

Takalvan Medical Centre

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Parliamentary Committee Inquiry into IMG's PO Box 6021 Parliament House CANBERRA ACT 2600

10 January 2011

Dear Sir/Madam

STANDING COMMITTEE

ON HEALTH AND AGEING

I have attached a submission for the Parliamentary Enquiry into the treatment of IMG's in Australia.

Personally I believe that they are being abused in a country that has not been prepared to train enough doctors for our own needs. If you look at the ratio of Australian Medical Graduates to IMG's you will find a high percentage of IMG's particularly outside the major cities. They have helped support a health system in Australia but in return have not been given the deserved respect or support from government departments or medical authorities. They have been paid considerably less than their Australian counterparts and have not been granted any benefits such as permanent residency, Medicare benefits for themselves or their family and education expenses for their family. As well as financial worries they have also been required to submit to constant reviews and exams.

I agree that there needs to be a system in place to protect people but you know whether a doctor is a threat to his/her patients within 12 months. There are good and bad doctors amount Australian graduates.

IMG's are just asking for a fair go. They have come to this country to fill a void in our health system and we give them nothing in return. The boat people are given more.

Please give these IMG's the respect they deserve

Please give this document your consideration.

Yours Faithfully

Coral-Sweeney Practice Manager

Submission for IMG Parliamentary Inquiry

I am writing this submission as a Practice Manager trying to run a practice that relies on IMG's.

Problems faced by practice

- Attracting doctors
- Retaining doctors
- Cost to doctors
- Cost to practices
- Increasing hurdles that have to be scaled
- Remuneration from Medicare
- Visas
- Provider numbers
- Medical registration
- Expenses to practice
- Time delays in feedback from government departments
- Supervision requirements not allowed to work unsupervised this has become unworkable for a small practice
- Leave for both IMG and supervisor If the supervisor needs personal leave the IMG is not permitted to work therefore the Practice has to close for that time.
- Failure of us to provide a Duty of Care to our patients while closed due to supervision requirements (This has become more of a farce since Nurse Practitioners are allowed to work in clinics unsupervised)
- Government Departments do not have phone numbers in their contact details only an email address

Medical registration

- Area of Need Certificate need letter for Dept of Health and Ageing
- Supervision
- Reports
- Changing conditions because of conditions patients think that doctor is incompetent
- Inability to contact Medical Board at present it appears that the only way of contacting the Medical Board is by email.
- No recognition of previous experience OS qualifications and experience are not recognised
- If you manage to talk to someone from the Medical Board the information you receive will depend on who you talk to.
- Unless their registration is endorsed as independent medical practice the doctors (regardless of experience) are not permitted to visit nursing homes on their own or participate in any on call arrangements where they will be working unsupervised
- Registration all Australian GP's who have not passed their Fellowship exam as specialist – This is a real slap in the face for all other GP's who have worded hard to pass the exam. The Medical Board say that the Fellowship exam is easy. Why is it that all of the older Australian GP have not sat the exam?

Provider numbers

- 19AB exemption renewed every 2 years Provider Number is only good for 1 year at a time added paperwork. A 19AB Exemption can be renewed 5 times. Why not extend the period to 5 years?
- Area of Need good for 4 years
- Advertising need to have recent advertising before a 19AB exemption is renewed

Expenses to practice

- Advertising even small advertisements are expensive and a waste of time
- Recruitment agencies are expensive
- Dr's leave practice to go elsewhere
- Supervision requirements mean that practices have to close if supervisor is not at work no income
- Changing doctors results in changes to stationary printing costs
- Non VR doctors only receive \$21.00 for a standard consultation this does not cover running costs of the practice and has remained the same for over 10 years there is no allowance for inflation
- Rising cost of running practice staff wages, equipment etc
- Accreditation necessary to receive PIP payments

Problems for IMG's

- OS qualifications not recognised
- Cost involved preparing for and sitting exams and relocation cost
- Unable to access Medicare benefits for themselves or their families
- unable to invest in Australia
- constant uncertainty with registration emotional strain
- constant reviews –
- constant study
- no family life (it is only work or study)
- threat on not being registered emotional strain
- different standards for Australian graduates
- length of time to get exam results 4 months
- unable to obtain permanent residency until exams have been passed
- cost to educate children in tertiary institutions

Remuneration from Medicare

- difference in Item numbers depending on remoteness (Standard consultation is either \$21.00 or \$34.90) the amount for a standard consultation (Item 53) has remained the same for the last 10 years
- IMG's are now on the same level of remuneration as Nurse Practitioners

Supervision

• Doctors find unrealistic supervision degrading

Exams

- Length of time to obtain results
- Varying pass mark you can fail an exam at 55%, study hard and fail again at 65% because the pass mark has changed. We had a doctor who failed an exam by 0.06%

Takalvan Medical Centre Time Line

- 1994 Opened practice Dr S Dr Bu & Dr M work part time
- 1997 Principal doctor retires ill health Locums used to work full time. Dr M also works part time Dr Bu retires
- 1998 Dr R (IMG) previous locum refused Qld registration (Dr R has been working in SA since 2000
 One IMG arrived one day, left the next due to harassment from Qld Medical Board

Locums used for full time work

- 1999 Dr Ka (IMG) arrives
- 2000 Dr B (IMG) arrives
- 2004 Dr Ku (IMG) arrives
- 2006 Dr Ku moves to Cairns
- Dr D (IMG) arrives
- 2009 Dr D moves to Brisbane
- 2010 Dr B leaves Australia after 9 years

We have not been able to replace the doctors that have left due to the increasing number of restriction being placed on IMG's.

We are now in a position to employ doctors with restrictions but will have to work through all the government departments and medical authorities before achieving this.

Because we are not in a District of Workforce Shortage this option may not be available. Dr Ka

- first registed November 1999 condition to practice within One Stop Medical Services
- 2002 started working as a Government Medical Officer no other Dr in town prepared to assist no conditions imposed on his registration
- 2006 Completed Diploma of Forensic Medicine Monash University Medical Board threaten to cancel registration because he was working outside his registration
- 2007 Dr K lodged an appeal in the District Court against the Medical Board's decision to impose the special condition which had altered the meaning of group practice. A new Area of Need Certificate had to be obtained and a new registration application form submitted to change the wording from group practice to solo practice. (As this affected 3 doctors in the practice this was extremely distressing to all staff) This was the year that conditions were imposed on the registration of all IMG's who had not passed their fellowship exams or passed their AMC exams
- 2007 all IMG's were notified that they had 4 years in which to apply for Specialist Registration or General Registration At this time I made enquiries with the Medical Board and was given the run around. I eventually spoke to a person responsible for Workforce Queensland who assured me that the Masters of General Practice, that 2 of our doctors were studying, would soon be accepted by the Medical Board for specialist registration.
- 2008 had difficulty renewing registration. The Medical Board had changed the guidelines again and this time wanted a receipt showing that the doctors were enrolled to sit either the AMC or FRACGP exam. Whatever happened to the 4 years. This affected 2 of our doctors and again was extremely distressing to all staff.

After obtaining help from our Local MP I had a phone call from the CEO of the Medical Board informing us of the requirements for registration. This was different to the letters that we had received from the Board. She promised to phone me back to continue the conversation about some of the concerns that I raised. I am still waiting for that call.

- Dr K had been working towards Vocational Registration. He had gained enough points for VR so sent his application form to Medicare. He received a letter in reply stating that this pathway was not available to IMG's.
- 2009 registration problems again. Although the registration was approved in a timely manner when we questioned another Dr's failure to gain registration we were told that the Board had made a mistake with Dr K because he had not met the Board requirements. He completed his Masters in General Practice at Monash University
- 2010 registration forms were sent to the Medical Board with all the documentation and received by them on 9th June. This application was not processed before the Qld Medical Board was superseded by AHPRA. When I contacted them to check the registration I was advised that we would have to complete different forms and pay another \$141.00 before the registration would be processed. However as the forms were not printed they would write to the Dr and enclose the new forms when available. The doctor's registration

was finally processed on 14 November. During this period we were continually explaining to suppliers why the doctor's registration was not current. **This time frame is totally unacceptable.**

• Dr K has been working at TMC for 11 years and at the writing of this submission has still not received VR status. He has now completed Diploma of Forensic Medicine at Monash University Masters of General Practice at Monash University Passed his exams for his fellowship to RACGP.

Dr B

- First registered in November 2000 -
- 2000-2006 uneventful apart from the tiresome renewal of registration every year
- 2007 Started studying for Masters of General Practice as a pathway to Specialist registration through the RRCGP (negotiations with the Medical Board fell through) – same problems as Dr K First time conditions placed on registration
- 2008 same problems as Dr K In order to have his registration proceed Dr B decided to pay the money to sit the RACGP exams although he had not done any study. – unfortunately he did not pass the exam. He would never have sat the exam if he could have foreseen the problems that it would cause.
- 2009 completed Masters of General Practice Monash University Because of failing the RACGP exam his registration was scrutinized extensively. He was required to have a pre-employment exam and heavy restrictions placed on his registration. During the 9 years that Dr B had worked at TMC he had not had any patient complaints and he was highly regarded by colleagues and patients alike.

Dr B planned to sit his college exams in March 2010 and had commenced his preparation

I tried to reason with the Medical Board but they would not listen. I was branded as rude.

- 2010 Dr B leaves the country in disgust. His patients were very upset and are still trying to find a doctor to replace him
- Dr B was a very experienced doctor. He had 25 years clinical experience. He had worked as a specialist physician in his own country before moving to South Africa and on to Australia.
- He had no complaints about his clinical ability in 3 countries

Dr Ku

- 2004 2006 Worked at TMC for 2 years before moving to Cairns. There was no problem except for the continual paperwork.
- There were no conditions on his registration

Dr D

- 2006 Problems with the registration process. Dr D was waiting for his registration to be approved for 3 months. This was due to the incorrect information obtained from the Medical Board. Phone calls were never put through to the right person even if you did manage to have the phone answered.
- 2008 Dr D moved to Brisbane after passing his Fellowship exams

Since 2008 we have wasted money, that could have been used to purchase new equipment, on advertising. We have had no replies. We have regressed from a busy 3 full time doctor and 2 part time doctors to 1 full time and 2 part time doctor practice. The 2 part time doctors are in their seventies and wanting to retire.