

## **Annual cap of \$2K on work-related self education expenses will lead to loss of rural doctors**

I am a rural doctor on Kangaroo Island, South Australia. As such I work as a sole trader and provide both clinic services to my patients as well as procedural services such as emergency medicine, obstetrics and anaesthetics.

I need to be up-to-date in order to do my job. I believe passionately in bringing 'quality care, out there' and see no reason that a deficit in my knowledge should disadvantage my community.

A cap of \$2000 on annual work-related education expenses will severely limit my ability to engage in a continuing professional development (CPD) programme

Not only are medical education events generally expensive, as a rural doctor I must travel around Australia in order to attend - and stay in the nearest available hotel. I will invariably need to eat, and travel to/from venues by taxi. Moreover, such events usually start early and finish late - so I need to spend an extra night on either side of an event in order to make connecting flights and travel to/from my rural community.

I should point out that such events are not frivolous overseas conferences. They are essential events to maintain my knowledge base and also maintain my accreditation with local hospital and compulsory continuing professional development programmes.

The biggest cost for me is travel, accommodation and conference fees - travelling from the country, I face high costs for airfares, taxis to/from airport and hotel fees

Many of the courses we are required to attend cost over \$2500 each

I stay in standard rooms in the closest possible hotel. I would try and eat on less than \$50 per day (note though that a typical breakfast in a hotel is \$30)

I don't fly to exotic locations

I rarely have time to do anything other than travel-conference-eat-sleep and usually am exhausted after each event. I don't get to see the local sights, swim in the hotel pool, frequent bars or undertake tourist activities. I am flat out trying to maximise my learning.

I am not kite-surfing in Guam or touring Antarctica. I am trying to maintain my own skills, where possible to advance them and to deliver a decent service to my community

I was thinking of undertaking a Masters in critical care & retrieval medicine to help deal with the sickest of my patients - this would cost over \$5000 per year alone.

Typical costs for a year might include AS A MINIMUM

EVENT	purpose	Cost
Membership of ACRRM (Australian College of Rural & Remote Medicine)	to gain access to ACRRM 'rural & remote medical education online' programme and maintain CPD points	<b>\$995</b> per annum
Membership of Australian Trauma Society	continue to keep up-to-date with advances in trauma for my remote community	<b>\$220</b> per annum
Attendance at annual ACRRM conference	Annual conference, usually interstate, plus flights, taxi accommodation, meals	\$1549.50 conference fee Flights \$750 Taxis \$120 Hotel 5 nights \$1250 Meals \$300 <b>TOTAL \$3969.50</b>
Attendance at annual anaesthetic conference	Annual event, often interstate, to maintain anaesthetic knowledge	\$990 conference Flights \$300 Hotel 2 nights \$500 Taxis \$90 <b>TOTAL \$1880</b>
10 days upskilling in anaesthesia at tertiary hospital	Compulsory in order to maintain my anaesthetic privileges as a rural GP-anaesthetist	\$200 per day 'facility fee' charged by tertiary hospital - \$2000 Hotel for 10 nights \$2500 Meals \$500 / 10 days <b>TOTAL \$5000</b>
EMST or APLS or REST or ELS or ALSO course	Required to participate in at least one event which involves advanced resuscitation	\$2500 per course 3-5 nights in hotel at \$250 per night Travel & meals \$500-\$1000 depending on location <b>\$3750 - \$4750</b>
Textbooks &/or Online Apps/iBooks	Reference material and self-development	\$300-\$500 per annum <b>TOTAL \$500</b>
Attendance at SMACC2013 conference	Critical care conference in Sydney to help me bring 'quality care, out there' - delegate and speaker	\$1500 registration Flights \$800 Hotel \$300 x 5 \$1500 Meals \$300 <b>TOTAL \$4100</b>

**TOTAL - \$21,414.50**

I note that my specialist colleagues are given a \$20K per annum CPD funding as part of their annual award from the State. As a sole trader I have to pay own costs from income.

The above would be a minimum - an overseas event would cost far more.

The proposed \$2000 per annum cap on work-related self-education expenses is clearly insufficient for rural doctors who face

- a requirement to attend courses as part of compulsory continuing professional accreditation
- a requirement to maintain professional skills across a range of disciplines (typically emergency medicine, primary care and a procedural skill such as obstetrics or anaesthetics)
- such courses typically cost \$2500 for a three day event
- as a rural doctor, I face significant costs to travel interstate
- as a rural doctor I stay in standard hotel room accommodation but may require 3-5 nights of accommodation per event - a typical hotel room is \$200-\$250 per room on Wotif, depending on city and season.

Meeting my annual CPD requirements and participating in necessary maintenance of skills costs in the order of \$20K per annum. I would imagine that other medical professionals face similar costs in relation to their work and would be unable to participate in sufficient required education if a \$2000 cap applied, whether annually or per event. Consultation with the profession is recommended.

## **Summary**

There will be unintended consequences from this legislative approach proposed for these reforms namely a disincentive for medical professionals to undertake adequate CPD to do their jobs. The reforms will hit rural doctors in particular and are excessively punitive when considered against existing State-awards of \$20K to city staff specialists who are working as salaried doctors - contrasting with rural sole traders

Such disincentive will mean that rural doctors undertake the bare minimum of events and go for the cheapest options. That might mean doing one 'entry-level' course each year to meet bare minimum CPD requirements only, not to advance knowledge ie *"20 years of experience" vs "one year of experience, repeated 20 times"*

In practical terms the reforms need to be revised and reviewed after consultation with the profession. As a rural doctor I would spend \$20K each year on work-related self-education as an absolute minimum. This would not involve a holiday, or perks such as drinks by the pool, a suntan or sightseeing. Instead it means long days of travel, crappy meals in airports, taxi trips in city traffic, then full days of education, plus expenses occurred away from home and a significant investment of time and money. But I do it because it helps me to help my patients, stay current and stay engaged as a rural clinician.

Without being able to do these courses/conferences, I would give up in rural medicine.

Sincerely

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