
AHPRA

Review of stakeholder perceptions of AHPRA and the National Boards

A Social Research Project

November 2018

Supplementary report prepared for:
The Medical Board of Australia

Truly[®]
Deeply



Introduction

- Truly Deeply has been engaged by the Australian Health Practitioner Agency (AHPRA) to test the perception of sentiment towards AHPRA and the National Boards. This review is intended to help AHPRA and National Boards better understand what stakeholders think and feel about the organisation and to identify how to facilitate ongoing confidence and trust in the work performed by AHPRA and National Boards.
- The study has used a combination of both qualitative and quantitative approaches, specifically extended interviews (face to face and via the telephone), focus groups and online surveys.
- A single, integrated report has been provided to AHPRA documenting the key themes and results.
- A separate summary has been provided for each of the National Boards based on the results of the online survey with practitioners.
- The purpose of this report is to present a subset of findings specifically for the **Medical Board of Australia**.

An overview of the methodology



A **four stage** approach that combined both qualitative and quantitative research approaches has been used.

Stage 1 comprised a total of 53 qualitative interviews. This consisted of interviews with the Chair of every National Board (15); the Executive Officer of almost every National Board (13), Government health providers (3); major health employers (3); Aboriginal and Torres Strait Islander Health Strategy group representatives (5); Co-regulatory partners (4); Professions Reference Group members (3); representatives from CALD communities (2) and 'Other' various stakeholders (5).

These interviews were conducted between August 10 and September 26, 2018.

Stage 2 involved three focus groups. The three groups were conducted with i) Members of the Community Reference Group; ii) Members of the Professions Reference Group and iii) Accreditation Authority representatives.

These groups were conducted between August 14 - 22, 2018.

Stage 3 consisted of an online survey with practitioners from all 15 registered professions.

This survey was conducted between September 17 – 25, 2018.

Stage 4 consisted of an online survey with a representative sample of the Australian general public.

This survey was conducted between September 17 – 25, 2018.

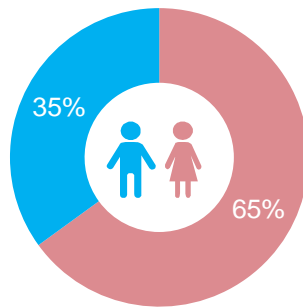
Quantitative approach

- Online surveys were conducted with practitioners as well as the broader community following the qualitative investigation. Truly Deeply developed the questionnaires in consultation with AHPRA.
- The questionnaires were developed to allow initial findings in the qualitative to be further explored and validated. Additional pre-codes and lists of words and statements were included in the survey following feedback from interviews and discussion with stakeholders.
- Respondents to the Community Survey were sourced using an external panel provider.
- Participants in the Practitioner Survey were sourced by AHPRA (using software that allowed the survey to be deployed to a random sample of practitioners in each profession).
- The practitioner sample has been weighted to ensure an equal ‘voice’ within the total sample of registered health practitioners (with the sample of ‘nurses’ and ‘midwives’ further separated). This has been done to ensure that the views of (for example) of ‘psychologists’, which accounted for 14% of responses to the survey, does not distort the views of other professions, which accounted for a much smaller response overall to the survey.
- Once the surveys were closed, statistical analysis was conducted by Truly Deeply to summarise and compare the quantitative findings.

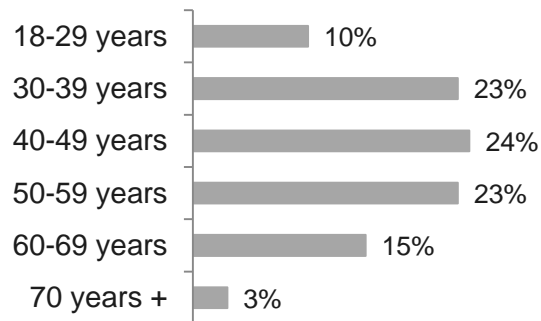
	Community Survey	Practitioner Survey
Fieldwork dates	September 19 - 25	September 19 - 27
Responses	1,020	5,694
Email invitations sent	na	100,257
Response rate	na	6.0%

Sample of registered practitioners (n = 5,694)

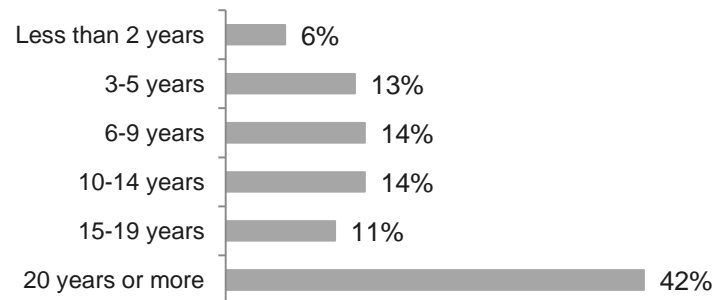
Gender



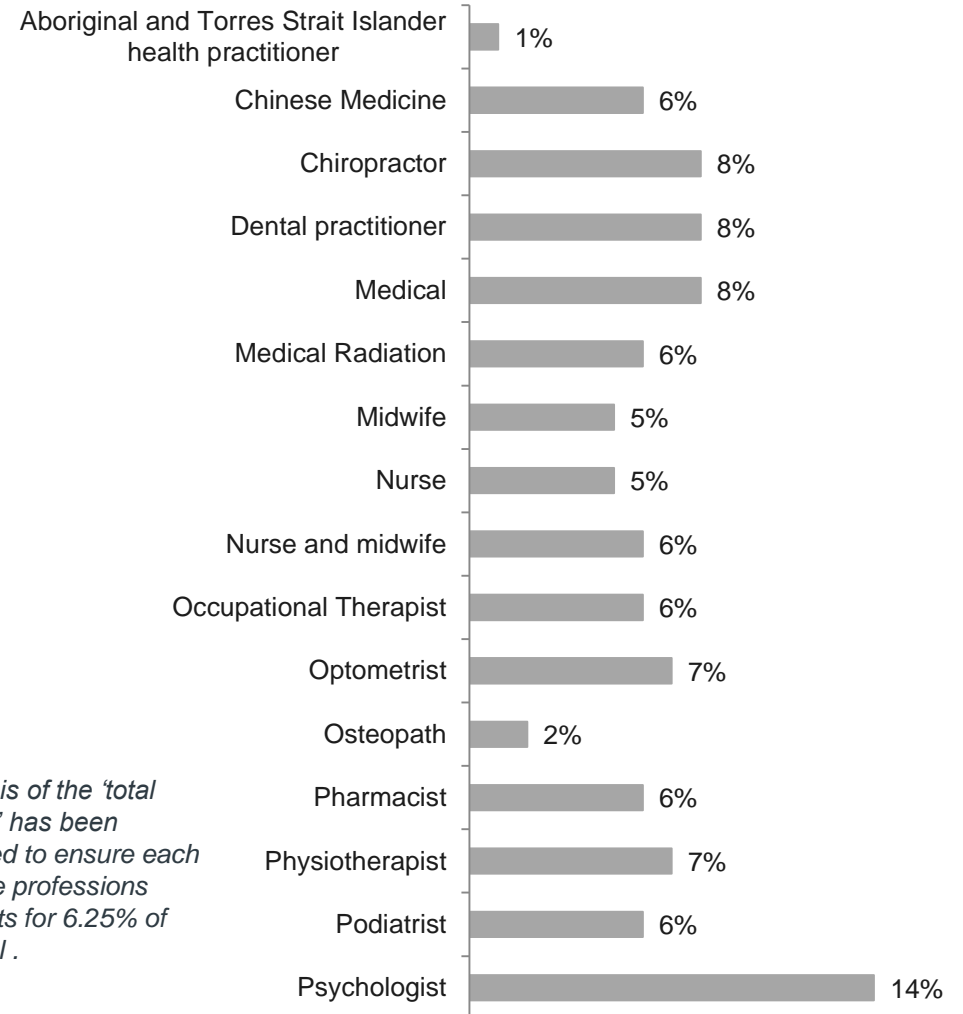
Age



Years in practice



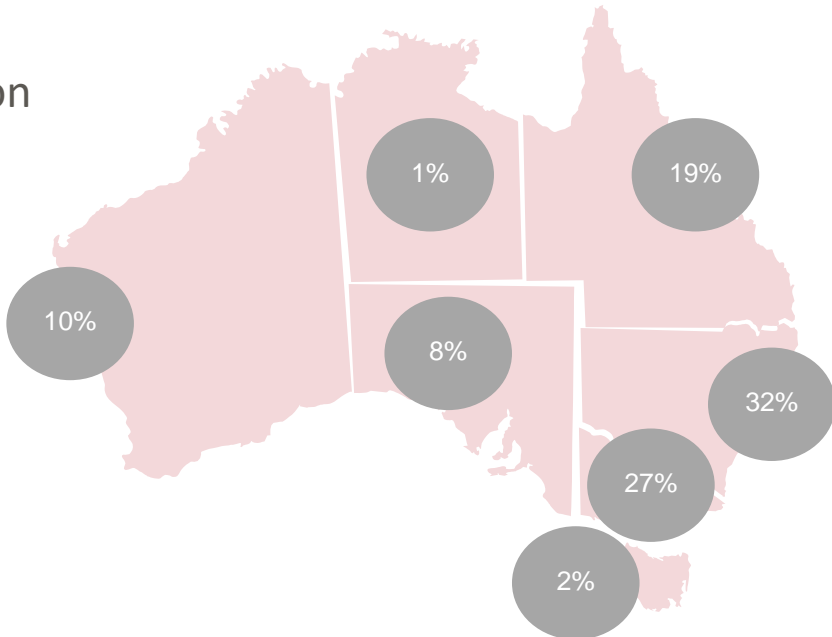
Practitioner type*



**Analysis of the 'total sample' has been weighted to ensure each of these professions accounts for 6.25% of the total.*

Sample of registered practitioners (n = 5,694)

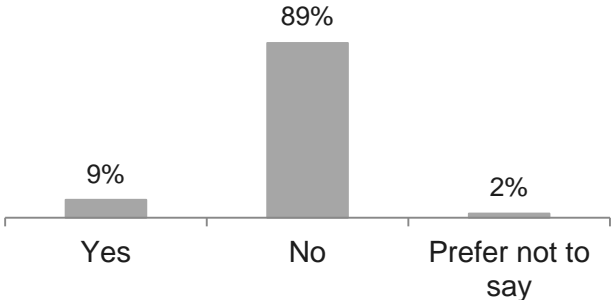
Location



Metro: 66%

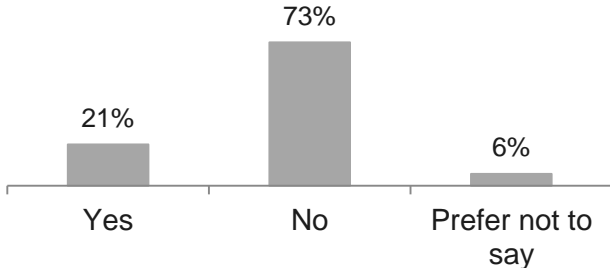
Regional : 34%

% who have had a complaint ever made against them to AHPRA or their Board as a registered Health Practitioner*



* As identified by individual respondents

% who have ever been audited to check their compliance with the mandatory registration standards*



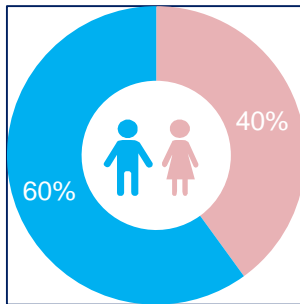
* As identified by individual respondents

Summary of results of the online survey with registered health practitioners.

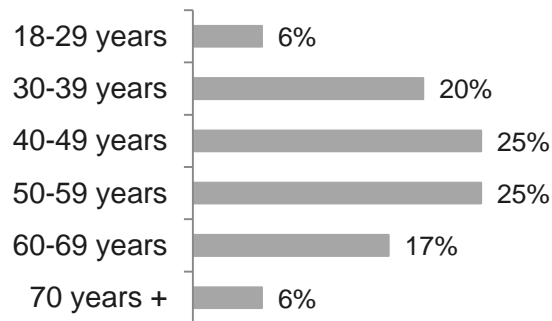
Specific insights into the responses from:
medical practitioners

Sample of Medical practitioners (n=461)

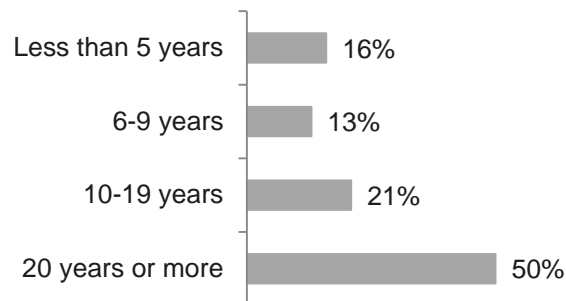
Gender:



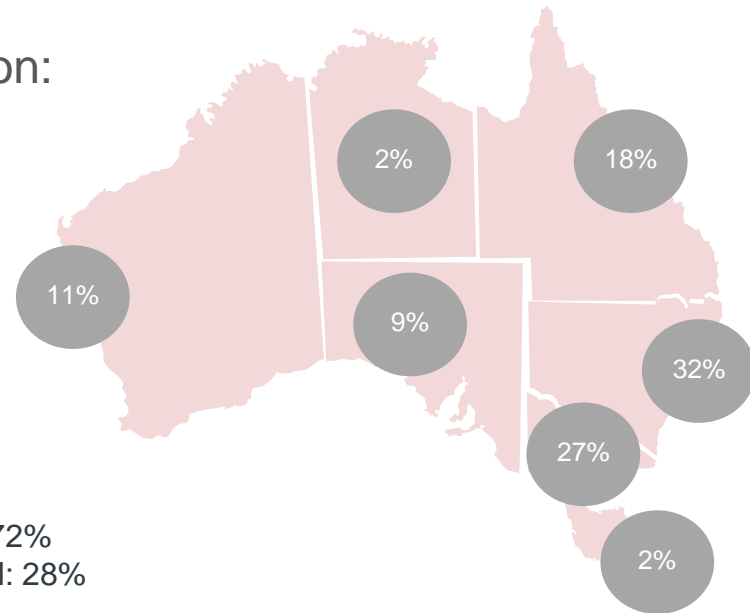
Age:



Years in practice:

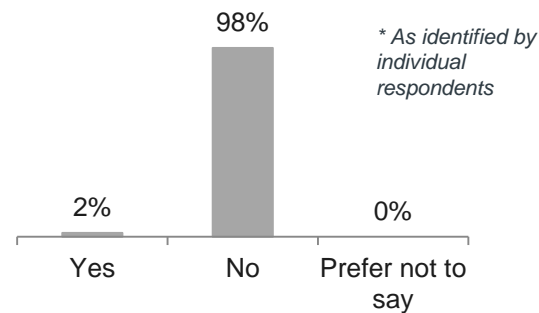


Location:

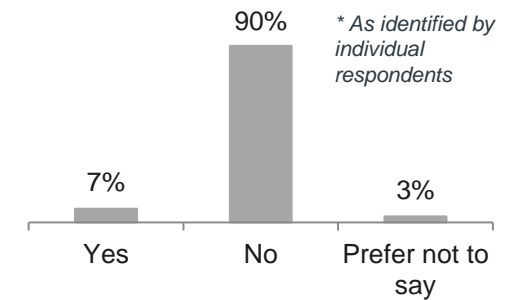


Metro: 72%
Regional: 28%

% who have had a complaint ever made against them to AHPRA or their Board as a registered Health Practitioner*



% who have ever been audited to check their compliance with the mandatory registration standards*



Perceptions of the Medical Board of Australia (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with the (National Board)?

Base: Total sample of practitioners registered with this specific Board (n=461)

Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Bureaucrats	39%	(+13%)
Regulators	39%	(+1%)
Necessary	32%	(-3%)
Administrators	30%	(-5%)
For the public	21%	(-2%)
For practitioners	18%	(-18%)
Intimidating	18%	(+8%)
Decision-makers	18%	(-9%)
Controlling	17%	(+7%)
Rigid	16%	(+5%)

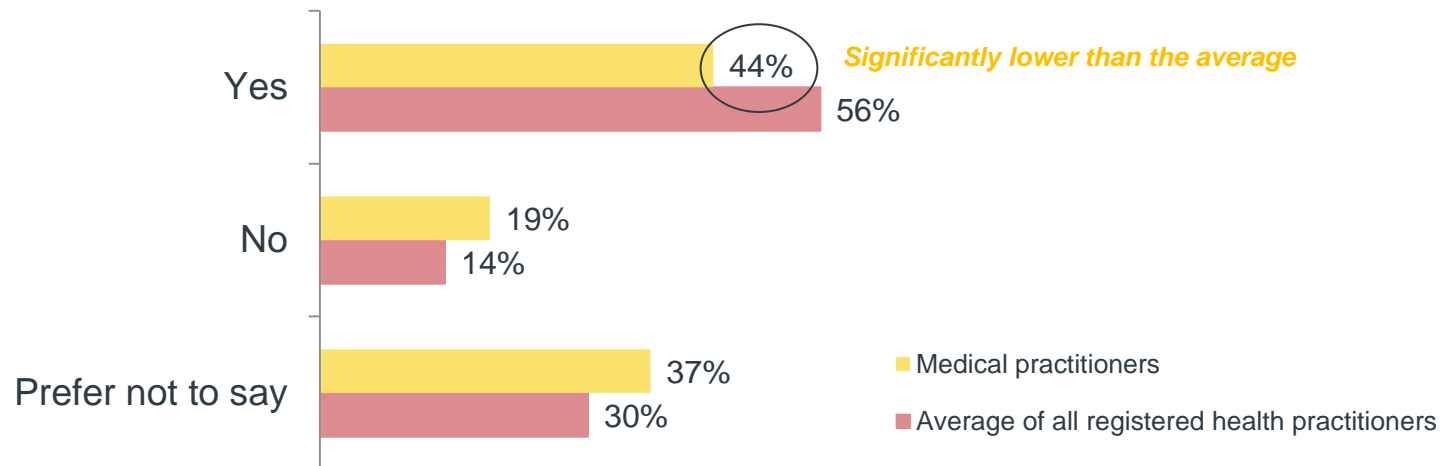
Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Poor communicators	15%	(+5%)
Out of touch	14%	(-2%)
Secretive	12%	(+5%)
Competent	11%	(-7%)
Aloof	10%	(+3%)
Fair	8%	(-3%)
Trustworthy	8%	(-5%)
Zealous	7%	(+4%)
Antiquated	7%	(+2%)
Advocates	6%	(-12%)

Green indicates a result *significantly higher* than the average across all professions.

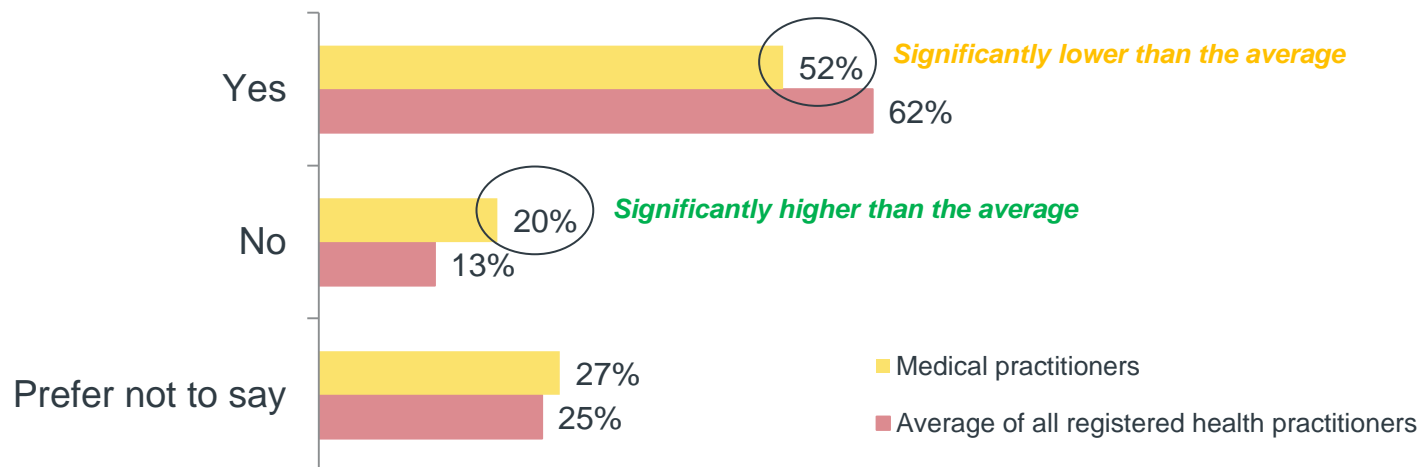
Orange indicates a result *significantly lower* than the average across all professions.

Levels of confidence and trust in the Medical Board of Australia

Q. Do you feel confident that your National Board is doing everything it can to keep the public safe?



Q. Do you trust your National Board?



What are the indicators of trust and barriers to trust in the Medical Board of Australia

Indicators of trust: **52% trust the Board**

They support doctors not treat them like criminals.

Experienced and run by medical professional alone.

I believe the Medical Board at least creates a supportive, constructive process to investigate complaints in a fair manner.

Believe they have serious responsibilities and therefore will be reliable.

Generally impartial experienced with fair attention to process and outcome.

They do a difficult job balancing the public interest and professional autonomy. They have no reason to be favouring one side unreasonably.

Those entrusted with this body are of high standing in the community.

Given the large number of medical practitioners, it appears that reports/media stories about negative outcomes are rare.

Barriers to trust: **20% DO NOT trust the Board**

Lacks transparency, has no oversight.

Lengthy delays in decision-making.

We hear a lot about what the medical board imposes multiple rules and regulations but not how it helps doctors.

Acts in adversarial manner. Focus on name and shame. Does not focus on quality improvement and helping practitioners maintain practice. Beholden to corporate and government interests.

They make arbitrary decisions without proper consultation.

Too slow to respond to problems / Not sufficiently tough on bad doctors / Too lenient on clearly unacceptable behaviour.

The organisation is there to crucify medical practitioners for spurious complaints.

Because the process of reviewing complaints is not subject to Federal law and due procedure.

Full list of responses provided separately

Perceptions of AHPRA amongst medical practitioners

(Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with AHPRA?

Base: Total sample of practitioners registered with this specific Board (n=461)

Perception	% of practitioners with that perception of AHPRA	Difference compared to the average across all professions
Bureaucratic	52%	(+12%)
Administrators	47%	(-5%)
Regulators	46%	(-8%)
Necessary	32%	(-8%)
For the public	31%	(-7%)
Intimidating	27%	(+10%)
Controlling	26%	(+11%)
Rigid	26%	(+12%)
Poor communicators	24%	(+10%)
Out of touch	21%	(+9%)

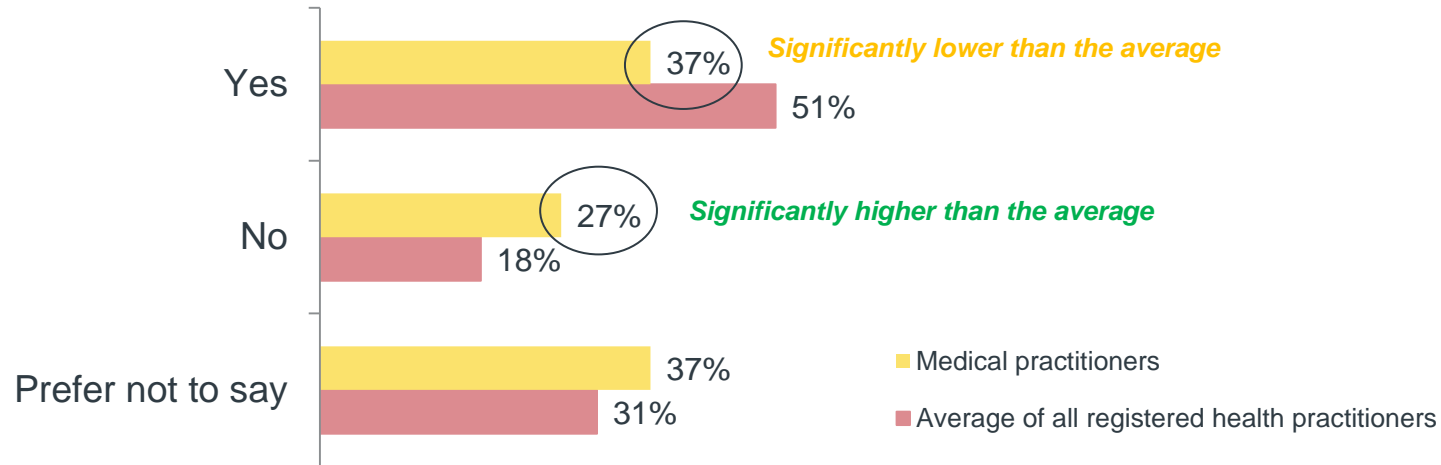
Perception	% of practitioners with that perception of AHPRA	Difference compared to the average across all professions
Aloof	14%	(+6%)
Secretive	13%	(+5%)
For practitioners	13%	(-17%)
Decision-makers	12%	(-13%)
Competent	10%	(-5%)
Zealous	10%	(+5%)
Fair	8%	(+2%)
Accessible	7%	(-6%)
Transparent	5%	(-2%)
Antiquated	5%	(+1%)

Green indicates a result *significantly higher* than the average across all professions.

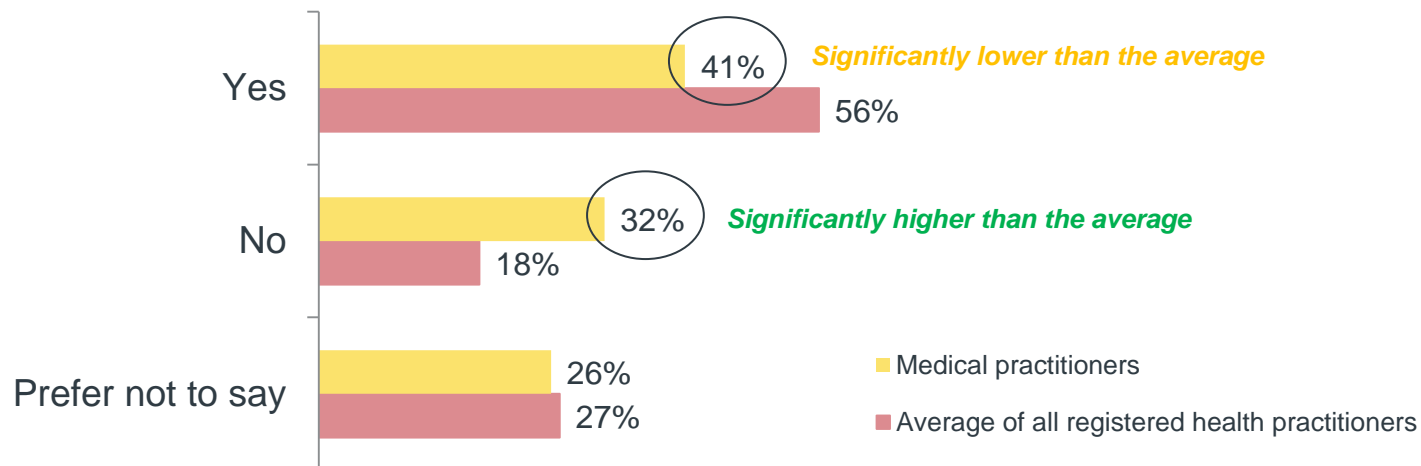
Orange indicates a result *significantly lower* than the average across all professions.

Levels of confidence and trust in AHPRA amongst medical practitioners

Q. Do you feel confident that **AHPRA** is doing everything it can to keep the public safe?



Q. Do you trust **AHPRA**?



What are the indicators of trust and barriers to trust in AHPRA amongst medical practitioners

Indicators of trust: **41% trust AHPRA**

Previous positive experiences only No knowledge of any reason not to trust them.

It is a professional authority.

It is placing checks & balances in the public interest.

I believe they have the right vision and approach, and seem trustworthy.

Reputable. Appear organised and seem to want to support practitioners.

Whilst I think they lack flexibility, their intentions are correct and they do act in the best interests of the public. They do need to show some empathy though for practitioners.

Generally do well in weeding out inappropriate behaviour though perhaps not so good at weeding out incompetence.

Large regulatory board comprising several of the registration boards. Effective system to my knowledge.

It seems to be doing it's job or regulating the registration of medical practitioners.

Full list of responses provided separately

Barriers to trust: **32% DO NOT trust AHPRA**

Run by bureaucrats - no idea of the real world.

I feel as if they are there only for the public not for the good of practitioners so anything I tell them can be used against me.

Anti doctors. Investigate complaints in a secretive manner that takes years.

In dealing with them they are impersonal uncaring and bureaucratic.

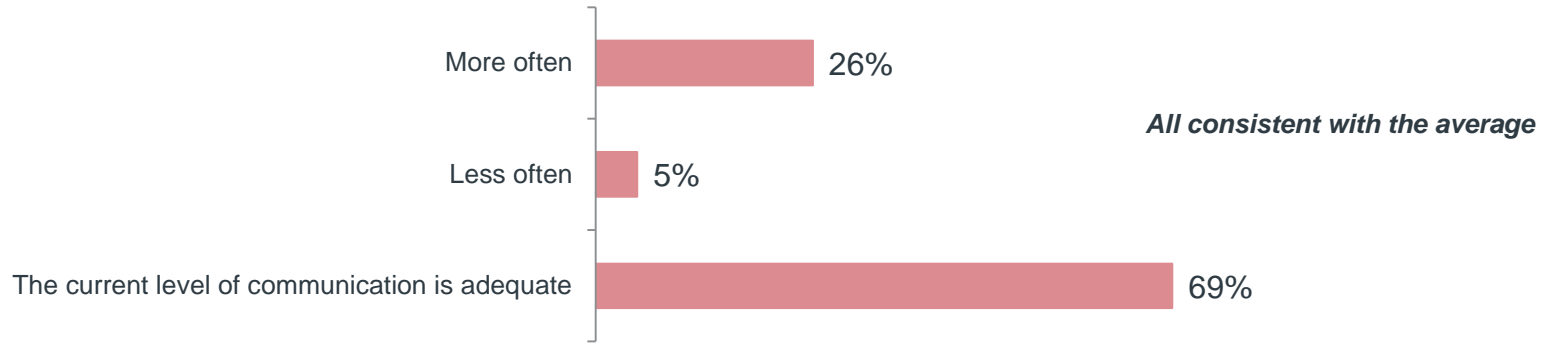
Not transparent, more judicial than mediatory, anti health professional.

When I have tried to get advice from AHPRA they were quite unhelpful and unwilling to give a definite answer.

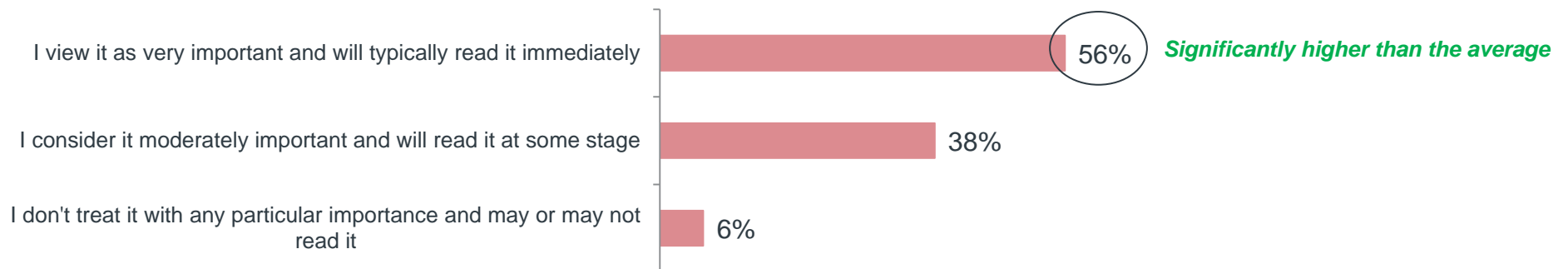
As a practitioner you are "guilty until proven innocent". Investigations are very adversarial and there is no transparency. You are treated as a criminal even if exonerated (as I was). Many practitioners get mental health issues thanks to AHPRA and give up part or all of their practice (as I did) even when found "innocent".

Response to communication by the Medical Board of Australia

Q. Would you like (National Board) to communicate with you.....?



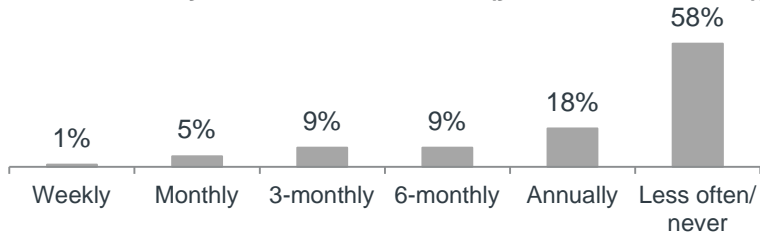
Q. How do you typically respond to communication you receive from (National Board)?



Base: Total sample of practitioners registered with this specific Board (n=461)

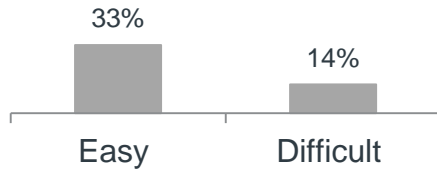
Use of the Medical Board of Australia website

Q. How often do you visit the website of (your National Board)?



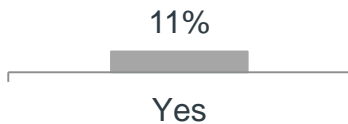
Base: Total sample of practitioners registered with this board

Q. How easy or difficult is it to find the information you were looking for on the (National Board) website?



Base: Practitioners who have visited that board's website

Q. Is there any information you have looked for on the website of (National Board) but not been able to find?



Base: People who have visited that board's website

Reasons for visiting the National Board website



Additional information sought by practitioners include (but not limited to)...

- List of all adverse findings by name
- Training bullying codes of conduct
- Tribunal themes.
- Powers of surveillance. Changes to policy, eg. testing of doctors over 70.
- Board findings about practitioners I know have been sanctioned but have been kept hidden.
- Doctors with caveats who EDMS needs to be briefed about

Additional feedback from Medical practitioners

Sample of open ended responses *(full list of responses provided separately)*

They need to be seen to protect both the public and health practitioners.

This survey is probably a good start in helping AHPRA and the Medical Board respond better to the requirements of the profession and avoid being an unpleasant regulatory body.

The process is overly bureaucratic which I don't think adds to the quality of the oversight. I also have no confidence that matters are dealt with fairly or quickly.

Bad doctors need to worry. Good doctors like myself have nothing to fear.

I think it is easy to throw stones at both, but in general, they do a very good job.

I am confused about the national board. I thought we had AHPRA and a medical board in each state to process complaints. I did not know there was a National Board (is there?) or that the state based boards are called "local national boards" (are they?).

The public image presented by AHPRA is that it functions through adversarial actions as opposed to investigative actions. This per se implies it's charter is that of guilt before anything has been proven. Not scientific. Not part of the world of medicine, definitely part of the world of politics. AHPRA presents itself as a political tool.

Not really clear on the distinction of the two bodies and more specifically the role of the Medical Board.

Stop the overreach and stick to the core business that we are paying our registration for.

These two organisations are almost the same for me and I never understood the reason for having AHPRA when we have already had Medical board. The way they deal with medical practitioners is not fair in most cases and they don't protect the public as they say. There are lots of issues in regional hospitals and they don't have an inspector to check their competency. They put so much unnecessary pressure in an intimidating way on medical practitioners but mainly for the exams not other standards that must be met. I strongly believe that these two organisations should consider basic fundamental change in their policy because the Australian community specifically in regional areas are in very high need of good doctors that are disturbed and intimidated by AHPRA on a regular basis.

More information

For further information about this study please contact:

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