

Mr Martin Fletcher
CEO, AHPRA
GPO Box 9958
MELBOURNE VIC 3001

Via email: martin.fletcher@ahpra.gov.au

14 April 2022

Dear Mr Fletcher,

Public Health Messaging is not the same as Health Care

On behalf of the Australian Medical Professional Society (AMPS) and the Nurses' Professional Associations of Australia (NPAA) we respectfully demand AHPRA remove the gag orders issued on the 9th of March 2021¹. These orders threaten regulatory action against Medical and Health Professionals for fulfilling their obligations to provide tailored patient care, evidence-based scientific approaches and informed consent.

AMPS recently conducted a survey of our medical members with some revealing results, for example:

- 97% of our membership believe the Government must provide health professionals with the scientific evidence underpinning policy directives.
- Nearly 95% believe they should be free to actively participate in public discourse without the threat of AHPRA disciplinary action.
- Nearly 97% believe open debate and questioning of policy decisions using scientific evidence for their patients best interests should be allowed without the threat of disciplinary action.
- Nearly 92% believe Government bureaucracy is interfering with their ability to treat their patients. The sacred Doctor-Patient relationship should be respected.
- Nearly 95% believe disciplinary action, and the threat of it, rather than being used for legitimate professional misconduct, is being used to silence doctors and allied health practitioners.
- Nearly 90% do not feel free to share their opinion on private social media accounts as a community member without the threat of being reported.
- More than $\frac{3}{4}$ surveyed said they no longer felt comfortable discussing concerns over policies and protocols in their workplace.
- More than $\frac{3}{4}$ of respondents know a colleague that has had their career threatened for questioning government or institutional policy about a treatment or procedure.
- Tragically, in our current health crisis, nearly 85% of respondents said they have known a colleague who has left (or intends to leave) the profession after feeling they cannot speak publicly on health matters.

¹ Ahpra---Position-statement---COVID-19-vaccination-position-statement (2).PDF

AHPRA's gag orders impede professional health advice and patient advocacy based on individual patient risk/benefit assessment by labelling such professional advice "the promotion of anti-vaccination statements", "health advice which contradicts the best available scientific evidence" or "seeking to undermine the national immunisation campaign." AMPS members want to know who decides the "best" available scientific evidence, why it cannot be challenged based on normal evidence-based medicine assessments and how they can provide informed consent in such an environment of restrictions on free medical and scientific discourse?

Furthermore, our members have major concerns about the public being coerced into what Minister Hunt referred to as the largest clinical vaccination trial. A vaccination trial of novel, poorly tested vaccine technology, with no long term data, where the manufacturers are provided liability protection by the government. According to the immunisation handbook:²

For consent to be legally valid, the following elements must be present:

- It must be given by a person with legal capacity, and of sufficient intellectual capacity to understand the implications of receiving a vaccine.
- It must be given voluntarily in the absence of undue pressure, **coercion** or manipulation.
- It must cover the specific procedure that is to be performed.
- It can only be given after the potential risks and benefits of the relevant vaccine, the risks of not having it, and any alternative options have been explained to the person.

According to this legislative framework it is illegal for health practitioners to inject someone under coercion, such as under threat of job loss through government mandates.

It is therefore of critical importance for the future of evidence-based medicine and the health of our Nation that healthcare professionals provide feedback from the frontline, review emerging evidence and debate transparent objective data. AMPS is supporting our Doctors' fight for truth and integrity in Science and Medicine to ensure we can support AHPRA's primary role of protecting the public:³

AMPS believes this can be achieved by appropriately adhering to the Australian Health Sector Emergency Response plan for Novel Coronavirus 2020 ⁴.

Section 4.2.5: Health sector evidence-based decision making consultation should guarantee our members participation in continuing policy review through data analysis, experience and peer reviewed research.

Section 2.6: Ethical framework trust means that health decision makers strive to communicate in a timely and transparent manner to the public and those within the health system.

² [Preparing for vaccination | The Australian Immunisation Handbook \(health.gov.au\)](https://www.health.gov.au/immunisation)

³ [Australian Health Practitioner Regulation Agency - Who we are](https://www.ahpra.gov.au/About-us/Who-we-are.aspx)

⁴ [Australian Health Sector Emergency Response Plan for Novel Coronavirus 2019 FINAL](#)

Our members do not believe this pandemic plan is being adhered to and AHPRA is undermining transparent communication and consultation by threatening the livelihood of anyone who questions the public health messaging. Such active hostility from the health practitioner regulatory agency against highly educated medical professionals participating in evolving pandemic planning is disturbing.

Health professionals' primary role and duty is to make the care of patients their first concern and to practise medicine safely and effectively, as outlined by the AHPRA code of conduct. They must be honest, ethical and trustworthy. Doctors have a responsibility to protect and promote the health of individuals and the community.

However, doctors cannot be honest with their patients because they are denied access to open and transparent data from regulators, politicians and pharmaceutical companies. AMPS members are very concerned that our regulatory bodies and boards are forcing medical professionals to breach the principle of "informed consent", thereby undermining the AHPRA Code of Conduct. As a result trust in health professionals is declining ⁵.

Tragically, we are aware that AHPRA has stated it is not within their mandate to evaluate the scientific validity of statements or exemptions, but only to assess if the statements or exemptions go against the Public Health Orders. If Public Health Orders have no demonstrable, transparent, objective, empirical data and are not open to public scrutiny, then this is politics not health care. If evidence-based medicine is decided by political dogma and influenced by corporate interests, media sensationalism and political polling, then "evidence-based medicine" is a lie.

How can AHPRA enforce compliance based on "best available scientific evidence" when they have stated it is not their role to evaluate the scientific evidence? In defiance of the Code of Conduct, AHPRA, as our national regulator of health professionals, has become a single-minded enforcer of government policy rather than a regulator of safe, effective and trustworthy professional practice. Silencing any dissent from the public health messaging through coercive government edicts that resist all requests for data and statistics, with no ongoing review, is undermining trust in government, institutions and the medical establishment.

AHPRA's 9 March 2021 position statement turns health professionals into an enforcement arm of the government. If the Government says a public health order is "safe and effective" while data is hidden, delayed or redacted, health professionals are being coerced to nod and go along with it regardless of the evidence. If you question, share a facebook post, or write an exemption that contradicts the States' assertions, you risk suspension as a threat to public health, regardless of how scientifically accurate your argument is.

Red Union, through engagement with our AMPS and NPAA members, have discovered that this position statement has created a massive loss of confidence in the transparency, fairness and administrative procedures of our regulatory body AHPRA. The most troubling being an inability to make public interest disclosures where scientific risk/benefit evidence indicates harm or potential harm to an individual or group. The shift away from AHPRA's core mission and values has

⁵Medical-Board---Code---Good-medical-practice-a-code-of-conduct-for-doctors-in-Australia---1-October-2020.PDF.

created a culture of **SILENCE** and **FEAR**, even within workplaces where concerns are raised in confidence.

At AMPS and NPAA we believe in the sanctity of the medical professional-patient relationship and that health professionals have the right and responsibility to advocate for the best interests of their patients and community using peer-reviewed scientific evidence, and to provide all relevant information to their patients/clients to allow them the right to provide or withhold informed consent for medical treatments on an individualised basis. Robust, transparent and healthy discussion of legitimate concerns based on peer-reviewed research and transparent data leads to trust in our health system and evidence-based best practice.

Censoring of our medical frontline by AHPRA during an emergency is not in the best interests of Australians. As case reports of severe adverse events from these experimental gene-based vaccines continue to mount, what we are seeing as a result is an escalating distrust of government, institutions and the medical field as a whole. The science has moved on and there is now grave concerns about poor safety and efficacy of the experimental gene-based vaccines ⁶, yet government policy does not appear to be “following the science” but more adhering to a narrative from early 2021.

AHPRA's mandate is to protect the public from practitioners whose conduct falls below standards set by national boards. However, feedback from our members has raised serious concerns that AHPRA now functions as an enforcer of Government policy, a politically motivated narrative and vested interests rather than a regulator of best practice. Our members want to feel supported, not intimidated in their vital roles to their patients and clients by their health regulatory agency.

THEREFORE, on behalf of our members, we respectfully demand:

1. **Evidence before policy:** That Health Professionals be returned their right to advocate for the best interest of their patients and community using peer-reviewed scientific evidence without being intimidated and threatened with regulatory action by AHPRA, where the evidence contradicts public policy and public health messaging.

Furthermore we note, recently in response to Senator Gerard Rennicks' letter dated 23 December 2021⁷AHPRA General counsel outlined that the position statement does not preclude health practitioners from expressing scientifically backed health and safety concerns or their conscientious objections. AMPS welcomes this clarification and notes it should lead to reinstatement of doctors who have been suspended for providing views on public health measures and exemptions based on clinical judgement and scientific evidence even when it did not align with public health messaging.

2. **Transparency:** That AHPRA provides health professionals with the “best” scientific evidence that has guided AHPRA's promotion of a narrow restrictive policy on all COVID mandates, testing, masks, lockdowns, and restrictions on early medical treatments.

⁶ (<https://www.covidmedicalnetwork.com/open-letters/open-letter-to-atagi.aspx>)

⁷ [Australian Health Practitioner Regulation Agency - Response to Senator Rennick and Tony Nikolic on Whistleblower Policy \(ahpra.gov.au\)](https://www.ahpra.gov.au/Response-to-Senator-Rennick-and-Tony-Nikolic-on-Whistleblower-Policy.aspx)

6. **Let doctors do their job:** That AHPRA cease invading the sacred doctor-patient relationship, by ending its threat of disciplinary action if practitioners do not adhere to a policy narrative representing a single prescribed interpretation of the scientific evidence. Enforcement is not a consensus.

3. **Timely complaints process:** As recommended in the 2017 Senate committee, AHPRA must improve the timeliness of the complaints process. All complaints should be resolved in a timely, transparent and fair manner: Procedures should not take many months or years.

4. **Accountability:** That there are consequences for complaints proven to be vexatious. Reinstatement of medical professionals who have raised legitimate concerns based on peer-reviewed scientific evidence.

5. **Roll back mission creep:** That AHPRA cease monitoring health practitioner's personal social media accounts. We believe all members of the public should be free to voice their personal opinions on any topic on their personal social media accounts. Restricting free speech is beyond AHPRA's remit.

Under AHPRA's Health Profession Agreement 2020-2025, AHPRA outlines the importance of integrity, respect, collaboration and achievement to maintain community trust and practitioner confidence. AMPS and NPAA respectfully request that AHPRA engage with practitioners to return to these principles.

Yours sincerely,

The Australian Medical Professional Society
Nurses Professional Association Australia