



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.**

External health programs for medical students and doctors are critical. The staff of such programs have special expertise in assessing and treating physically and/or mentally impaired doctors and medical students. This treatment is confidential and usually not widely available in the general community. In addition, such programs can provide an expert triage service, based on a database of medical practitioners who are known to have expertise in this area.

External health programs provide an important liaison service with AHPRA, particularly for doctors who suffer from substance abuse or dependence and whose registrations may be subject to conditions. In these situations, external health programs can provide important advocacy, counselling and support. External health programs act as a crucial emergency referral service when doctors, often through lack of insight, are unable to present to the appropriate health provider.

#### 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 prefer to see the VDHP model adopted nationally.

### 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. The Board should have the best interest of its doctors (as well as of the community) at heart and thus should fund a national program that caters for the often-specialised medical needs of 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?

I have had direct involvement with VDHP since 2011. During an often difficult period I have found all of its hardworking staff to be resourceful and supportive and to have treated me with respect and confidentiality. If it had not been for the intervention of VDHP I would have not received the timely medical care that I desperately needed and with the assistance of which I have experienced a significant and sustained improvement in my condition.

VDHP has helped me to liaise with AHPRA, a process that has often been difficult and to make sense of and adhere to the restrictions that have been imposed on my condition. I would support in the strongest possible terms the development of a national external health program along the lines of VDHP.