

Border Medical Recruitment Taskforce

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BORDER MEDICAL RECRUITMENT TASKFORCE

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Mr GREG APLIN (Albury) [5.45 p.m.]: The good news for today is that Albury-Wodonga has found a way to grow its medical population. Our method has been so successful that it is now being exported to regional centres such as Tamworth and Bendigo. The active recruitment of doctors has seen the arrival of 67 specialists and 20 general practitioners in just four years. This comes after many years of unsuccessful attempts to attract doctors to our region. An Albury-Wodonga resident now has access to more than 120 medical specialists, while around 90 doctors are in general practice. Just a few years ago the skills shortage was so acute that a new resident would have had great difficulty getting onto the books of a general practitioner. Only three general practices were accepting new patients. Now the position has reversed, and all but three general practices are welcoming new patients.

So what is happening in Albury-Wodonga? Rather than look to Sydney, Melbourne or Canberra for help, in 2007 then president of the Border Medical Association, Dr Scott Giltrap, put together funding from a variety of private and public organisational donors to form the Border Medical Recruitment Taskforce. This facilitated the employment of a recruitment manager and active promotional work. Members of the taskforce knew that Albury-Wodonga had a number of strong attractions for doctors. There were snowfields, wineries, theatres, good schools and two universities. We have two major public hospitals, two active private hospitals and numerous clinics. On top of this, since 2000 we have had an Albury campus of the University of New South Wales Rural Clinical School.

The taskforce's initial recruitment drive seemed obvious: to place advertisements in the *Age* and the *Australian* newspapers offering medical practitioners the opportunity to bring the family to the Albury-Wodonga region for an all-expenses paid familiarisation weekend. This enterprise garnered much media attention both locally and at State level, yet it was a failure. Some inquired, but no-one moved. If we wanted doctors we would have to do more than just attract them; we would have to help make them. The taskforce refocused on medical students, interns, medical registrars and overseas-trained doctors. We understand that if a doctor grows up in the country, or has a partner with a love of the rural lifestyle, it is more likely they might return to rural practice. We want to be involved in their medical training. City-based trainees recognise the benefits of coming to Albury-Wodonga, where they receive more face-to-face time with their instructors or more time in surgery.

The taskforce works with real estate agents, schools, universities, employers and so on to develop solutions for individual doctors and their families. It is very much a tailored process which is private, informal, relationship-centred, and not bogged down in red tape. And it works. Of the 61 doctors who finished their general practitioner training in the Albury-Wodonga area by 2009, 42 per cent are still in rural general practice in southern New South Wales and Victoria. A further 32 per cent are still general practitioners in this region. The taskforce is looking into infrastructure projects such as the development of a residential medical precinct. A feasibility study proposes a 15-house residential development in East Albury, a short walk to the central business district, Albury hospital and the Rural Clinical School.

This could be an ideal way to provide not simply accommodation for new doctors but also a community to welcome their families and to help them settle into new homes, jobs, schools and the regional lifestyle. A longer-term aspect of the work of the taskforce is to engage in lobbying to streamline barriers such as medical registration for cross-border work. This outdated disincentive must be ripped away. The border approach of encouragement and development goes right back to the start of a person's medical career. The Border Medical Association Scholarship, an initiative of local doctors, was first offered in 1991. Since then 90 first-year medical students have received the benefit of financial support and the assurance that the local medical community is interested in their progress. Additionally, scholarship recipients are encouraged to select a local doctor as a personal mentor.

Not only will this help improve their studies but it also provides an ongoing link for professional development: when students return home to the border they may be invited to sit in at their mentor's practice, seeing patients and attending operating theatres or maternity procedures. There is more. Each year the Rotary Club of Albury Foundation provides \$7,000 to assist fifth-year medical students in their elective term: the Graham Turner Bursary Award. The Hume Building Society gives \$2,500 each year, shared between the top two fifth-year students in their biomedical exam. A fourth scheme, provided by Albury City Council, offers two \$5,000 scholarships to local high school graduates leaving to study medicine. Scholarship recipient Gemma Goodwin was quoted in the local newspaper as saying:

The most important thing about the medical scholarship is that it provides an incentive to give back to the community which has supported my studies, this is the reason I was attracted to study medicine in the first instance.

I congratulate the Border Medical Association, Denise Klemm and the Border Medical Recruitment Taskforce on their outstanding effort and achievement. We are privileged to have them working so hard and effectively for our border community.

Walsh Street Project

4 x 3 bedroom houses

11 x 2 bedroom houses

Swimming pool

Gymnasium

Purpose of the project

To aid workforce recruitment to the Albury Base Hospital. Satisfactory work experience and living experience while at Albury Base Hospital will aid long term workforce recruitment to the region.

Quality of the project

The quality of the project is at the top end of the market, therefore the proposed rentals are higher than GSAHS is currently paying. This extra cost will be repayed many times over as a result of the outcomes of training doctors, and their families having quality living experiences during their time working at Albury Base Hospital.

- a) recruitment of hospital doctors in training will become easier.
- b) recruitment of trained doctors from the pool of doctors who underwent training at Albury Base Hospital and had positive experiences will become routine
- c) future successful recruitment will provide huge savings in recruitment costs, locum costs and associated travel and accommodation costs

Funding of the project

Local investors who have an interest in helping solve the medical workforce problems will fund the project. The returns will be at the lower end of what investors could achieve by putting their money in other investments.

Rationale for the project

- a) The Border Medical Recruitment Taskforce has identified accommodation and socialisation issues as a major area of dissatisfaction among hospital doctors. If we want them to come back when they are trained we need to ensure that the doctor and family have a very positive experience when they are here. At present many doctors don't even bring their families with them.

- Instead they go back to their capital city on the weekend, so the families don't even get a taste of what it could be like living here
- b) There is a large cohort of doctors in Albury and Wodonga who are here as a result of their residency at the old Albury Base Hospital in the 70's and early 80's when the hospital owned it's own flats and there was a real "socialisation" and cohesiveness amongst the medical community. These doctors are now all in their 50's and 60's and approaching retirement. We need to move forward but we can take lessons from the past
 - c) The Wagga experience is that hospital doctors are proactive about acquiring the new accommodation in Wagga prior to even getting to Wagga. This indicates that this issue is important to the hospital doctors

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