



SUBMISSION ON THE MEDICAL BOARD OF AUSTRALIA FUNDING EXTERNAL DOCTORS HEALTH PROGRAMS

Overview

The Australian Medical Council (AMC) welcomes the opportunity to contribute to the Medical Board of Australia consultation on the Board funding external doctors' health programs.

This submission comments generally on doctors' health programs external to the Medical Board of Australia's legislated functions under Part 5 Division 2 s35(g)(h)(i)(j) of the *Health Practitioner Regulation National Law Act 2009*, Medical Board of Australia funding of such programs, and specifically addresses the questions asked in the consultation paper.

The Australian Medical Council

As an independent national standards and assessment body for medical education and training, the purpose of the AMC is to ensure that standards of education, training and assessment of the medical profession promote and protect the health of the Australian community.

General comments

The AMC recognises the importance of the maintenance of doctors' health and wellbeing, and supports the provision of appropriate professional resources and medical health programs for medical students and doctors.

The AMC supports the prominence given to ensuring doctors' health in the Board document, *'Good Medical Practice: A Code of Conduct for Doctors in Australia'*.

The approved 'Standards for Assessment and Accreditation of Specialist Medical Education Programs and Professional Development Programs' (2010), implemented by the AMC in the assessment of medical colleges, include requirements for education providers to provide information to doctors in training on training policies and processes including on the available support systems and career guidance. They also encourage education providers to collaborate with health departments and other stakeholders on procedures to detect and support trainees who are experiencing personal and/or professional difficulties.

The approved accreditation standards for primary medical education, developed by the AMC for the Medical Board, indicate that medical schools are expected to offer appropriate student support, including counselling, health and academic advisory services, to cater for the needs of students, including social, cultural and personal needs.

The 'Assessment and Accreditation of Medical Schools: Standards and Procedures' (AMC, 2010) also include specific attributes required of medical graduates of primary medical education which incorporate:

- knowledge and understanding
- skills and
- attitudes as they affect professional behaviour

Attribute 27 of these is recognition that the doctor should have the necessary professional support, including a primary care physician, to ensure his or her own well-being.

The AMC assesses the knowledge, clinical skills and professional attributes of overseas qualified medical practitioners seeking registration to practise medicine in Australia. Overseas qualified medical graduates are required to demonstrate a level of medical knowledge, clinical skills and attitudes required of newly qualified graduates of Australian medical schools who are about to begin intern training. The approved 'Workplace-Based Assessment Accreditation Guidelines and Procedures' (2010), implemented by the AMC in assessment of those institutions seeking accreditation to offer workplace based assessment programs for international medical graduates, include the requirement, under section 7.1, that the institution has processes in place to ensure that the duties, working hours, and supervision of IMGs, balanced with the requirements of workplace-based assessment, are consistent with the delivery of high quality, safe patient care.

The 'Good Medical Practice: Code of Conduct for Doctors in Australia', endorsed by the Medical Board in 2010 and developed by the AMC through extensive consultation with the profession and major stakeholders, includes a section dedicated to 'Ensuring doctors health'. Section 9 of the Code of Conduct deals with the importance of doctor's maintenance of health and wellbeing and addresses both self-care and the health of medical colleagues. Section 9.2.6 of the Code of Conduct refers directly to the need for doctors to be aware of the doctors' health programs offered in States or Territories as a resource for help and advice in this area.

Responses to the specific questions asked in the consultation paper

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?

The AMC considers external doctors' health programs for medical students and doctors provide an important opportunity to address issues in health and performance of individual doctors and medical students in a non punitive environment and to intercede before these issues escalate to incidents which require the involvement of the Medical Board of Australia through its legislated role under the National Law. As such, these programs provide a complimentary role to that of the Medical Board's mandated 'health committees' which are an essential part of the Board's protection of the public.

A program that is independent in function from the Medical Board, universities and training hospitals offers an environment which encourages individual doctors and students who have self-identified a need to seek specialised help to seek support and referral in confidence as has been evidenced by the growth in use of services of the Victorian Doctors Health Program by medical students and numbers of younger doctors in training.

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?

The AMC suggests that the Board consider developing guidelines on the minimum services that should be available for practitioners irrespective of location. It considers that each jurisdiction is best placed to develop a model of health program which meets those specific needs of the state or territory in which it is established. The nature of challenges to the health and wellbeing of doctors may vary considerably in different settings, such as remote or rural practice. Flexibility to address particular jurisdictional issues, within a framework of Medical Board determined minimum standards and services, will add to any program's effectiveness by providing services tailored to local needs.

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?*

The primary role of the Medical Board of Australia is to protect the public and set standards and policies that all registered medical practitioners must meet.

Part of that role includes the Medical Board's functions under s35(1)(n)(g)(h)(i) of the National Law to manage issues related to doctors and medical students health and performance, and professional standards matters.

In undertaking these functions the Medical Board is also required to have consideration of s3 (3) (c) of the National Law that restrictions on the practice of a health profession are to be imposed under the scheme only if it is necessary to ensure health services are provided safely and are of an appropriate quality.

In taking responsibility for the funding external doctors' health programs the Medical Board would facilitate the opportunity for early intervention in matters which have the potential to affect health and performance of medical students and doctors, and therefore the safety and quality of health services, before matters come to the attention of the Board through notification and are therefore subject to the Medical Board's legislative function. Provision of such external health programs is therefore consistent with the Medical Board role in the protection of the public. It is also potentially a cost effective way to address problems.

4. *Range of service provided by doctors' health program.*

In comparing the programs currently available nationally there are some factors which appear to be common core services, such as telephone support services for doctors and medical students, offered in all program models.

The AMC considers that a period of collaborative development including participation of providers of the existing doctors' health program and other key stakeholders would enable the definition of the minimum criteria for services supported by the Medical Board of Australia. Consideration should be given to differentiation of support services from therapeutic services. A case would need to be made to increase the services provided in jurisdictions where the current program of support is serving doctors and the community well.

The AMC notes that other profession organisations, such as some Colleges, also offer support services to member practitioners. In establishing the portfolio of services to be funded by Medical Board sponsored programs, the range of services offered by these other established programs should be considered to minimise duplication and cost to the profession.

5. *Funding*

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

The AMC considers that the profession of medicine has responsibility for the provision of doctors' health programs to its members and future members and the Medical Board of Australia is best placed to facilitate a cohesive national program of these services.

During a period in which the profession has been asked to absorb increases in fees it will be particularly important for the Board to communicate and consult the profession on a proposed funding structure which may increase the fee for practitioners. The cost of such programs and in turn the implication for practitioners' fees will depend on the level of services provided. Work will need to be done to determine the minimum criteria/services required. This will in turn dictate the level of funding.

Conclusion

The AMC supports the provision of doctor's health programs external to the Medical Board's functions under the National Law and considers that such programs contribute to the Medical Board of Australia role of protection of the public.