

Submissions

Please provide written submissions by email, marked "Consultation on funding external doctors' health programs" to medboardconsultation@ahpra.gov.au by close of business on **5 April 2012**. Submissions by post should be addressed to the Executive Officer, Medical, AHPRA, GPO Box 9958, Melbourne 3001.

The Board publishes submissions on its website to encourage discussion and inform the community and stakeholders.

We will not place on our website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the reference. Before publication, we may remove personally identifying information from submissions.

The views expressed in the submissions are those of the individuals or organisations who submit them and their publication does not imply any acceptance of, or agreement with, these views by the Board.

The Board also accepts submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the Freedom of Information Act 1982 (Cth), which has provisions designed to protect personal information and information given in confidence.

Please let us know if you do not want us to publish your submission, or want us to treat all or part of it as confidential.



telephonist and after-hours locum service. Four panel general practitioners and 1 psychiatrist provide their time gratis.

VDHP – Annual cost is \$500,000 funded from the reserves of the previous MPBV.

Other services available for medical practitioners

In addition to the doctors' advisory services, there are other services available for medical practitioners. These include:

- Medical Benevolent Association of NSW
- Medical Benevolent Association of South Australia
- Rural Doctors Workforce Agency – Dr Doc Program (supports the health and well being of South Australia's Rural GPs)
- Peer Support Service – AMA Vic
- Victorian Medical Benevolent Association

Feedback about the type of programs the Board should fund

The Board recognises the significant contribution being made by people and agencies working in the area of doctors' health, many of whom are volunteers. Early recognition of illness and intervention to restore a practitioner to better health and to avoid them becoming impaired are important for the individual practitioner, the medical profession and the community.

There is a range of health services currently provided across Australia. The Board does not have a clear view about which is the best model for the provision of these services or how they are best funded. The Board is seeking the views of the medical profession on these issues.

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.

I do see value and a need for external health programs for medical students and/or doctors. Reasons include:
1) specialist help in a sense that the practitioner specialises in dealing with impaired doctors and/or medical students and thus is able to understand their situation better.
2) reassurance of confidentiality
3) one stop shop

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 like to see the VDHP model adopted nationally. I think the case management and follow up are of great use to impaired doctors as it provides additional monitoring and a differing but helpful perspective compared to the treating doctor.

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?

I do not think it is mandatory for the Board to fund external health programs but it could be seen as an interest of the Board to help with the health of its impaired doctors.

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

What services should be provided by doctors' health programs – click on as many options as you want. 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
 - Telephone advice available 24/7
 - 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
- Other services (please list)

Question 5: Funding

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

- Nil
- \$1 - \$5
- \$5 - \$10
- \$10 - \$25
- \$25 - \$40
- >\$40

Question 6: Other comments

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

No