision, Ahpra considered the following factors in favour of disclosure:
- promoting the objects of the FOI Act, particularly in increasing scrutiny, discussion, comment and review of the Government's activities

¹³ s. 11A(5).

¹⁴ *Seven Network (Operations Limited) and Australian Competition and Consumer Commission (Freedom of Information)* [2019] AICmr 29 (6 June 2019), [47].

¹⁵ s. 11B(3).

¹⁶ FOI Guidelines, [6.231].

- public scrutiny of documents relevant to deliberations of Ahpra and the Medical Board may improve the quality of advice and decision-making processes
- facilitating access to information to members of the public that allows them to be satisfied that proper processes have been followed by the agency
- revealing information that informed a decision-making process
- allowing a person to access their personal information, or information relating to matters that otherwise concern them.

44. I agree that disclosure of document 5 would promote the objects of the FOI Act and reveal information that informed a decision-making process, which may in turn improve the quality of advice and decision-making processes of Ahpra and the Medical Board.

Factors against disclosure

45. The FOI Act does not list any factors weighing against disclosure but the conditional exemptions themselves recognise that harm may result from disclosure in certain circumstances, for example, where disclosure could prejudice an investigation.

46. As an example, some factors against disclosure include whether disclosure could reasonably be expected to:

- prejudice public health or safety
- impede the flow of information to a regulatory authority
- prejudice Ahpra or the Medical Board's ability to obtain confidential or similar information in the future.

47. In making its decision, Ahpra put forward the following factors against disclosure:

- the public interest in protecting and maintaining the integrity of Ahpra's assessment and compliance processes. Ahpra's ability to receive, assess and investigate concerns in respect of the health, performance and/or conduct of registered health practitioners is integral to the maintenance and enforcement of the National Law. There is a strong public interest in ensuring proper processes for consumer protection,¹⁷
- the public interest in Ahpra and the [Medical] Board being able to carry out their statutory functions as efficiently and effectively as possible. Disclosure of the conditionally exempt document could reasonably be expected to deter practitioners and third parties from disclosing sensitive personal information in response to a concern, despite it being relevant to Ahpra's evaluation of the concerns, and a Board's decision about whether any action is required. This would have a significant adverse impact on the integrity and robustness of Ahpra's regulatory processes, and the ability of Ahpra and the [Medical] Board to carry out their functions and duties in an effective manner.
- the prejudice to an individual's right to privacy, particularly where the information is not well known, or publicly available and in circumstances where there is an expectation, reinforced by

¹⁷ See *Ah Teo v Pacific Media Group* [2016] VSC 626 at [30].

statute, that their personal information would be confidential. The personal privacy exemption is designed to prevent unreasonable invasion of a third party's privacy.

48. Under s. 11B(4), there are certain factors that must not be taken into account, namely whether:

- disclosure could result in embarrassment to the Commonwealth Government
- disclosure would result in any person misinterpreting or misunderstanding the document
- the author of the document was of high seniority in the agency
- access to the document could result in confusion or unnecessary debate.

Balancing the public interest factors for and against disclosure

49. Having inspected document 5, it is a brief correspondence from the Practitioner to Ahpra responding to a request for a treating practitioner report about the Applicant. The correspondence does not include the requested report, rather, it provides a brief update on the status of the patient-doctor relationship. It also advises Ahpra that a treating practitioner report cannot be provided. Information in document 5 about the status of the patient-doctor relationship is known to the Applicant.

50. While there is a strong public interest in protecting and maintaining the integrity of Ahpra and the Medical Board's regulatory processes, I am of the view that any adverse impact in the release of document 5 is weakened by the fact that:

- much of the information in this document is already known to the Applicant
- much of the information is factual in nature
- it seems unlikely that disclosure would impair Ahpra's ability to obtain communication of this kind in future, given the information contained in the document is largely factual
- the fact that the information relates to the Applicant and that disclosure would enable them to have access to their own information.

51. Based on the available information, I am satisfied that the public interest factors in favour of disclosure outweigh those against disclosure.

52. On balance, I am satisfied that granting the Applicant access in full to document 5 at this time would not be contrary to the public interest.

Finding

53. I am satisfied that document 5 is not exempt under s. 47E(d) on the basis that disclosure would not be contrary to the public interest for the purposes of s. 11A(5).

Section 47F: Documents affecting personal privacy

54. Ahpra also found document 5 to be conditionally exempt in full under s. 47F.

55. A document is conditionally exempt under s. 47F if its disclosure would involve the unreasonable disclosure of personal information of any person (including a deceased person).¹⁸

¹⁸ s. 47F.

56. The main requirements of this conditional exemption are that:

- a document contains ‘personal information’
- disclosure in response to the Applicant’s FOI request would be unreasonable¹⁹
- it would be contrary to the public interest to release the document at the time of the decision.²⁰

57. The FOI Guidelines explain:

The information needs to be ‘about’ an individual – there must be a connection between the information and the person. This is a question of fact and depends on the context and circumstances. Some information is clearly about an individual – for example, name, date of birth, occupation details and medical records. A person’s signature, home address, email address, telephone number, bank account details and employment details will also generally constitute personal information. Other information may be personal information if it reveals a fact or opinion about that person in a way that is not too tenuous or remote. Invoices related to the purchase of alcohol for Prime Ministerial functions do not disclose personal information about the Prime Minister if it is possible that a staff member made the purchases based on something other than the Prime Minister’s preferences. Examples of when information is not ‘about’ a person and therefore the information is not personal information for the purposes of s. 6 of the Privacy Act, include the colour of a person’s mobile phone or their network type (e.g., 5G).²¹

Joint personal information

58. The FOI Guidelines state that where it is not possible to separate an Applicant’s personal information from a third party’s personal information, the exemption may be claimed if it is unreasonable to release the information.²²

59. Whether it is unreasonable to release the information may depend on the relationship between the individuals.

Unreasonable disclosure of personal information

60. In determining whether the disclosure of the information would involve an unreasonable disclosure of personal information, s. 47F(2) provides that a decision-maker must have regard to:

- the extent to which the information is well known
- whether the person to whom the information relates is known to be (or to have been) associated with the matters dealt with in the document
- the availability of the information from publicly accessible sources
- any other matters that the agency or minister considers relevant.

61. The FOI Guidelines explain that other relevant factors include:

¹⁹ s. 47F(1).

²⁰ s. 11A(5).

²¹ FOI Guidelines, [6.131].

²² Ibid, [6.144].

- the nature, age and current relevance of the information
- any detriment that disclosure may cause to the person to whom the information relates
- any opposition to disclosure expressed or likely to be held by that person
- the circumstances of an agency's collection and use of the information
- any submission an applicant chooses to make in support of their application as to their reasons for seeking access and their intended or likely use or dissemination of the information
- whether disclosure of the information might advance the public interest in government transparency and integrity
- that the FOI Act does not control or restrict any subsequent use or dissemination of information released under the FOI Act.²³

62. The FOI Guidelines explain that the test of 'unreasonableness' under s. 47F 'implies a need to balance the public interest in disclosure of government-held information and the private interest in the privacy of individuals'.²⁴

Ahpra's submissions

63. In the course of making its decision, Ahpra had consulted with the Practitioner in relation to the disclosure of the Practitioner's personal information, including the information in document 5. In response, the Practitioner objected to the disclosure of their information.

64. In Ahpra's decision, Ahpra stated:

[...Ahpra is] satisfied from [its] own enquiries that the information in question is not well known or publicly available. Ahpra obtained this information in conducting its regulatory activities and in undertaking its functions under the National Law. There is an expectation, reinforced by the confidentiality provisions of section 216 of the National Law, that the personal information provided would be used by Ahpra and the [Medical] Board within this context only and only in a manner consistent with the Privacy Act and the Australian Privacy Principles. Further any disclosure under the FOI Act does not advance the public interest in terms of transparency and integrity of agency processes.

[Ahpra has] considered section 47F(3) of the FOI Act which provides that a document is not conditionally exempt simply because it contains information about you. I have not found any documents to be conditionally exempt on this basis. To the extent that the document contains joint personal information, [Ahpra has] considered the practicability of removing the personal information of others and releasing to [the Applicant] only [the Applicant's] personal information. In the circumstances, [Ahpra is] satisfied that this would not be possible, or would otherwise not be possible without rendering the document meaningless.

²³ Ibid, [6.138].

²⁴ Ibid, [6.133].

Application of personal privacy exemption

65. Having considered document 5, I am of the view that the document contains personal information of the Practitioner.
66. I am also satisfied that some of the third party personal information is intertwined with information about the Applicant, given the relationship of the Applicant and the Practitioner.
67. However, I am not satisfied that disclosure of the personal information is unreasonable having regard to the following:
- the fact that the Applicant is aware of much of the information in the document
 - most of the information in the document is factual in nature
 - the unlikelihood that disclosure would cause detriment to the Practitioner.
68. Given the above factors, I am of the view that document 5 is not conditionally exempt under s. 47F.
69. Given this finding, I am not required to consider whether it would be contrary to the public interest to give the Applicant access to this information.

Finding

70. I am satisfied that document 5 is not exempt under s. 47F.

Conclusion

71. Under s. 55K, I set aside Ahpra's decision of 4 July 2023 in relation to document 5.
72. I substitute my decision that document 5 is to be released in full to the Applicant.

Richelle McCausland

National Health Practitioner Privacy Commissioner

Rights

Review rights

If a review party is not satisfied with a review decision of the Commissioner, the party may apply to a relevant tribunal to have the decision reviewed. The application must be made within 28 days after the day the party receives the Commissioner's decision.²⁵

Where an application for a review is made to the relevant tribunal, the proper respondent to such a proceeding is the agency to whom the freedom of information request was initially made (not the Commissioner). In this case, the respondent is Ahpra.²⁶

²⁵ s. 57A.

²⁶ s. 60(3).

Appeal rights

A review party may appeal to the Supreme Court on a question of law from a decision of the Commissioner if the party believes the Commissioner incorrectly interpreted and applied the FOI Act.

An appeal must be made either:

- within 28 days after the day a review party receives the Commissioner's review decision, or
- within further time that the Supreme Court or another appropriate court allows, and
- in any way that is prescribed by rules of court made under the relevant legislation of the Supreme Court or another appropriate court.

In determining a question of law, the Supreme Court may make findings of fact if its findings of fact are not inconsistent with findings of fact made by the Commissioner (other than findings resulting from an error of law), and it appears to be convenient for the Supreme Court.

To receive this document in another format phone 1300 795 265, using the National Relay Service 13 36 77 if required, or [email](mailto:foi@nhpo.gov.au) our FOI team, <foi@nhpo.gov.au>.

Authorised and published by the National Health Practitioner Ombudsman.

GPO Box 2630

Melbourne VIC 3001

Phone 1300 795 265

[Email](mailto:foi@nhpo.gov.au) National Health Practitioner Ombudsman <foi@nhpo.gov.au>

National Health Practitioner Ombudsman [website](http://www.nhpo.gov.au) <www.nhpo.gov.au>

© National Health Practitioner Ombudsman, Australia, June 2025.