

SPECIAL COMMISSION OF INQUIRY  
RE GRAEME REEVES

Before Mr Peter Garling SC, Commissioner

At Special Commission Offices  
Level 6, 199 Elizabeth Street  
Sydney

On Thursday, 24 July 2008  
(Day 5)

Counsel Assisting: Mr T Tobin QC and  
Ms G Wright  
Solicitor to the Inquiry: Ms C Follett

1 THE COMMISSIONER: Good afternoon, Mr Wilson. This is a  
2 formal hearing designed to record your recollection of the  
3 various events that Mr Tobin will ask you about. Firstly,  
4 can I express my gratitude to you for coming at such short  
5 notice. Secondly, this is not a memory test. If at any  
6 time you want to look at a document or refresh your  
7 recollection from anything, please let Mr Tobin know. I  
8 don't want you to think that in any way any part of this  
9 examination is designed to be at all critical of you or  
10 what you did. We are simply interested in finding out the  
11 best recollection that everybody has about the events in  
12 question. Of course, if at any stage you wish to have a  
13 break all you have to do is let us know. Mr Tobin, please  
14 go ahead.

15  
16 <GRATTON WILSON, sworn:

17  
18 MR TOBIN: Q. Mr Wilson, you wrote to the commissioner  
19 on 31 March this year, and do you remember in your letter  
20 you mentioned the fact that you had returned all the  
21 documents relating to this matter to the Area Health  
22 Service; is that correct?

23 A. Yes.

24  
25 Q. So is it the case that what you wrote to the  
26 commissioner was without the benefit of having your  
27 documents with you; you were just trying to bring to mind  
28 the events of several years before; is that correct?

29 A. Yes.

30  
31 Q. And the events roughly were - I think we're looking at  
32 2002 and 2003; is that correct?

33 A. Yes.

34  
35 Q. And then, Mr Wilson, it's roughly five years, four and  
36 a half years perhaps, before you wrote to the commissioner  
37 this year. You prepared an affidavit, did you not, for the  
38 appeals under the Health Services Act by Dr Reeves; do you  
39 remember that?

40 A. Yes.

41  
42 Q. And you set out there your recollection, did you not,  
43 of what had happened?

44 A. With regard to what was going on, yes.

45  
46 Q. I want to ask you about one of the attachments that  
47 you provided in 2003. Perhaps before I go into it, when

1 you did this affidavit in September 2003 were you provided  
2 with a file of documents so that you could check through  
3 yourself?

4 A. There would have been some there, yes.

5  
6 Q. And then I think you also had, did you not, an  
7 affidavit of Dr Mortimer --

8 A. Correct.

9  
10 Q. -- which you adopted in part. You said, "I agree with  
11 what he says and I include it in my affidavit"; is that  
12 right?

13 A. Yes.

14  
15 Q. When you did all that, Mr Wilson, you appreciated, I'm  
16 sure, that that was quite a serious thing that you were  
17 doing; is that correct?

18 A. Very, yes.

19  
20 Q. And you were pretty conscientious about checking what  
21 you said in the affidavit against whatever documents you  
22 had?

23 A. Correct.

24  
25 Q. Could I ask you to go to tab 2 in that bundle. You  
26 will see that there is the affidavit at the front and at  
27 the very last paragraph, number 5, you refer to an  
28 annexure, annexure 1; do you see?

29 A. Yes.

30  
31 Q. If you go over the page, the annexure turns out to be  
32 the minutes of the meeting of the board on 14 March 2003  
33 held at the Delegate Hotel. Was the meeting held at  
34 Delegate? Where was the meeting held? What town was it  
35 held in?

36 A. It would have been held in Delegate.

37  
38 Q. If you would go then to the second page which is  
39 called "In committee minutes" which is presumably when --

40  
41 THE COMMISSIONER: I think the witness has that open.

42  
43 MR TOBIN: Q. Have you got that there?

44 A. Yes, I have.

45  
46 Q. I want to ask about this. The CEO at the time was  
47 Dr Robinson; is that right?

1 A. Yes.

2

3 THE COMMISSIONER: Well, I'm not sure that is right,  
4 Mr Tobin. I beg your pardon, yes, it is. Dr Robinson was  
5 still there. She left not long after this. I'm sorry to  
6 interrupt.

7

8 MR TOBIN: Q. She presented, did she not, from her  
9 position as chief executive, an account of what had  
10 happened with Dr Reeves; is that right?

11 A. Yes.

12

13 Q. You chaired the meeting. Were you present physically  
14 at the Delegate Hotel?

15 A. Yes.

16

17 Q. So were other people connected by a teleconference?

18 A. It would have been all the members of the board who  
19 were available for that meeting, yes.

20

21 Q. Were some on telephone link?

22 A. I don't think so.

23

24 Q. So you were all present in person. If you have a look  
25 at what she said back in 2003 - it's headed "Obstetrics and  
26 Gynaecology Services, Bega Valley", and she said:

27

28 The specialist appointed to provide  
29 services within the Bega Valley has been  
30 found to have conditions upon his  
31 registration, which prevent his undertaking  
32 obstetric care. He was immediately  
33 suspended from the provision of these  
34 services ...

35

36 Do you see that?

37 A. I can't quite find it actually.

38

39 Q. It is under the big headline "Obstetrics and  
40 Gynaecology Services"?

41 A. In the first paragraph?

42

43 Q. Yes, that's it.

44 A. Yes, right.

45

46 Q. Then it goes on to say in the next paragraph:

47

1 As a consequence the practitioner is unable  
2 to fulfil the terms of his contract with  
3 SAHS and there is no specialist obstetric  
4 care available to support GP obstetricians  
5 in the Valley.  
6

7 I take it that the specialist in question was Dr Reeves; is  
8 that correct?

9 A. Yes.

10  
11 Q. Then Dr Robinson said:

12  
13 This impediment was not revealed to the  
14 MADAC at the time of interview, nor  
15 subsequently to management. The  
16 documentation provided by the practitioner  
17 in support of his application did not  
18 reveal these conditions and as a  
19 consequence the committee was misled ...  
20

21 Then if you look at the last paragraph, it says:

22  
23 A response has now been received from the  
24 Doctor which is in conflict with advice  
25 from the Medical Board as he is clearly not  
26 able to provide any Obstetric services  
27 whatsoever.  
28

29 Do you see that?

30 A. I do.

31  
32 Q. Was it the case in 2003, Mr Wilson, that, as you  
33 understood it at the time, Dr Robinson said in effect that  
34 they had recently found out that Dr Reeves had a condition  
35 attached to his practice which prevented him from doing  
36 obstetrics; is that how you would have understood it at the  
37 time?

38 A. That is correct, yes.

39  
40 Q. Was that in fact as best you know the case?

41 A. Yes.

42  
43 Q. When Dr Robinson said he was immediately suspended  
44 from the provision of these services, it was suggesting,  
45 was it not, to you at the time that up till that time he  
46 had in fact been providing some obstetric services in the  
47 Bega Valley?

1 A. Can I answer this question in my own way?  
2  
3 Q. I'm not sure whether you will be answering the  
4 question, but before you go on to expand on it, can I ask  
5 you, perhaps as a preliminary, did you know one way or the  
6 other whether Dr Reeves was delivering obstetric services  
7 at either Pambula or Bega during 2002 and for the first  
8 week or so in 2003?  
9 A. Well, he was appointed to provide consultations with  
10 the doctors on obstetric services. That was part of his  
11 function.  
12  
13 Q. Did you know whether he was providing obstetric  
14 services in the nature of Caesarean sections at the public  
15 hospital?  
16 A. No.  
17  
18 Q. Do you appreciate that that appears now to be the  
19 case?  
20 A. I do.  
21  
22 Q. That he did obstetric services?  
23 A. Yes.  
24  
25 Q. I interrupted you. Did you want to expand on it  
26 further?  
27 A. The whole argument about his appointment, from what we  
28 knew at the time of the appointment committee, was based  
29 around, (a), he couldn't do hands on obstetrics with  
30 patients. We knew that.  
31  
32 Q. Who is the "we" there?  
33 A. The board knew. The committee knew that, and John  
34 Mortimer says that in his document. But what we required  
35 was for him to provide gynaecological services, which he  
36 was able to do, to patients and to provide a consultative  
37 or advisory service, if you like, to the doctors who were  
38 performing the obstetrics in the Bega Valley. That is why  
39 he was appointed.  
40  
41 Q. And didn't he have to provide, if need be, backup  
42 obstetric care in emergency?  
43 A. Well, you get involved in an argument about what's an  
44 emergency, and all doctors --  
45  
46 Q. Don't worry about that.  
47 A. All doctors are required to provide --

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Q. Don't worry about that. Did he have a contract which required him to provide specialist obstetric services in certain circumstances?

A. To individuals.

Q. Is that right?

A. No, I don't believe so.

Q. Could I read this out, because I think this is important. What I'm reading from is the fee for service contract. It is at tab 33. Would you look at tab 33, please. If you go to the third page of that, it is called a fee for service contract. Do you see that?

A. Yes.

Q. It is dated 24 April 2002?

A. Yes.

Q. And down the bottom do you see "Page 1 of 18"? Do you see that pagination at the very end, bottom right?

A. Yes.

Q. If you would go ahead to page 17, you can follow it through with that pagination.

A. Okay.

Q. Perhaps if you would have a look at schedule 2. Would you read that? You will see that in the contract, under the heading "Services", paragraph 2, he was to provide on-call obstetric service and perform emergency caesarean sections if indicated in accordance with the roster published by the hospital following consultation with visiting medical officers; do you see that?

A. I do.

Q. Now, Mr Wilson, would you go back to page 4 of the document.

A. Yes.

Q. 5.1:

The services, other than emergency after-hours medical services, which the [VMO] is to provide under this contract, and a services plan for the provision of such services shall be as agreed between

1 the officer and the Hospital, and shall be  
2 specified in Schedule 2 of the contract on  
3 an annual basis or on the basis of a lesser  
4 specified period ...

5  
6 Et cetera. Do you see that?

7 A. I do.

8  
9 Q. It would appear, would it not, from the contract, if  
10 you go to the second-last page of the bundle in that same  
11 tab, that it is signed off by Dr Arthurson and Mr Toft. Do  
12 you see their signatures there?

13 A. I have got it.

14  
15 Q. It is page 15 of 18, I'm sorry.

16 A. I have got it.

17  
18 Q. You will see there that it is signed off, is it not,  
19 by Dr Arthurson and Mr Toft on behalf of the --

20  
21 THE COMMISSIONER: I think, Mr Tobin, it is signed by  
22 Dr Robinson. Her signature is up above Dr Arthurson's.

23  
24 MR TOBIN: Q. You will see, I am sorry, Mr Wilson, that  
25 Dr Robinson, the CEO, signed it in the presence of  
26 Dr Arthurson; do you see that?

27 A. No, I don't.

28  
29 Q. There it is, you have got it.

30 A. That's Arthurson, Toft and --

31  
32 Q. The top right is Dr Robinson?

33 A. Oh, that's Robinson, yes.

34  
35 Q. And then directly under Dr Robinson's is Dr Reeves'  
36 signature; do you see that?

37 A. Yes.

38  
39 Q. Of course, Mr Wilson, I'm not expecting you to know  
40 the contents of every contract by a VMO with the area, but  
41 it would appear, would it not, that the actual contract  
42 itself that Dr Reeves had in April 2002 included, as  
43 stipulated in schedule 2, on-call obstetric service and the  
44 performance of emergency caesarean sections?

45 A. I agree.

46  
47 Q. Do you agree with that?

1 A. Yes.  
2  
3 Q. You wouldn't suggest, would you, that the contract was  
4 inconsistent with what came before the appointment  
5 committee, the credentials committee and MADAC?  
6 A. Well, I think I would.  
7  
8 Q. Right. Well, let me explore that with you a little  
9 bit. Why do you say that?  
10 A. Well, my quite clear recollection is that this guy was  
11 appointed to do gynaecology and give advice to the docs on  
12 obstetrics, and he wasn't supposed to be getting his hands  
13 dirty. That's my quite clear recollection. Now, whether  
14 I'm wrong or right I don't know, but that's my feeling,  
15 that the appointment committee agreed to and the board  
16 agreed to.  
17  
18 Q. Well, we will go through the other documents, then,  
19 and see if it assists in clarifying it. Can I begin,  
20 though, with another issue. You understood, at the  
21 meetings that discussed this appointment, didn't you, that  
22 there were conditions applying to his practice?  
23 A. We knew there were conditions applying to the  
24 practice. We didn't know precisely what they were.  
25  
26 Q. Did you know that he had produced a letter from the  
27 Medical Board about some conditions on his practice?  
28 A. I thought that was subsequent.  
29  
30 Q. Did you?  
31 A. It is one of the things that I picked up in the papers  
32 that were sent to me, that the CEO of the health service  
33 that he was going to work in was supposed to have a copy of  
34 the conditions - that's in the letter to him. Now, I don't  
35 recollect that ever having been produced.  
36  
37 Q. Okay. Well --  
38 A. Because the dates in John Mortimer's affidavit - and  
39 he refers to documents of that nature having been produced  
40 to whatever her name was, Dwyer - at least, the way I read  
41 it, that was after; they were documents produced by the  
42 board after they had had a more recent inquiry.  
43  
44 Q. Perhaps if we look at tab number 4. You will see  
45 there's an application being made here by Dr Reeves to  
46 Dr Arthurson on 10 February 2002. Do you have that?  
47 A. Yes.

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Q. Now, you can take it, Mr Wilson, that this is the application that he put in to the area to get an appointment for the Bega Valley?

A. Yes.

Q. I wonder if you would go to the sixth page. You will see six pages in there is a letter from the New South Wales Medical Board.

A. Yes.

Q. This accompanied his application - do you follow?

A. Yes.

Q. Perhaps if you would have a look at that briefly. You will see, I think, that there is a reference to the Impaired Registrants Program - do you see that after number 8 at the top?

A. Yes, I do.

Q. "Impaired Registrants Program, Participants Handbook", et cetera. Now, did this information come to your notice during the selection process, either by reading it or by being told about it?

A. We would have had his application in front of us, but we wouldn't have had those attachments, I don't think.

Q. You were told, were you not, that he had conditions attaching to his registration?

A. Yes.

Q. You knew that?

A. We knew that.

Q. And I think you will see from the documentation that the conditions which he told your area about were the conditions that are set out in this letter of 27 December?

A. There aren't any conditions in the letter - in the attachments.

THE COMMISSIONER: I think the witness is saying, Mr Tobin, that this letter of 27 December from the Medical Board was an attachment to Dr Reeves' letter of application. I think what Mr Wilson was saying was that he received the letter of application, but he may not have received the attachments to that letter, which include this Medical Board letter.

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Q. Is that right, Mr Wilson?

A. I suspect we did receive that.

Q. You did receive the Medical Board letter?

A. But we didn't have any attachments.

Q. That that letter referred to?

A. Yes. And the conditions that affected Dr Reeves were in those attachments.

Q. Well; is that right?

A. Well, I don't know, I'm assuming they are.

Q. But have a look on the first page of the Medical Board letter. You see in the second paragraph the sentence says:

I enclose a copy of the report prepared following that inquiry for your information --

Now, you didn't have a copy of that?

A. No.

Q.

-- and advise that your registration is now subject to the following conditions ...

Then there are eight listed conditions.

A. Yes.

Q. If you go over the page, there are two listed there that are called employment-related conditions?

A. None of them explained what he was supposed to do or not do.

Q. Well, what they do explain is he has to attend for treatment, take any prescribed medication, and attend for review, et cetera. You are correct when you say they don't say anything about his capacity to practise - his legal capacity to practise obstetrics.

A. That's right.

Q. I think what Mr Tobin is asking you is whether the only conditions on his registration that you knew about were the ones in this letter?

1 A. Correct. Actually in the letter.  
2  
3 Q. Actually in the letter?  
4 A. Yes.  
5  
6 Q. So you, when you were doing the interview of him on  
7 the MADAC committee, knew about these conditions but no  
8 others?  
9 A. Correct.  
10  
11 MR TOBIN: Q. Could you look at tab 5. This is the  
12 credentials committee teleconference relating to the  
13 credentialing process for Dr Reeves. Do you follow?  
14 A. Yes.  
15  
16 Q. You are familiar with this, aren't you?  
17 A. Yes.  
18  
19 Q. With this process?  
20 A. Yes.  
21  
22 Q. And these credential committee minutes would come up  
23 to - I think they are now calling it MDAC - the next level  
24 up, the board committee?  
25 A. Correct.  
26  
27 Q. So you will see for Dr Reeves, on the second page,  
28 this is what Dr Mortimer sets out to the credentials  
29 committee. Do you have that there?  
30 A. Yes, I do.  
31  
32 Q. It says that Dr Reeves was an applicant for the  
33 position of visiting specialist obstetrician gynaecologist  
34 at Pambula and Bega Hospitals. The conditions were  
35 described to the committee. Dr Mortimer went on to explain  
36 that he had discussed the expectations of the role with  
37 each of the applicants. Do you remember, Mr Wilson, that  
38 there had been three applicants?  
39 A. Yes, I do.  
40  
41 Q. Then:  
42  
43 While there was no requirement to conduct a  
44 private obstetric practice, specialist  
45 back-up for GP obstetricians was required.  
46 The Committee RECOMMENDED clinical  
47 privileges in obstetrics and gynaecology

1 within the delineated roles of Bega and  
2 Pambula Hospitals.

3  
4 Do you follow that?

5 A. I do.

6  
7 Q. Now, that meant, did it not, that you would have  
8 received these minutes when the appointments committee met,  
9 which you chaired, probably a couple of days later, on  
10 28 March - the next tab?

11 A. I'm not sure whether we had this document in front of  
12 us, but we had the content of it.

13  
14 Q. But if you look at the minutes, you will see at page 1  
15 of tab 6 that you are identified as the chair?

16 A. Yes.

17  
18 Q. And then:

19  
20 Please find attached:

21  
22 In the section called "Message". There are dot points at  
23 the end of the page. Do you have that?

24 A. Yes.

25  
26 Q. The second point says:

27  
28 . Minutes of Credentials Committee Meeting  
29 held on 26 March.

30  
31 A. Yes.

32  
33 Q. That's attachment A, is it not?

34 A. Yes.

35  
36 Q. That's the document that I just took you to at tab 5,  
37 is it?

38 A. Yes, correct.

39  
40 Q. Is it fair to say that, given that attachment which  
41 came up to you, at least as far as the written material is  
42 concerned that went to your appointments committee, the  
43 written material suggests that specialist back-up for GP  
44 obstetricians was required; do you agree with that?

45 A. Well, we had that in front of us, we must have, yes.

46  
47 Q. And perhaps if we go, then, a little forward, you will

1 see that the next tab, tab 7, raised the subject of  
2 "Additional information for the appointments committee  
3 teleconference 2 April", and, again, you were present at  
4 that meeting; correct?  
5 A. Yes.  
6  
7 Q. I beg your pardon, it is not a meeting; it appears to  
8 be a follow-up facsimile from Dr Arthurson?  
9 A. Yes.  
10  
11 Q. To update you on some interview questions for the  
12 position specialist obstetrician and gynaecologist?  
13 A. Yes.  
14  
15 Q. Then some issues that had been raised by the  
16 Obstetricare people who were applicants; do you agree with  
17 that?  
18 A. Yes, I do.  
19  
20 Q. And then if you go over a couple of sheets, you will  
21 see that the suggested interview questions are set out -  
22 eight questions in all?  
23 A. Yes.  
24  
25 Q. Do you remember that at the time?  
26 A. Yes.  
27  
28 Q. Thank you. At tab 9 you will see the agenda for your  
29 meeting of the Appointments Committee, which again you  
30 chaired as chairman of the area?  
31 A. Correct.  
32  
33 Q. The first item does refer at 3.1 to the position of  
34 specialist obstetrician and gynaecologist, does it not?  
35 A. Yes.  
36  
37 Q. Then if we go over to tab 10 you will see these are  
38 the minutes of the meeting itself which you chaired. Do  
39 you have that?  
40 A. Yes.  
41  
42 Q. You will see your name is the first one followed by  
43 Dr Robinson and Dr Mortimer?  
44 A. Yes.  
45  
46 Q. Under the heading halfway down, "Bega and Pambula  
47 District Hospitals" it says simply, "Dr Graeme Reeves was

1 interviewed for the position of specialist obstetrician at  
2 Bega and Pambula." Then it refers to the other applicants;  
3 correct?

4 A. Yes.

5

6 Q. Then I think we can move to the top of page 2 where  
7 there is a recommendation that Dr Reeves be offered the  
8 position; do you see that?

9 A. I do.

10

11 Q. That is at the beginning of April. Do you agree with  
12 me that when you look at the documents that came up to the  
13 board, including the board itself and the board  
14 subcommittee - and I'm thinking in particular of the  
15 Credentials Committee material - when you look at that and  
16 when you see the contract of service, they seem to line up,  
17 don't they?

18 A. Correct, yes.

19

20 Q. Do you agree with that?

21 A. Yes, I do.

22

23 Q. So the documents that were created at the time of the  
24 appointment seem to be based - I'm not saying that you saw  
25 all of this; you obviously didn't - pretty clearly, does it  
26 not, on part of the work for Dr Reeves which would be to  
27 provide backup obstetric services including Caesarean  
28 sections in certain circumstances?

29 A. If you go through the process we have just been to you  
30 would have to come to that conclusion.

31

32 Q. And that would be closer, would it not, to your  
33 recollection when you did the original affidavit in 2003 as  
34 to the circumstances. Perhaps if I can just go back to  
35 that, Mr Wilson, quickly. You will see that at tab 2  
36 you've got a five-paragraph affidavit?

37 A. Yes.

38

39 Q. Number 4 - before going to Dr Mortimer's - of yours  
40 says:

41

42 It is my view that the Area Health Service  
43 Board would not have made a determination  
44 to appoint Dr Reeves if the Area Health  
45 Service Board was aware at that time of the  
46 conditions relating to obstetrics which  
47 were placed on Dr Reeves' registration ...

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Do you see that?

A. I do.

Q. Is it likely that when you wrote that you would have had in mind these documents which were only a few months prior, that one of the jobs that Reeves was to do included, if need be, emergency Caesarean sections?

A. Well, when we prepared this documentation we knew that the board didn't want him to do any obstetrics full stop - anything. And we did not know that at - we did not appreciate that at the time the appointment was made.

Q. Yes, but at the time the appointment was made, doesn't the contract of employment, the fee for service contract, indicate that he would be called upon in certain circumstances to do actual obstetric operations?

A. Yes.

Q. And that was contrary, as you understood it - or you learned contrary to his condition on his registration?

A. Yes.

Q. So is it a fair summation that back in 2003 when you did the affidavit you did so in the understanding that he was retained, among other things, to do emergency Caesarean sections for example; do you agree with that?

A. I doubt if that was a consideration at the time to be honest.

Q. But when you did that affidavit you would have had that in mind, would you not?

A. I doubt it.

Q. Well, you say here that if you were aware at the time of the conditions relating to obstetrics you wouldn't have appointed him?

A. Correct.

Q. Why do you say that, then, in 2003?

A. Oh, because in my view the requirements of him would not let him give advice to the doctors.

Q. Okay. To do any obstetrics?

A. To do anything.

Q. But in any event you learned, didn't you, that he had

1           been conducting an obstetric practice in a public hospital?  
2           A.     Yes.  
3  
4           Q.     And did you know that very soon after he was appointed  
5           he was rostered on for the emergency Caesarean section?  
6           A.     No, I wouldn't have known that.  
7  
8           Q.     Perhaps if I could show you this, because this meeting  
9           is of the Medical Staff Council - tab 34. Do you see there  
10          that a couple of weeks after he signed that fees for  
11          service contract - you see that last bit?  
12          A.     Yes.  
13  
14          Q.     That sort of sums up, doesn't it, the two sides of it,  
15          that it was both consultation obstetrics and if required  
16          Caesarean sections?  
17          A.     Yes.  
18  
19          Q.     And as you understood it, when you finally learned of  
20          the Medical Board's condition attaching to his  
21          registration, he shouldn't have been doing either of them?  
22          A.     No, he shouldn't have.  
23  
24          Q.     Do you agree with me that if we go back to this 14  
25          March document at tab 2 - and I'll just take you to the  
26          second page of that, Mr Wilson - just in the light of the  
27          documents that you have seen, you will see the first  
28          paragraph says that the specialist, namely, Dr Reeves,  
29          appointed to provide services within the Bega Valley, has  
30          conditions on his registration - I'm just summing this up -  
31          which prevents him doing obstetric care?  
32          A.     Yes.  
33  
34          Q.     Is it fair to say that when the appointment was being  
35          made you didn't know that there were conditions upon his  
36          registration which prevented him from undertaking obstetric  
37          care?  
38          A.     I think we knew he wasn't allowed to treat patients,  
39          and that's presumably why he didn't want to have an  
40          obstetrics practice. We knew that.  
41  
42          Q.     I just wanted to explore that a little, because  
43          Dr Mortimer's report from the Credentials Committee, which  
44          we have got at tab number 5, on the second page you will  
45          see Dr Mortimer describes the conditions on his  
46          recommendations to the committee - do you see that?  
47          A.     Yes.

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Q. Then he goes on to tell the Credentials Committee that "specialist backup for GP obstetricians was required"; do you see that?

A. I do.

Q. So that would hardly be consistent with Dr Mortimer knowing that he was not supposed to do obstetrics, would it?

A. I agree.

Q. So how do you resolve that? Are you relying on your memory which is not reflected in your affidavit in 2003 or has something else happened?

A. Well, if John made that statement, it implies that he knew what the conditions of registration were.

Q. He knew that there were conditions of registration?

A. But that says he described them to the committee.

Q. Yes.

A. So the inference is that he knew what they were.

Q. Yes.

A. Well, that is inconsistent with the other statement.

THE COMMISSIONER: Q. It is not, is it, Mr Wilson, if all he knew was what was in that Medical Board letter --

A. Correct.

Q. -- of 27 December 2001 that you looked at a little earlier?

A. Correct, yes.

Q. So in other words, if what Dr Mortimer was doing was to say, "I'm describing the conditions of registration as set out in that letter", then he could go on and make these statements?

A. He could.

Q. Because, as you rightly said, what that letter doesn't tell you is there is any restriction on obstetrics. I wanted to ask you this question, and I know you are doing your best to think become a long time, but there is a big difference when someone comes for an interview and they say to you on the one hand, "I won't be doing any obstetric care" - in other words, "It's not my intention to do it";

1 do you follow?  
2 A. Yes.  
3  
4 Q. Or alternatively saying to you, "I am forbidden by the  
5 Medical Board to provide obstetric care" - in other words,  
6 not that "I won't be doing it", but "I can't do it." Do  
7 you follow the difference between those two statements?  
8 A. I do, yes.  
9  
10 Q. They are quite different statements?  
11 A. I would agree.  
12  
13 Q. I have a sense - and I invite you to agree or  
14 disagree - that what Dr Reeves told the interviewing  
15 committee, the appointments committee, was not "I can't do  
16 obstetrics", but rather "I won't be" or "I don't intend to  
17 do obstetrics"; would that be correct?  
18 A. I think that is true.  
19  
20 Q. And hence your thought process, which is he wasn't  
21 going to get his hands dirty as you told me but he was  
22 there to help --  
23 A. Yes.  
24  
25 Q. -- if called upon by other doctors --  
26 A. Yes.  
27  
28 Q. -- either for consultation and advice or, as Mr Tobin  
29 has put to you, to help out in an emergency Caesarean.  
30 Would that be a good summary?  
31 A. I believe it would be. I'm slightly biased about it  
32 because I've read the material on the Internet when the  
33 Medical Board heard his case and disbelieved everything he  
34 said which I thought - I thought really was a bit unfair,  
35 because a lot of the material it was saying was not new to  
36 me. I'd heard it all before. I mean, that doesn't excuse  
37 him in any way, I'm not suggesting that, but I don't think  
38 it really got to the core of the issue.  
39  
40 Q. No, and hence my question to you about whether there  
41 is a difference between "won't" and "can't"?  
42 A. Yes, very much so.  
43  
44 Q. And I have a sense that what Dr Reeves was saying to  
45 the interviewing committee was, "Don't worry. I won't be  
46 doing obstetrics directly, but I will be able to help the  
47 existing practitioners." He certainly didn't say, "I can't

1 do obstetrics because the Medical Board have banned me from  
2 doing it"?

3 A. Correct.

4

5 Q. That's correct.

6 A. Yes. I should say in terms of trying to learn from  
7 these situations --

8

9 Q. Yes, I wanted to come to that. What do we learn from  
10 what has happened? How can we stop it happening again?

11 A. In going through these papers, the Medical  
12 Appointments Committee and the Credentials Committee should  
13 have picked up the phone and spoken to the Medical Board.  
14 Now, I don't know whether John Mortimer did that or not,  
15 but we should have said, "Look, we're not going to appoint  
16 this guy until you send us the explanatory material about  
17 his position", and we didn't do that.

18

19 Q. No, there are a couple of things that you may not know  
20 about. One is that in the time between when Dr Reeves was  
21 appointed and now, the Medical Board have made available on  
22 their website a facility that will let you type in the name  
23 of a doctor, the surname, and search to see if they have  
24 conditions and, if so, what type of conditions they are.  
25 So one can do that check very easily.

26 A. Yes.

27

28 Q. Of course, what this does teach us all is that that  
29 sort of check is mandatory. It has to be done for  
30 everybody, whether they be a locum, a temporary appointment  
31 or a permanent appointment without fail, because otherwise  
32 one can get this sort of situation recurring. So I think  
33 that that facility makes a difference.

34

35 But tell me this, I also have a sense that - and it  
36 may not be the same today but back in 2002 when this  
37 appointment was happening - there was a broad sense that if  
38 doctors told you something, you took it to be true. In  
39 other words, you, broadly speaking, trusted what doctors  
40 told you; is that right?

41 A. I think that's true. I think it was certainly true in  
42 1996 when the board started. During the intervening years  
43 following 1996 when the department put a lot of effort into  
44 quality work - and so did most of the Area Health Services,  
45 including us - I think that changed, and I like to think,  
46 even though there are obviously still gaps in the  
47 situation, the appointment of doctors as VMOs was certainly

1 flatter in 2002 than it was in 1996.

2

3 Q. And you certainly hope it is better today than it was  
4 in 2002?

5 A. It obviously is, isn't it?

6

7 Q. Continuous improvement.

8 A. Yes.

9

10 Q. Tell me this - this is not directly on Dr Reeves but I  
11 will get the benefit of your experience while you are here,  
12 Mr Wilson: how much did this time as the chairman of the  
13 Area Health Service take?

14 A. Well, I took this on after being a local government  
15 councillor, and I spent a year being the mayor. It is what  
16 I did. I didn't have anything else to do, if you like. It  
17 was what I did. Being the chair of the board, I took the  
18 attitude that it wasn't sufficient to chair meetings; you  
19 had to know what you were doing. I spent a lot of time  
20 doing it - going to meetings that I didn't perhaps have to  
21 go to, but being involved in the application of the  
22 policies the board approved, and so on, perhaps to the  
23 annoyance of the CEOs sometimes, but that conflict was  
24 always there because the board was supposed to be  
25 responsible under the legislation.

26

27 Q. Looking back on it, would it have been a day a week?

28 A. No, it would have been more than that. On most days  
29 of the week - I would have spent two or more days in  
30 Queanbeyan.

31

32 Q. So most weeks you would have had two days up in  
33 Queanbeyan?

34 A. Yes, and interspersed with other activity - you know,  
35 going to Health Council meetings.

36

37 Q. Whatever was necessary?

38 A. Yes.

39

40 Q. It is a pretty substantial part time position, isn't  
41 it?

42 A. Yes, it is. This is irrelevant to your inquiry, I  
43 suppose, but all during the time I was in that position, we  
44 had two main difficulties - money and doctors.

45

46 Q. Do you mean by that enough doctors to provide services  
47 throughout the area?

1 A. Yes. Because you didn't have the permanent doctors  
2 available to you in the towns, the special people - if you  
3 needed someone to fill in, you had to pay a lot of money.

4  
5 Q. For locums you would be paying a lot of money.

6 A. I remember one crazy situation where we brought an  
7 orthopaedic surgeon over from New Zealand simply because  
8 the minister wanted the guy in Bega because there was a  
9 motorcycle event on in the town. Now, all of that sort of  
10 stuff takes money. The admin staff at Bega have done some  
11 work on the cost of transporting patients to Canberra. My  
12 recollection is that for the year it was approaching  
13 \$1 million, just for that. The staff running the place  
14 were very stressed in terms of the availability of casuals.  
15 It is what made me leave eventually.

16  
17 THE COMMISSIONER: Thank you, that was not quite what I  
18 was asking you about but I was interested to understand  
19 from your experience. Thank you for telling me that.

20  
21 MR TOBIN: Q. Mr Wilson, do you remember in mid-November  
22 2002, 14 November, being told that contact had been made  
23 with the Medical Board and certain information about orders  
24 involving Dr Reeves' practice had come to light? Do you  
25 remember --

26 A. I can't recollect that.

27  
28 Q. Do you remember having conversations with the CEO in  
29 November 2002 as to what was to be done about Dr Reeves?

30 A. It was still Dr Robinson, wasn't it?

31  
32 Q. Yes.

33 A. No, I can't recollect conversations.

34  
35 Q. In the ordinary course of things, would you expect the  
36 CEO to discuss with you, as chairman, a problem such as the  
37 issue of Dr Reeves carrying out obstetric practice in the  
38 public hospitals when that came to light?

39 A. Yes, I would.

40  
41 Q. So is it likely that it would have been raised with  
42 you as a matter of course?

43 A. It is likely that it would have been. For example, I  
44 can recollect she discussed with me an incident down in the  
45 Bega Valley relating to Dr Reeves and gynaecological  
46 services. There had been a complaint by one of the  
47 patients.

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Q. Would you have expected that she would run past you what the area proposed to do about Dr Reeves in order to get your concurrence?

A. Yes, I would have thought so.

Q. So that was the way you worked together?

A. Yes.

Q. Although you have no recollection in this case of that happening?

A. I have no recollection of that happening.

Q. Could I go back to your earlier affidavit at tab 2. I think we started with this one. I asked you about paragraph 4 and you explained what you meant by that.

A. Yes.

Q. As I understood it, whatever conditions are referred to in paragraph 4, you came to learn, did you not, that there were orders over and above the conditions in that Medical Board letter?

A. Yes.

Q. And then, going to the attachments, which are the minutes of the meeting you chaired at Delegate, you'll see what's set out there is the information conveyed by the CEO as to Dr Reeves; do you see that?

A. Yes.

Q. Would you have signed off on these minutes at the time of the next meeting of the board?

A. Almost certainly. There was a member of the staff who made sure I did.

Q. And would you have read this at the time, Mr Wilson?

A. Yes.

Q. And are you happy, or were you happy at the time, that this was an accurate statement?

A. I would have been, yes.

Q. And you were satisfied, in swearing the affidavit, that the contents of that affidavit of September 2003 were, to the best of your knowledge, true and correct?

A. Yes.

1 THE COMMISSIONER: Is there anything more, Mr Tobin?

2

3 MR TOBIN: No, I don't think so.

4

5 THE COMMISSIONER: Q. Mr Wilson, that brings to an end  
6 the formal questions that I was interested in asking you  
7 and having an understanding of, and it I think now explains  
8 what was a little unclear to us initially, so I'm very  
9 grateful to you for coming and clearing that up.

10

11 Is there anything you'd like to add or anything else  
12 you want to tell us about these events? Don't feel as  
13 though you have to, but I don't want you going back to  
14 Numerella without at least telling me anything that you  
15 think I should know.

16 A. I don't think there's anything else. Except for one  
17 conversation, an off-the-record conversation with a journo,  
18 I have refrained from having public debate about this,  
19 because, particularly at Bega, there has been a public  
20 debate by the local member, who, every time the subject  
21 comes up, taunts me on the radio. I've explained to them  
22 that I don't want to get into a public fight about this,  
23 but all this will come out, will it?

24

25 Q. I anticipate that some time in the next few weeks I  
26 will be delivering a report dealing with Dr Reeves and his  
27 appointment and canvassing all of the facts and setting out  
28 precisely who said what to whom?

29

A. Good.

30

31 THE COMMISSIONER: Hopefully, that will give everybody a  
32 sound basis for having a rational debate about what  
33 happened.

34

35 Just so that you know, whatever my report is, it won't  
36 deal with individual patients saying, "My treatment from  
37 Dr Reeves was" this, that or the other, because that's  
38 being investigated by other bodies and I'm not looking  
39 specifically at that. Of course, though, it is necessary  
40 for me to note that Dr Reeves did do obstetrics during that  
41 period. So that's the way my report will deal with it.

42

43 So, Mr Wilson, thank you very much. Now, I will  
44 adjourn the hearing. Again, can I express my gratitude to  
45 you for coming and I will make sure that the staff make  
46 sure that all of your travel requirements are organised  
47 suitably.

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MR WILSON: Thank you.

THE COMMISSIONER: Thank you very much, Mr Wilson.

AT 1.27PM THE COMMISSION WAS ADJOURNED ACCORDINGLY

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