JOINT SELECT COMMITTEE ON AUSTRALIA'S IMMIGRATION DETENTION NETWORK

Q144

Question: Who makes the decision to whether there is a clinically recommended second opinion needed? How can the health service, which makes the initial assessment then be assessing themselves as to whether there is a second assessment needed? What is the communication to detainees around the charging of independent psychiatric assessments?

Answer: Clinicians employed by the Health Services Provider, International Health and Medical Services (IHMS), make clinical recommendations for a second opinion.

The need for a second opinion is considered on a case by case basis, and may be discussed by the primary IHMS clinician with the IHMS Medical Director at the detention facility, or with other senior IHMS clinicians.

IHMS advises that in most cases where a second opinion is sought, this is done to help alleviate client anxiety or to clarify client expectations about treatment or management.

The IHMS clinician may refer the client to another IHMS clinician for provision of a second opinion.

If the client is seeking a second opinion in relation to a diagnosis made by a medical specialist, including a non-IHMS specialist, the IHMS GP may refer the client to a different specialist.

Where IHMS does not consider a second-opinion to be clinically warranted, the client or their representative can seek to make their own arrangements for a second opinion at their own expense.

The option of organising a private assessment is usually explained by the department to client representatives such as migration agents and lawyers, in response to enquiries made to the department. IHMS staff may also explain this option to clients.