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AMA JUNIOR DOCTOR SURVEY DELIVERS ANOTHER POOR REPORT CARD FOR PUBLIC HOSPITALS

An AMA national survey of junior doctors has exposed insufficient medical training resources and infrastructure in our public hospitals.

The *AMA Junior Doctor Training, Education and Supervision Survey* has collated the views of more than 900 junior doctors from across Australia on the quality of their medical training and the support they are receiving to become independent practitioners.

AMA President, Dr Andrew Pesce, said today that medical training in public hospitals is being held together by dedicated senior doctors who are giving their time and skills to junior doctors without the support of State Governments.

“This is another poor report card on the performance of our public hospitals,” Dr Pesce said.

“It is clear that strong leadership is needed from the Federal Government to fix all aspects of our ailing public hospitals, and next week’s COAG meeting is the time and the place for that leadership to be on display.

“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 that 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 health care to patients.

“Public hospital medical training is at breaking point now. It will collapse under the weight of the greater numbers of medical graduates in the system.

“Australia cannot afford to lose doctors because of a lack of training opportunities and poorly supported training environments. The States and Territories must plan for more training places and a greater investment in medical training resources and infrastructure,” Dr Pesce said.

Participants in the *AMA Junior Doctor Training, Education and Supervision Survey* were asked about their learning environment and the availability of supervision, assessment and feedback in their training hospital.

Chair of the AMA Council of Doctors in Training, Dr Andrew Perry, said that balancing the provision of care to patients with training the next generation of doctors has always been challenging for public hospitals.

“We are concerned that the survey shows that the obligation of hospitals to teach and train junior doctors is being outweighed by the demand for service delivery, and this trend is worsening,” Dr Perry said.

“Not enough resources are being devoted to training. Public hospitals are not quarantining sufficient time for supervisors or trainees from the pressures of immediate service delivery for education and training.

“Many public hospitals no longer have a culture or environment that encourages high quality medical education,” Dr Perry said.

Key findings of the survey include:

- Junior doctors have a good level of access to learning resources;
- Public hospitals are adopting important quality assurance mechanisms that enable learning;
- The supervision of junior doctors in public hospitals is inadequate;
- The focus on service delivery by our public hospitals is hindering medical education and training;
- The inadequate investment in staffing in our 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.

Dr Pesce said that the inadequate number of intern training places is a major problem.

“Australia’s overburdened health system could be robbed of as many 1,553 future doctors by 2012 if there is no increase in the number of intern training places in our public hospitals.”

In 2007, there were 1,544 domestic medical graduates, an increase of 22 per cent from 2003. This is projected to increase to 2,920 graduates by 2012. When you add in international graduates (517) and Australian Medical Council graduates (estimated 146), the total number of intern places required by 2012 would be 3,583. Based on 2008 figures, the total number of intern places currently available is 2,030, leaving a deficit of 1,553 in 2012 if no additional places are made available by State Governments in the interim.

The *AMA Junior Doctor Training, Education and Supervision Survey* is available on the AMA website at www.ama.com.au. The *AMA Priority Investment Plan for Australia’s Health System* sets out practical solutions to avert a medical training crisis in Australia. This document is also available on the AMA website at www.ama.com.au

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