

[REDACTED]

From: [REDACTED]
Sent: Friday, 3 January 2020 2:51 PM
To: newsletters
Cc: [REDACTED]
Subject: From Dr Mellisa Riddle - feedback re CME proposed changes

Categories: Acknowledged

Dear Dr Tonkin,

My colleagues and I were completely disheartened when we heard the Board's recent proposed changes to CME. I feel insulted by the detailed sub-categories and level of detail/ paperwork required; Most doctors are people who have been good students most of their lives and who take pride in their work; since starting out in GP in 1988 I have always exceeded my CME requirements, even whilst having young children; most GPs I know have also done so - we like learning and improving! We like meeting our local specialists and participating in clinical discussions. I agree it's vital we prove we are participating in CME - some, especially older doctors, can become complacent about their level of knowledge. However I feel the current system is satisfactory and manageable - perhaps doctors who come to your attention via complaints should be required to provide the proposed level of detailed feedback on their CME; I'm sad to hear that fewer undergraduates are considering GP as a career - the Board's patronising proposal will only further reduce the perceived status of GPs, who have already done comprehensive post graduate training. How do we 'identify activities that deliver real value and have genuine benefit', and to whom? My patients pay a private fee to see me so would probably not come back if they felt they weren't getting a benefit - is that enough? We GPs enjoy the generality and variety of practice - measuring performance is much harder with the diverse presentations we see, and patient-centred care can mean we need to modify guidelines so that a patient will agree to try something if not the raft of Tx recommended for their condition; Much easier for specialists who see a much narrower range of conditions and treatments. At 58 I feel I'm too young to retire but feel so uninspired by the thought of years of increased tick boxing re CME as well as doing my day job. Please don't tinker with things that are working, we are too busy!

yours sincerely

On 13 Dec 2019, at 3:33 pm, Medical Board of Australia <newsletters@ahpra.gov.au> wrote:

Your update from the Medical Board of Australia



Dr Anne Tonkin, Chair, Medical Board of Australia

Message from the Chair

We all want to practise safely, reflecting contemporary evidence and drawing on the knowledge and skills we have and one of the important ways we can keep our knowledge and skills fresh. The Board is proposing some changes that will add value and have a genuine benefit. By measuring their outcomes and reflecting on their own performance, doctors can improve their practice. We invite you to participate in our [consultation](#) and tell us what you think.

Mandatory notifications have been a hot topic in public debate in our profession. Some doctors are worried about the impact on their practice and may hesitate in seeking help because of this worry. We have published new resources to help allay unnecessary concerns. The Board and Ahpra will only need to know about a practitioner's health issue when there is an imminent risk to the public. This will take effect in early 2020.

Read



Medical Board of Australia News

The latest news from the Medical Board of Australia

Mandatory reporting: Look after your health

Healthy practitioners are good for patient safety. We want practitioners with health issues to feel safe to seek treatment resources to help make reporting requirements clear.

Read

What interns think about medical training

In a recent joint AMC and Board survey, 74 per cent of interns surveyed think medical school prepared them for the

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Social media guide

If you're active on social media, you should look at our new guide that aims to help medical practitioners understand

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2018/19 annual report now available

The 2018/19 annual report of Ahpra and the National Boards has been published. It includes detailed data about

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Latest quarterly profession-specific statistics published

Quarterly data about the medical profession are published on the Board's website.

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Consultations

Consultation on draft revised CPD registration standard

Have your say on the Medical Board's proposal to improve CPD for medical practitioners, to make it more useful.

Read

Consultation on Good practice guidelines for specialist IMG assessments

We've suggested some changes to the guidelines for colleges in their assessment of international medical graduates.

Read

Consultation on a Supervised practice framework

We've developed guidelines to support the safe return to work of doctors who, as a result of the notifications process, apply to international medical graduates or interns. Tell us what you think.

Read



Proof of identity requirements for new applicants for registration

New medical graduate applying for registration? Keen to avoid a delay in your application for medical registration?

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Social research results published

We commissioned research to better understand how registered medical practitioners and the community think and

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Medical benevolent associations

These independent organisations can assist medical practitioners in times of need. Contact them for help or to m

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Three cases published and an appeal dismissed

Cases relate to an inappropriate relationship, inappropriate prescribing and inadequate supervision of an internati

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Please note: Practitioners are responsible for keeping up to date with the Board's expectations about their professional obligations. are still required to keep up to date with information published on the Board's website.

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