

# The ageing doctor

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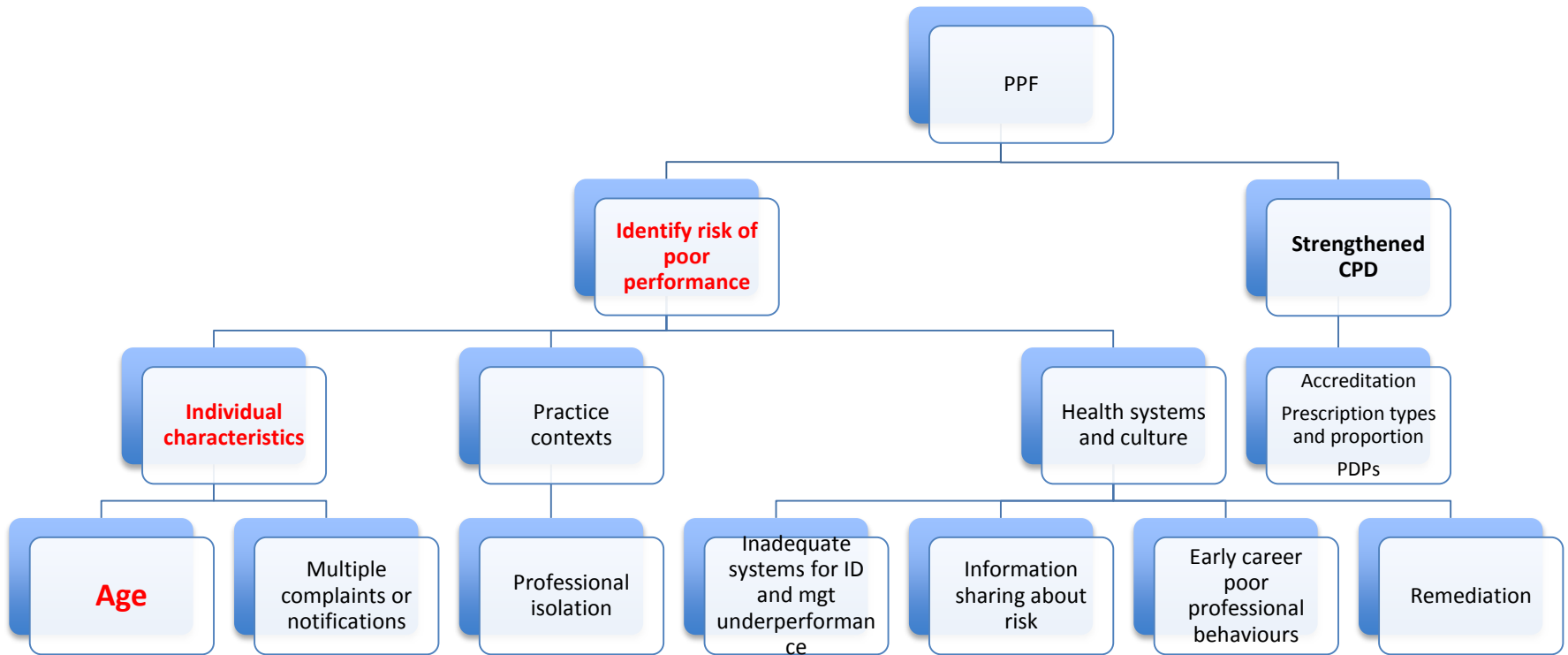
27 October 2018



# Proposed regulatory changes for doctors aged 70+ : overview

- Context: revalidation
- The evidence for change
- The solution?
- What next?

# Professional Performance Framework



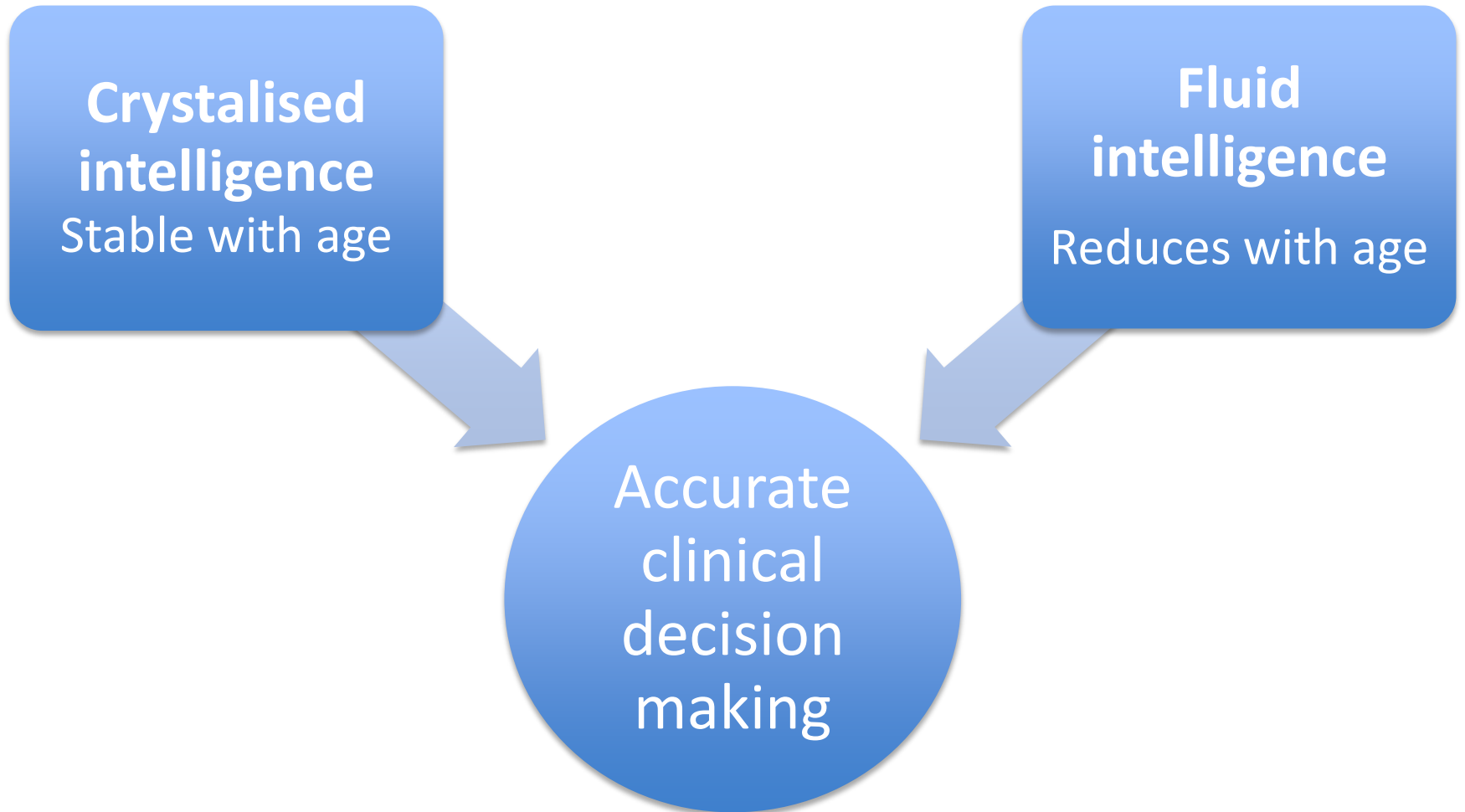


# Demographics

- Aging population : 65+ 1995 11.9%; 2017 15%
- Dementia Australasia : 6.7% of 65+ (World Alzheimer's report 2015)
- Dementia = single greatest cause disability in Australians 65+
- Estimated dementia > 65: women 20%, men 17% (Alzheimer's Australia)
- Doctors registered to practice : 70+ 5970 including 80+ 903
- Occupational physicians 2016: 13 % 70+; 42% 60 – 69 ; 23% 50 - 59

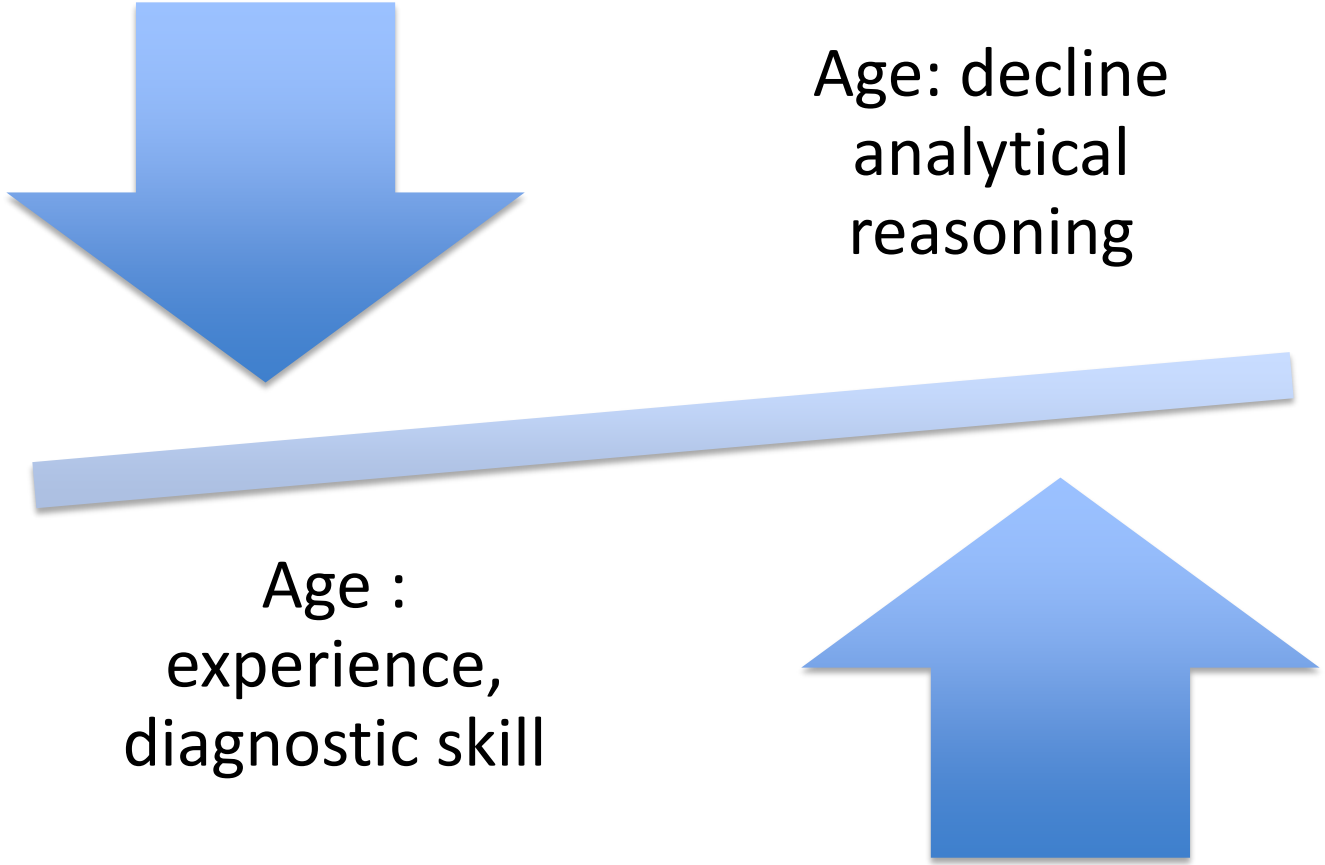


# Intelligence





# Experience: a double edged sword





# Cognitive decline

- Competency concerns : > 1/3<sup>rd</sup> mod – severe cognitive impairments.
- 2014 UK study 109 doctors aged >45 : performance concerns
  - 22 potential cognitive issue on screening
  - 14 cognitive impairment on further assessment (youngest 46)
- What level of cognitive decline puts the public at risk?



# Competence

- Self assessment?
  - Recognising limitations in standard of care
  - Knowing when to cease practice
- Systematic review (2005) – clinical experience and quality of care :
  - Clinical knowledge
  - Adherence to standards for treatment and prescribing
  - Process measures of health care quality - diagnosis, screening, preventative care





# Performance

- Referrals to regulatory bodies :
  - later career 6x than early career
  
- Performance up to age 65 = at or near younger peers
  
- Surgeons
  - 78% 60 – 64 = younger colleagues
  - 38% 70+



# Positive contributors to competence

- Intelligence
- Engagement in self directed learning
- Deliberate practice to maintain expertise
- Patient factors
  - Illness and complexity of problems
- Practice factors
  - time pressures
  - Hours worked, on call
  - Organisational support
  - Governance systems



# Retirement

- Competence and health vs compulsory retirement age
- Australian doctors: 11% > 65; 6% >70
- Determinants for retirement
  - finances
  - anxiety about aging
- Less likely to retire
  - international graduates
  - greater work centrality



# Transitioning to retirement

## ➤ RACS

- *The surgical career transitions guide*
- CPD tailored to scope of practice
- Support annual health checks for senior surgeons



# EAG recommendations for age related risk...1

The MBA should

- Require doctors at age 70 and 3 yearly thereafter to undergo:
  - Confidential health check including cognitive screening
  - Formal performance review process with feedback and credit for CPD
- Provide guidance on requirements for the above and the process for dealing with outcomes



# EAG recommendations for age related risk...2

The MBA should provide structure and support for CPD providers/indemnity insurers/employers to:

- Promote annual health checks
- Work closely and collectively with doctors aged 70+:
  - Raise awareness of potential risks to performance
  - Improve supports for safe clinical practice
  - Increase supports for later career doctors to where appropriate manage changes to scope of practice or transition to retirement including:
    - Written guidance
    - Tailored CPD activities
    - Retirement ambassadors

# EAG recommendations for age related risk...3

The MBA should:

- Commission independent, de-identified analysis on the outcome of the health and performance screening
- Rigorously evaluate the utility of this approach in detecting performance and health concerns that may impact on fitness to practice
- Cost benefit analysis

# EAG recommendations for age related risk...4

If there are insurmountable legal obstacles, at a minimum the MBA should:

- Conduct further research to examine risk of poor performance in doctors of this age group, including
  - Voluntary pilot studies
  - Further investigate risks shown by notification and complaints data for older doctors



# All recommendations accepted by MBA

- 15 February 2018 stakeholder workshop for the Professional Performance Framework
- Doctors aged 70+
  - was the most controversial element of the Professional Performance Framework, however
  - recognition of strong and increasing evidence base
- Concerns
  - Workforce risks, rural and remote areas
  - Cost to individuals



# What now?

The MBA will commission:

- **Clinical advice** on what constitutes a practical and effective health check for doctors aged 70+
  
- **Ongoing research** and evaluation to ensure:
  - Effective
  - Evidence based
  - Fair

# The other MBA....

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