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Sent: Friday, October 4, 2024 12:12 AM
To: medboardconsultation <medboardconsultation@ahpra.gov.au>
Subject: Health Checks for doctors over 70

Submission

The stated reasons for universal age based testing of all doctors, which may be in contravention of Age Discrimination Act 2004 when tested in a Court .

The published stated reasons are:-

" Our goal is to keep late-career doctors practising safely for longer, by introducing health checks for doctors aged 70 and over.

Our complaints data shows there is a problem to solve. Complaints about doctors aged 70 and over increase sharply, and adverse outcomes are more common for this group.

We're consulting on three options – making no change, introducing a general health check, and introducing a high-impact detailed assessment with cognitive testing."

The correct way to approach this is not to commence institutional global ageism but to solve the problem for what the Medical Board was originally created by Parliament. To protect the Consumer . Global aged based criteria is in fact discriminatory to the majority of 70 plus who do not have any impairment which is based on present scientific knowledge..

If the complaints data [which should be published to make the magnitude public] shows there is an increase in complaints about doctors aged over 70 then the normal course would be to investigate those complaints and reach a conclusion whether the complaint is a valid complaint, or is it a normal dissatisfied consumer complaint.

All other statutory authorities know how to deal with complainants and the Medical Board should follow the standard applied to statutory bodies in Australia - not to target a class of persons which the Parliament of Australia has protected by virtue of their age. Treating someone based upon different age arbitrarily assigned is direct discrimination.

The global general check based upon an arbitrary age bracket is contrary present medical and psychological scientific findings.

Divergence in cognition appear around age of 60 and the divergence is more marked by the age of 80. Focusing on those with some impairment misses more than half the population of that age group who have no impairment.

Current research shows that in 6 years after turning 75 half the people show little or no change in their cognition, biological, hormonal physical functioning. A large study has shown that people with an average age of 77 studied for up to 16 years, those who did not develop dementia, showed very little to no cognitive decline.

The conclusions reached by Stanford University [Stanford Center on Longevity] that in aging past 70, there are things that improve with age.

Recent research shows are more emotionally stable than the younger counterparts. No doubt the Medical Board has data that inappropriate sexual advances occur in the younger age groups.

It also has data that certain ethnicity has more complaints - but is there a proposal to focus on instigating global checks on certain ethnic group of doctors? Imagine community response if ethnicity checks were instituted by the Board.

Aging does bring changes to the normal human brain, shrinkage occurs in the frontal lobes and neuronal changes occur, cognitive processes slow down and when measured it is in the order of milliseconds and is not meaningful in life activities as compensation occurs in additional pathways.

Older persons have an advantage, they can draw on their experienced knowledge [computer analogy - more data on the hard disks] thus have better solutions to problems giving an edge to over younger professionals. This shows up as better decision making. The Proceedings of the National Academy of Sciences USA published the relevant data 14 years ago.

The Medical Board seems not to have reviewed current scientific evidence, has not analysed the the complaints process, whether there is an age difference regarding complainants and the service provider and other sociological factors - Crude number counting shows lack of analysis. If there are other factors the Board should make complete and frank disclosure to the profession and service providers.

Contrary to Medical Board or rather to the public servants advising the Medical Board the crude evidence of merely number of complaints against a cohorts of doctors based upon age or ethnicity or other criteria do not justify the Medical Board arbitrarily extending its statutory duty by breaching the principles of Australian society as laid down by The Australian Parliament which is contrary to the Board's age based global proposal.

To reiterate

Objects

The objects of this Act are:

- (a) **to eliminate**, as far as possible, discrimination against persons on the ground of age in the areas of work, education, access to premises, the provision of goods, services and facilities, accommodation, the disposal of land, **the administration of Commonwealth laws and programs** and requests for information; and
 - (b) to ensure, as far as practicable, that everyone has the same rights to equality before the law, regardless of age, as the rest of the community; and
 - (c) to allow appropriate benefits and other assistance to be given to people of a certain age, particularly younger and older persons, in recognition of their particular circumstances; and
 - (d) to promote recognition and acceptance within the community of the principle that people of all ages have the same fundamental rights; and
 - (e) to respond to demographic change by:
 - (i) removing barriers to older people participating in society, particularly in the workforce; and
 - (ii) changing negative stereotypes about older people;
- bearing in mind the international commitment to eliminate age discrimination reflected in the Political Declaration adopted in Madrid, Spain on 12 April 2002 by the Second World Assembly on Ageing.

Therefore the correct course for the Board would be normal investigative procedure by its public servants advising on case by case basis -

1 Receive the complaint

2 Assess the complaint and complainant

3 Review the evidence - act on the conclusion according to law.

Any other non scientific approach should be a political decision.

Kind Regards

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