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# Independent Health Advice Panel

## Second Face-to-Face Meeting Minutes

Date: Monday 9 September 2019

Time: 13:00 to 16:15

Location: Ground Floor, 5 Constitution Avenue Canberra ACT 2600

**Participants:**

Independent Health Advice Panel:

- Dr Antonio Di Dio, Australian Medical Association, IHAP Chair
- Professor Brendan Murphy, Australian Government Chief Medical Officer (Commonwealth Chief Medical Officer), Department of Health
- Dr Parbodh Gogna, Chief Medical Officer of the Department of Home Affairs and Surgeon-General of the Australian Border Force
- Associate Professor Susan Moloney, Royal Australasian College of Physicians
- Associate Professor Neeraj Gill, Royal Australian and New Zealand College of Psychiatrists
- Mr Guy Coffey, Australian Psychological Society
- Associate Professor Michael Douglas, Australian College of Rural and Remote Medicine

Department of Home Affairs:

- s22(1)(a)(ii) Director, Regional Processing Taskforce (RPTF)
- s22(1)(a)(ii) Acting Director, IHAP Secretariat
- s22(1)(a)(ii) IHAP Secretariat

Acknowledgement of Country: Dr Di Dio, IHAP Chair

Apologies: Nil

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## Independent Health Advice Panel

### Second Face-to-Face Meeting Agenda

**Date:** Monday 9 September 2019

**Time:** 13:00 to 16:15 (AEDT)

**Location:** **Ground Floor, 5 Constitution Avenue Canberra ACT 2600**

*Note that the room is available for the Panel's use all day.*

Agenda Item	Time	Lead
1 Welcome to IHAP and Minutes of 6 June 2019 meeting	13:00	Chair
<u>Departmental representations</u>		
2 Update on health services available in Nauru and PNG and relationship with host countries	13:15	Regional Processing Taskforce
<u>IHAP business</u>		
3 Reporting – 30 September 2019 Quarterly Report	14:00	Chair/Panel
4 Other Business		Panel
a) Document Library		
b) IHAP Outcomes Tracker		
c) PNG and Nauru visit status		
5 Closing remarks	16:00	Chair

*Following the meeting, at 16:30, there will be a security briefing for Panel and Secretariat members travelling to PNG in October 2019.*

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Item 1: The Chair opened the meeting and welcomed Independent Health Advice Panel (IHAP) members, noting the three new members, and departmental officers. The minutes of the previous IHAP meeting held 12 June 2019 were accepted as a true record.

The Panel made use of the meeting to request and exchange information with the Secretariat regarding:

- the relevant legislation
- the outcomes of the Federal Court case regarding the term “remote treatment”
- the repeal process going through the parliamentary process.

Item 2: s22(1)(a)(ii) Director, Regional Processing Taskforce, joined the meeting at 13:30 to provide a briefing on the current and future processes for transferees as well as details of relationships, facilities and services available in both PNG and Nauru. She gave a detailed overview for the benefit of the three new Panel members and an update for all participants. s33(a)(iii)

s22(1)(a)(ii) provided information regarding the changes that have occurred recently with the transfer of people from Manus Island to the Bomana Immigration Centre Port Moresby and an overview of the circumstances of the remaining eight. She said that there should be no one left on Manus Island by the time the Panel travelled to PNG in October 2019.

Following a very detailed description of the various facilities available in PNG, including the ongoing support provided to those in the community, she undertook to provide the Panel members with a full breakdown of numbers for the various cohorts, including location and pathways, as well as maps and descriptions of the types of accommodation. An update of the statistics would be provided again in early October, prior to the Panel’s travel to PNG.

Action: RPTF and Secretariat

Items 3 and 4a: The participants were provided with a copy of the template for the 30 September 2019 report and the Secretariat explained how the Panel’s requests for information will be routinely submitted as a formal Notice under s199D of the Act to be complied with ten days following the end of each reporting period.

The Panel requested that the current Notice be amended to include daily patient logs from IHMS and statistics for Nauru (as is provided for PIH).

Action: Secretariat

s47C

Item 4b: The Panel requested that the Outcomes Tracker be amended to reflect only current cases and agreed that a sub-committee be formed on rotation to review outcomes in more detail. Mr Coffey and A/P Moloney agreed to take this role for the first three months.

Action: Panel

Item 4c: The Secretariat informed that PNG government approval was still pending, however all plans were confirmed. The Department’s PNG Program Management Branch were liaising with PNG officials regarding the required permission. The Panel requested the following meetings, arrangements and information for their visit:


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- What access is available to follow-up facilities and what is the reach of PIH post discharge or whether it depends on the patient to seek this support;
- Summary of mental health capacity at PIH;
- Meetings with services providers, including JDA, and PIH senior medical staff.

Panel discussed the need to travel to Nauru later in the year and agreed that A/P Gill or Mr Coffey should travel with A/P Douglas or Dr Di Dio.

Concerns raised by the Panel over the course of the meeting included:

s33(a)(iii), s47C



Panel members were asked to provide the IHAP Secretariat with any leave plans.

Action: Panel members

**Next meetings**

The next face-to-face meeting will be held at 13:00 hrs on Monday 2 December 2019 in Canberra. The date for the next meeting to be held early February 2020 will need to be decided.

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# Independent Health Advice Panel

## Third Face-to-Face Meeting Minutes

Date: Monday 2 December 2019

Time: 13:20 to 16:15

Location: History Room, Ground Floor, 5 Constitution Avenue Canberra ACT 2600

### Participants:

Independent Health Advice Panel:

- Dr Antonio Di Dio, Australian Medical Association, IHAP Chair
- Professor Brendan Murphy, Australian Government Chief Medical Officer (Commonwealth Chief Medical Officer), Department of Health
- Dr Parbodh Gogna, Chief Medical Officer of the Department of Home Affairs and Surgeon-General of the Australian Border Force
- Associate Professor Susan Moloney, Royal Australasian College of Physicians
- Associate Professor Neeraj Gill, Royal Australian and New Zealand College of Psychiatrists
- Mr Guy Coffey, Australian Psychological Society
- Associate Professor Michael Douglas, Australian College of Rural and Remote Medicine

Department of Home Affairs:

- s22(1)(a)(ii) Director, PNG Program Management
- s22(1)(a)(ii) Director, Nauru Program Management
- s22(1)(a)(ii) Acting Director, IHAP Secretariat (outgoing)
- s22(1)(a)(ii) Director, IHAP Secretariat (incoming)
- s22(1)(a)(ii) IHAP Secretariat

Acknowledgement of Country: Dr Di Dio, IHAP Chair

Apologies:

- Mr Stephen Hayward, First Assistant Secretary, Health Services Division, Department of Home Affairs
- Mr Anton Bockwinkel, Assistant Secretary, Migration and Citizenship Law, Department of Home Affairs
- s22(1)(a)(ii) Director, Regional Processing Taskforce, Department of Home Affairs

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## Independent Health Advice Panel

### Fourth Face-to-Face Meeting Agenda

**Date:** Monday 2 December 2019

**Time:** 13:20 to 16:15 (AEDT)

**Location:** History Room, Ground Floor, 5 Constitution Avenue Canberra ACT 2600

*Note that the room is available for the Panel's use all day.*

Agenda Item	Time	Lead
1 Welcome to IHAP and update on Medevac Bill	13:00	Chair and FAS CEG HS
<u>Departmental representations</u>		
2 Update on health services available in Nauru and PNG and relationship with host countries	13:15	Regional Processing T/F
Plus briefing by Legal Division		Legal Division
<u>IHAP business</u>		
3 Reporting – 31 December 2019 Quarterly Report	14:00	Chair/Panel
4 Other Business		Panel
a) Document Library		
b) IHAP Outcomes Tracker		
c) Nauru visit status		
d) Dates for the next two meetings (first week of March and June 2020)		
5 Closing remarks	16:00	Chair

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Item 1: The Chair opened the meeting and welcomed the Independent Health Advice Panel (IHAP) members and departmental officers. He thanked all in advance for their time. The Minutes of the previous IHAP meeting held Monday 9 September 2019 were accepted as a true and accurate record.

In lieu of FAS CEG providing an update on the Medevac Bill, s22(1)(a)(ii) advised that the legislation would be debated in Parliament during this sitting period and a vote taken to determine the future of the IHAP legislation.

Item 2: s22(1)(a)(ii) (PNG Program Management) and s22(1)(a)(ii) (Nauru Program Management) provided an update on the availability of health services in Nauru and Papua New Guinea (PNG).

s22(1)(a)(ii) noted:

- The biggest change in circumstance for transitory persons in Papua New Guinea (PNG) is the completion of the contract with Paladin. Paladin completed services on 30 November 2019. As such, the security and garrison type services which have typically been available to them have now ceased. s. 22(1)(a)(ii) noted that transitory persons had been made aware prior to the contract ceasing and provided with alternatives for essential services such as transport (e.g. taxi vouchers for transport to medical services etc).
- The population of transitory persons on PNG continues to decrease as refugees find long term settlement arrangements such as resettlement in the United States or alternative third country options (for example UNHCR settlement). Of those transitory persons who have not been assessed as refugees, there are only a small number who are on the pathway to return to their country of origin.

• s33(a)(iii)

s22(1)(a)(ii) noted:

- s33(a)(iii)
- The Department's biggest service providers in Nauru, IHMS (medical services) and Canstruct (Garrison services), have extended their contracts to June 2020. s33(a)(iii)

• s33(a)(iii)

The Panel discussed a number of items related to health services in these processing countries:

- The panel requested an update regarding the progress of the mental health outreach programme in Port Moresby.
- The Panel asked whether interpreter availability at Pacific International Hospital (PIH). The Department advised that transitory persons had access to the Telephone Interpreter Service (TIS).
- The Panel asked whether the PIH employed mental health nurses.
- The Panel requested that the Department ensure that treating doctor reports are provided to psychiatrists or other doctors at PIH.

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- The Panel discussed the benefit of having access to the welfare provider reports in Port Moresby and requested access to similar services in Nauru. The Department noted that the welfare provider in Nauru, Eigigu Solutions Corporation (ESC), is contracted directly by the Government of Nauru. However, the Department is able to submit these types of requests on behalf of the Panel.

- s47C [REDACTED]

The briefing by the Legal Division was postponed due to unavailability of key staff. It was agreed that the Panel would consolidate its questions and submit them to Legal Services in writing for their consideration.

The Panel requested a separate meeting (via teleconference) with Legal Services.

Item 3: s47C [REDACTED]

Item 4a: The Panel discussed the GovTEAMs Document Library.

Item 4b: The Panel discussed the Outcomes Tracker and agreed to review the cases that continue to be monitored by the Department.

Item 4c: The Panel noted the previous advice from the Department (s22(1)(a)(ii) [REDACTED]) who noted that the Panel and Department could recommence liaison with the Government of Nauru regarding an appropriate travel period in early 2020 for the Panel's site visit.

Item 4d: The Panel agreed that the next face to face meetings will be held:

- Tuesday 10 March 2020; and
- Monday 1 June 2020.

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# Independent Health Advice Panel

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## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	04/07/2019 Time: 1040 hrs	s47F	
IHAP Meeting date:	05/07/2019		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral attached:	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	<u>Remotely</u>
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Following IHAP document review, s47F has been diagnosed with:

s47F

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# Independent Health Advice Panel

s47F

The IHAP Panel accepted s47F. The Panel also accepted s47F.

IHAP determined s47F

IHAP has accepted that s47F

IHAP noted that s47F

The members also noted that the MOC reviewed s47F case and did not recommend transfer to Australia for treatment. The IHAP agreed with the MOC opinion and noted that transfer to Australia is not necessary at this stage.

The Panel expressed concern about the delays between independent assessments of the patient and the reports being referred to the IHAP.

**The Panel noted that there was quite a delay from the treating doctors in preparing their reports (following their initial review) and submitting for Minister review. The Panel considers this to be particularly concerning considering their reports stated a transfer to Australia was urgent.**

## IHAP recommendations

The three IHAP members present agreed that their recommendation is that s47F transfer to Australia for medical treatment be **refused**. This recommendation is based on the following reasons:

s47F

The Panel agreed that their recommendation that s47F not be transferred to Australia is based on the above factors.

## Actions:

1. The IHAP be notified via the Outcomes Tracker in GovTEAMS when s47F is transferred to PH POM.

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# Independent Health Advice Panel

**Document library reviewed:** (list documents considered)

1. ABF Client brief – 2 pages
2. MOC Opinion – 2 pages
3. Letter from <sup>s47F</sup> [REDACTED]
4. Treating Drs referral – 9 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
5. Medical Records – 159 pages
6. Health Discharge Summary – 6 pages

**Panel members assessing:**

Professor Brendan Murphy  
 Dr Antonio Di Dio (Chair)  
 Associate Professor Susan Moloney

**IHAP Majority recommendation:**
**Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

**3/3**
**Transfer is recommended:**

No

**Date of IHAP recommendation:**

05/07/2019

**Time of IHAP recommendation:**

18:36

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	12/07/2019 Time: 16:43 hrs	s47F	
IHAP Meeting date:	13/17/2019 1500 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Saturday 13 July 2019 at 1500 hrs attended by 6 IHAP Panel members.

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii) and Stephen Hayward, Dept. of Home Affairs

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that he is a relevant transitory person.

Following IHAP document review s47F has been diagnosed with:

s47F

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## Sensitive

The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel agreed that <sup>s47F</sup> [REDACTED]

The Panel agreed that <sup>s47F</sup> [REDACTED]

The Panel agreed that <sup>s47F</sup> [REDACTED]

The Panel noted that <sup>s47F</sup> [REDACTED]

The Panel agreed that <sup>s47F</sup> [REDACTED]

The Panel agreed that <sup>s47F</sup> [REDACTED]

**The Panel noted that there was a significant unexplained delay from the treating doctors in preparing their reports (following their initial review) and submitting for Minister review. The Panel considers this to be particularly concerning considering their reports stated a transfer to Australia was urgent. The panel makes no criticism of any person or agency, as there are no doubt significant logistical challenges involved in this area, however, would appreciate further information about where and how the delays occur, in order to provide the best possible service to all concerned.**

### **IHAP recommendations**

All six IHAP members present agreed that their recommendation is that <sup>s47F</sup> [REDACTED] transfer to Australia for medical treatment be **refused**. This recommendation is based on the following reasons:

<sup>s47F</sup> [REDACTED]

The Panel agreed that their recommendation that <sup>s47F</sup> [REDACTED] not be transferred to Australia is based on the above factors.

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**Sensitive****Actions:**

1. s47F
2. s47F
3. The Panel be notified via the Outcomes Tracker in GovTEAMS when s47F is transferred to PIH POM.

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 05/07/2019 – 2 pages
2. Letter from s47F, 2 pages
3. Treating Drs referral – 10 pages
  - a. s47F
  - b. s47F
4. Clinical Records  
s47F

**Panel members assessing:**

Dr Antonio Di Dio ( Chair )  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Mr Guy Coffey  
 Associate Professor Michael Douglas

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	6/6
<b>Transfer is recommended:</b>	No

**Date of IHAP recommendation:**

14/07/2019

**Time of IHAP recommendation:**

07:51 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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**Sensitive**

**Sensitive: Personal****Independent Health Advice Panel****Clinical Assessment**

Meeting details		Biodata details	
IHAP referral date/time:	12/08/2019 Time: 1235 hrs	s47F	
IHAP Meeting date:	13/08/2019 1700hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

**Initial meeting:** Tuesday 13 August 2019 at 17:00 attended by 7 IHAP Panel members.

Secretariat attending: s22(1)(a)(ii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that s47F is a relevant transitory person.

Following IHAP document review s47F has been diagnosed with:

s47F

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**Sensitive: Personal**

**Sensitive: Personal**

s47F

The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers s47F and the report by the Medical Officer of the Commonwealth (MOC).

The Panel noted the disparity between the medical records provided to the IHAP versus the medical records referenced in the treating doctors' referrals.

The Panel agreed that s47F

The Panel s47F

The Panel agreed that s47F

. The Panel noted that s47F

. The Panel agreed that s47F

The Panel noted that Dr Parbodh Gogna's name was listed in the patient's notes on the chest x-ray and blood screening results taken when the patient first arrived on Christmas Island. Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All seven IHAP members present agreed that their recommendation is that s47F transfer to Australia for medical treatment be **refused**. This recommendation is based on the following reasons:

1. s47F
- 2.
- 3.
- 4.

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**Sensitive: Personal**

**Sensitive: Personal****Actions:**

- 1.
- 2.
- 3.

s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.08.2019 – 2 pages
2. Letter from s47F – 5 pages
3. Treating Drs referral – 13 pages
  - a. s47F
  - b.
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Dr Neeraj Gill  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

7/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

14/08/2019

**Time of IHAP recommendation:**

20:49 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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**Sensitive: Personal**

**Sensitive: Personal****Independent Health Advice Panel****Clinical Assessment**

Meeting details		Biodata details	
IHAP referral date/time:	04/09/2019 16:26 hrs	s47F	
IHAP Meeting date:	06/09/2019 19:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Initial meeting: Friday 6 September 2019 at 19:00 hrs attended by five IHAP Panel members with two apologies.

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that s47F is a relevant transitory person.

Following IHAP document review s47F has been diagnosed with:

s47F

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**Sensitive: Personal**

**Sensitive: Personal**

s47F

The Panel agreed with the possible diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel noted that

s47F

The Panel also noted that

s47F

The Panel also discussed

s47F

The members further noted that

s47F

It was noted that

s47F

s47F

, the Panel agreed that

s47F

. The members also noted that

s47F

The Panel considered that

s47F

s47F

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**Sensitive: Personal**



**Sensitive: Personal**

s47F

The Panel agree that

s47F

**IHAP recommendations**

All five IHAP members agreed that their recommendation is that s47F transfer to Australia for medical treatment be **refused**. This recommendation is based on the following reasons:

s47F

The Panel agreed that their recommendation that s47F not be transferred to Australia is based on the above factors

**Actions:**

1.

s47F

2. The Panel be notified, via the Outcomes tracker, when s47F has been transferred to

s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 27.08.2019 – 2 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral – 20 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Dr Michael Douglas Mr Guy Coffey Dr Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	.5/5
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	07/09/2019	<b>Time of IHAP recommendation:</b>	15:45. hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive: Personal****Independent Health Advice Panel****Clinical Assessment**

Meeting details		Biodata details	
<b>IHAP referral date/time:</b>	05/09/2019 16:45 hrs	s47F	
<b>IHAP Meeting date:</b>	06/09/2019 19:00 hrs	<b>Treating Doctor's referral received?</b>	Yes
<b>Reconvened IHAP meeting (if required):</b>	N/A	<b>Was the Referring Doctor's clinical assessment performed remotely or in person?</b>	Remotely
		<b>Health Service Provider clinical summary received:</b>	Yes

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

**Initial meeting:** Friday 6 September 2019 at 19:00 hrs attended by five IHAP Panel members with two apologies.

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that s47F is a relevant transitory person.

Following IHAP document review s47F has been diagnosed with:

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**Sensitive: Personal**

**Sensitive: Personal**

s47F

The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel members noted that

s47F

. It was also noted

s47F

The Panel noted that

s47F

All members agreed that

s47F

It was noted by the Panel that

s47F

The Panel members agreed that

s47F

The Panel agrees that

s47F

**IHAP recommendations**

All five IHAP members agreed that their recommendation is that transfer to Australia for medical treatment be **refused**. However, the Panel recommends:

s47F

The Panel agreed that their recommendation that not be transferred to Australia is based on the above factors

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**Sensitive: Personal**

**Sensitive: Personal****Actions:**

1. <sup>s47F</sup> [REDACTED]
2. [REDACTED]
3. The Panel be notified, via the Outcomes tracker, when <sup>s47F</sup> [REDACTED] has been transferred to <sup>s47F</sup> [REDACTED].

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 09/09/2019 – 3 pages
2. Letter from <sup>s47F</sup> [REDACTED] dated 22/08/2019 – 2 pages
3. Treating Drs referral
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Dr Michael Douglas Mr Guy Coffey Dr Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/5
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	7/09/2019	<b>Time of IHAP recommendation:</b>	15:35hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	12/09/2019 11:00	s47F	
IHAP Meeting date:	13 September 2019 18:00	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Professor Paul Kelly, A/Prof Sue Moloney, A/Prof Neeraj Gill, A/Prof Michael Douglas, Mr Guy Coffey. Dr Gogna provided his input following the meeting.

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel noted s47F

s47F

The Panel shared concern that s47F

The Panel were concerned that s47F

They were also concerned s47F

The Panel found s47F

The Panel noted that, s47F

The Panel notes s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six members present recommended that s47F be **approved** transferred to Australia for treatment.

The Panel agreed that s47F

. The Panel considered that th s47F

**Actions:**

1. s47F
2. The Panel be informed once transfer has occurred.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.08.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral – 12 pages
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Paul Kelly Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority (out of total members):</b>	7/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	13/09/2019	<b>Time of IHAP recommendation:</b>	1940hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/09/2019 Time: 18:12 hrs	s47F	
IHAP Meeting date:	16/09/2019 0730hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by four panel members.

Secretariat attending: s22(1)(a)(ii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that s47F is a relevant transitory person.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as Dr Gogna was not the treating doctor on Christmas Island, allowed Dr Gogna to continue in the discussion.

Following IHAP document review s47F has been diagnosed with:

s47F

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**Sensitive: Personal**

s47F

The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The members noted s47F

The Panel agreed that s47F

The Panel notes that s47F

s47F . It is noted that

The Panel noted that s47F

The Panel note s47F

The Panel expressed strong concerns with the particularly long delay in the treating doctors conducting their interviews and completing and submitting their reports.

**IHAP recommendations**

All four IHAP members agreed that their recommendation is that s47F transfer to Australia for medical treatment be **refused**. However, the Panel recommends:

- s47F

**Actions:**

Nil

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 5 pages
3. Treating Drs referral – 9 pages

a.

s47F

b.

4. Clinical Records

s47F

- 5.

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Dr Michael Douglas

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

4/4

**Transfer is recommended:**

No

**Date of IHAP  
recommendation:**

16/09/2019

**Time of IHAP recommendation:**

16:30 hrs

**Deemed approval (post 72  
hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	13/09/2019 Time: 1029hrs	s47F	
IHAP Meeting date:	14/09/2019 0800hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, A/Prof Sue Moloney, A/Prof Neeraj Gill, A/Prof Michael Douglas, Dr Parbodh Gogna.

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel considered the two treating doctor reports s47F

the Panel expressed concerns that s47F

The Panel considered s47F

The Panel recommended s47F

s47F

The Panel requested confirmation that s47F

The Panel notes a large volume of cases being referred to the Minister and then to IHAP; this creates some difficulty getting the complete panel to review the case and may need to be addressed by the Secretariat to ensure compliance with the relevant legislation.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel recommended that s47F request to transfer to Australia for medical treatment be **refused**.

The Panel recommended that s47F

s47F

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**Sensitive: Personal****Actions:**

1. The Panel request confirmation that <sup>s47F</sup> [REDACTED]
2. The Panel expressed concern about the length of time taken for a case to be fully documented and referred to the IHAP. **This case had extensive delays between the treating doctors initial interview and final report, as well as lengthy delay between the Department receiving notification and the Panel receiving a request to review. This has been raised repeatedly. The Chair will write to the <sup>s47F</sup> [REDACTED] to discuss.**

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 22 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records – 220 pages  
<sup>s47F</sup> [REDACTED]
5. [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Dr Michael Douglas

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

5/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

14/09/2019

**Time of IHAP recommendation:**

0930hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/09/2019 Time: 18:12 hrs	s47F	
IHAP Meeting date:	16/09/2019 07:30hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by four panel members.

Secretariat attending: s22(1)(a)(ii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that s47F is a relevant transitory person.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and, as Dr Gogna was not the treating doctor on Christmas Island, allowed Dr Gogna to continue in the discussion.

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel notes s47F

The Panel note s47F

The Panel agreed that s47F

**IHAP recommendations**

All four IHAP members agreed that their recommendation is that s47F transfer to Australia for medical treatment be **refused**. The Panel notes that s47F concerns have been addressed s47F prior to the Minister and IHAP receiving the referral. The Panel recommends:

- s47F

**Actions:**

Nil

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 8 pages

a. s47F

b.

4. Clinical Records

s47F

- 5.

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Dr Michael Douglas

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

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**Sensitive: Personal**

		<b>Majority</b> (out of total members):	4/4
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	16/09/2019	<b>Time of IHAP recommendation:</b>	1630 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/09/2019 Time: 1816 hrs	s47F	
IHAP Meeting date:	16/09/2019 1900hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Associate Professor Sue Moloney, Mr Guy Coffey, Associate Professor Neeraj Gill, Professor Paul Kelly, Dr Parbodh Gogna

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel reviewed the treating doctors' reports and noted that s47F

The Panel note that the Minister's letter has been omitted from this paperwork and request that the Secretariat confirm the Minister's refusal.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six members agreed that s47F request for transfer to Australia for medical treatment should be **refused**.

The Panel noted that s47F, and agreed that s47F requires:

- s47F
- 
- 

The Panel agreed that s47F

**Actions:**

- Secretariat to provide Minister's letter.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 8 pages

- a. s47F
- b.

## 4. Clinical Records

s47F

5. Offshore HSP response to Section 198E notification – 2 pages

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Dr Paul Kelly  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

6/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

16/09/2019

**Time of IHAP recommendation:**

2201hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/09/2019 Time: 1816hrs	s47F	
IHAP Meeting date:	16/09/2019 1900hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Associate Professor Sue Moloney, Mr Guy Coffey, Associate Professor Neeraj Gill, Professor Paul Kelly, Dr Parbodh Gogna

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel reviewed the treating doctors' reports and noted s47F

. The Panel noted s47F

The Panel noted that s47F

that s47F

The Panel were concerned

The Panel discussed s47F

s47F . The Panel expressed concern that

The Panel note that s47F

The Panel request:

- s47F
- s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The IHAP recommended that s47F request for transfer to Australia for medical treatment be **refused** in the first instance. Noting this, the Panel request regular (at least weekly) updates s47F

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**Sensitive: Personal****Actions:**

s47F

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 09.09.2019 – 1 page
2. Letter from advocate s47F – 6 pages
3. Treating Drs referral – 30 pages
  - a. s47F
  - b. s47F
4. Clinical Records  
s47F
5. s47F Offshore HSP Response – 2 pages

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Paul Kelly  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

6/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

16/09/2019

**Time of IHAP recommendation:**

2000hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/09/2019 Time: 1816 hrs	s47F	
IHAP Meeting date:	16/09/2019 1900hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Associate Professor Sue Moloney, Mr Guy Coffey, Associate Professor Neeraj Gill, Professor Paul Kelly, Dr Parbodh Gogna

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel reviewed the treating doctors' reports and note that

s47F

The Panel note

The Panel note that

The Panel noted that

The Panel note

. The Panel recommend that

. The Panel request review

The Panel noted that

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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## Sensitive: Personal

### IHAP recommendations

All six members of the IHAP Panel agreed that <sup>s47F</sup> request for transfer to Australia for medical treatment should be **refused** in the first instance.

The Panel request an update <sup>s47F</sup>

### Actions:

- Request for update <sup>s47F</sup> in two weeks.

### **Document library reviewed:** ABF Client brief – 3 pages

- Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
- Letter from advocate – 2 pages
- Treating Drs referral – 14 pages

a. <sup>s47F</sup>

b. <sup>s47F</sup>

- Clinical Records

<sup>s47F</sup>

- <sup>s47F</sup> OFFSHORE HSP RESPONSE TO SECTION 198E NOTIFICATION – 2 pages

### **Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Dr Paul Kelly  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Mr Guy Coffey

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<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	6/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	16/09/2019	<b>Time of IHAP recommendation:</b>	1001hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	17/09/2019	s47F	
	Time: 15:00 hrs		
IHAP Meeting date:	19/09/2019	Treating Doctor's referral received?	Yes
	Time: 19:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel reviewed <sup>s47F</sup> [REDACTED] and noted <sup>s47F</sup> [REDACTED]

The Panel noted <sup>s47F</sup> [REDACTED]  
The Panel discussed <sup>s47F</sup> [REDACTED]

The Panel noted <sup>s47F</sup> [REDACTED]

The Panel agreed that <sup>s47F</sup> [REDACTED]

With this in mind, the Panel recommended that <sup>s47F</sup> [REDACTED] request for transfer to Australia for medical treatment be **refused** at this time.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP members present recommended that <sup>s47F</sup> [REDACTED] request for transfer to Australia for medical treatment be **refused** at this time.

**Actions:**

The Panel discussed the level of services that were available in Port Moresby and requested an update regarding service delivery (noting the sudden increase in resident numbers as transitory persons previously residing in Manus have been transferred to Port Moresby, and thus wishing to ensure that there were enough services available for the increase numbers of residents).

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 12.09.2019 – 1 page
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral – 14 pages
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Paul Kelly Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	6/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	20/09/2019	<b>Time of IHAP recommendation:</b>	05:50
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	17/09/2019 Time: 1500 hrs	s47F	
IHAP Meeting date:	19/09/2019 1900hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by:

Secretariat attending:

Following IHAP document review s47F [REDACTED] has been diagnosed with:

s47F [REDACTED]

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**Sensitive: Personal**

s47F

The Panel discussed the treating doctors' reports and noted the lengthy delay between the interview and the initial report (written five weeks after interview).

s47F

s47F

the Panel agreed that s47F

. The Panel agreed that s47F

The Panel agreed that s47F

With this in mind, the Panel recommended that s47F request for transfer to Australia for medical treatment be **approved**.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP members present at this meeting agreed that s47F request for transfer to Australia for medical treatment should be **approved**.

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**Sensitive: Personal****Actions:**

The Panel requested they be informed via the Secretariat as soon as plans have been confirmed for <sup>s47F</sup> [REDACTED] transfer to Australia.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 12.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral – 13 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records <sup>s47F</sup> [REDACTED]

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Paul Kelly Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	6/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	20/09/2019	<b>Time of IHAP recommendation:</b>	05:50
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	17/09/2019 Time: 1500 hrs	s47F	
IHAP Meeting date:	19/09/2019 1900hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Professor Paul Kelly, Dr Parbodh Gogna, Associate Professor, Sue Moloney, Associate Professor Neeraj Gill, Mr Guy Coffey

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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**Sensitive: Personal**

s47F

The Panel considered the treating doctors' reports and the MOC opinion s47F. It was noted that s47F. The Panel noted that the refusal documentation from the Minister was not in the GovTeams folder of the documents provided and will be obtained by the Secretariat. The panel also notes s47F

The Panel discussed s47F and noted:

•

s47F

•

s47F

s47F

the Panel noted that s47F

. The Panel noted that s47F

The Panel note the wholesale movement of transferees from Manus Island to Port Moresby may require an adjustment period, and the panel will write to the Secretary clarifying the model of medical care being provided to refugees and non-refugees.

The Panel agreed that s47F

s47F

With this in mind, the Panel agreed that s47F request for transfer to Australia should be **refused** s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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## Sensitive: Personal

### IHAP recommendations

Four of the six members in attendance at the meeting agreed that s47F request for transfer to Australia should be refused.

### Actions:

- The IHAP request weekly updates s47F .
- A letter be written to the Secretary:-
  1. Clarifying the model of medical care being provided to refugees and non-refugees in Port Moresby.
  2. Noting that the Treating Doctors reports are being provided to s47F in advance of IHAP review, evidenced by the reports by the Health Service Provider (HSP) in the GovTeams case folders. IHAP would ask that secretary provide governance that the HSP attempts to engage with individuals to stratify/manage medical needs highlighted by the treating doctors. s47F

### Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 12/09/2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. s47F – Offshore HSP Response – 2 pages
4. Treating Drs referral – 14 pages
  - a. s47F
  - b. s47F
5. Clinical Records s47F

### **Panel members assessing:**

Dr Antonio Di Dio (Chair)  
Dr Parbodh Gogna

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**Sensitive: Personal**

		Professor Paul Kelly Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	20/09/2019	<b>Time of IHAP recommendation:</b>	11:34
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	19/09/2019 Time: 1100 hrs	s47F	
IHAP Meeting date:	20/09/2019 1730 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Friday, 20 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Susan Moloney, Dr Parbodh Gogna, A/Prof. Paul Kelly, A/Prof, Michael Douglas, Mr Guy Coffey

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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**Sensitive: Personal**

s47F

s47F the Panel agreed that there s47F  
s47F . The Panel agreed that s47F

The Panel noted that s47F  
The Panel agreed that s47F

The Panel noted that s47F  
The Panel noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All 6 members of the IHAP Panel agreed that their recommendation was that s47F be **refused** transfer to Australia. This recommendation is based on the following factors:

s47F

The Panel agreed that their recommendation to refuse s47F transfer to Australia was based on the above factors.

**Actions:**

s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 16.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> – 2 pages
3. <sup>s47F</sup> - Offshore HSP Response – 2 pages
4. Treating Drs referral – 13 pages
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
5. Clinical Records  
<sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Associate Professor Susan Moloney (Case Lead) Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	6/6
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	21/09/2019	<b>Time of IHAP recommendation:</b>	1138hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	19/09/2019 Time: 1100 hrs	s47F	
IHAP Meeting date:	20/09/2019 1730 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Friday, 20 September 2019 at 17:30 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, A/Prof. Paul Kelly, A/Prof. Michael Douglas, Mr Guy Coffey

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F [REDACTED]

The Panel considered the treating doctors' reports and the MOC opinion s47F [REDACTED]. The panel notes s47F [REDACTED]

The Panel discusses s47F [REDACTED] and noted:

- s47F [REDACTED]
- [REDACTED]

s47F [REDACTED] The Panel noted that s47F [REDACTED] however the Panel agreed that s47F [REDACTED]. The Panel agreed that s47F [REDACTED].

The Panel agreed that s47F [REDACTED]

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five of six Panel members present agreed that their recommendation was to **approve** s47F [REDACTED] transfer to Australia. This recommendation is based on the below factors:

s47F [REDACTED]

Based on the above factors, the Panel agrees that s47F [REDACTED] should be transferred to Australia s47F [REDACTED].

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**Sensitive: Personal**

**Sensitive: Personal****Actions:**

1. s47F be transferred to Australia for treatment. The Panel be notified through the Outcomes Tracker once s47F has been transferred to Australia for treatment.

2. s47F

- 3.

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 16.09.2019 – 1 pages
2. Letter from s47F – 2 pages
3. s47F - Offshore HSP Response – 2 pages
4. Treating Drs referral – 13 pages
  - a. s47F
  - b.
5. Clinical Records  
s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna (Case Lead)  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority (out of total members):</b>	5/6
<b>Transfer is recommended:</b>	Yes

**Date of IHAP recommendation:**

21/09/2019

**Time of IHAP recommendation:**

1138 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	21/09/2019 Time: 16:50 hrs	s47F	
IHAP Meeting date:	23/09/2019 17:30hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday, 23 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, Dr Neeraj Gill, A/Prof. Paul Kelly, A/Prof. Michael Douglas

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel considered the treating doctors' reports and the MOC opinion s47F .

The Panel noted s47F

The Panel noted that s47F

. The Panel agreed that s47F

The Panel raised concern that s47F

The panel raised concerns that s47F

The Panel agreed that s47F

s47F

. The Panel agreed that

s47F

The Panel agreed that

The Panel noted that s47F

The Panel noted that s47F

. The Panel noted that s47F

The Panel noted that s47F

The

Panel agreed that s47F

The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

Four of the six IHAP Panel members agreed that their recommendation was to **approve** s47F transfer to Australia for treatment. This recommendation was based on the following factors:

s47F

The Panel agreed that their recommendation is based on the above reasons.

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**Sensitive: Personal****Actions:**

1. s47F be transferred to Australia s47F.
2. s47F
3. s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 16.09.2019 – 2 pages
2. Letter from s47F – 2 pages
3. s47F - Offshore HSP Response – 2 pages
4. Treating Drs referral – 13 pages
  - a. s47F
  - b. s47F
5. Clinical Records
 

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna (Case Lead)  
 Associate Professor Paul Kelly  
 Dr Susan Moloney  
 Dr Neeraj Gill  
 Associate Professor Michael Douglas

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority</b> (out of total members):	4/6
<b>Transfer is recommended:</b>	Yes

**Date of IHAP recommendation:**

24/09/2019

**Time of IHAP recommendation:**

0849 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	21/09/2019 Time: 16:50 hrs	s47F	
IHAP Meeting date:	23/09/2019 17:30hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday, 23 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, Dr Neeraj Gill, A/Prof. Paul Kelly, A/Prof. Michael Douglas

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

The Panel considered the treating doctors' reports and the MOC opinion s47F.

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The Panel noted that s47F . The Panel noted that s47F

The Panel noted that s47F

The Panel noted that s47F .  
 The Panel also noted that s47F . The  
 Panel raised concern s47F .

The Panel raised concern s47F . The Panel raised concern that s47F

The Panel raised concern about s47F . The Panel were concerned s47F  
 . The Panel agreed that s47F

The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

Four of the six IHAP Panel members agreed that their recommendation was to **approve** the transfer of s47F to Australia for treatment. The Panel members agreed that their recommendation was based on the below factors:

s47F

The Panel agreed that their recommendation was based on the above reasons.

**Actions:**

1. s47F be transferred to Australia s47F .
2. s47F .
3. The Panel be notified through the Outcomes Tracker once s47F has been transferred to Australia.
4. s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 12.09.2019 – 1 page
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral – 11 pages
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>

## Clinical Records – 335 pages

<sup>s47F</sup>

- e. <sup>s47F</sup> \_Offshore HSP Response to S198E

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Paul Kelly (Case Lead)  
 Dr Susan Moloney  
 Dr Neeraj Gill  
 Associate Professor Michael Douglas

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority (out of total members):</b>	4/6
<b>Transfer is recommended:</b>	Yes

**Date of IHAP recommendation:**

24/09/2019

**Time of IHAP recommendation:**

0849 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	21/09/2019 Time: 16:50 hrs	s47F	
IHAP Meeting date:	23/09/2019 17:30hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday, 23 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, Dr Neeraj Gill, A/Prof. Paul Kelly, A/Prof. Michael Douglas

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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**Sensitive: Personal**

s47F

The Panel considered the treating doctors' reports and the MOC opinion s47F

The Panel discussed s47F and noted:

s47F

The Panel noted s47F .

The Panel agreed s47F

The Panel agreed s47F .

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation is to **refuse** s47F transfer to Australia for treatment. The Panel agreed that their recommendation is based on the following factors:

s47F

The Panel agree that their recommendation is based on the above reasons.

**Actions:**

1.

s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 13.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral – 13 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records  
<sup>s47F</sup> [REDACTED]

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Paul Kelly Dr Susan Moloney Dr Neeraj Gill Associate Professor Michael Douglas (Case Lead)	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	6/6
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	24/09/2019	<b>Time of IHAP recommendation:</b>	0849 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive: Personal**

# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	21/09/2019 Time: 16:50 hrs	s47F	
IHAP Meeting date:	23/09/2019 17:30hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday, 23 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, Dr Neeraj Gill, A/Prof. Paul Kelly, A/Prof. Michael Douglas

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel considered the treating doctors' reports and the MOC opinion in relation to <sup>s47F</sup> case.

The Panel discussed <sup>s47F</sup> The  
Panel noted <sup>s47F</sup>

The Panel noted <sup>s47F</sup>

The Panel agreed <sup>s47F</sup>

The Panel agreed <sup>s47F</sup>

The Panel agreed <sup>s47F</sup>

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation is to **refuse** <sup>s47F</sup> transfer to Australia for treatment. The Panel agreed that they based their recommendation on the following reasons:

<sup>s47F</sup>

The Panel agreed that their recommendation is based on the above factors.

**Actions:**

1.

<sup>s47F</sup>

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 13.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral – 13 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair)	
		Dr Parbodh Gogna	
		Associate Professor Paul Kelly	
		Dr Susan Moloney	
<b>IHAP Majority recommendation:</b>		Dr Neeraj Gill	
		Associate Professor Michael Douglas	
		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	6/6
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	24/09/2019	<b>Time of IHAP recommendation:</b>	0849 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	23/09/2019 Time: 1510 hrs	s47F	
IHAP Meeting date:	25/09/2019 0700 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Wednesday, 25 September 2019 at 0700 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Neeraj Gill, Dr Susan Maloney, Dr Paul Kelly, Dr Michael Douglas.

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

The Panel considered the treating doctors' reports and the MOC opinion in relation to s47F case.

The Panel discussed s47F

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## Sensitive: Personal

s47F

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the Panel noted that s47F

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The Panel noted that s47F

The Panel agreed that s47F

The Panel noted that s47F  
agreed that s47F

and agreed that s47F

. The Panel

The Panel agreed than s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

### **IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was to **refuse** s47F transfer to Australia for treatment. The Panel members agreed that their recommendation was based on the below reasons:

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The Panel agreed that their recommendation to refuse transfer was based on the above factors.

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**Sensitive: Personal****Actions:**

1.

s47F

2.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 page
2. Letter from s47F – 2 pages
3. Treating Drs referral – 13 pages
  - a. s47F
  - b. s47F
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Dr Michael Douglas

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

6/6

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

26/09/2019

**Time of IHAP recommendation:**

0925 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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**Sensitive: Personal**

# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	23/09/2019 Time: 1510 hrs	s47F	
IHAP Meeting date:	25/09/2019 0700 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Wednesday, 25 September 2019 at 0700 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Maloney, Dr Neeraj Gill, Dr Michael Douglas, Dr Paul Kelly

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

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**Sensitive: Personal**

s47F

The Panel considered the treating doctors' reports and the MOC opinion in relation to s47F case.

The Panel discussed s47F and noted:

s47F

The Panel noted that s47F The  
Panel also noted that s47F . The Panel  
noted that s47F

The Panel noted that s47F  
. The Panel agreed that s47F

s47F the Panel noted that s47F

The Panel noted that s47F

The Panel noted that s47F

The Panel agreed that s47F

The Panel noted that s47F

The Panel raised concern that s47F

The Panel agreed that s47F

The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

5 of the 6 IHAP Panel members present agreed that their recommendation was to **refuse** <sup>s47F</sup> [REDACTED] transfer to Australia for treatment. The Panel agreed that their recommendation was based on the below reasons:

1. <sup>s47F</sup> [REDACTED]
2. [REDACTED]
3. [REDACTED]

The Panel agreed that their recommendation to refuse transfer was based on the above factors.

**Actions:**

1. <sup>s47F</sup> [REDACTED]
2. [REDACTED]

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 17.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral – 13 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records <sup>s47F</sup> [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Dr Michael Douglas

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

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		<b>Majority</b> (out of total members):	5/6
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	26/09/2019	<b>Time of IHAP recommendation:</b>	0925 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	27/09/2019 Time: 0941 hrs	s47F	
IHAP Meeting date:	28/09/2019 0800 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel noted and agreed with the diagnoses provided by the treating doctors based on the clinical records provided. s47F

s47F

The Panel noted that s47F it was agreed that s47F

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel agreed that s47F

s47F

The Panel agreed that their recommendation to refuse s47F transfer was based on the above findings.

**Actions:**

1. s47F
2. The Panel be provided with a status update s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 pages
2. Letter from s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records
 

s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Paul Kelly Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	28/09/2019	<b>Time of IHAP recommendation:</b>	17:00
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	27/09/2019 Time: 0941 hrs	s47F	
IHAP Meeting date:	28/09/2019 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

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The Panel noted and agreed s47F

They noted that h s47F

s47F

The Panel were concerned that, s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel considered that s47F

s47F

The Panel would like to be informed of when this

s47F review is available, and make a further recommendation after that has been received.

The Panel agreed that their recommendation to refuse s47F transfer was based on the above findings.

**Actions:**

1. s47F
- 2.
3. A full update be made available to the Panel s47F

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**Sensitive: Personal**

**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 pages
2. Letter from s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
4. Clinical Records  
s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Paul Kelly Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	28/09/2019	<b>Time of IHAP recommendation:</b>	17:00 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
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IHAP Meeting date:	28/09/2019 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel were concerned that s47F

. They agreed that s47F

It was noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel recommends that s47F

The Panel agreed that their recommendation to refuse s47F transfer was based on the above findings.

**Actions:**

1. s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 20.09.2019 – 1 pages
2. Letter from s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records
  - s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Paul Kelly Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	28/09/2019	<b>Time of IHAP recommendation:</b>	17:00
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

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IHAP Meeting date:	28/09/2019 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel noted and agreed s47F

s47F

The Panel noted that s47F

The Panel was concerned that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel considered that s47F

The Panel agreed that their recommendation to refuse s47F transfer was based on the above findings.

**Actions:**

1. s47F
2. A full update be provided to the Panel s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 23.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. <sup>s47F</sup> Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Paul Kelly Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	28/09/2019	<b>Time of IHAP recommendation:</b>	17:00
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	28/09/2019 Time: 13:45 hrs	s47F	
IHAP Meeting date:	29/09/2019 15:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

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s47F

The Panel noted

s47F

The Panel agreed

s47F

. They also recommended that

s47F

The Panel recommended that

s47F

they noted

s47F

**IHAP recommendations**

s47F

**Actions:**

s47F

- Panel to be informed via the IHAP Secretariat once these have been provided.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 20.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	29/09/2019	<b>Time of IHAP recommendation:</b>	20:27
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	28/09/2019 Time: 13:45 hrs	s47F	
	IHAP Meeting date: 29/09//2019 15:00 hrs	Treating Doctor's referral received?	Yes
	Reconvened IHAP meeting (if required): N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

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s47F

The Panel noted

s47F

The Panel was concerned that

s47F

The Panel noted the

s47F

**IHAP recommendations**

s47F

**Actions:**

s47F

- Panel to be informed via the IHAP Secretariat once these have been provided.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records
 

<sup>s47F</sup> [REDACTED]

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	29/09/2019	<b>Time of IHAP recommendation:</b>	20:27
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	28/09/2019 Time: 13:45 hrs	s47F	
IHAP Meeting date:	29/09/2019 15:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

The Panel noted s47F

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**IHAP recommendations**

s47F

**Actions:**

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 25.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral – 13 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	29/09/2019	<b>Time of IHAP recommendation:</b>	20:37
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	01/10//2019 Time: 1300 hrs	s47F	
IHAP Meeting date:	02/10/2019 1900 hrs		
Reconvened IHAP meeting (if required):		Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

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The Panel noted that <sup>s47F</sup>

The Panel welcomed <sup>s47F</sup>

It was noted <sup>s47F</sup>

<sup>s47F</sup> the Panel was of the opinion that <sup>s47F</sup>

**IHAP recommendations**

The Panel agreed that Mr <sup>s47F</sup>

They recommend that <sup>s47F</sup>

**Actions:**

- <sup>s47F</sup>
- 
- 
- 

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.05.2019 – 1 page
2. Letter from <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair)	
		Associate Professor Susan Moloney	
		Associate Professor Neeraj Gill	
		Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		Mr Guy Coffey	
		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	3/10/2019	<b>Time of IHAP recommendation:</b>	1220 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	3/10/2019 Time: 08:49 hrs	s47F	
IHAP Meeting date:	4/10/2019 0700 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review, s47F has been diagnosed with:

s47F

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<p>s47F</p> <p>The Panel noted s47F</p> <p>s47F</p> <p>The Panel noted s47F</p> <p>The Panel agreed that s47F</p> <p>s47F They noted that s47F</p> <p><b><u>IHAP recommendations</u></b></p> <p>The Panel recommend that s47F</p> <p>The Panel was concerned that s47F</p> <p>The Panel noted that s47F</p> <p><b><u>Actions:</u></b></p> <ul style="list-style-type: none"><li>s47F</li><li></li><li></li></ul>
--

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**Sensitive: Personal**

**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 25/09/2019 – 1 page
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. <sup>s47F</sup> – 2 pages
4. Treating Drs referral – 23 pages
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
5. Clinical Records  
<sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	4/10/2019	<b>Time of IHAP recommendation:</b>	13:55
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	03/10/2019 Time: 0847 hrs	s47F	
IHAP Meeting date:	04/10/2019 0700hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel noted <sup>s47F</sup>

<sup>s47F</sup>

The panel expressed concern about <sup>s47F</sup>

<sup>s47F</sup>

It was agreed that <sup>s47F</sup>

<sup>s47F</sup>

The Panel noted the difficulty in making recommendations when the clinical documentation provided to them dated back to when the case was presented to the Department, and therefore often one month or more out of date.

**IHAP recommendations**

The Panel recommend that <sup>s47F</sup>

<sup>s47F</sup>

<sup>s47F</sup>

**Actions:**

<sup>s47F</sup>

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**Sensitive: Personal**

**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 27.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	4/10/2019	<b>Time of IHAP recommendation:</b>	13:55
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	03/10/2019 Time: 0849 hrs	s47F	
IHAP Meeting date:	04/10/2019 0700hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel noted that s47F

s47F

It was also noted that s47F

s47F

Panel agreed that s47F

The

**IHAP recommendations**

The Panel recommended that s47F

s47F

s47F

**Actions:**

- s47F
- 
- 

- A report back to IHAP via the Secretariat with outcomes of the above s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 25.09.2019 – 2 pages
2. Letter from <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	4/10/2019	<b>Time of IHAP recommendation:</b>	13:55
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	03/10/2019 Time: 0849 hrs	s47F	
IHAP Meeting date:	04/10/2019 0700hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel shared concern that one treating doctor's report was written nearly three months after the assessment on s47F and the other was also tardy at nearly two months. This increased the difficulty in the Panel's understanding of a patient's current medical situation.

s47F

s47F

s47F

s47F

**IHAP recommendations**

The Panel recommended that s47F

s47F

**Actions:**

- s47F
- 
- 
- 

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 25.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records
 

<sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	4/10/2019	<b>Time of IHAP recommendation:</b>	13:55
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	03/10/2019 Time: 0850 hrs	s47F	
IHAP Meeting date:	05/10/2019 0700hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel discussed s47F

s47F

The Panel agreed that s47F

The Panel noted that s47F

The Panel noted that s47F

The Panel noted that s47F

. The Panel noted that Mr s47F

. The Panel noted that s47F

the Panel agreed that s47F

The Panel noted that s47F

The Panel noted the s47F

The Panel agreed that s47F

. The Panel raised concern s47F

The Panel agreed that s47F

The Panel agreed that s47F

The Panel agreed that s47F

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

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**Sensitive: Personal**

<ul style="list-style-type: none"> <li>• s47F [REDACTED]</li> </ul> <p>The Panel agree that their recommendation to approve s47F [REDACTED] transfer to Australia for medical treatment is based on the above reasons.</p>			
<p><b><u>Actions:</u></b></p> <ol style="list-style-type: none"> <li>1. s47F [REDACTED] be transferred to Australia, and the Panel be notified via the Outcomes Tracker when this is done.</li> <li>2. s47F [REDACTED]</li> </ol>			
<p><b>Document library reviewed:</b> ABF Client brief – 2 pages</p> <ol style="list-style-type: none"> <li>1. Clinical Advisory Team (MOC) Opinion dated 26.09.2019 – 2 pages</li> <li>2. Letter from s47F [REDACTED] – 6 pages</li> <li>3. Treating Drs referral –             <ol style="list-style-type: none"> <li>a. s47F [REDACTED]</li> <li>b. [REDACTED]</li> </ol> </li> <li>4. Clinical Records s47F [REDACTED]</li> </ol>			
<p><b>Panel members assessing:</b></p>		<p>Dr Antonio Di Dio (Chair)</p> <p>Professor Paul Kelly</p> <p>Associate Professor Susan Moloney</p> <p>Dr Michael Douglas</p>	
		<p><b>Is the Minister's refusal confirmed:</b></p>	<p>No</p>
		<p><b>Majority (out of total members):</b></p>	<p>4/7</p>
<p><b>IHAP Majority recommendation:</b></p>		<p><b>Transfer is recommended:</b></p>	<p>Yes</p>
<p><b>Date of IHAP recommendation:</b></p>	<p>05/10/2019</p>	<p><b>Time of IHAP recommendation:</b></p>	<p>1431 hrs</p>
<p><b>Deemed approval (post 72 hours)?</b></p>	<p>No</p>	<p><b>Meeting audio recorded:</b></p>	<p>No</p>

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	03/10/2019 Time: 0850 hrs	s47F	
IHAP Meeting date:	05/10/2019 0700hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

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## Sensitive: Personal

The Panel discussed <sup>s47F</sup>  
<sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

. The Panel agreed that <sup>s47F</sup>

. The Panel agreed that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>  
<sup>s47F</sup>

. The Panel agreed that

The Panel noted that <sup>s47F</sup>

. The Panel noted that <sup>s47F</sup>

. The Panel agreed that <sup>s47F</sup>

### **IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- 
- 

Based on the above reasons and the recommendation from PIH POM and the Medical Officer of the Commonwealth, the Panel agree that their recommendation is to approve <sup>s47F</sup> transfer to Australia for medical treatment.

### **Actions:**

1. <sup>s47F</sup> be transferred to Australia and the Panel be notified via the Outcomes Tracker when this is done.
- <sup>s47F</sup>

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 25.09.2019 – 2 pages
2. Letter from <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Professor Brendan Murphy Associate Professor Susan Moloney Dr Michael Douglas	
		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	05/10/2019	<b>Time of IHAP recommendation:</b>	1431 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	04/10/2019 Time: 1342 hrs	§47F	
IHAP Meeting date:	06/10/2019 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: §22(1)(a)(ii)

Following IHAP document review §47F has been diagnosed with:

§47F

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The Panel discussed <sup>s47F</sup>  
<sup>s47F</sup>

The Panel noted that <sup>s47F</sup>. The Panel  
noted that <sup>s47F</sup>.

The Panel noted that <sup>s47F</sup>. The Panel noted that <sup>s47F</sup>  
The Panel noted that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>. The Panel agreed that <sup>s47F</sup>.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- <sup>s47F</sup>

Based on the above reasons, the Panel agree that <sup>s47F</sup> transfer to Australia for treatment should be refused.

**Actions:**

1. <sup>s47F</sup>
2. <sup>s47F</sup>

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.09.2019 – 2 pages
2. Letter from advocate - <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records
 

<sup>s47F</sup> [REDACTED]

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Professor Paul Kelly Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	07/10/2019	<b>Time of IHAP recommendation:</b>	1246 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	04/10/2019 Time: 1342 hrs	s47F	
IHAP Meeting date:	06/10/2019 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

The Panel discussed §47F

The Panel noted that §47F

The Panel noted that §47F

§47F. The Panel agreed that §47F. The Panel noted that §47F

The Panel agreed the §47F

. The Panel agreed that §47F

The Panel noted that there §47F

. The Panel raised concern §47F

The Panel agreed that §47F

The Panel agreed that §47F needed a transfer to Australia for §47F treatment and the management of §47F symptoms.

### **IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that §47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- §47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation was to approve §47F transfer to Australia for treatment.

### **Actions:**

1. §47F be transferred to Australia for treatment and the Panel be notified via the Outcomes Tracker once this is done.
2. §47F
3. §47F

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 25.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
4. Clinical Records  
<sup>s47F</sup>

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Professor Paul Kelly  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Dr Michael Douglas

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority</b> (out of total members):	5/7
<b>Transfer is recommended:</b>	Yes

**Date of IHAP recommendation:**

07/10/2019

**Time of IHAP recommendation:**

1246 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No



# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	04/10/2019 Time: 1342 hrs	s47F	
IHAP Meeting date:	06/10/2019 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

The Panel noted that s47F  
noted that s47F

. The Panel

The Panel noted that s47F  
The Panel noted that s47F  
further noted that s47F

. The Panel

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The Panel noted that <sup>s47F</sup> [REDACTED]

The Panel noted that <sup>s47F</sup> [REDACTED]

. The Panel noted that <sup>s47F</sup> [REDACTED].

The Panel agreed that <sup>s47F</sup> [REDACTED]

. The Panel agreed that <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- [REDACTED]

Based on the above factors, the Panel agreed that their recommendation was to approve <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

1. <sup>s47F</sup> [REDACTED] be transferred to Australia for medical treatment, urgently, and the Panel be notified via the Outcomes Tracker once this is done.
2. <sup>s47F</sup> [REDACTED]

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 16.09.2019 – 1 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 5 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records <sup>s47F</sup> [REDACTED]

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**Sensitive: Personal**

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Professor Paul Kelly Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	07/10/2019	<b>Time of IHAP recommendation:</b>	1246 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive: Personal**

# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	04/10/2019 Time: 1944 hrs	§47F	
IHAP Meeting date:	06/10/2019 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review §47F has been diagnosed with:

§47F

The Panel discussed §47F and noted that:

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s47F

The Panel agreed that s47F . The Panel noted that s47F

The Panel noted that s47F . The Panel agreed that s47F . The Panel noted that s47F

The Panel agreed that s47F . The Panel **raised concern about the delay in the treating doctors' assessments and the medical referrals.** The Panel agreed that s47F **, the medical referral did not come until 3 months later.**

The Panel agreed that s47F . The Panel agreed that s47F

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

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**Sensitive: Personal**

**Sensitive: Personal****Actions:**

- 1.
- 2.
- 3.

s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 30/09/2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Professor Paul Kelly  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Dr Michael Douglas

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

5/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

07/10/2019

**Time of IHAP recommendation:**

1528 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	12/09/2019 Time: 1100 hrs	§47F	
IHAP Meeting date:	13/09/2019 1800hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Professor Paul Kelly, A/Prof Sue Moloney, A/Prof Neeraj Gill, A/Prof Michael Douglas, Mr Guy Coffey, Dr Parbodh Gogna.

Secretariat attending: §22(1)(a)(ii) and §22(1)(a)(ii)

Following IHAP document review §47F has been diagnosed with:

§47F

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s47F

The Panel considered the reports of the treating doctors and the Medical Officer of the Commonwealth and agreed that s47F

The Panel considered t s47F

With this in mind, the Panel agreed that s47F

The Panel notes a large volume of cases being referred to the Minister and then to IHAP; this creates some difficulty getting the complete panel to review the case and may need to be addressed by the Secretariat to ensure compliance with the relevant legislation.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All seven Panel members recommended that s47F transfer to Australia for medical treatment be **approved** as soon as possible in order to ensure s47F receives appropriate medical care.

**Actions:**

1. s47F to be transferred to Australia s47F.
2. The Panel be informed once the transfer has occurred.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 29.08.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral – 12 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records – total pages 625 pages  
<sup>s47F</sup> [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Paul Kelly  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

No

**Majority (out of total members):**

7/7

**Transfer is recommended:**

Yes

**Date of IHAP recommendation:**

13/09/2019

**Time of IHAP recommendation:**

2000hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	12/09/2019 Time: 10:51 hrs	s47F	
IHAP Meeting date:	13/09/2019 07:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday 13 September 2019 at 07:00 hrs attended by three IHAP Panel members with one Panel member providing an assessment outside of the meeting environment.

Secretariat attending: s22(1)(a)(ii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that s47F is a relevant transitory person.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel notes a large volume of cases being referred to the Minister and then to IHAP, this created some difficulty getting the complete Panel to review the case.

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Following IHAP document review <sup>s47F</sup> [REDACTED] has been diagnosed with:

<sup>s47F</sup> [REDACTED]

The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel agreed that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED], the Panel recommends that <sup>s47F</sup> [REDACTED]

The Panel notes that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED], the Panel agrees that <sup>s47F</sup> [REDACTED]

The Panel also noted that <sup>s47F</sup> [REDACTED]

The Panel recommends that <sup>s47F</sup> [REDACTED]

. They further note that <sup>s47F</sup> [REDACTED]

The Panel raised concerns <sup>s47F</sup> [REDACTED]

. The also noted that they <sup>s47F</sup> [REDACTED]

The Panel also noted the significant delay from the completion of the treating doctor reviews and the submission/notification to the Department of Home Affairs.

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**Sensitive: Personal****IHAP recommendations**

All four IHAP members agreed that their recommendation is that s47F transfer to Australia for medical treatment be **refused**. However, the Panel recommends:

- s47F

The Panel agreed that their recommendation that s47F not be transferred to Australia is based on the above factors.

**Actions:**

- s47F
  - o s47F
  - o The Panel to be notified s47F via the IHAP Outcomes Tracker.

- s47F

s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.08.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral – 13 pages
  - a. s47F
  - b. s47F
4. Clinical Records – 146 pages

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair) - *provided assessment outside of meeting environment.*

Dr Parbodh Gogna

Associate Professor Susan Moloney

Mr Guy Coffey

**IHAP Majority recommendation:**

**Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

4/4

**Transfer is recommended:**

No

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Date of IHAP recommendation:	13/09/2019	Time of IHAP recommendation:	16:09 hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	12/09/2019 Time: 10:51 hrs	s47F	
IHAP Meeting date:	13/09/2019 07:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday 13 September 2019 at 07:00 hrs attended by three IHAP Panel members with one Panel member providing an assessment outside of the meeting environment.

Secretariat attending: s22(1)(a)(ii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that s47F is a relevant transitory person.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel notes a large volume of cases being referred to the Minister and then to IHAP, this created some difficulty getting the complete Panel to review the case.

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Following IHAP document review <sup>s47F</sup> [REDACTED] has been diagnosed with:

<sup>s47F</sup> [REDACTED]

The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel agreed that <sup>s47F</sup> [REDACTED]. It was noted that <sup>s47F</sup> [REDACTED]. They also suggest that <sup>s47F</sup> [REDACTED]. The Panel noted that <sup>s47F</sup> [REDACTED].

The Panel assessed that <sup>s47F</sup> [REDACTED].

<sup>s47F</sup> [REDACTED], the Panel agreed that <sup>s47F</sup> [REDACTED].

The Panel notes, that <sup>s47F</sup> [REDACTED].

The Panel also noted the significant delay from the completion of the treating doctor reviews and the submission/notification to the Department of Home Affairs and one of the treating doctor's reports was undated.

**IHAP recommendations**

All four IHAP members agreed that their recommendation is that <sup>s47F</sup> [REDACTED] transfer to Australia for medical treatment be **refused**. However, the Panel recommends:

- <sup>s47F</sup> [REDACTED]

The Panel agreed that their recommendation that <sup>s47F</sup> [REDACTED] not be transferred to Australia is based on the above factors.

**Actions:**

- <sup>s47F</sup> [REDACTED] be transferred <sup>s47F</sup> [REDACTED]
  - o The Panel to be notified when <sup>s47F</sup> [REDACTED] transferred via the IHAP Outcomes Tracker.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 3/09/2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral – 13 pages
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) – <i>provided assessment outside of meeting environment.</i> Dr Parbodh Gogna Associate Professor Susan Moloney Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/4
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	13/09/2019	<b>Time of IHAP recommendation:</b>	16:09 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	03/10/2019 Time: 0850 hrs	s47F	
IHAP Meeting date:	05/10/2019 0700hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel discussed <sup>s47F</sup>

<sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

. The Panel noted that, <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- 
- 
- 

Based on the above reasons, the Panel agree that <sup>s47F</sup> transfer to Australia for medical treatment be refused.

**Actions:**

1.

<sup>s47F</sup>

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.09.2019 – 2 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records  
<sup>s47F</sup> [REDACTED]

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Professor Brendan Murphy Associate Professor Susan Moloney Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	05/06/2019	<b>Time of IHAP recommendation:</b>	1431 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	12/06/2019 Time: 14:55 hrs	s47F	
IHAP Meeting date:	13/06/2019 17:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Following IHAP document review s47F has been diagnosed with:

s47F

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**Sensitive**

s47F

The Chair advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Chair also advised he was a Senior Medical Officer on Manus Island 2013/2014. IHAP noted the potential/perceived conflict of interest and advised they were happy for the Chair to continue in the discussion.

The Panel accepted the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers s47F and the report by the Medical Officer of the Commonwealth. IHAP have also provide commentary on other areas of clinical significance found during this review.

The Panel noted that s47F

IHAP determined that it will not be necessary for them to s47F

IHAP has accepted that s47F

### **IHAP recommendations**

All four IHAP members agreed that their recommendation is that s47F transfer to Australia for medical treatment should be **refused** initially. The recommendation was based on the following reason:

1. s47F
- 2.
- 3.
- 4.
- 5.

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**Sensitive****Actions:**

- 1.
- 2.
- 3.

s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.06.2019 – 2 pages
2. Letter from s47F – 4 pages
3. Treating Drs referral – 13 pages
  - a. s47F
  - b.
4. Clinical Records
 

s47F

**Panel members assessing:**

Dr Parbodh Gogna (Chair)  
 Professor Brendan Murphy  
 Dr Antonio Di Dio  
 Associate Professor Susan Moloney

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

4/4

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

14/06/2019

**Time of IHAP recommendation:**

12:47hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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**Sensitive****Independent Health Advice Panel****Clinical Assessment**

Meeting details		Biodata details	
<b>IHAP referral date/time:</b>	21/06/2019 Time: 16:02hrs	s47F	
<b>IHAP Meeting date:</b>	23/06/2019 17:00hrs		
<b>Reconvened IHAP meeting (if required):</b>	N/A		
		<b>Treating Doctor's referral received?</b>	Yes
		<b>Was the Referring Doctor's clinical assessment performed remotely or in person?</b>	Remotely
		<b>Health Service Provider clinical summary received:</b>	Yes
<b><u>Interview with Transitory Person</u></b> <input type="checkbox"/> The IHAP undertook an interview. <input type="checkbox"/> The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier. <input checked="" type="checkbox"/> The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.			

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**Sensitive**



**Sensitive****IHAP findings:**

Following IHAP document review, <sup>s47F</sup> [REDACTED] has been diagnosed with:

<sup>s47F</sup> [REDACTED]

The Panel accepted the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers <sup>s47F</sup> [REDACTED] and the report by the Medical Officer of the Commonwealth. IHAP have also provided commentary on other areas of clinical significance found during this review.

IHAP determined that it will not be necessary for them to <sup>s47F</sup> [REDACTED]. IHAP has accepted that

<sup>s47F</sup> [REDACTED]

The Secretariat advised the Panel that <sup>s47F</sup> [REDACTED]

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**Sensitive**

## Sensitive

### IHAP recommendations

All four available IHAP members agreed that their recommendation is that <sup>s47F</sup> transfer to Australia for medical treatment should be **refused** initially. The recommendation was based on the following reason:

1. <sup>s47F</sup>
- 2.
- 3.
- 4.

### Actions:

1. <sup>s47F</sup>
- 2.
- 3.
- 4.

### **Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 17.06.2019 – 2 pages
2. Two letter from <sup>s47F</sup> – 6 pages
3. Letter from <sup>s47F</sup> – 2 pages
4. Treating Drs referral – 10 pages
  - a. <sup>s47F</sup>
  - b.
5. Clinical Records

<sup>s47F</sup>

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<b>Panel members assessing:</b>		Dr Antonio Di Dio (Acting Chair) Professor Brendan Murphy Associate Professor Susan Moloney Associate Professor Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/5
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	24/06/2019	<b>Time of IHAP recommendation:</b>	13:40hr
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive****Independent Health Advice Panel****Clinical Assessment**

Meeting details		Biodata details	
<b>IHAP referral date/time:</b>	14/06/2019 Time: 1812 hrs	s47F	
<b>IHAP Meeting date:</b>	16/06/2019 1500 hrs		
<b>Reconvened IHAP meeting (if required):</b>	N/A		
		<b>Treating Doctor's referral received?</b>	Yes
		<b>Was the Referring Doctor's clinical assessment performed remotely or in person?</b>	Remotely
		<b>Health Service Provider clinical summary received:</b>	Yes
<b><u>Interview with Transitory Person</u></b> <input type="checkbox"/> The IHAP undertook an interview. <input type="checkbox"/> The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier. <input checked="" type="checkbox"/> The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.			

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**Sensitive**

**Sensitive****IHAP findings:**

Following IHAP document review <sup>s47F</sup> [REDACTED] has been diagnosed with:

<sup>s47F</sup> [REDACTED]

The Chair advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Chair also advised he was a Senior Medical Officer on Manus Island 2013/2014. IHAP noted the potential/perceived conflict of interest and advised they were happy for the Chair to continue in the discussion.

The Panel accepted the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers <sup>s47F</sup> [REDACTED] and the report by the Medical Officer of the Commonwealth. IHAP have also provided commentary on other areas of clinical significance found during this review.

The Panel noted <sup>s47F</sup> [REDACTED]

IHAP determined that it will not be necessary for them to <sup>s47F</sup> [REDACTED]

. IHAP has accepted that <sup>s47F</sup> [REDACTED]

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**Sensitive**

## Sensitive

### **IHAP recommendations**

All five IHAP members agreed that their recommendation is that <sup>s47F</sup> transfer to Australia for medical treatment should be **refused** initially. The recommendation was based on the following reason:

1. <sup>s47F</sup>
- 2.
- 3.
- 4.
- 5.

### **Actions:**

1. <sup>s47F</sup>
2. The IHAP will seek an updated <sup>s47F</sup>.  
IHAP will review the case at that time.
3. <sup>s47F</sup>
4. IHAP Assessment copy be provided to the treating team as suggestions for review.

### **Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.06.2019 – 2 pages
2. Letter from <sup>s47F</sup> – 5 pages
3. Treating Drs referral – 17 pages
  - a. <sup>s47F</sup>
  - b.
4. Clinical Records

<sup>s47F</sup>

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**Sensitive**

<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Professor Brendan Murphy Dr Antonio Di Dio Associate Professor Susan Moloney Associate Professor Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/5
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	17/062019	<b>Time of IHAP recommendation:</b>	10:15
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive**

**Sensitive****Independent Health Advice Panel****Clinical Assessment**

Meeting details		Biodata details	
<b>IHAP referral date/time:</b>	21/06/2019 Time: 16:02hrs	s47F	
<b>IHAP Meeting date:</b>	23/06/2019 17:00hrs	<b>Treating Doctor's referral received?</b>	Yes
<b>Reconvened IHAP meeting (if required):</b>	N/A	<b>Was the Referring Doctor's clinical assessment performed remotely or in person?</b>	Remotely
		<b>Health Service Provider clinical summary received:</b>	Yes
<b><u>Interview with Transitory Person</u></b> <input type="checkbox"/> The IHAP undertook an interview. <input type="checkbox"/> The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier. <input checked="" type="checkbox"/> The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.			

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**Sensitive**



**Sensitive****IHAP findings:**

Following IHAP document review, <sup>s47F</sup> [REDACTED] has been diagnosed with:

<sup>s47F</sup> [REDACTED]

The Panel accepted the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers <sup>s47F</sup> [REDACTED] and the report by the Medical Officer of the Commonwealth. IHAP have also provided commentary on other areas of clinical significance found during this review.

IHAP determined that it will not be necessary for them to <sup>s47F</sup> [REDACTED]. IHAP has accepted that <sup>s47F</sup> [REDACTED]

The Secretariat advised the Panel that <sup>s47F</sup> [REDACTED]

The Panel noted that there was quite a delay from the treating doctors in preparing their reports (following their initial review) and submitting to the Minister review. The Panel considers this to be particularly concerning considering their reports stated a transfer to Australia was urgent. It was also noted by the Panel that <sup>s47F</sup> [REDACTED]

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**Sensitive**

**Sensitive****IHAP recommendations**

All four available IHAP members agreed that their recommendation is that <sup>s47F</sup> ' transfer to Australia for medical treatment should be **refused** initially. The recommendation was based on the following reason:

1. <sup>s47F</sup>

2.

3.

4.

**Actions:**1. <sup>s47F</sup>

2.

3. IHAP Assessment copy be provided to the treating team as suggestions for review.

4. Arrange a teleconference <sup>s47F</sup> to introduce Dr Gill and discuss issues including <sup>s47F</sup> capacity, patient load, average length of stay and post discharge care provision. IHAP members have supplied their urgent availability for the teleconference on both Monday 24 and Tuesday 25 June 2019.

**Document library reviewed: ABF Client brief – 2 pages**

1. Clinical Advisory Team (MOC) Opinion dated 18.06.2019 – 2 pages

2. Letter from <sup>s47F</sup> – 5 pages

3. Treating Drs referral – 16 pages

a. <sup>s47F</sup>

b.

4. Clinical Records

<sup>s47F</sup>
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**Sensitive**

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Acting Chair) Professor Brendan Murphy Associate Professor Susan Moloney Associate Professor Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/5
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	24/06/2019	<b>Time of IHAP recommendation:</b>	13:40hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive**

# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	11/10/2019 Time: 11:32 hrs	§47F	
IHAP Meeting date:	12/10/2019 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: §22(1)(a)(ii) and §22(1)(a)(ii)

Following IHAP document review §47F has been diagnosed with:

§47F

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s47F

The Panel noted that s47F

The Panel discussed s47F and noted that:

s47F

The Panel agreed that s47F

The Panel discussed s47F

The Panel expressed concern that s47F

The Panel noted that s47F

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 
- 

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**Sensitive: Personal**

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> transfer to Australia for treatment

**Actions:**

- <sup>s47F</sup>

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 04.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral – 22 pages

a. <sup>s47F</sup>

b.

4. Clinical Records

<sup>s47F</sup>

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
Dr Parbodh Gogna

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**Sensitive: Personal**

		Professor Brendan Murphy Associate Professor Susan Moloney Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	6/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	12/10/2019	<b>Time of IHAP recommendation:</b>	16:41hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive: Personal**

# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	10/10/2019 Time: 17:04 hrs	s47F	
IHAP Meeting date:	12/10/2019 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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## Sensitive: Personal

The panel discussed <sup>s47F</sup>

The Panel discussed <sup>s47F</sup> and noted the following:

<sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel has concerns that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel agreed that <sup>s47F</sup> should be transferred to Australia <sup>s47F</sup>

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

### **IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve <sup>s47F</sup> transfer to Australia for treatment

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Sensitive: Personal

**Sensitive: Personal****Actions:**

- s47F be transferred to Australia.
- s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 03.10.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority</b> (out of total members):	6/7
<b>Transfer is recommended:</b>	Yes

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**Sensitive: Personal**

Date of IHAP recommendation:	12/10/2019	Time of IHAP recommendation:	16:41 hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	10/10/2019 Time: 17:04hrs	s47F	
IHAP Meeting date:	12/10/2019 08:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

[Redacted content]

The panel discussed s47F and noted that:

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s47F

The panel agreed that s47F .

The Panel noted that s47F . They also noted that s47F

It is also noted that s47F

The Panel raised concerns that s47F .

The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment

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**Sensitive: Personal****Actions:**

- 
- 
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s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 02.10.2019 – 1 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

6/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

12/10/2019

**Time of IHAP recommendation:**

16:41 hrs

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Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No
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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	17/10/2019 Time: 1342 hrs	s47F	
IHAP Meeting date:	19/10/2019 Time: 0800hrs		
Reconvened IHAP meeting (if required):	N/A		
		Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The Panel considered the treating doctors' reports s47F

s47F

s47F

s47F

The Panel discussed s47F

. The Panel agree that s47F

The Panel agree that s47F

s47F

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

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**Sensitive: Personal****Actions:**

The Panel agree that <sup>s47F</sup> [REDACTED] :

- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> [REDACTED] – 2 pages
3. <sup>s47F</sup> [REDACTED]
4. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
5. Clinical Records

<sup>s47F</sup> [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority</b> (out of total members):	5/7
<b>Transfer is recommended:</b>	No

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Date of IHAP recommendation:	19/10/2019	Time of IHAP recommendation:	1830hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	17/10/2019 Time: 1342 hrs	s47F	
IHAP Meeting date:	19/10/2019 Time: 0800hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

s47F

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The Panel discussed the treating doctors' reports and considered all other medical records and case management notes provided.

The Panel noted that <sup>s47F</sup> [REDACTED]

. The Panel agreed that <sup>s47F</sup> [REDACTED]

The Panel further noted that there <sup>s47F</sup> [REDACTED]

. The Panel noted:

<sup>s47F</sup> [REDACTED]

With this in mind, the Panel agreed that <sup>s47F</sup> [REDACTED]

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was for <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

•

<sup>s47F</sup> [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

The Panel agree that <sup>s47F</sup> [REDACTED]. They suggested that <sup>s47F</sup> [REDACTED]:

<sup>s47F</sup> [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 9/10/2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> [REDACTED] – 2 pages
3. <sup>s47F</sup> [REDACTED]
4. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
5. Clinical Records  
<sup>s47F</sup> [REDACTED]

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	6/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	19/10/2019	<b>Time of IHAP recommendation:</b>	1830hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	18/10/2019 Time: 1352 hrs	§47F	
IHAP Meeting date:	19/10/2019 Time: 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: §22(1)(a)(ii)

Following IHAP document review §47F has been diagnosed with:

§47F

The Panel discussed §47F

§47F

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s47F

[Redacted]

The Panel agreed that s47F [Redacted]

The panel agreed that s47F [Redacted]

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that s47F [Redacted] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F [Redacted]
- [Redacted]
- [Redacted]

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F [Redacted] transfer to Australia for treatment.

**Actions:**

The Panel agreed that s47F [Redacted]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 03.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. s47F
4. Treating Drs referral –
  - a. s47F
  - b. s47F
5. Clinical Records

s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Associate Professor Susan Moloney Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	19/10/2019	<b>Time of IHAP recommendation:</b>	1830hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	17/10/2019 Time: 1346 hrs	s47F	
IHAP Meeting date:	18/10/2019 Time: 1830hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel discussed <sup>s47F</sup>

<sup>s47F</sup>

<sup>s47F</sup>

The Panel noted <sup>s47F</sup>

The Panel felt that <sup>s47F</sup>

<sup>s47F</sup>

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> transfer to Australia for treatment.

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**Sensitive: Personal****Actions:**

The Panel agreed that §47F [REDACTED].

The Panel also agreed that §47F [REDACTED]  
[REDACTED]

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 09.10.2019 – 2 pages
2. Letter from advocate §47F [REDACTED] – 2 pages
3. §47F [REDACTED]
4. Treating Drs referral –
  - a. §47F [REDACTED]
  - b. [REDACTED]
5. Clinical Records

§47F [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
Dr Parbodh Gogna  
Associate Professor Susan Moloney  
Associate Professor Neeraj Gill

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority</b> (out of total members):	4/7
<b>Transfer is recommended:</b>	No

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**Sensitive: Personal**

Date of IHAP recommendation:	19/10/2019	Time of IHAP recommendation:	11:44am
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	17/10/2019 Time: 1346 hrs	s47F	
IHAP Meeting date:	18/10/2019 Time: 1830hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

The Panel discussed s47F

The Panel noted s47F

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s47F

The Panel noted that s47F

All Panel members agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment

**Actions:**

Nil.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 04.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. <sup>s47F</sup> [REDACTED]
4. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
5. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Susan Moloney Associate Professor Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	19/10/2019	<b>Time of IHAP recommendation:</b>	11:44am
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive: Personal****Independent Health Advice Panel****Clinical Assessment**

Meeting details		Biodata details	
IHAP referral date/time:	17/10/2019 Time: 1342 hrs	s47F	
IHAP Meeting date:	19/10/2019 Time: 0800hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

**Interview with Transitory Person**

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

The Panel noted that s47F

The Panel considered s47F

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s47F [REDACTED]

The Panel noted that s47F [REDACTED]

s47F [REDACTED] the Panel agreed that s47F [REDACTED]

. The Panel suggested that s47F [REDACTED]

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that s47F [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F [REDACTED] transfer to Australia for treatment.

**Actions:**

The panel suggested that s47F [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 15.10.2019 – 1 page
2. Letter from advocate <sup>s47F</sup> [REDACTED] – 2 pages
3. <sup>s47F</sup> [REDACTED]
4. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
5. Clinical Records

<sup>s47F</sup> [REDACTED]**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

5/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

19/10/2019

**Time of IHAP recommendation:**

11:44am

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 Time: 1526 hrs	s47F	
	IHAP Meeting date: 27/10/2019 Time: 1600 hrs	Treating Doctor's referral received?	Yes
	Reconvened IHAP meeting (if required): N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel acknowledge <sup>s47F</sup> [REDACTED]

The Panel notes <sup>s47F</sup> [REDACTED]

The Panel agree that <sup>s47F</sup> [REDACTED]

The Panel agree that <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to approve <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup> [REDACTED] requires transfer to Australia <sup>s47F</sup> [REDACTED].
- <sup>s47F</sup> [REDACTED]

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 17 October 2019– 2 pages
2. Letter from advocate <sup>s47F</sup> [REDACTED] – 2 pages
3. <sup>s47F</sup> [REDACTED]
4. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
5. Clinical Records
 

<sup>s47F</sup> [REDACTED]

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s47F			
<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Professor Brendan Murphy Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	28/10/2019	<b>Time of IHAP recommendation:</b>	1000hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 Time: 1526 hrs	s47F	
IHAP Meeting date:	27/10/2019 Time: 1600 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel noted <sup>s47F</sup> [REDACTED]

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- The Panel is confident <sup>s47F</sup> [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

Nil

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 21.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> [REDACTED] – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records <sup>s47F</sup> [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Professor Brendan Murphy  
 Associate Professor Neeraj Gill  
 Mr Guy Coffey

**IHAP Majority recommendation:**

**Is the Minister's refusal confirmed:**

Yes

**Majority (out of total members):**

4/7

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		Transfer is recommended:	No
Date of IHAP recommendation:	28/10/2019	Time of IHAP recommendation:	1000hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 Time: 1526 hrs	s47F	
IHAP Meeting date:	27/10/2019 Time: 1600 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel noted the <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

The Panel noted the <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

The Panel recommends <sup>s47F</sup> [REDACTED]:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 17 October 2019– 2 pages
2. <sup>s47F</sup> [REDACTED]
3. Letter from advocate <sup>s47F</sup> [REDACTED] – 2 pages
4. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
5. Clinical Records

<sup>s47F</sup> [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
Professor Brendan Murphy

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		Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	28/10/2019	<b>Time of IHAP recommendation:</b>	1000hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 15:22 hrs	s47F	
IHAP Meeting date:	27/10/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel found that <sup>s47F</sup>

<sup>s47F</sup>

The Panel found a <sup>s47F</sup>

It was agreed that <sup>s47F</sup>

<sup>s47F</sup>

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve <sup>s47F</sup> transfer to Australia for treatment.

**Actions:**

- Transfer <sup>s47F</sup> to Australia
- <sup>s47F</sup>
- 
- 
- 
- Panel to be notified once transfer has occurred.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11 October 2019– 2 pages
2. §47F [REDACTED]
3. Letter from advocate §47F [REDACTED] – 2 pages
4. Treating Drs referral –
  - a. §47F [REDACTED]
  - b. [REDACTED]
5. Clinical Records

§47F [REDACTED]

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	28/10/2019	<b>Time of IHAP recommendation:</b>	11:10
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019	s47F	
	15:22 hrs		
IHAP Meeting date:	27/10/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that s47F

s47F

the Panel recognises s47F

. They note that s47F

s47F

**IHAP recommendations**

All HAP Panel members present agreed that their recommendation was that s47F transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- s47F be transferred to Australia for treatment

- s47F

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F be transferred to Australia s47F

- s47F

- The Panel have requested notification once transfer has taken place.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 27 September 2019– 1 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
  - c. s47F
4. Clinical Records s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	27/10/2019	<b>Time of IHAP recommendation:</b>	17:30
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 15:22	s47F	
IHAP Meeting date:	27/10/2019 08:00		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted s47F .

s47F

Treating doctors' reports were quite different in a number of findings which was of concern s47F .

s47F

s47F

**IHAP recommendations**

All HAP Panel members present agreed that their recommendation was that s47F transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- 

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 14/10/2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	27/10/2019	<b>Time of IHAP recommendation:</b>	17:30
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 15:22	s47F	
IHAP Meeting date:	27/10/2019 08:00	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel found that s47F

s47F

s47F

The Panel found that s47F

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 11/10/2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair)	
		Dr Parbodh Gogna	
		Professor Brendan Murphy	
		Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		Mr Guy Coffey	
		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	27/10/2019	<b>Time of IHAP recommendation:</b>	17:30
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 Time: 12:53 hrs	s47F	
IHAP Meeting date:	26/10/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A		
		Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that s47F  
s47F. They also noted that s47F  
s47F.

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- Panel requests an update on the above within one month

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 16 October 2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records  
s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Associate Professor Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	26/10/2019	<b>Time of IHAP recommendation:</b>	17:15
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 Time: 12:53 hrs	s47F	
IHAP Meeting date:	26/10/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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The Panel noted that s47F

s47F

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer to Australia s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 17.10.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
4. Clinical Records  
s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Associate Professor Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	26/10/2019	<b>Time of IHAP recommendation:</b>	17:15
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	23/10/2019 Time: 17:40 hrs	s47F	
IHAP Meeting date:	25/10/2019 Time: 18:30 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel found that <sup>s47F</sup> [REDACTED]

They noted that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 14.10.2019 – 1 page
2. Letter from advocate – 4 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records

<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Professor Brendan Murphy Associate Professor Neeraj Gill Mr Guy Coffey (provided assessment prior to meeting)	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	26/10/2019	<b>Time of IHAP recommendation:</b>	12:00
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	23/10/2019 Time: 17:40 hrs	s47F	
IHAP Meeting date:	25/10/2019 Time: 18:30 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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## Sensitive: Personal

### IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

### Actions:

- 
- 
- 
- 
- Update to be provided to the Panel s47F

### **Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 16.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records s47F

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<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Professor Brendan Murphy Associate Professor Neeraj Gill Mr Guy Coffey (provided assessment prior to meeting)	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	26/10/2019	<b>Time of IHAP recommendation:</b>	12:00
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	23/10/2019 Time: 17:40 hrs	s47F	
IHAP Meeting date:	25/10/2019 Time: 18:30 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- 
- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 15.10.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

s47F

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Dr Parbodh Gogna (Chair) Professor Brendan Murphy Associate Professor Neeraj Gill Mr Guy Coffey (provided assessment prior to meeting)		Dr Parbodh Gogna (Chair) Professor Brendan Murphy Associate Professor Neeraj Gill Mr Guy Coffey (provided assessment prior to meeting)	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	26/10/2019	<b>Time of IHAP recommendation:</b>	12:00
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	23/10/2019 Time: 17:40 hrs	s47F	
IHAP Meeting date:	25/10/2019 Time: 18:30 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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**Sensitive: Personal**

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that s47F

s47F

s47F

The Panel discussed s47F

s47F

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 16.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –

- a. s47F
- b. [REDACTED]
- c. [REDACTED]

4. Clinical Records

s47F

[REDACTED]

<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Professor Brendan Murphy Associate Professor Neeraj Gill Mr Guy Coffey (provided assessment prior to meeting)	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	26/10/2019	<b>Time of IHAP recommendation:</b>	12:00
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 Time: 12:53 hrs	s47F	
IHAP Meeting date:	26/10/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that s47F

s47F

The Panel considered s47F. It was agreed that s47F

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- The Panel found that s47F

- s47F

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F

- 

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**Sensitive: Personal**

**Sensitive: Personal****Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 21.10.2019 – 2 pages
2. Email from MOC
3. Letter from advocate s47F – 2 pages
4. Treating Drs referral –

a.

b.

c.

5. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Neeraj Gill

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

x/x

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

26/10/2019

**Time of IHAP recommendation:**

17:15

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/10/2019 Time: 12:53 hrs	s47F	
IHAP Meeting date:	26/10/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that §47F transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- §47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse §47F transfer to Australia for treatment.

**Actions:**

- §47F
- 
- Updated provided to the Panel §47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10/10/2019 – 1 page
2. Letter from advocate §47F – 2 pages
3. Treating Drs referral –
  - a. §47F
  - b.
4. Clinical Records

§47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Neeraj Gill

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority</b> (out of total members):	4/7
<b>Transfer is recommended:</b>	No

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**Sensitive: Personal**

Date of IHAP recommendation:	26/10/2019	Time of IHAP recommendation:	17:15
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	YNo

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	31/10/2019 Time: 15:04 hrs	s47F	
IHAP Meeting date:	1/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel noted that <sup>s47F</sup> [REDACTED]

It is noted that <sup>s47F</sup> [REDACTED]

The Panel agree that <sup>s47F</sup> [REDACTED]

. The Panel agree that <sup>s47F</sup> [REDACTED]

. The Panel determined that <sup>s47F</sup> [REDACTED]

- <sup>s47F</sup> [REDACTED]

- [REDACTED]

<sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

the Panel are satisfied that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

The Panel notes that <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]

- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to approve <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

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**Sensitive: Personal**

**Sensitive: Personal****Actions:**

- Transfer <sup>s47F</sup> to Australia
- <sup>s47F</sup>
- 
- Panel to be notified once transfer has occurred.

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 22/10/2019 – 1 page
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
4. Clinical Records  
<sup>s47F</sup>
5. Clinical Records provided on 2 November  
<sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Neeraj Gill Associate Professor Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority (out of total members):</b>	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	3/11/2019	<b>Time of IHAP recommendation:</b>	0800hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	31/10/2019 Time: 15:04 hrs	s47F	
IHAP Meeting date:	1/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The Panel noted that <sup>s47F</sup> [REDACTED] . They agree that <sup>s47F</sup> [REDACTED]

The Panel note that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED] the members agree that <sup>s47F</sup> [REDACTED]

The Panel identified that <sup>s47F</sup> [REDACTED]

The Panel agreed that <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- [REDACTED]

Based on the above reason, the Panel agreed that their recommendation is to approve <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- Transfer <sup>s47F</sup> [REDACTED] to Australia
- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- Panel to be notified once transfer has occurred.

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 25.09.2019 – 2 pages
  - a. Clinical Advisory Team (MOC) Opinion Addendum dated 17.10.2019 – 1 pages
2. Letter from advocate §47F – 2 pages
3. Treating Drs referral –
  - a. §47F
  - b. §47F
4. Clinical Records
 

§47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Neeraj Gill Associate Professor Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	3/11//2019	<b>Time of IHAP recommendation:</b>	0700hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	04/11/2019 Time: 17:55 hrs	s47F	
IHAP Meeting date:	05/11/2019 Time: 17:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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s47F the Panel note s47F  
 . The Panel disagreed with this, s47F  
 .

The Panel note that s47F  
 .

The Panel agree that s47F  
 .

s47F the Panel note that s47F  
 . The also agree that s47F

### **IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

### **Actions:**

- Transfer s47F to Australia
- s47F
- The Panel to be notified once s47F transferred.

### **Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.10.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
  - c. s47F
4. Clinical Records  
 s47F

### **Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna

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		Professor Brendan Murphy Associate Professor Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	6/11/2019	<b>Time of IHAP recommendation:</b>	10:40hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	04/11/2019 Time: 1755 hrs	s47F	
IHAP Meeting date:	05/11/2019 Time: 1700 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

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## Sensitive: Personal

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that s47F [REDACTED]

The Panel were reassured s47F [REDACTED]

The Panel agreed that s47F [REDACTED]

### **IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F [REDACTED] transfer to Australia for treatment.

### **Actions:**

- s47F [REDACTED]
- [REDACTED]
- The Panel will undertake a review of s47F [REDACTED] in one month, s47F [REDACTED].

### **Document library reviewed: ABF Client brief – 2 pages**

- a) Clinical Advisory Team (MOC) Opinion dated 04.10.2019 – 2 pages
- b) Letter from advocate s47F [REDACTED] – 2 pages
- c) Treating Drs referral –
  - a. s47F [REDACTED]
  - b. [REDACTED]
- d) Clinical Records s47F [REDACTED]

### **Panel members assessing:**

Dr Antonio Di Dio (Chair)  
Dr Parbodh Gogna  
Professor Brendan Murphy

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		Associate Professor Neeraj Gill	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	6/11/2019	<b>Time of IHAP recommendation:</b>	10:40hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
<b>IHAP referral date/time:</b>	04/11/2019 Time: 17:55 hrs	s47F	
<b>IHAP Meeting date:</b>	05/11/2019 Time: 17:00 hrs	<b>Treating Doctor's referral received?</b>	Yes
<b>Reconvened IHAP meeting (if required):</b>	N/A	<b>Was the Referring Doctor's clinical assessment performed remotely or in person?</b>	Remotely
		<b>Health Service Provider clinical summary received:</b>	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel agree with the opinion expressed by the Medical Officer of the Commonwealth and believe that s47F

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The Panel were unsure of s47F and sought clarification in order to assist in the recommendation.

s47F

Following receipt of this advice, the Panel agreed that s47F will need to be transferred to Australia now.

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F to be transferred to Australia.
- s47F
- The Panel to be notified when s47F is transferred.

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 24.10.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Neeraj Gill

**IHAP Majority recommendation:**

**Is the Minister's refusal confirmed:**

No

**Majority** (out of total members):

4/7

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		Transfer is recommended:	Yes
Date of IHAP recommendation:	7/11/2019	Time of IHAP recommendation:	1020hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	08/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii) s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

[Redacted content]

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The panel noted that <sup>s47F</sup> [REDACTED]

It was noted that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

The panel advised that <sup>s47F</sup> [REDACTED]

It was noted that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

The panel noted that <sup>s47F</sup> [REDACTED]

. It was also noted that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

the panel agreed that the <sup>s47F</sup> [REDACTED]

It was noted that <sup>s47F</sup> [REDACTED]

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

### **IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

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**Sensitive: Personal****Actions:**

- s47F
- 
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**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.10.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority</b> (out of total members):	5/7
<b>Transfer is recommended:</b>	No

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Date of IHAP recommendation:	9/11/2019	Time of IHAP recommendation:	10:09 hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	08/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The panel noted <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

The panel agreed that <sup>s47F</sup> [REDACTED]

It was noted that <sup>s47F</sup> [REDACTED]

The panel requested <sup>s47F</sup> [REDACTED]

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]

- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup> [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 14.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	9/11/2019	<b>Time of IHAP recommendation:</b>	10:09 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	08/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii) s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

[Redacted content]

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The panel noted <sup>s47F</sup> [REDACTED]

The panel noted that <sup>s47F</sup> [REDACTED]

The panel also noted that <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup> [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 23.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	9/11/2019	<b>Time of IHAP recommendation:</b>	10:09 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The panel noted that s47F

s47F

. The panel also noted that s47F

s47F

the panel noted that s47F

The panel noted that s47F . It was also noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 28.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 3 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Susan Moloney Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	9/11/2019	<b>Time of IHAP recommendation:</b>	15:54 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	7/11/2019 Time:1000 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F

The panel noted that s47F . They also highlighted that s47F

The panel discussed s47F and they noted that s47F

They noted that the s47F

s47F

The panel noted that s47F

s47F

s47F the panel noted that s47F

The panel noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

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**Sensitive: Personal****Actions:**

- s47F [REDACTED]

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 29.10.2019 – 1 page
2. Letter from advocate s47F [REDACTED] – 2 pages
3. Treating Drs referral –
  - a. s47F [REDACTED]
  - b. [REDACTED]
  - c. [REDACTED]
  - d. [REDACTED]

4. Clinical Records

s47F [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
Dr Parbodh Gogna  
Associate Professor Susan Moloney  
Dr Michael Douglas  
Mr Guy Coffey

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**Sensitive: Personal**

<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	9/11/2019	<b>Time of IHAP recommendation:</b>	15:54 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive: Personal**



# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii) s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The panel noted that <sup>s47F</sup> [REDACTED] has had no encounters with IHMS since May 2018 until August 2019 even though he was still in the community.

<sup>s47F</sup> [REDACTED] The panel noted that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED] The panel noted that <sup>s47F</sup> [REDACTED]. The panel requested that <sup>s47F</sup> [REDACTED].

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	9/11/2019	<b>Time of IHAP recommendation:</b>	15:54 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive: Personal**

# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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## Sensitive: Personal

interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel notes that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

The Panel notes that <sup>s47F</sup> [REDACTED]

The Panel noted <sup>s47F</sup> [REDACTED]

The Panel notes that <sup>s47F</sup> [REDACTED]

The Panel raised concerns that <sup>s47F</sup> [REDACTED]

The Panel acknowledged that <sup>s47F</sup> [REDACTED]

### IHAP recommendations

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to approve <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

### Actions:

- <sup>s47F</sup> [REDACTED] to be transferred to Australia
- <sup>s47F</sup> [REDACTED]
- The Panel to be notified once <sup>s47F</sup> [REDACTED] transferred

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## Sensitive: Personal

**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 26.10.2019 – 1 pages
2. Letter from advocate <sup>s47F</sup> – 3 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
  - c.
  - d.

## 4. Clinical Records

<sup>s47F</sup>**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority</b> (out of total members):	6/7
<b>Transfer is recommended:</b>	Yes

**Date of IHAP recommendation:**

9/11/2019

**Time of IHAP recommendation:**

2020hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel notes that <sup>s47F</sup>

<sup>s47F</sup>

The Panel noted that <sup>s47F</sup>

The Panel acknowledged that <sup>s47F</sup>

The Panel further noted that <sup>s47F</sup>

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup>
- 
- 
- 

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	6/7
<b>Transfer is recommended:</b>	No

**Date of IHAP recommendation:**

9/11/2019

**Time of IHAP recommendation:**

2020hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review s47F has been diagnosed with:

s47F

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel found s47F

s47F

the Panel are concerned s47F

s47F

The Panel agreed that s47F

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 15.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	6/7
<b>Transfer is recommended:</b>	No

**Date of IHAP recommendation:**

9/11/2019

**Time of IHAP recommendation:**

2020hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	§47F	
IHAP Meeting date:	9/11/2019 Time: 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review §47F has been diagnosed with:

§47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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**Sensitive: Personal**

interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that <sup>s47F</sup> [REDACTED]

The Panel expressed concern that <sup>s47F</sup> [REDACTED]

The Panel noted that <sup>s47F</sup> [REDACTED]

The Panel noted that <sup>s47F</sup> [REDACTED]

The Panel acknowledged that <sup>s47F</sup> [REDACTED]

. The Panel were concerned that <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**.

The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
  - c.

## 4. Clinical Records

<sup>s47F</sup>**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	6/7
<b>Transfer is recommended:</b>	No

**Date of IHAP recommendation:**

9/11/2019

**Time of IHAP recommendation:**

2020hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 16:00hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted s47F

The Panel noted s47F

s47F

The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- The Panel request a report on s47F condition within two weeks

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 4/11/2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy

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**Sensitive: Personal**

**Sensitive: Personal**

		Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	13:56
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 16:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer s47F to Australia
- s47F
- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 14.10.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.

## 4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Dr Michael Douglas

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**Sensitive: Personal**

		Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	13:56
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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**Sensitive: Personal**

# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

s47F the Panel agree s47F

The Panel notes s47F. The Panel agree that he s47F

The Panel agree that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer to Australia s47F
- s47F
- The Panel to be notified once s47F transferred.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 29/10/2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records s47F

<b>Panel members assessing:</b>		Antonio Di Dio Professor Brendan Murphy Associate Professor Susan Moloney (Meeting Chair) Associate Professor Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	2239hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

The Panel note s47F  
also acknowledge s47F

The Panel note that s47F and note s47F

The Panel recommend that s47F

The Panel note s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 6.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Meeting Chair)  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	5/7
<b>Transfer is recommended:</b>	No

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**Sensitive: Personal**

Date of IHAP recommendation:	10/11/2019	Time of IHAP recommendation:	2239hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

s47F

The Panel note that s47F . The Panel note s47F

. The Panel note s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 6.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
  - d.
4. Clinical Records
 

s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Meeting Chair)  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

**Is the Minister's refusal confirmed:**  
**Majority** (out of total members):  
**Transfer is recommended:**

Yes  
 5/7  
 No

**Date of IHAP recommendation:**

10/11/2019

**Time of IHAP recommendation:**

2239hrs

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**Sensitive: Personal**

Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No
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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii)

The Panel agree that s47F. They note s47F

that s47F. The Panel agree

The Panel note that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 01.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Meeting Chair)  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

**Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

5/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

10/11/2019

**Time of IHAP recommendation:**

2239hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 16:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F

The Panel noted that s47F

The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 28/10/2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
  - d.
4. Clinical Records

s47F

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<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Professor Brendan Murphy Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	13:56
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 16:00hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that s47F

It was noted that s47F

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It was noted that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED], the Panel has concerns <sup>s47F</sup> [REDACTED]

The Panel recommended <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 6/11/2019 – 1 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Neeraj Gill Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	9/11/2019	<b>Time of IHAP recommendation:</b>	20:40 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 16:00hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that s47F and that the MOC has recommended transfer to Australia in this submission.

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s47F [REDACTED]

s47F [REDACTED]

The Panel agreed that s47F [REDACTED]

s47F [REDACTED]

The Panel agreed s47F [REDACTED]

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F [REDACTED] transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F [REDACTED] transfer to Australia for treatment.

**Actions:**

- Transfer to Australia as soon as possible. s47F [REDACTED]
- s47F [REDACTED]

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 01/11/2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
  - c. s47F
  - d. s47F
4. Clinical Records s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Neeraj Gill Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	9/11/2019	<b>Time of IHAP recommendation:</b>	20:40 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F

The panel noted that s47F

The panel also noted that s47F

It is noted that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- The panel agreed that <sup>s47F</sup>
- The panel also agreed that <sup>s47F</sup>

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup>
- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 1.11.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
4. Clinical Records <sup>s47F</sup>

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Meeting Chair)  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	5/7

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		Transfer is recommended:	No
Date of IHAP recommendation:	10/11/2019	Time of IHAP recommendation:	2239hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F  
 . They also noted s47F  
 . The panel also noted s47F  
 .

The panel also noted s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- The panel agreed that s47F

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F

-

-

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 05/11/2019 – 1 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –

a. s47F

b.

4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Meeting Chair)  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

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		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	2239hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F

. The panel also noted that s47F

The panel also made note of s47F

It was noted that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- 

**Document library reviewed:** ABF Client brief – 5 pages

1. Clinical Advisory Team (MOC) Opinion dated 2.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Meeting Chair)  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

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<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	2239hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F

. They noted that s47F

The panel also noted s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- 

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 06/11/2019 – 2 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
4. Clinical Records s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Meeting Chair)  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority</b> (out of total members):	5/7
<b>Transfer is recommended:</b>	No

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Date of IHAP recommendation:	10/11/2019	Time of IHAP recommendation:	2239hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 16:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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The Panel noted that <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

It was noted <sup>s47F</sup> [REDACTED]

<sup>s47F</sup> [REDACTED]

It was noted that <sup>s47F</sup> [REDACTED]

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that <sup>s47F</sup> [REDACTED] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> [REDACTED] transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup> [REDACTED]
- [REDACTED]

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 04/11/2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> [REDACTED] – 3 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]

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c.	s47F		
d.			
4. Clinical Records			
s47F			
<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Neeraj Gill Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	09/11/2019	<b>Time of IHAP recommendation:</b>	20:40
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	07/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 0800 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii) s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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The panel discussed s47F and noted that the following:

- s47F
- 
- 
- 

s47F, the panel noted that s47F

The panel noted that s47F. They noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 24.10.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 3 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. Clinical Records <sup>s47F</sup>

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	09/11/2019	<b>Time of IHAP recommendation:</b>	15:54
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	11/11/2019 Time: 16:26 hrs	s47F	
IHAP Meeting date:	13/11/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

s47F  
note s47F The Panel . It is also noted that s47F

. The Panel note s47F

The Panel note that s47F

The Panel note that s47F

The Panel are concerned that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer s47F to Australia s47F
- Notify the Panel with s47F has been transferred.

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 6.11.2019 – 2 pages
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

s47F

**Panel members assessing:**

Dr Parbodh Gogna (Meeting Chair)  
Associate Professor Susan Moloney  
Associate Professor Neeraj Gill  
Associate Professor Michael Douglas

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

No

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		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	13/11/2019	<b>Time of IHAP recommendation:</b>	13:38 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	11/11/2019 Time: 16:26 hrs	s47F	
IHAP Meeting date:	13/11/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F. The panel noted s47F

The Panel noted s47F

The Panel expressed their concerns.

s47F the Panel recommended s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer s47F to Australia s47F
- The Panel to be notified once s47F transferred.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
4. Clinical Records s47F

**Panel members assessing:**

Dr Parbodh Gogna (Meeting Chair)  
Associate Professor Susan Moloney  
Associate Professor Neeraj Gill  
Dr Michael Douglas

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority</b> (out of total members):	4/7

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		Transfer is recommended:	Yes
Date of IHAP recommendation:	13/11/2019	Time of IHAP recommendation:	11:46 hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	11/11/2019 Time: 16:26 hrs	s47F	
IHAP Meeting date:	12/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel note s47F

The Panel note that s47F

The Panel acknowledge that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- The Panel to be provided with an update s47F

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

<b>Panel members assessing:</b>		Dr Parbodh Gogna (Meeting Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	13/11/2019	<b>Time of IHAP recommendation:</b>	13:53 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	11/11/2019 Time: 16:26 hrs	s47F	
IHAP Meeting date:	13/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel note that s47F

The Panel note that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 2 pages
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –

a.

4. Clinical Records

s47F

**Panel members assessing:**

Dr Parbodh Gogna (Meeting Chair)  
Associate Professor Susan Moloney  
Associate Professor Neeraj Gill  
Dr Michael Douglas

**IHAP Majority recommendation:**

**Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

4/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

13/11/2019

**Time of IHAP recommendation:**

13:53hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	11/11/2019 Time: 16:26 hrs	s47F	
IHAP Meeting date:	13/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel note s47F  
note s47F . They also

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 1 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

<b>Panel members assessing:</b>		Dr Parbodh Gogna (Meeting Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	13/11/2019	<b>Time of IHAP recommendation:</b>	11:46 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	11/11/2019 Time: 16:26hrs	s47F	
IHAP Meeting date:	13/11/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel note that s47F

The Panel note that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 01.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records s47F

**Panel members assessing:**

Dr Parbodh Gogna (Meeting Chair)  
Associate Professor Susan Moloney  
Associate Professor Neeraj Gill  
Dr Michael Douglas

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

**Majority** (out of total members):

4/7

**Transfer is recommended:**

No

**Date of IHAP recommendation:**

13/11/2019

**Time of IHAP recommendation:**

13:38 hrs

**Deemed approval (post 72 hours)?**

No

**Meeting audio recorded:**

No

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**Sensitive: Personal****Independent Health Advice Panel****Clinical Assessment**

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 16:00hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

**Interview with Transitory Person**

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F. The panel noted s47F.

The Panel were concerned that s47F. The Panel agreed that s47F.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal**

## Sensitive: Personal

### IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

### Actions:

- Transfer s47F to Australia
- s47F [REDACTED]
- [REDACTED]
- The Panel to be informed once transfer has occurred

### **Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 05/11/2019 – 2 pages
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –
  - a. s47F [REDACTED]
  - b. [REDACTED]
  - c. [REDACTED]
4. Clinical Records

### **Panel members assessing:**

Dr Antonio Di Dio (Chair)  
Dr Parbodh Gogna  
Professor Brendan Murphy

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		Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	13-56
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	9/11/2019 Time: 16:00hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted s47F . The Panel noted that s47F

s47F

The Panel noted that s47F

The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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## Sensitive: Personal

### IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

### Actions:

- s47F
- 
- The Panel receive fortnightly reports s47F

### **Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 5/11/2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.

#### 4. Clinical Records

s47F

### **Panel members assessing:**

Dr Antonio Di Dio (Chair)  
Dr Parbodh Gogna

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		Professor Brendan Murphy Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	13:56
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	8/11/2019 Time: 17:45 hrs	s47F	
IHAP Meeting date:	10/11/2019 Time: 17:00hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F . The panel noted that

s47F

The panel also noted s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- The Panel agreed that s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F

-

-

-

-

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 6.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Meeting Chair)  
 Associate Professor Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

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		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	10/11/2019	<b>Time of IHAP recommendation:</b>	2239hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	13/11/2019 Time: 18:18 hrs	s47F	
IHAP Meeting date:	14/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F

Panel noted s47F.

The panel noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer s47F To Australia s47F
- The Panel to be notified once s47F transferred.
- s47F

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 7.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –

- a. s47F
- b.
- c.
- d.

4. Clinical Records

s47F

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**Sensitive: Personal**

<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Professor Paul Kelly	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	10:05 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment (Attachment A.1)

Meeting details		Biodata details	
IHAP referral date/time:	28/09/2019 Time: 13:45 hrs	s47F	
IHAP Meeting date:	30/09/2019 07:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by:

Secretariat attending:

Following IHAP document review s47F [redacted] has been diagnosed with:

s47F

[redacted]

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**Sensitive: Personal**

The Panel found that <sup>s47F</sup>

<sup>s47F</sup>

**IHAP recommendations**

The Panel recommended that <sup>s47F</sup>

**Actions:**

- <sup>s47F</sup>
- 
- 

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**Sensitive: Personal****Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 20.09.2019 – 2 pages
2. Letter from <sup>s47F</sup> – 2 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b. <sup>s47F</sup>
4. <sup>s47F</sup> Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Professor Paul Kelly Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	30/09/2019	<b>Time of IHAP recommendation:</b>	14:26
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	13/11/2019 Time: 18:18 hrs	§47F	
IHAP Meeting date:	14/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: §22(1)(a)(ii)

The Panel noted §47F

The Panel noted that §47F

. The Panel expressed their concerns.

The Panel noted that §47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer to Australia.
- Notify panel once s47F transferred.

- s47F

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.10.2019 – 2 pages
2. Letter from advocate s47F – 6 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.

4. Clinical Records

s47F

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**Sensitive: Personal**

<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Professor Paul Kelly	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	10:26 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment (Attachment A.1)

Meeting details		Biodata details	
IHAP referral date/time:	12/08/2019 Time: 1235 hrs	s47F	
IHAP Meeting date:	13/08/2019 1700 hrs		
Reconvened IHAP meeting (if required):	14/08/2019 1715 hrs	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Tuesday 13 August 2019 at 1700 hrs attended by 7 IHAP Panel members.

**Secondary meeting:** Wednesday 14 August 2019 at 1715 hrs attended by 5 IHAP Panel members. (Final recommendation supported by all 7 IHAP Panel members).

Secretariat attending: s22(1)(a)(ii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that s47F is a relevant transitory person.

s47F

**The treating doctors have put forward the following diagnoses:**

s47F

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s47F

[REDACTED]

The Panel accept that s47F  
 [REDACTED]. The Panel note s47F. The  
 Panel noted that s47F. The Panel  
 note that s47F. The Panel  
 were concerned s47F

The Panel note the report by the Medical Officer of the Commonwealth (MOC).

The Panel agreed that s47F  
 [REDACTED] The Panel agree and note s47F  
 [REDACTED]. The Panel also notes s47F

The Panel agreed that s47F  
 [REDACTED] The Panel agreed that s47F  
 [REDACTED]

The Panel noted that s47F  
 [REDACTED]

The Panel agreed that s47F  
 [REDACTED] The Panel questioned, s47F  
 [REDACTED]

The Panel agreed that s47F  
 [REDACTED] The Panel agreed that s47F  
 [REDACTED] The Panel were uncertain if s47F

The Panel noted that Dr Parbodh Gogna's name was listed in the patient's notes on the chest x-ray and blood screening results taken when the patient first arrived on Christmas Island. Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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### IHAP recommendations

All seven IHAP members present agreed that their recommendation is that <sup>s47F</sup> [REDACTED] transfer to Australia for medical treatment be **refused**. This recommendation is based on the following reasons:

1. <sup>s47F</sup> [REDACTED]
2. [REDACTED]
3. [REDACTED]
4. [REDACTED]
5. [REDACTED]
6. [REDACTED]

The Panel agreed that their recommendation that <sup>s47F</sup> [REDACTED] not be transferred to Australia is based on the above factors.

### Actions:

1. <sup>s47F</sup> [REDACTED]
2. Inform the IHAP Panel, via the Outcomes Tracker, when <sup>s47F</sup> [REDACTED].
3. Provide the IHAP Panel with an updated <sup>s47F</sup> [REDACTED]

### **Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.07.2019 – 2 pages
2. Letter from <sup>s47F</sup> [REDACTED] – 5 pages
3. Treating Drs referral – 13 pages
  - a. <sup>s47F</sup> [REDACTED]
  - b. [REDACTED]
4. Clinical Records

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<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Professor Brendan Murphy Dr Antonio Di Dio Associate Professor Susan Moloney Dr Neeraj Gill Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	7/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	15/08/2019	<b>Time of IHAP recommendation:</b>	09:30 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	13/11/2019 Time: 18:18 hrs	s47F	
IHAP Meeting date:	14/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted s47F

s47F the Panel recommended s47F

The Panel was concerned s47F

. The Panel also noted s47F

The Panel noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup>
- 
- 
- 
- Provide the Panel with an update <sup>s47F</sup>.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 2 pages
2. Letter from advocate <sup>s47F</sup> – 3 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
  - c.
  - d.

4. Clinical Records

<sup>s47F</sup>

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<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Professor Paul Kelly	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	10:51 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment (Attachment A.1)

Meeting details		Biodata details	
IHAP referral date/time:	25/09/2019 Time: 1051 hrs	s47F	
IHAP Meeting date:	26/09/2019 1730 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Thursday, 26 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, A/Prof. Michael Douglas, Mr Guy Coffey

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

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s47F [REDACTED]

The Panel considered the treating doctors' reports and the MOC opinion s47F [REDACTED].

The Panel discussed s47F [REDACTED] and noted:

- s47F [REDACTED]
- [REDACTED]
- [REDACTED]

The Panel noted that s47F [REDACTED]. The Panel noted that s47F [REDACTED].

The Panel agreed that s47F [REDACTED]

s47F [REDACTED] the Panel noted that s47F [REDACTED]. The Panel noted that s47F [REDACTED]. The Panel noted that s47F [REDACTED].

The Panel noted that s47F [REDACTED]. The Panel noted that s47F [REDACTED].

The Panel noted that s47F [REDACTED]. The Panel also noted that s47F [REDACTED].

The Panel agreed that s47F [REDACTED]

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

### **IHAP recommendations**

All five IHAP Panel members agreed that their recommendation is to **refuse** the transfer of s47F [REDACTED] to Australia for treatment. The Panel agreed that their recommendation is based on the following factors:

1. s47F [REDACTED] The Panel agree s47F [REDACTED]
2. s47F [REDACTED] The Panel agree that s47F [REDACTED].

The Panel agree that their recommendation to refuse s47F [REDACTED] transfer is based on the above reasons.

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**Sensitive: Personal**

**Sensitive: Personal****Actions:**

1. s47F be transferred s47F
2. s47F
- 3.
- 4.
- 5.
6. The Panel be notified via the Outcomes Tracker when s47F is transferred s47F. The Panel also needs to be advised s47F.

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 pages
2. Letter from s47F – 7 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Dr Parbodh Gogna Associate Professor Susan Moloney Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/5
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	27/09/2019	<b>Time of IHAP recommendation:</b>	1405 hrs

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Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No
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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	s47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel note that s47F

The Panel note that s47F

The Panel note that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer s47F to Australia for s47F.
- The Panel to be notified once s47F transferred

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 4.11.2019 – 1 page
2. Letter from advocate s47F – 5 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records  
s47F

<b>Panel members assessing:</b>		Associate Professor Susan Moloney (Chair) Professor Paul Kelly Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	22:13hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	§47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: §22(1)(a)(ii)

The Panel noted that §47F. The Panel commented on the §47F

The Panel were concerned with §47F

The Panel noted §47F

The Panel agreed that §47F

The Panel requested §47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- The Panel be provided with an update s47F

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 7.11.2019 – 2 pages
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
  - d.

4. Clinical Records

**Panel members assessing:**

Associate Professor Susan Moloney (Chair)  
Professor Paul Kelly  
Dr Michael Douglas

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		Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	22:13hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	§47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: §22(1)(a)(ii)

The Panel noted that §47F

The Panel also notes §47F

The panel noted that §47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- The panel noted <sup>s47F</sup> but agreed that <sup>s47F</sup>
- <sup>s47F</sup>

Based on the above reasons, the Panel agreed that their recommendation is to refuse <sup>s47F</sup> transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup>
- 
- 

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.11.2019 – 1 pages
2. Letter from advocate <sup>s47F</sup> – 7 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
4. Clinical Records <sup>s47F</sup>

**Panel members assessing:**

Associate Professor Susan Moloney (Chair)  
Dr Michael Douglas  
Mr Guy Coffey  
Professor Paul Kelly

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<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority (out of total members):</b>	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	22:13hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	s47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

s47F

The Panel noted s47F

The Panel noted that s47F

, the Panel agreed that s47F

This recommendation is in line with the recommendation from the medical Officer of the Commonwealth.

s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer s47F to Australia s47F.
- The Panel to be notified once s47F transferred.

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.08.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records  
s47F

<b>Panel members assessing:</b>		Associate Professor Susan Moloney (Chair) Professor Paul Kelly Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	22:13hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	s47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel note that s47F

s47F

The Panel notes that s47F

The Panel note s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that §47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- §47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse §47F transfer to Australia for treatment.

**Actions:**

- The Panel notes that §47F
- The Panel request §47F

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 5.11.2019 – 1 page
2. Letter from advocate §47F – 2 pages
3. Treating Drs referral –
  - a. §47F
  - b.
  - c.
4. Clinical Records §47F

**Panel members assessing:**

Associate Professor Susan Moloney (Chair)  
 Professor Paul Kelly  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority</b> (out of total members):	4/7
<b>Transfer is recommended:</b>	No

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Date of IHAP recommendation:	15/11/2019	Time of IHAP recommendation:	22:13hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	s47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

The panel noted s47F

The panel noted s47F. The panel also noted s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- The panel noted that <sup>s47F</sup>

Based on the above reasons, the Panel agreed that their recommendation is to approve <sup>s47F</sup> transfer to Australia for treatment.

**Actions:**

- <sup>s47F</sup>
- 
- 
- The Panel to be notified once <sup>s47F</sup> is transferred to Australia.

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 8.11.2019 – 1 page
2. Letter from advocate <sup>s47F</sup> – 3 pages
3. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
4. Clinical Records

<sup>s47F</sup>

**Panel members assessing:**

Professor Brendan Murphy  
Associate Professor Susan Moloney (Chair)  
Mr Guy Coffey  
Professor Paul Kelly

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<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority (out of total members):</b>	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	22:13hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	Yes

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	s47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted that s47F

The panel also note that s47F

The panel noted that s47F

The panel also noted that s47F

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### IHAP recommendations

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

### Actions:

- s47F
- 
- 
- 
- 
- 

### **Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 29.10.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

s47F

### **Panel members assessing:**

Associate Professor Susan Moloney (Chair)  
Dr Michael Douglas  
Associate Professor Neeraj Gill

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		Mr Guy Coffey Professor Paul Kelly	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	15/11/2019	<b>Time of IHAP recommendation:</b>	22:13
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	s47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F

. The panel noted s47F

The panel also noted that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- The Panel to be notified once s47F is transferred to Australia.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 7.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

**Panel members assessing:**

Associate Professor Susan Moloney (Chair)  
 Dr Michael Douglas  
 Mr Guy Coffey  
 Professor Paul Kelly

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority (out of total members):</b>	4/7

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		Transfer is recommended:	Yes
Date of IHAP recommendation:	15/11/2019	Time of IHAP recommendation:	2213hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F. The Panel noted that s47F.

s47F, the Panel also recommended s47F.

s47F, the Panel recommend transfer to Australia.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer s47F to Australia s47F .
- The Panel to be notified once s47F transferred.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 09.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records s47F

<b>Panel members assessing:</b>		Dr Antonio Di Dio Professor Paul Kelly Associate Professor Susan Moloney (Chair) Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	16/11/2019	<b>Time of IHAP recommendation:</b>	1127hrs

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Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No
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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F

The Panel noted that s47F

The Panel noted that s47F

s47F

note that s47F

The Panel

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- The Panel request s47F

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 06.11.2019 – 2 pages
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Paul Kelly  
 Associate Professor Susan Moloney (Chair)  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

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		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	16/11/2019	<b>Time of IHAP recommendation:</b>	1127hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel considered s47F case and noted that s47F

s47F

The Panel agreed that s47F

s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that <sup>s47F</sup> transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- <sup>s47F</sup>
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve <sup>s47F</sup> transfer to Australia for treatment.

**Actions:**

- Transfer <sup>s47F</sup> to Australia <sup>s47F</sup>

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.10.2019 – pages
2. Letter from advocate <sup>s47F</sup> – 2 pages
3. <sup>s47F</sup>
4. Treating Drs referral –
  - a. <sup>s47F</sup>
  - b.
5. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Paul Kelly  
 Associate Professor Susan Moloney (Chair)

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		Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	16/11/2019	<b>Time of IHAP recommendation:</b>	1127hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel discussed the treating doctors reports and s47F and noted that s47F

s47F, the Panel recommended s47F. The Panel note that s47F

s47F the panel recommend transfer to Australia s47F.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- Transfer s47F to Australia s47F
- The panel to be notified once s47F transferred.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 08.11.2019 – 1 page
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –
  - a. s47F
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Paul Kelly  
 Associate Professor Susan Moloney (Chair)  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes/No
<b>Majority</b> (out of total members):	5/7
<b>Transfer is recommended:</b>	Yes

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Date of IHAP recommendation:	16/11/2019	Time of IHAP recommendation:	1127hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel note that s47F

s47F

The panel agreed that s47F

. The Panel recommend s47F

recommend s47F

. The Panel further

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- Full report to be provided to the Panel s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 04.11.2019 – 2 pages
2. Letter to Minister - Notice of Submission – 8 pages
3. s47F
4. Clinical Records s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Paul Kelly  
 Associate Professor Susan Moloney (Chair)  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	5/7
<b>Transfer is recommended:</b>	No

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Date of IHAP recommendation:	16/11/2019	Time of IHAP recommendation:	1127hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F

The Panel noted that s47F

The Panel noted that s47F

. The Panel agreed that s47F

The Panel noted that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

1. s47F
- 2.
- 3.

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 5.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio  
Professor Paul Kelly

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		Associate Professor Susan Moloney (Chair) Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	16/11/2019	<b>Time of IHAP recommendation:</b>	11:25
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F . The Panel noted that s47F

The Panel noted that s47F . The Panel noted that s47F

The Panel noted that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

1. s47F be transferred to Australia s47F

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 04.11.2019 – 1 page
2. Notice of 'relevant transitory person' under s198E (25.10.19)
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.

4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Professor Paul Kelly  
 Associate Professor Susan Moloney (Chair)

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		Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority</b> (out of total members):	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	16/11/2019	<b>Time of IHAP recommendation:</b>	11:25
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F

The Panel noted that s47F

. The Panel agreed that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

1. s47F
- 2.
- 3.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 8.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.

4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio  
Professor Paul Kelly

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		Associate Professor Susan Moloney (Chair) Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	5/4
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	16/11/2019	<b>Time of IHAP recommendation:</b>	11:25
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 12:00 hrs	s47F	
IHAP Meeting date:	16/11/2019 Time: 08:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted that s47F

The Panel noted that s47F

. The Panel noted that s47F

The Panel noted that s47F

The Panel agreed that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- 1.
- 2.
- 3.
- 4.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 29.10.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records
 

s47F

**Panel members assessing:**

Professor Paul Kelly  
 Associate Professor Susan Moloney (Chair)  
 Dr Michael Douglas  
 Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

Yes

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		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	16/11/2019	<b>Time of IHAP recommendation:</b>	11:25
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	15/11/2019 Time: 15:45 hrs	§47F	
IHAP Meeting date:	17/11/2019 Time: 16:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: §22(1)(a)(ii)

Following IHAP document review §47F has been diagnosed with:

The panel noted §47F

. They noted §47F

. They note §47F

The panel noted §47F

. They also note that §47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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### IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

### Actions:

- s47F
- 
- 
- 
- 

### **Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 12.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records s47F

### **Panel members assessing:**

Dr Antonio Di Dio  
Dr Parbodh Gogna  
Professor Brendan Murphy

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		Associate Professor Susan Moloney (Chair) Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	6/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	17/11/2019	<b>Time of IHAP recommendation:</b>	19:07pm
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	14/11/2019 Time: 09:45 hrs	s47F	
IHAP Meeting date:	15/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

The panel noted s47F  
panel also noted s47F

The panel also noted s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- The Panel to be notified once s47F is transferred to Australia.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 31 OCT 2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

**Panel members assessing:**

Associate Professor Susan Moloney (Chair)  
 Dr Michael Douglas  
 Mr Guy Coffey  
 Professor Paul Kelly

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority</b> (out of total members):	4/7
<b>Transfer is recommended:</b>	Yes

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Date of IHAP recommendation:	15/11/2019	Time of IHAP recommendation:	22:13hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	15/11/2019 Time: 15:45 hrs	s47F	
IHAP Meeting date:	17/11/2019 Time: 16:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel note that s47F

The Panel note that s47F

. The Panel recommend s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- The Panel to be provided with a s47F report s47F
- The Panel to be provided with a s47F report as soon as possible and no later than one week s47F

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records s47F

**Panel members assessing:**

Dr Antonio Di Dio  
 Dr Parbodh Gogna  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney (Chair)  
 Associate Professor Neeraj Gill  
 Dr Michael Douglas

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	6/7

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		Transfer is recommended:	No
Date of IHAP recommendation:	17/11/2019	Time of IHAP recommendation:	19:07pm
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	15/11/2019 Time: 15:45 hrs	s47F	
IHAP Meeting date:	17/11/2019 Time: 16:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes/No
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes/No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F

. They noted that s47F

The panel also noted s47F

The panel also noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- The panel noted that s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- 

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio  
Dr Parbodh Gogna

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**Sensitive: Personal**

		Professor Brendan Murphy Associate Professor Susan Moloney (Chair) Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	6/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	17/11/2019	<b>Time of IHAP recommendation:</b>	19:07pm
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	15/11/2019 Time: 15:45 hrs	s47F	
IHAP Meeting date:	17/11/2019 Time: 16:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted that s47F

. They noted that s47F

The panel also noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- The panel noted that s47F [REDACTED]
- The panel also noted that s47F [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F [REDACTED]
- [REDACTED]
- [REDACTED]

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 08.11.2019 – 2 pages
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –
  - a. s47F [REDACTED]
  - b. [REDACTED]
4. Clinical Records s47F [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio  
Dr Parbodh Gogna

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		Professor Brendan Murphy Associate Professor Susan Moloney (Chair) Associate Professor Neeraj Gill Dr Michael Douglas	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	6/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	17/11/2019	<b>Time of IHAP recommendation:</b>	19:07pm
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	22/11/2019 Time: 15:20 hrs	s47F	
IHAP Meeting date:	23/11/2019 Time: 16:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) s22(1)(a)(ii)

The Panel noted that s47F

s47F

s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- 

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 12.11.2019 – xx pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority</b> (out of total members):	4/7
<b>Transfer is recommended:</b>	No

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**Sensitive: Personal**

Date of IHAP recommendation:	24/11/2019	Time of IHAP recommendation:	08:41
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	18/11//2019 Time: 16:53 hrs	s47F	
IHAP Meeting date:	20/11/2019 Time: 08:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel considered the case and noted the recommendation from the Medical Officer of the Commonwealth. The Panel noted that s47F

s47F

The Panel discussed s47F

. The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F [REDACTED]
- [REDACTED]
- s47F [REDACTED] the Panel recommend transfer to Australia s47F [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F [REDACTED]
- s47F to be transferred to Australia s47F [REDACTED]
- The Panel to be notified once s47F transferred.

**Document library reviewed:** ABF Client brief – 5 pages

1. Clinical Advisory Team (MOC) Opinion dated 1.11.2019 – 1 page
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F [REDACTED]
  - b. [REDACTED]
4. Clinical Records s47F [REDACTED]

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Dr Parbodh Gogna  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill  
 Dr Michael Douglas

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<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority (out of total members):</b>	5/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	21/11/2019	<b>Time of IHAP recommendation:</b>	10:00 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	25/11/2019 Time: 14:20 hrs	s47F	
IHAP Meeting date:	27/11/2019 Time: 07:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F

The panel notes that s47F

The panel noted that s47F

. The panel noted that s47F

. The panel noted that s47F

The panel also noted

s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
  - 
  -
- The panel agrees that these items can be addressed in Port Moresby.

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 
- 
- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 20.11.2019 – xx pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –

- a. s47F
- b.

4. Clinical Records

s47F

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<b>Panel members assessing:</b>		Dr Antonio Di Dio (Chair) Associate Professor Susan Moloney Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	27/11/2019	<b>Time of IHAP recommendation:</b>	13:50pm
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	27/11/2019 Time: 10:00 hrs	s47F	
IHAP Meeting date:	29/11/2019 Time: 0700 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F

. The panel also noted s47F

The panel noted s47F

The panel agreed that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 12.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –

- a. s47F
- b.

4. Clinical Records

s47F

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**Sensitive: Personal**

<b>Panel members assessing:</b>		Dr Antonio Di Dio Associate Professor Susan Moloney (Chair) Associate Professor Neeraj Gill Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	Yes
		<b>Majority</b> (out of total members):	4/7
		<b>Transfer is recommended:</b>	No
<b>Date of IHAP recommendation:</b>	29/11/2019	<b>Time of IHAP recommendation:</b>	08:00 hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	02/12/2019 Time: 16:20 hrs	s47F	
IHAP Meeting date:	04/12/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A	Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel considered s47F

The Panel noted s47F

The Panel noted s47F

s47F . The panel note that s47F . The Panel note the

The Panel do not have confidence that s47F

s47F . For this reason, the Panel recommend transfer to Australia for medical treatment.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F should be transferred to Australia for medical treatment; and
- The Panel be notified once this has occurred.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
4. Clinical Records

**Panel members assessing:**

Dr Parbodh Gogna (Chair)  
Associate Professor Neeraj Gill  
Dr Michael Douglas  
Mr Guy Coffey

**IHAP Majority recommendation:****Is the Minister's refusal confirmed:**

No

**Majority** (out of total members):

4/7

**Transfer is recommended:**

Yes

**Date of IHAP recommendation:**

4/12/2019

**Time of IHAP recommendation:**

1912hrs

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Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No
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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	02/12/2019 Time: 16:20 hrs	s47F	
IHAP Meeting date:	04/12/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

s47F

The Panel agree that s47F

s47F

the Panel agree that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F be transferred to Australia s47F
- The Panel be notified once transfer has occurred.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 12.11.2019 – 2 pages
2. Letter from advocate s47F – 6 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records
 

s47F

<b>Panel members assessing:</b>		Dr Parbodh Gogna (Chair) Associate Professor Neeraj Gill Dr Michael Douglas Mr Guy Coffey	
<b>IHAP Majority recommendation:</b>		<b>Is the Minister's refusal confirmed:</b>	No
		<b>Majority (out of total members):</b>	4/7
		<b>Transfer is recommended:</b>	Yes
<b>Date of IHAP recommendation:</b>	4/12/2019	<b>Time of IHAP recommendation:</b>	1912hrs
<b>Deemed approval (post 72 hours)?</b>	No	<b>Meeting audio recorded:</b>	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	28/11/2019 Time: 10:21 hrs	s47F	
IHAP Meeting date:	29/11/2019 Time: 18:00 hrs		
Reconvened IHAP meeting (if required):	N/A		
		Treating Doctor's referral received?	Yes
		Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	No

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The Panel noted s47F. The Panel noted s47F the notes of the treating doctors, and the recommendation of the Medical Officer of the Commonwealth.

The Panel expressed concern that s47F

The Panel note s47F

The Panel note that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- s47F
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve s47F transfer to Australia for treatment.

**Actions:**

- s47F be transferred to Australia s47F
- The Panel be informed once this transfer is complete.

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 19.11.2019 – 1 pages
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –
  - a. s47F
  - b.
4. Clinical Records s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Professor Brendan Murphy  
 Associate Professor Neeraj Gill  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	No
<b>Majority</b> (out of total members):	4/7
<b>Transfer is recommended:</b>	Yes

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Date of IHAP recommendation:	30/11/2019	Time of IHAP recommendation:	11:41am
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	28/11/2019 Time: 10:21 hrs	§47F	
IHAP Meeting date:	29/11/2019 Time: 18:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: §22(1)(a)(ii)

The Panel noted §47F

The Panel recommend §47F

§47F the Panel note that §47F

The Panel §47F believes §47F. The Panel strongly

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 
- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 13.11.2019 – 2 pages
2. Letter from advocate s47F – 2 pages
3. Treating Drs referral –
  - a. s47F
  - b.
  - c.
4. Clinical Records s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Professor Brendan Murphy  
 Associate Professor Neeraj Gill  
 Mr Guy Coffey

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority</b> (out of total members):	4/7
<b>Transfer is recommended:</b>	No

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Date of IHAP recommendation:	30/11/2019	Time of IHAP recommendation:	11:40am
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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# Independent Health Advice Panel

## Clinical Assessment

Meeting details		Biodata details	
IHAP referral date/time:	29/11/2019 Time: 1600 hrs	s47F	
IHAP Meeting date:	30/11/2019 Time: 16:00 hrs	Treating Doctor's referral received?	Yes
Reconvened IHAP meeting (if required):	N/A	Was the Referring Doctor's clinical assessment performed remotely or in person?	Remotely
		Health Service Provider clinical summary received:	Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii)

s47F

s47F

. The Panel noted that s47F

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**Sensitive: Personal****IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that s47F transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- s47F

Based on the above reasons, the Panel agreed that their recommendation is to refuse s47F transfer to Australia for treatment.

**Actions:**

- s47F
- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.11.2019 – 2 pages
2. Letter from advocate s47F – 3 pages
3. Treating Drs referral –
  - a. s47F
  - b. s47F
4. Clinical Records

s47F

**Panel members assessing:**

Dr Antonio Di Dio (Chair)  
 Professor Brendan Murphy  
 Associate Professor Susan Moloney  
 Associate Professor Neeraj Gill

**IHAP Majority recommendation:**

<b>Is the Minister's refusal confirmed:</b>	Yes
<b>Majority (out of total members):</b>	4/7

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		Transfer is recommended:	No
Date of IHAP recommendation:	02/12/2019	Time of IHAP recommendation:	08:15 hrs
Deemed approval (post 72 hours)?	No	Meeting audio recorded:	No

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