# Ahpra

Practitioner and community perceptions of the Australian Health Practitioner Regulation Agency (Ahpra) and the National Boards: 2020

A Social Research Project November 2020

Supplementary report prepared for:

The Medical Board of Australia

# Truly Deeply

#### Introduction

Truly Deeply was first engaged in 2018 by the Australian Health Practitioner Regulation Agency (Ahpra) to assess the perception and sentiment towards Ahpra and the National Boards.

The review was intended to help National Boards and Ahpra better understand what stakeholders think and feel about them and to identify how to facilitate ongoing confidence and trust in the work performed by Ahpra and the National Boards.

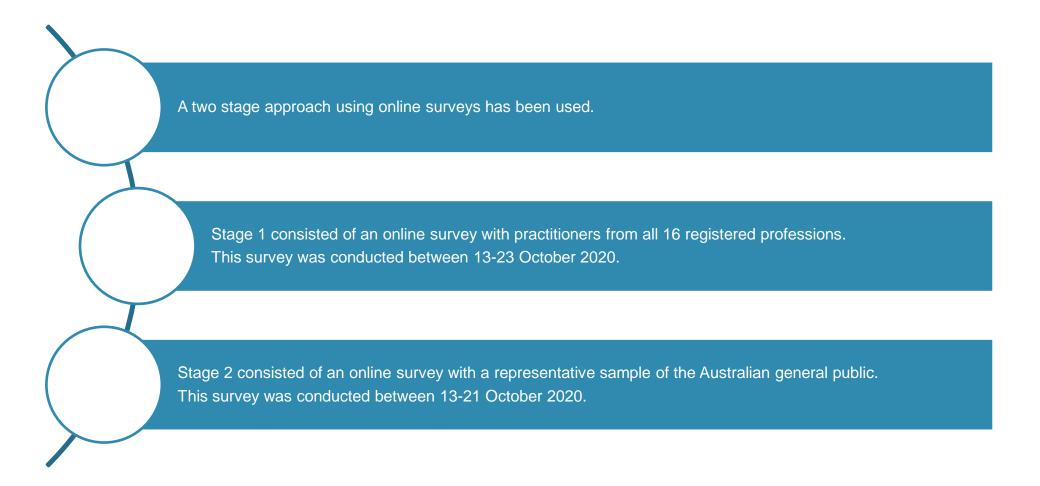
The benchmark 2018 study used a combination of qualitative and quantitative approaches, specifically extended interviews (face-to-face and via the telephone), focus groups and online surveys.

Given the value of the insights delivered through the 2018 benchmark study to Ahpra and National Boards, the decision was taken to update the quantitative measures by conducting the online survey with practitioners and the general public in November 2019 and most recently in October 2020.

The purpose of this report is to present, discuss and consolidate the findings and insights from the 2020 surveys and to make comparisons, where appropriate, with the 2018 and 2019 results.

- A single, integrated report has been provided to Ahpra documenting the key themes and results.
- A separate summary has been provided for each of the National Boards based on the results of the online survey with practitioners.
- The purpose of this report is to present a subset of findings specifically for the **Medical Board of Australia**.

# An overview of the methodology



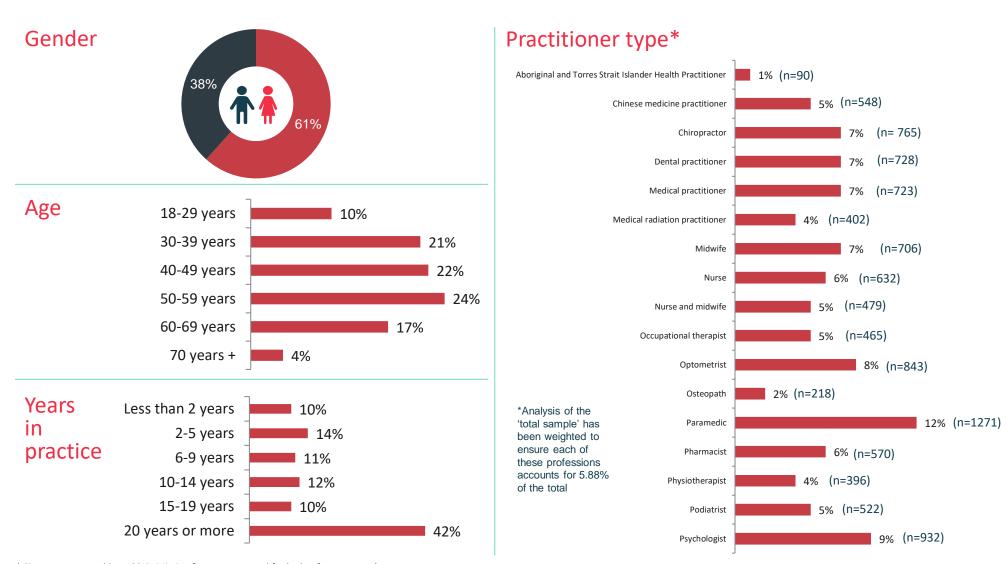
# Quantitative approach

- Online surveys were conducted with practitioners as well as the broader community.
- The 2020 questionnaires were very similar to the 2018 and 2019 questionnaires, with two additional questions.
- Respondents to the Community Survey were sourced using an external panel provider. Quotas were placed on the sample for gender, age and location to ensure a nationally representative sample was achieved.
- Participants in the Practitioner Survey were sourced by Ahpra (using software that allowed the survey to be deployed to a random sample of practitioners in each profession).
- The practitioner sample has been weighted to ensure an equal 'voice' within the total sample of registered health practitioners (with the sample of 'nurses' and 'midwives' further separated).
   This has been to done to ensure that the views of professions with larger numbers of practitioners do not outweigh the views of professions with much smaller numbers of practitioners.
- For comparison between the sub-analysis groups, chi square or independent tests were conducted as appropriate, with significant differences at the 95% confidence interval indicated where applicable.

	Community Survey	Practitioner Survey
Fieldwork dates	13-21 October	13-23 October
Responses	2,020	10,228
Email invitations sent	na	138,453
Response rate	na	7.4%



# 2020 sample of registered practitioners (n = 10,228)

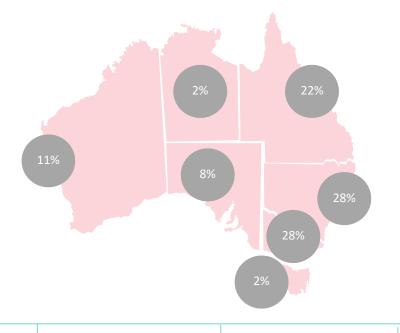


 $<sup>\</sup>ensuremath{^*}$  Figures may not add to 100%. Missing figures accounted for by 'prefer not to say'

#### Truly Deeply

# 2020 sample of registered practitioners (n = 10,228)



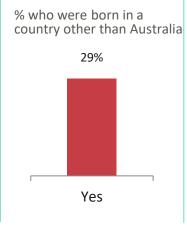


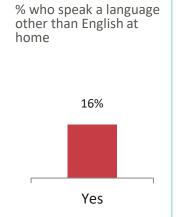
Metro: **63%** 

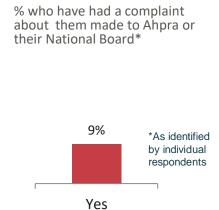
Regional: 30%

Rural: **7%** 

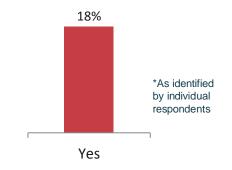








% who have been audited to check their compliance with the mandatory registration standards\*

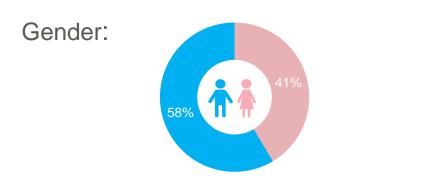


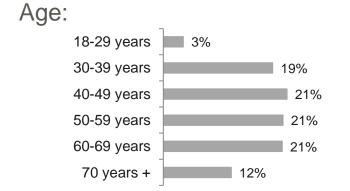
# Summary of results of the online survey with registered health practitioners

Specific insights into the responses from:

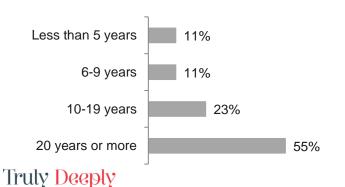
Medical practitioners

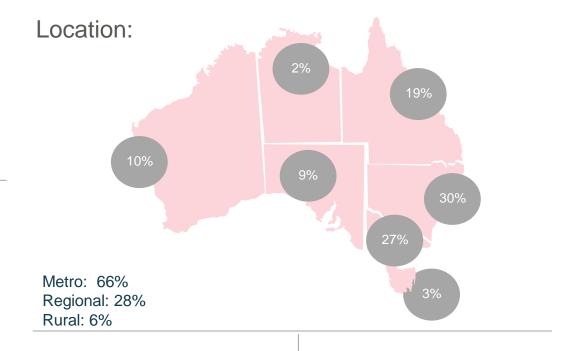
# Sample of medical practitioners (n=723)



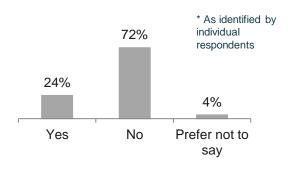


## Years in practice:

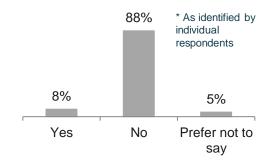




% who have had a complaint about them made to Ahpra or their National Board\*



% who have been audited to check their compliance with the mandatory registration standards\*



# 2020: Perceptions of the medical profession among practitioners (Top 20 associations)

Q. Which of the following words do you strongly associate with your profession? Base: Total sample of practitioners registered with this specific Board (n=723)

Perceptions in 2020	% of practitioners with that perception	Difference compared to the average across all professions
Professional	51%	(+5%)
Hard working	41%	(+12%)
Knowledgeable	35%	(+4%)
Dedicated	29%	(+8%)
Competent	28%	(+7%)
Trusted	27%	(+3%)
Responsible	26%	(+8%)
Caring	23%	(-5%)
Respected	23%	(+3%)
Compassionate	22%	(-1%)

Perceptions in 2020	% of practitioners with that perception	Difference compared to the average across all professions
Committed	21%	(+4%)
Empathetic	15%	(-6%)
Honest	13%	(+3%)
Reputable	12%	(+2%)
Community minded	9%	(-6%)
Leaders	8%	(+5%)
Passionate	6%	(-7%)
Team oriented	6%	(-3%)
Influential	5%	(+3%)
Approachable	5%	(-7%)

Green indicates a result significantly higher in 2020 than the average across all professions. Orange indicates a result significantly lower in 2020 than the average across all professions.

# Summary of changes 2019-20:

# Perceptions of the medical profession among practitioners

Q. Which of the following words or statements, if any, do you strongly associate with your profession? Base: Total sample of practitioners registered with this specific Board

% of practitioners with that perception of the profession	2019 N=470	2020 N=723
Professional	51%	51%
Hard working	42%	41%
Knowledgeable	37%	35%
Dedicated	31%	29%
Competent	27%	28%
Trusted	28%	27%
Responsible	26%	26%
Caring	25%	23%
Respected	24%	23%
Compassionate	22%	22%

% of practitioners with that perception of the profession	2019 N=470	2020 N=723
Committed	20%	21%
Empathetic	17%	15%
Honest	12%	13%
Reputable	13%	12%
Community minded	9%	9%
Leaders	8%	8%
Passionate	5%	6%
Team oriented	7%	6%
Influential	5%	5%
Approachable	4%	5%

**Green** indicates a result significantly higher result in 2020 compared with the 2019 result. **Orange** indicates a result significantly lower result in 2020 compared with the 2019 result

Note: There have been no significant changes in perceptions of the profession among medical practitioners between 2019-2020

# 2020: Perceptions of the Medical Board of Australia (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with the (National Board)? Base: Total sample of practitioners registered with this specific Board (n=723)

Perceptions in 2020	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Bureaucratic	39%	(+14%)
Regulators	38%	(-)
Administrators	31%	(-1%)
Necessary	31%	(-)
For the public	23%	(+2%)
Intimidating	18%	(+10%)
For practitioners	16%	(-15%)
Controlling	15%	(+7%)
Decision-makers	15%	(-8%)
Out of touch	15%	(+4%)

Perceptions in 2020	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Poor communicators	15%	(+5%)
Rigid	13%	(+4%)
Secretive	12%	(+7%)
Aloof	11%	(+5%)
Competent	9%	(-6%)
Fair	8%	(-2%)
Antiquated	7%	(+3%)
Trustworthy	7%	(-5%)
Advocates	7%	(-11%)
Shows leadership	6%	(-7%)

Green indicates a result significantly higher in 2020 than the average across all professions. Orange indicates a result significantly lower in 2020 than the average across all professions.

# Summary of changes 2018-20: Perceptions of the Medical Board of Australia

Q. Which of the following words or statements, if any, do you strongly associate with the (National Board)? Base: Total sample of practitioners registered with this specific Board

% of practitioners with that perception of the Board	2018 N=461	2019 N=470	2020 N=723
Bureaucratic	39%	39%	39%
Regulators	39%	38%	38%
Administrators	30%	32%	31%
Necessary	32%	34%	31%
For the public	21%	23%	23%
Intimidating	18%	18%	18%
For practitioners	18%	18%	16%
Controlling	17%	14%	15%
Decision-makers	18%	17%	15%
Out of touch	14%	14%	15%

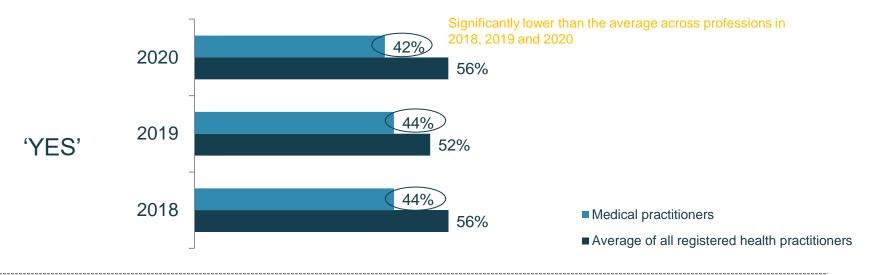
% of practitioners with that perception of the Board	2018 N=461	2019 N=470	2020 N=723
Poor communicators	15%	13%	15%
Rigid	16%	13%	13%
Secretive	12%	12%	12%
Aloof	10%	9%	11%
Competent	11%	12%	9%
Fair	8%	10%	8%
Antiquated	7%	5%	7%
Trustworthy	8%	10%	7%
Advocates	6%	5%	7%
Shows leadership	5%	8%	6%

Green indicates a result significantly higher compared with the previous year. Orange indicates a result significantly lower compared with the previous year.

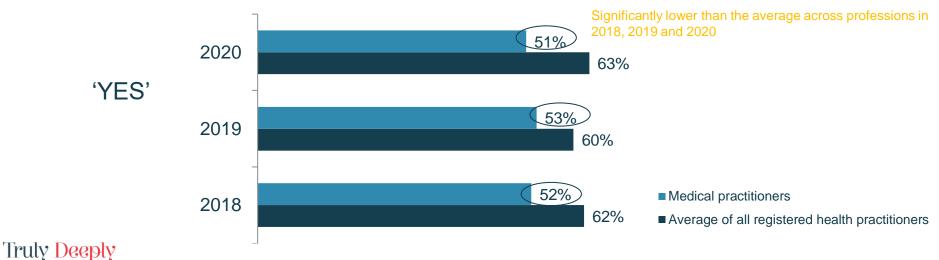
Note: There have been no significant changes in perceptions of the Board among medical practitioners between 2018-2020

#### Levels of confidence and trust in the Medical Board of Australia

Q. Do you feel confident that your National Board is doing everything it can to keep the public safe?



Q. Do you trust your National Board?



#### What are the indicators of trust and barriers to trust in the Medical Board of Australia

#### Indicators of trust: 51% trust the Board

I feel it is important to trust an agency which is there to do a job. It's the medical board. I assume trust in a body with that name.

As a doctor I choose to believe they are a responsible body looking to regulate the profession. The alternative is that there is nobody really holding the profession to account which would be scary to consider.

Tries to fairly regulate medical practitioners and be fair to practitioners while ensuring safe clinical standards for the public.

My dealings with them have been transparent, straightforward and fruitful. My impression is that they are fair, and able to balance the interests of the profession as well as the public.

No reason not to trust them. Regular communications advise practitioners of their policies and procedures, inform about cases concerning doctors. This provides clinicians with standards and reminders about failures of compliance, and also offers some remediation.

A long history of advocacy and fairness for the medical profession in Australia.

#### Barriers to trust: 23% DO NOT trust the Board

Reactive to complaints rather than proactive; doctors are guilty until proven innocent.

Because too many practitioners go unpunished for unethical or negligent actions and words.

A very slow paced, time consuming organization that charges expensive fees from the registered practitioners.

Out of touch, who do very little about the few bad apples in the profession.

The medical board consists of too many bureaucrats and non clinicians who are more interested in their own agenda and controlling the practice of medicine then the actual care or responsibility to the practitioners or the public.

No idea what they do or what benefit they bring to medical community or general public. Seems like extra bureaucracy with no benefits.

I think that Aphra run the show and they are submissive to them. I think they lack understanding governance. They are inconsistent, non-transparent and poor accessors of risk.

# Perceptions of Ahpra among medical practitioners (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with Ahpra? Base: Total sample of practitioners registered with this specific Board (n=723)

Perceptions in 2020	% of practitioners with that perception of Ahpra	Difference compared to the average across all professions
Bureaucratic	57%	(+21%)
Regulators	46%	(-7%)
Administrators	44%	(-1%)
Necessary	31%	(-5%)
For the public	29%	(-4%)
Intimidating	27%	(+12%)
Rigid	25%	(+10%)
Controlling	24%	(+9%)
Poor communicators	24%	(+11%)
Out of touch	22%	(+11%)

Perceptions in 2020	% of practitioners with that perception of Ahpra	Difference compared to the average across all professions
Secretive	17%	(+10%)
Aloof	15%	(+8%)
For practitioners	13%	(-15%)
Decision-makers	13%	(-10%)
Zealous	8%	(+5%)
Competent	6%	(-6%)
Antiquated	6%	(+3%)
Trustworthy	6%	(-4%)
Supportive	5%	(-3%)
Fair	5%	(-4%)

Green indicates a result significantly higher in 2020 than the average across all professions. Orange indicates a result significantly lower in 2020 than the average across all professions.

# Summary of changes 2018-20: Perceptions of Ahpra among medical practitioners

Q. Which of the following words or statements, if any, do you strongly associate with Ahpra? Base: Total sample of practitioners registered with this specific Board

% of practitioners with that perception of Ahpra	2018 N=461	2019 N=470	2020 N=723
Bureaucratic	52%	56%	57%
Regulators	46%	49%	46%
Administrators	47%	40%	44%
Necessary	32%	33%	31%
For the public	31%	30%	29%
Intimidating	27%	26%	27%
Rigid	26%	26%	25%
Controlling	26%	24%	24%
Poor communicators	24%	19%	24%
Out of touch	21%	21%	22%

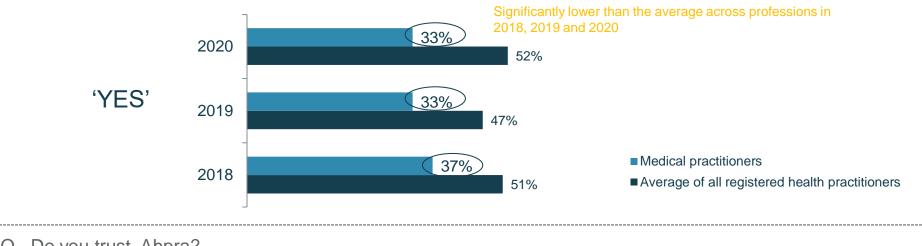
% of practitioners with that perception of Ahpra	2018 N=461	2019 N=470	2020 N=723
Secretive	14%	14%	17%
Aloof	13%	13%	15%
For practitioners	13%	13%	13%
Decision-makers	12%	10%	13%
Zealous	10%	9%	8%
Competent	10%	7%	6%
Antiquated	5%	5%	6%
Trustworthy	3%	6%	6%
Supportive	5%	5%	5%
Fair	8%	8%	5%

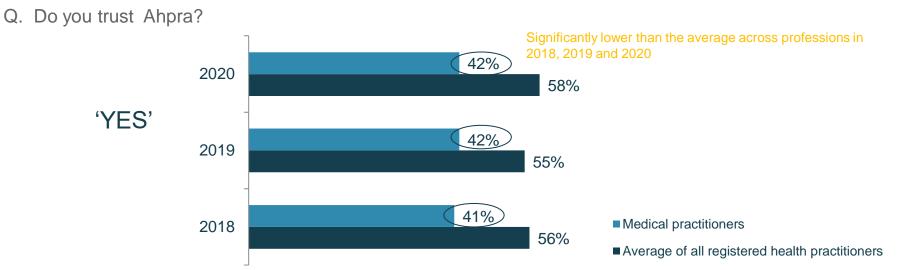
Green indicates a result significantly higher compared with the previous year. Orange indicates a result significantly lower compared with the previous year

## Levels of confidence and trust in Ahpra among medical practitioners

Q. Do you feel confident that Ahpra is doing everything it can to keep the public safe?

Truly Deeply





## What are the indicators of trust and barriers to trust in Ahpra among medical practitioners

#### Indicators of trust: 42% trust Ahpra

I believe that it is important to have trust in agency to do what they are meant to.

Believe that Ahpra is trying to act in the best interest for the medical practitioners and the public. However, Ahpra has to be more forceful and enforce its own policies adequately.

I believe Ahpra is a platform for doctors to raise concerns regarding any issues at workplace/patient care.

I have no reason not to trust them I support their role in keeping the public safe from practitioners who perhaps should not be practicing for various reasons.

They are striving to improve the competence and perception of Australian health practitioners.

I believe they Ahpra is well intentioned but falls short of its primary duty which is controlling unethical medical practices and protecting the public.

After 50+ years clinical practice I have never had reason to lack trust in Ahpra.

I trust its governance, and I assume that its members maintain a high degree of integrity.

#### Barriers to trust: 33% DO NOT trust Ahpra

Inconsistent and out of touch with reality. Intimidating to practitioners not at all helpful to the professionals that pay registration.

I am not confident they appropriately regulate some health care providers.

I don't find their processes to be transparent. They are inconsistent and there is no person who takes responsibility. They are difficult to contact and contradict themselves.

Slow response times to public complaints leaving medical practitioners stressed. To many layers very poor communication.

I do not know if I would receive respect and procedural fairness if a member of the public made an unwarranted complaint against me.

Ahpra have been slow, opaque and unhelpful. They had little understanding of the matter at hand and people with no experience in the specialist field seemed to be making momentous decisions based on a poor understanding of the clinical scenario and specific expertise.

Don't get anything for yearly fees.

# Assessment of the level of support provided to practitioners from Ahpra and National Boards to maintain their professional practice

Q. How would you rate the level of support provided by National Boards and Ahpra for you to maintain or improve your professional practice? Medical practitioners 2% Excellent 17%: Medical practitioners 6% 34%: Average of all registered practitioners \* Significantly lower result among medical 15% practitioners compared with the average Good across professions 28% 27% Fair 31% 22% Poor 15% ■ Medical practitioners 18% Very poor 8% ■ Average of all registered practitioners

# Additional activities or support practitioners would have liked to see from Ahpra and/or the National Boards during the pandemic

Practitioners were asked what additional activities or support, if any, they would have liked to see from Ahpra and/or their National Board during the pandemic? Below is a sample of the open-ended responses provided. (Full list of responses provided separately).

Encouraging older health practitioners to return to work during a pandemic when they are in the "at risk" group for serious illness seemed short sighted and ill considered.

Mainly educational, it's been impossible to attend meetings & trying to do the seminars which are usually between 6-8 at night when exhausted from a days' work just isn't working.

Provide assurance that practitioners will be indemnified if they assist with the COVID-19 pandemic, even if they have to be retrained.

Not put up fees for practitioners who have lost income due to COVID-19 - i.e. GPs. Support part time practitioners and those on parental leave by having pro rata fees.

Continuation of Telehealth. The capacity to consult by phone or online with remuneration has vastly improved crisis intervention. It has also shortened consultation times for routine patients, allows extended time when needed, and above all permits very brief contacts that have been life-saving. Some 10-minute calls have been of greater significance and life-saving importance than many longer and more numerous consultations.

Preliminary personal discussion and meeting with practitioners before complaints "go live" to weed out malicious complainants.

I do not see the pandemic response as being within the remit of Ahpra, other than the need from time to time to temporarily relax regulations which cannot be complied with.

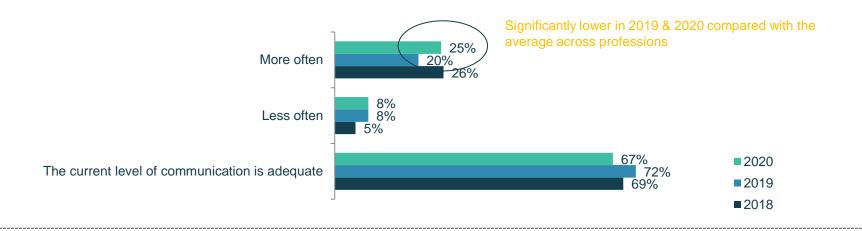
Actual programs that would make a difference, not waste money on programs that are not effective but sound like they work.

Provision of PPE for frontline health workers. Coordination of response with GPs & local public health divisions with government. Evidence-based advice to local, state, & federal governments - with proper education of public.

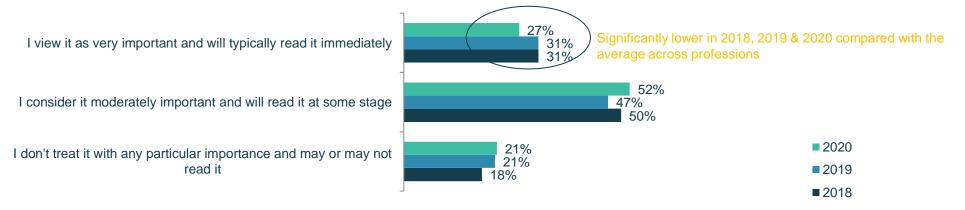
Advocate for practitioners to get more funding and support from government.

## Response to communication by the Medical Board of Australia

Q. Would you like (National Board) to communicate with you....?



Q. How do you typically respond to communication you receive from (National Board)?

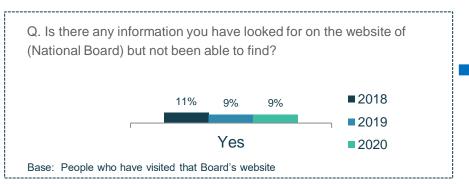


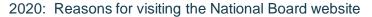
Base: Total sample of practitioners registered with this specific Board

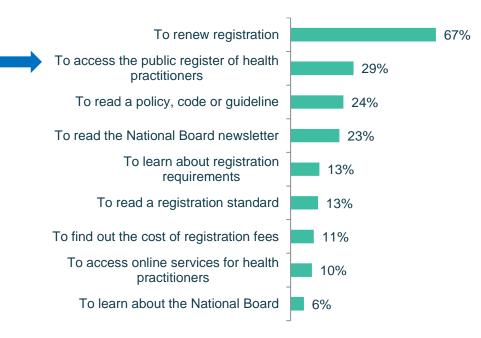
#### Use of the Medical Board of Australia website











Additional information sought by practitioners included (but was not limited to)...

- · Registration statistics by specialty.
- Registration details of practitioners.
- · Basis of bureaucratic decisions.
- My registration renewal progress.
- · Names of doctors who have retired.



# Contact details

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