



THE LIMENETWORK

Faculty of Medicine, Dentistry
and Health Sciences
141 Barry Street
Carlton VIC 3010
Australia

T: +61 3 8344 9160

E: lime-network@unimelb.edu.au

W: www.limenetwork.net.au

3rd August 2018

To Whom It May Concern,

Re: Public consultation on *Good medical practice: a code of conduct for doctors in Australia*

Thank you for the opportunity to provide input on the proposed changes to the *Good medical practice: a code of conduct for doctors in Australia*. We have consulted with the Leaders in Indigenous Medical Education (LIME) Network Reference Group (Feedback Sub-Committee) and below are the combined responses from this group and the LIME Network secretariat.

2. Professionalism

We would suggest that an explicit acknowledgement of professionalism with regards to Aboriginal and Torres Strait Islander people is included in this section, in the paragraph relating to culturally safe and respectful practice. It would be useful to include acknowledgment that standing against racism can be difficult, but is essential in order to change practices.

4.7 Aboriginal and Torres Strait Islander Peoples' health

We acknowledge the new material included that relates specifically to Aboriginal and Torres Strait Islander health, but wonder what opportunities for feedback are made available to these patients to ensure that the care provided is in fact culturally safe and respectful, as per feedback section in 5.4.

4.8 Culturally safe and respectful practice

We suggest that a specific comment about institutional racism may be appropriate in this section.

In relation to 4.8.5, creating a welcoming and acceptable environment involves much more than supporting an inclusive environment. Employment practices, signage, access, structures, evidence of acknowledgment and so on, are some examples of elements to be addressed.

5.4 Discrimination, bullying and sexual harassment

We suggest that a specific comment about institutional racism may be appropriate in this section as it is often not acknowledged as an act of discrimination.

7.3 Health Advocacy

We suggest that a specific comment about unconscious bias (racism) may be appropriate in this section. For example, 'it is the responsibility of the doctor to ensure that they do not contribute to maintaining or increasing the health disparities experienced by Aboriginal and Torres Strait Islander peoples'.

12.2 Teaching and Supervision

The teaching and learning of Aboriginal and Torres Strait Islander health has improved considerably since 2006, when it was included in the Australian Medical Council Guidelines for Accreditation of Medical Schools. It is expected that students graduating from medicine will have a good understanding of the health status of Aboriginal and Torres Strait Islander people, as well as knowledge of the social determinants of health and the ways in which appropriate care is provided to Aboriginal and Torres Strait Islander patients. However, evidence suggests that once students enter the profession, they are being exposed to racist and biased attitudes of some supervising practitioners and/or institutions, and that much of the learning that is occurring in medical school is being undone in this environment.¹

We suggest that explicit mention of Aboriginal and Torres Strait Islander patients is included in this section. Further, we support a more explicit statement that there needs to be greater alignment between the formal, informal and hidden curricula and that this must have vertical approach so that learning from internship through to specialty training and beyond builds on the foundations established during doctors' primary degree.


13 Undertaking research

We note the references in this section cite the NHMRC (2003) Ethical guidelines for research involving Aboriginal and Torres Strait Islander Peoples, but suggest explicitly referring to the particular need for awareness around good practice in research with Aboriginal and Torres Strait Islander people. Information on the recently revised *NHMRC Ethical conduct in research with Aboriginal and Torres Strait Islander Peoples and communities: Guidelines for researchers and stakeholders*, section 4.7 in the *National Statement on Ethical Conduct in Human Research* and the *NHMRC Road Map 3* may be useful in this section.

Thank you for the opportunity to contribute to this consultation, and please contact me if you have any questions regarding this feedback.

Yours sincerely,



Project Manager | Leaders in Indigenous Medical Education (LIME) Network
Faculty of Medicine, Dentistry and Health Sciences
141 Barry Street, Carlton | The University of Melbourne
Ph. 

¹ Grant M, Felton-Busch C, Elston J, Saunders V, Crossland L, Solomon S, Payne C. Bulletproofing Indigenous Health Students and Staff Against Racism. Proceedings of the Australian Rural Health Alliance Conference. Keynote Address. Cairns. 2009.