

# Medical Board of Australia consultation on the funding of external doctors' health programs

Submission received from: **Cheryl Wile**

## Question 1: Is there a need for health programs?

Do you see any value in, or need for external health programs for medical students and/or doctors? Please explain your reasoning

*Absolutely. Having a program to cater for this particular group is essential. The medical profession is notorious for not looking after themselves and in the event of illness it has been proven that they are more likely to attend an organization that specifically caters for and is experienced in caring for doctors compared to a more generic health service. I also think that having a confidential, compassionate service just for doctors encourages the profession to seek confidential advice if they are concerned about a colleague.*

## Question 2: Preferred model for external health programs

Of the existing models in Australia as described above, is there a model that you would prefer to see adopted nationally? Is there an alternative model that you would like to see adopted nationally?

*I would very much like to see the VDHP model adopted nationally. It is the most comprehensive, beneficial, program for the medical profession, and the on-going involvement that VDHP has with their case-management program is the type of on-going care and support that impaired students and doctors need. Not only does this approach assist the medical community with their health issues, but it also ultimately benefits the general community who can then access healthy doctors. Furthermore, the 'educative' role that is also a part of the VDHP sends out a terrific message to medical students and young doctors that it is OK to have health issues and that there is somewhere they can go to for assistance - hence playing a 'preventative' role and not just a 'reactive' role.*

## Question 3: The role of the Board in funding external health programs

Do you believe that it is the role of the Board to fund external health programs?

*Yes. Given it is the Board's role to keep the community safe, they should have a vested interest in ensuring that their doctors are in good health. In the event that a doctor is impaired I think it is imperative that there is a specific program where the Board can direct doctors too for assistance.*

## Question 4: Range of services provided by doctors' health programs

What services should be provided by doctors' health programs. In addition to the ones you have selected, what other services (if any) should be provided by doctors' health programs?

*Telephone advice during office hours*

*Referral to expert practitioners for assessment and management*

*Develop and maintain a list of practitioners who are willing to treat colleagues*

*Education services for medical practitioners and medical students to raise awareness of health issues for the medical profession and to encourage practitioners and students to have a general practitioner*

*Programs to enhance the skills of medical practitioners who assess and manage the health of doctors*

*Case management and monitoring (including workplace monitoring) the progress of those who voluntarily enter into Case Management agreements (or similar) with the service*

*Follow up of all participants contacting or attending the service*

*Assistance in finding support for re-entry to work and rehabilitation*

*Research on doctors' health issues*

*Publication of resources – maintaining a website, newsletters, journal articles*

**Question 5: Funding**

How much of an increase in registration fees is acceptable to you, to fund doctors' health services?

>\$40

**Question 6: Other comments**

Do you have any other comments or feedback about external health programs?

*The VDHP model is the most comprehensive program for impaired medical students and doctors. To not have this type of service would undoubtedly be a backward step in doctors health.*