

feature

Helping medical students and doctors-in-training through their 'interesting times' By Sim Mead



Doctors-in-training around Australia may well wonder if they have fallen victim to the mythical Chinese curse “may you live in interesting times”. The entire health sector is struggling to negotiate its way through these “interesting times” but for young doctors in particular the challenges are extreme.

A national survey of 900 junior doctors conducted by the AMA late last year put a spotlight on the issues facing junior doctors and medical training across the country.

What did the AMA discover?

- Supervision of junior doctors in public hospitals is inadequate;
- Focus on service delivery by public hospitals is hindering medical education and training;
- Inadequate investment in staffing in public hospitals is decreasing opportunities for education and training;
- Many public hospitals do not have a culture or environment that encourages high-quality medical education;
- Public hospitals are not doing enough to foster a teaching culture; and
- Public hospitals are not providing sufficient space for junior doctors to undertake study and research.

The most difficult challenge however is the so-called ‘tsunami’ of medical students graduating from Australian universities. AMA National President, Dr Andrew Pesce says nationally there will be 2,920 domestic graduates from medical schools by 2012 and more than 500 international graduates, many of whom will want to stay in Australia. “This will swamp the existing number of intern places with only 2,030 currently available across the country,” he says.

Dr Pesce says Australia cannot

afford to lose doctors because of a lack of training opportunities and poorly supported environments and that the State and Territories must plan for more training places and a greater investment in medical training resources and infrastructure. The responsibility for tackling the shortfall in training places shouldn’t be left to the States alone.

“While the [Federal] Government has introduced welcome measures to increase the available financial support for undergraduate students there needs to be recognition more broadly that medical training does not stop at the university gate,” Dr Pesce said.

“It needs a coordinated approach with the Commonwealth tipping-in extra resources so we boost the number of training places in public hospitals as well as make better use of other clinical settings such as general practice and private hospitals.”

AMA (NSW) President, Dr Michael Steiner says finishing your training shouldn’t be left to a lottery. “It would be completely unacceptable for young doctors to be left hanging, unable to complete their final year of training simply because there are not enough intern places available in the system,” Dr Steiner said.

“The AMA has lobbied the NSW Government to ensure this situation does not occur and we have secured a guarantee that all Australian students will be provided with an intern place until at least 2012. Beyond 2012 however there is still a lot of uncertainty. The situation is also concerning for international students who have made significant sacrifices to do their training in this country.”

Providing places is not just a matter of numbers as junior doctors need to learn

from senior doctors who are already under pressure from a system running beyond its capacity. Dr Pesce sees the lack of support for senior doctors as another significant threat to the ability of the system to cope with increased training demand.

“Australia’s public hospitals are fundamental to educating and training our future doctors. They are where most junior doctors spend their formative years but clinical service and administrative workloads mean senior doctors are finding it hard to find quality time for teaching and passing-on their skills to their junior colleagues.

“We must ensure there are enough resources in place to support senior doctors to train the increasing numbers of new doctors in our public hospitals over the next few years and to support the junior doctors who are juggling the demands of training and delivering healthcare to patients.”

Securing the future of doctors-in-training is a key advocacy priority of the AMA.

“We need to ensure that sufficient funding is provided from all levels of Government so the number of training places is increased to meet demand. We need to ensure that teaching time is protected for both doctors-in-training and senior doctors so the needs of students are not squeezed-out by other priorities. We need to be undertaking comprehensive medical workforce planning to assess future specialist workforce needs. Once we know what our workforce needs are, appropriate resources must be provided to make sure these needs can be met,” says Dr Pesce.

While the AMA plays a high-profile public role in representing the interests



of doctors and advocating for better policy outcomes, Dr Steiner says the AMA has an equally important role in helping doctors-in-training cope with the significant pressures of their professional lives.

“The AMA is more than a lobby group – it’s a body of professionals who provide support for each other. We can provide expert industrial information on issues such as pay rates and award conditions. By tapping-into our network of senior doctors, other doctors-in-training and college representatives, doctors-in-training can get valuable advice and information.

“Whether its tips about training

opportunities, interview techniques or ways to stand out from the crowd, access to a professional support network is vital.”

AMA NSW is planning a career expo for 2011 which will be a great opportunity for the community of doctors to get together and discuss the many different career paths people can take.

“While each of these paths can lead to a fulfilling and satisfying working life, there are always traps and pitfalls for the unwary. Through the AMA junior doctors can get the guidance they need from people who know the way,” says Dr Steiner.

What exactly is the NSW intern place guarantee?

- Australian citizen/permanent resident graduates from NSW universities are guaranteed an intern place. The guarantee also applies to Australian citizen/permanent resident graduates from interstate universities who completed year 12 studies in NSW. It does not apply to any other graduates.

- The NSW Department of Health has developed a priority list that will be applied to other graduates if there are “spare” places available. In other words, other medical graduates will only be offered intern places in NSW if there are places available after the guaranteed graduates have been offered places.

The list in order of priority is:

- Australian citizen/permanent resident.
- Commonwealth-supported place and domestic full fee paying graduates of interstate universities.
- Australian citizen/permanent resident AMC graduates.
- Graduates of NZ universities and AMC graduates resident in NZ.
- Non-permanent resident graduates of NSW universities.
- Non-permanent resident graduates of interstate and NZ universities.
- Non-permanent resident AMC graduates.

[Source: www.imet.health.nsw.gov.au]

Required number of NSW intern places 2008 – 2012

year	required intern places
2008	648
2009	663
2010	732
2011	882
2012	1097

[Source: Medical Training Review Panel 12th Report]

AMA (NSW) position

The AMA (NSW) position is based on a resolution passed by a meeting of NSW medical students in 2009 and is as follows:

“NSW medical students and the AMA (NSW) call on the Government to ensure that all current Australian university-trained medical students are guaranteed an intern training place enabling them to become registered medical practitioners.”