



The Royal Australasian
College of Physicians

Survey Summary Learning Experiences of an OEP

Presented by
Dr Beata Byok
AFOEM Stream at Congress 2016



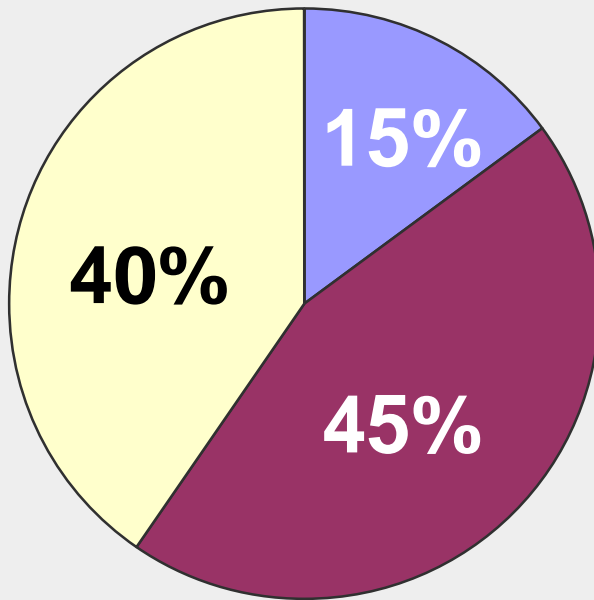
- The survey was conducted earlier this year online using “Survey Monkey”
- The aim was to collect data enabling understanding of some key issues facing Fellows in our Faculty
- Questions were developed by a small group of Fellows based in Adelaide
- Data was initially collated by College staff
- The survey was voluntary, but we had hoped for a substantial response rate to increase validity of the survey



- Total responses 47 – 10% of AFOEM membership.



- Predominantly treating referred workers.
- Predominantly undertaking independent medical examinations and related medico-legal work.
- Predominantly servicing companies, clinical/consultative, including pre-employment medicals.
- No longer in active practice.





For all respondents

- 22 % undertake predominantly plaintiff work
- 55 % undertake predominantly defendant work
- 23% do not undertake work in the independent medical examinations and related medico-legal space.

For those whose practice is predominantly undertaking medical examinations and related medico-legal work, the majority of respondents (76%) undertake defendant work.



For all respondents

- 53% of respondents indicated that they are **nearly always** provided with adequate material from the requesting source.
- 53 % stated that the worker **sometimes** attends with their own material, such as reports, notes, photos, investigations
- 42% stated the worker **sometimes** understands the nature of the request, questions and process of an IME
- 31% are **nearly always** and 28% are **sometimes** the first to explain the role, request and related aspects to the worker.



- Of those respondents practicing predominantly in the independent medical examinations and related medico-legal space, 48% are ***nearly always*** the first to explain the role, request and related aspects to the worker.



- 51 % of respondents indicated that worker **anxiety** is a significant issue in their practice and consider it influences the interaction
- 38% stated it was an issue but did not influence the interaction
- 40% of respondents indicated that **anger** from the worker is a significant issue in their practice and consider it influences the interaction
- 36% stated it was an issue but did not influence the interaction



60 % of respondents are concerned when complaints are directed towards the requesting agent, statutory bodies, health complaints units and AHPRA.

Abandoning or not completing an assessment - 1



The Royal Australasian
College of Physicians

Answer Options	Response Percent
I have never had to abandon undertaking an assessment of this type.	29%
I have had to abandon an assessment of this type because the worker was threatening.	14%
I have had to abandon an assessment of this type because the worker was non-cooperative/obstructive.	43%
I have had to abandon assessments because of both threatening behaviour and non-cooperation/obstruction, not all occurring in each case.	33%
I have had to abandon an assessment because insufficient background material was provided.	24%
Other	24%

This implies, in total, 57% of Fellows had abandoned assessments because of patient behaviour

Abandoning or not completing an assessment - 2



The Royal Australasian
College of Physicians

I have had occasions to defer assessments because the worker was unaware of the nature of the assessment and the need to be medically examined. .”

“...need for immediate referral for care ”

No
translator

“The patient presented with a solicitor”

“The patient did not understand my role”

“Patient did not give consent”



When writing a report how do Fellows approach documenting that their opinion is in conflict with that of another health professional?

- 53 % report their opinion with attention to the basis of the reasoning of the opinion
- 21 % refer to the material specifically and comment on the conclusions



Bullying is a “hot topic” in the medical profession at present, and action to identify, respond to and prevent bullying is being promoted by colleges and other medical organisations across our profession.



- 36% have not experienced problems with bullying in their work
- 34% have experienced bullying by employer representatives
- **32% have experienced bullying from Fellows or other medical colleagues**
- 30% have experienced bullying from client representatives
- 30% have experienced bullying from workers
- 21% have observed bullying in cases outside of my direct work
- 17% have experienced bullying by union representatives.



Some individual comments received:

- *I experienced bullying from management when working in industry*
- *Support person intrusive assertions, arguing, lobbying*
- *Boys' club exclusion was the norm many years ago - not now with so many women in the Faculty*
- *Bullying considered as aggressive attempt to influence*
- *Doctor's employers have been known to bully certifying doctors in their employ to preserve and/or cultivate relationships with large, ongoing corporate employer clients.*
- *I have experienced bullying behaviour from my employer*



The Royal Australasian
College of Physicians