

**SENATE FOREIGN AFFAIRS, DEFENCE AND TRADE  
REFERENCES COMMITTEE**

**INQUIRY INTO RECRUITMENT & RETENTION  
OF DEFENCE PERSONNEL**

**SUBMISSION**

**Submission No:** 96

**Submittor:** Australian Society of Anaesthetists  
Ltd

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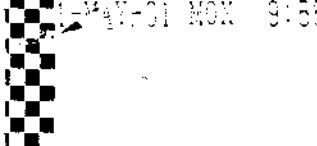
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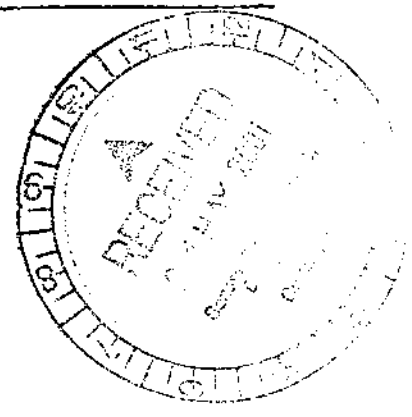
**Attachments:** NO



*Australian Society of Anaesthetists Ltd*

**FACSIMILE TRANSMISSION**

**TO:** Senator John Hogg **FAX NO:** (02) 6277 5818  
**FROM:** Dr Michael Hodgson AM **FAX NO:** (02) 9362 9139  
**DATE:** 21<sup>st</sup> May 2001  
**RE:** Inquiry into Recruitment and Retention of ADF Personnel  
**No. pages:** 3 including cover



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**PRESIDENT**  
*Dr Michael Hodgson AM*

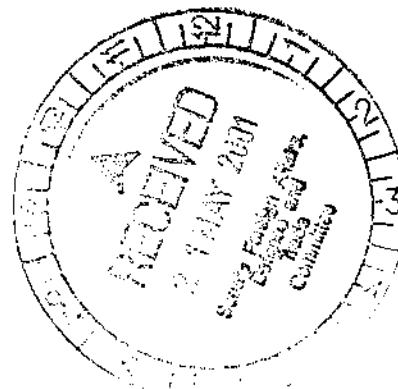


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21<sup>st</sup> May 2001

Senator John Hogg  
 Chairman  
 Senate Foreign Affairs, Defence and  
 Trade References Committee  
 Parliament House,  
 CANBERRA ACT 2600



Dear Senator Hogg

**Re: Inquiry into Recruitment and Retention of ADF Personnel**

The Society represents in the vicinity of 2000 anaesthetists throughout Australia. As you are no doubt aware there is a critical shortage of medical practitioners within the Reserve forces and in particular anaesthetists. We welcome this opportunity to be able to contribute to the Senate inquiry and look forward to working with the Government on this issue.

Outlined below are areas the Society perceives to be relevant in addressing the terms of reference and, in particular, recruitment and retention of anaesthetists within the Australian Defence Force, particularly within the Reserves.

- The present recruitment and retention strategy of the ADF is not effectively meeting the organisational needs in terms of anaesthetic manpower. The Society is aware of a situation whereby a junior medical officer who was not fully trained in anaesthesia was rotated to OP Warden in Timor to provide anaesthetic services. This rotation was brought about by the unavailability of a specially qualified anaesthetist who, as you appreciate, is a member of the Reserve rather than the regular Defence Force. Thus there is an obvious need to increase the number of anaesthetists within the Reserve Services.
- Members of the Society who are also members of the Reserve Forces are being asked to rotate repeatedly due to the shortage of anaesthetists within the Services. We are aware of an anaesthetist being rotated to OP Belisi three times within twelve months. This practitioner has made a tremendous commitment to the Services and has compromised his Private Practice to do so.
- It is also disturbing to hear of medical practitioners within the Army who, whilst members of the Reserve, have been deployed to OP Warden without weapons. This is due to inadequate or non-existent training, resulting in them being non AIRN compliant.

The Society feels the issues of recruitment could be addressed by:

- 1) In addition to personal contact by serving members of the Reserve, appropriate advertisements could be placed in the Society's Newsletter and an active recruiting program could be carried out at the Society's Annual Scientific Congress.
- 2) The introduction of a comparable system of rank and salary for specialists across the three Services would provide parity and alleviate what is at the moment an inequitable system, depending upon which arm of the Reserve the practitioner decides to join.
- 3) The lack of appropriate insurance cover is seen as a major hurdle for many practitioners, especially in instances of ongoing illness contracted whilst on active service. The Society is aware of a practitioner contracting haemorrhagic dengue fever whilst on deployment. Such a disease presents a real risk to the practitioner's future livelihood.
- 4) Current methods of recruit testing are cumbersome and time-consuming. The Society believes this could be modified so that the system is not so prolonged. After joining, many practitioners receive little or no assistance with ongoing training or complying with AIRN regulations so far as the Army is concerned. Most members report a lack of consistent ongoing careers management.
- 5) There is a shortage of young, fit anaesthetists who are able to deploy at short notice. Basically they are unable to forsake their practice due to:
  - a) poor financial returns whilst on deployment;
  - b) disruption to the referral base of their practice whilst on deployment;
  - c) inadequate civil support allowance to cover background costs and
  - d) inappropriate insurance cover.

Perhaps if these issues were addressed along with appropriate orientation, career management and training, more young practitioners would exhibit an interest in joining the ADF in a Reserve capacity. The Society is extremely proud of its members who serve in the ADF Reserve and looks forward to collaborating with the Government to increase recruitment and retention of these very necessary personnel.

Should you wish to discuss the matter, please do not hesitate to contact the Society's Executive Director, Mr Joe Dalzell.

Again I would like to thank you for the opportunity to launch this submission.

Kind regards,

Yours sincerely



DR MICHAEL HODGSON AM  
PRESIDENT