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Standing Committee on Health and Ageing
House of Representatives
PO Box 6021
Parliament House
Canberra ACT 2600

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Submission No. 118 (Overseas Trained Doctors) Date: 01/03/2011

Dear Honorable Members of the Committee,

My name is Piotr Lemieszek. I am an international medical graduate who has trained in Poland and Australia. I was fortunate to have been awarded a grant of \$10,000 in 2007 to help me gain Australian qualifications which was initiated by the honorable Mr. Tony Abbott who was Minister of Health at the time. While I am very appreciative of the support that I have received from the government, I would like to describe the problems that I have had in getting my General registration, so that it may help you to find a solution and help other doctors like myself. I have passed parts one and two of my AMC exams and have worked in the Australian system as a doctor for 20 months.

Workplace Bullying

From [REDACTED] to [REDACTED] I was the victim of severe workplace bullying at the [REDACTED] hospitals. This bullying affected my ability to obtain registration. This is because the bullies gave me unfair supervisor reports as part of the bullying. As a result the Medical Board imposed conditions on my registration which made it next to impossible to get a job. I had tried to explain the bullying to the Medical Board by describing the events below but the Medical Board did not change its decision. I had also reported the bullying to three organisations earlier on including the anti-bullying hotline, North Sydney and Central Coast Health Area (Human Resources) and NSW Health Officer responsible for resolving bullying issues. All three organisations strongly encouraged me not to report it but to solve it privately. Following is a description of the bullying that occurred and the subsequent actions of the Medical Board. I have signed a statutory declaration as to the truthfulness of my statements.

From [REDACTED] to [REDACTED] I worked as a Senior Resident Medical Officer (SRMO) at [REDACTED] hospital. On [REDACTED] 2009 I had a meeting with [REDACTED] and [REDACTED] to discuss my end of term assessment in [REDACTED]. First I was asked by Dr [REDACTED] what was my self evaluation. I told her that my mid term assessments had been appreciative of my work and that I thought I continued to make good progress. Dr [REDACTED] responded that unfortunately my performance was bad. I asked in what aspects was my performance unsatisfactory but she refused to tell me! Then she presented me her marks on assessment were much worse than I expected and my own self-evaluation. I was shocked and asked why was my final assessment so bad when my mid-term report had been fine? She then went on to tell me that my mid-term reports had been annulled. I asked why and she responded

"Career Medical Officers CMO's are not supposed to give assessments, only consultants can do it". This was not true as many of my colleagues had received assessments from CMOs. I asked on what basis could an official mid-term reports be dismissed? She replied "Secret reports are more relevant".

Dr. [REDACTED] then joined us. He took my mid-term assessments and put them on the floor and said "How much are they worth if I put them on the floor?" I was so shocked I could not speak. He then showed me a negative assessment done by Dr. [REDACTED], another consultant in [REDACTED] [REDACTED] had not discussed or shown me this assessment and I had obviously not signed it. He told me that Dr. [REDACTED] assessment was more relevant than my mid-term and self evaluations. I had given myself good marks in these assessments based on positive feedback from patients and colleagues. When I asked him why I could not give myself good marks in areas of obvious strength, Dr. [REDACTED] answered "Because top marks are reserved for the top 3% of best performers, and as you are overseas trained you can not belong to this group"

I took another look at the end of term assessment and I asked why was I given high marks and praise for my professionalism in one part of the assessment and low marks for the same thing in another part.? Dr. [REDACTED] responded to my question with "Do you want me to lower all your other marks?" I was in shock! I was then told that I must sign consent for a demotion to an intern status and that I would be receiving assessment every 1-2 weeks. When I asked whether I could discuss my evaluations every two weeks, she responded "if there is enough time".

For the next 8 weeks I did my best to work diligently. I worked largely with [REDACTED] a consultant [REDACTED]. He was always keen to help and teach and gave constructive criticism and credit when it was due. He wrote most of my assessments for that period which were all satisfactory. On [REDACTED] 2009 I had a meeting with Dr. [REDACTED], another [REDACTED] consultant, and Dr. [REDACTED] to discuss my performance. At the beginning Dr. [REDACTED] asked me how did I think I was doing?. I answered that according to my reports I had improved in all the identified areas for improvement. Dr. [REDACTED] said that he was concerned with the low number of patients seen by me. I then presented him with my statistics which showed that I had seen the same or higher numbers of patients than other JMO's [REDACTED] then presented to me a number of negative assessments done by consultants that I had barely worked with! None of these consultants had discussed these assessments with me. Also I had not signed them! When I showed him my positive assessments completed by Dr. [REDACTED] with whom I had primarily worked, he dismissed them by saying "Oh - Dr. [REDACTED] .. he always gives marks that are too good." Dr. [REDACTED] then said that for the next term "We will keep you like a dog on a leash. If you are a good puppy we will extend your leash, if not we will tighten it" Dr. [REDACTED] repeated this sickening statement and added If we trust you , we will let you progress, if we do not -we will limit your progress and shut you up. "After this conversation I was completely shocked. I felt that they were using their positions of authority to intimidate me.

The bullying process reached its peak on [REDACTED] 2009. At 2 pm I arrived at the [REDACTED] department in [REDACTED] hospital to commence a shift I had taken from another doctor. Shortly after signing in I was approached By Dr. [REDACTED]

who said that I could not start work in the [REDACTED]. When I asked about reason he requested me to **"talk to him privately"** in secluded area of kitchenette.. I apologized for needing to take a few minutes first to use the toilet (I was very nervous and had to use the bathroom) After I returned I was told by Dr [REDACTED] to "go home". When I asked why I was told that I was not supposed to work as a resident in [REDACTED] and he repeated his demand. When I asked to explain the reason he said **"Being intern (you are) not supposed to walk away from a consultant"** I told him that I had needed to use the toilet he responded that was **"Not an excuse"**. He went on to threaten me with disciplinary action if I did not leave the department. Specifically he yelled **"Get out of my department"** otherwise **"security will escort you"**. He also said repeatedly **"You have dug a hole under yourself"**

I left the emergency department shocked and shaking. I could not understand what had happened and what I had done wrong? It was common practice for other doctors to take one another's shifts. I had never been told that I could not trade shifts. I was humiliated by this outburst which had occurred in a very public place. It was completely unwarranted to threaten to call security to escort me from the hospital as I had not made any threats or done anything wrong to warrant such a hostile treatment.

Following this incident I became very depressed and anxious. I could not sleep or eat and needed to take time off work for stress related reasons. I contacted the bullying hotline for NSW Health as well as Human Resources for North Sydney Central Coast Health Area about the bullying. The hotline representative encouraged me to try and resolve it at the hospital level. The officer of Human Resources at North Sydney Central Coast Health Area advised me not to **"Make a hulabaloo" of this matter** and **"not to get into bullying process"**. She recommended that I file a grievance rather than file a bullying report. I felt like a victim of rape asked to...reconcile with the rapist!

I returned to work on [REDACTED]. A few days later I received a call from [REDACTED] [REDACTED] informing me that this matter will be investigated by..... [REDACTED] I was in shock...this was the man who was central to the bullying, who had compared me to a dog on a leash!,

[REDACTED] for my mid term assessment in rehabilitation at the [REDACTED] hospital. I had not had any problems with my work brought to my attention. I was shocked to see that I had received the lowest evaluations possible in all areas of performance. When I asked why they had given me such low marks, they responded that they had given these marks, because they had expected me to run the ward independently. When I asked them if they expected a junior medical officer to run the ward independently, they refused to answer the question. I then asked why I had been given low marks across the board, including the areas like communication with patients where I had received very positive feedback from patients and registrars about my performance.? They responded that **"as we have not seen you in action (in these areas) we are going to give you the lowest marks"**. When I asked for an explanation for this statement they excused themselves and did not return.

Soon afterwards I resigned and tried to put this traumatic time behind me. I had accepted

a position as a psychiatry trainee at [REDACTED] hospital. I asked Dr. [REDACTED] the consultant with whom I had spent the most time with, to fill out IMG form 6 so that I could get registered. A week later Dr. [REDACTED] contacted me and told me that he was not allowed to fill in any feedback or assessment forms for me. He was instructed that only Drs. [REDACTED], (doctor who screamed at me and threatened to get security) Dr. [REDACTED] (doctor who called me a puppy) or [REDACTED] were allowed to fill in such a document. I felt that this was the third time that I was being referred back to the bullies.

Experience with the Medical Boards (New South Wales, Queensland and APHRA)

[REDACTED] I lodged a detailed statement with the NSW Medical Board about bullying and how I believed it unfairly affected my evaluations. The NSW Medical Board denied me registration based on the negative evaluations and did not acknowledge my concerns about the bullying and unfair evaluations. **I then received a phone call [REDACTED] recruitment agency, who informed me that she had received a call from [REDACTED] requesting not to give me any job! I am stunned - I have no idea why this man would go out of his way to track me down and sabotage my attempts to get a job.**

I then I contacted [REDACTED] hospital and tell them about the situation and that I planned to appeal to the Medical board. They then told me not to bother to apply for any job in the NSW health system as I would need to supply them with a satisfactory evaluation from my previous employer! This was obviously impossible. Consequently I was effectively banned from any form of employment in the NSW system. The Medical Board did not even acknowledge my letter or proof of the bullying! This also prevented me from applying for any IMET positions (needed to get general registration) for the next year as the applications closed in January. Consequently my career was put on hold for at least a year.

[REDACTED] I lodged an appeal with the NSW Medical Board. The Medical Board's response was that I could apply for provisional registration if I signed all the assessment reports. I waited for another four months before I was able to sign the evaluations because of the transition from the NSW to APHRA Medical Board. When I presented to sign the reports, not only were there a number of reports that I had never seen (all negative) but there were even reports for my performance (written by rehabilitation consultant Dr. [REDACTED] during periods where I was on leave! This raises the question - how was it possible to assess my performance when I was not working? !! I refused to sign this report

I had also applied to the Queensland Medical Board in [REDACTED] 2010 for limited registration for a RMO positions in Queensland. In July the Medical Board of Queensland was replaced by the APHRA which sent me a letter inviting me to also apply for general registration. It took more than 5 months to process these applications, despite providing all required documents. At the beginning of October I was also asked to do another English exam even though I had already done the exam in 2007 and had worked as a doctor for almost 20 months since. A few weeks later I received a letter from APHRA. I was denied General registration despite meeting all requirements because of my supervisor reports, particularly the assessment from [REDACTED] (this doctor told me he

needed to give me the lowest marks because he had not seen me in action AND had evaluated my performance during the period when I was not physically at the hospital). Instead, APHRA provisional registration was offered, but with very strict and detailed conditions, making me practically unemployable.

I have been lucky as I have been able to commence job in December 2010 as a psychiatry trainee despite the harsh conditions imposed on my temporary registration by APHRA. This work is very satisfying to me. I feel treated like a human being and my work is appreciated. I enjoy good contact with my supervisors and I receive sufficient support and honest feedback. Interestingly about 2 to 3 times a week I receive these odd pages from [REDACTED]. It can not have any link with my work, as [REDACTED] is not our patients intake area. I do not know who is sending me these calls and what is their purpose but these calls make me uncomfortable and sometimes I wonder if there is any connection to the painful past.

My experiences at the [REDACTED] hospital and its aftermath has inflicted serious damage to my career. I was deprived the opportunity to work in my profession, despite passing all required exams. I lost 11 months of my professional life and about 70,000 dollars in income. I am lucky that my career wasn't totally ruined. I ask myself what did I do to deserve such treatment? I had tried my best to do my job and looked towards my supervisors for constructive feedback. Instead I my supervisors made it clear that they presumed me guilty unless I could prove my innocence. The Medical Board took the same approach. Under these conditions, how is it possible for an IMG to defend their reputation and protect themselves against these bullies?

I believe that to protect overseas doctors and to give more fairness to assessment process following steps could be taken..

- 1) There should be established separate, independent office that that could consider IMG's complaints about unfair treatment, bullying and faulty assessment process. Currently IMGs are vulnerable to unfair treatment by their superiors, and no real option of arbitrage exists within the system. In my case the complaints were returned to perpetrators, which makes any such an attempt a farse. We are practically powerless and unable to defend our good name.
- 2) Doctors should be given opportunity to appeal and to discuss their assessments on merit basis before they are incorporated into their professional history files. It should be done on medical board level, possibly with someone supporting IMGs and helping them to find clarification of reason behind their marks.

Let me attach words of my deepest respect to the members of committee for your efforts and consideration. I am happy to present in person and to answer any questions if further clarification is required.

With kindest regards

Piotr Lemieszek
[REDACTED]