



Media release

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Medical Board to fund strong national health programs for doctors

The Medical Board will fund health programs to deliver a nationally consistent set of services to medical practitioners and students in all states and territories, to be run at arms' length from the Board.

This will improve Australian doctors' access to health programs and strengthen current services for most doctors.

Through these programs, medical practitioners and medical students in all states and territories will have access to the same suite of services, which will include advice and referral, education and awareness, general advocacy and the development of case management services.

"This is a really important decision for the Board and for all Australian doctors," said Medical Board of Australia Chair, Dr Joanna Flynn AM.

"Our message is clear: We care about the wellbeing of medical practitioners and students and we are improving their access to health services" Dr Flynn said.

In March 2013, the Board announced that it would fund an external health program for doctors that would be nationally equitable, external, and support and promote doctors' health. The Board confirmed the program would be funded from within existing Board resources and complement the regulatory focus of the Board and AHPRA, which is to manage practitioners with impairment that may place the public at risk.

The Board then commissioned an independent report to advise on possible governance arrangements for external health programs, services to be provided, funding models and contractual arrangements.

This decision makes clear what services will be provided, how and where. It follows – and extends - the recommendations of the DLA Piper report, published [here](#). The report was informed by consultation with stakeholders.

The Board will work with key partners to establish a national governance model for external health programs that will then sub-contract with state-based services. The national organisation will manage the Board's funds for external health programs and will ensure the delivery and monitoring of the Board's model in each jurisdiction.

Six months after the Board decided to fund a nationally equitable health program, beyondblue released the findings of a world-first survey that validated the Board's decision. The survey, released in October 2013, revealed that thousands of Australian doctors and medical students were burnt-out, more likely to experience psychological distress and suicidal thoughts than the general community and drinking too much alcohol.

beyondblue's [National Mental Health Survey of Doctors and Medical Students](#) found that medical students and young or female doctors were most at risk and identified that significant levels of stigma exist towards people with mental health problems. Some respondents also reported that they were bullied or experienced racism.

“As the regulator, our focus is on public safety. We can’t provide these services directly, but we can fund them and work with stakeholders like the AMA and beyondblue to make them happen,” Dr Flynn said.

Work will begin immediately to implement the Board’s decision. Services will be provided progressively as existing services in each state and territory can be scaled up to match the nationally agreed model.

For more information

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