Extract from Hansard

[ASSEMBLY - Thursday, 3 April 2003] p6136b-6139a Mr John D'Orazio; Mr Alan Carpenter

MEDICAL STUDENTS, INCREASE IN NUMBER OF UNIVERSITY PLACES

Grievance

MR J.B. D'ORAZIO (Ballajura) [9.50 am]: My grievance is to the Minister for Education and Training and concerns the number of medical students being allowed into the University of Western Australia and the shortage of general practitioners in Western Australia. I want to put some background on the record. Western Australia has a shortage of GPs and, as indicated by the Prime Minister and the federal Minister for Health, the shortage of GPs is creating problems for bulk-billing and delivery of health services. Western Australia has only one medical school and it is run by UWA with a current capacity of 180 places. It is a six-year course. A medical student needs six years university training and basically another four years prior to becoming qualified as a doctor - a total of 10 years.

In Western Australia we currently have a shortage of 300 doctors and I will compare that figure with the situation in the other States and Territories. The measurement of doctors is done by the number of doctors per 100 000 population. Western Australia has 98.7 doctors per 100 000 population; New South Wales has 111 doctors per 100 000 population; Victoria has 113.5 doctors per 100 000 population; Queensland has 104.5 doctors per 100 000 population; South Australia has 120.7 doctors per 100 000 population; Tasmania has 125.9 doctors per 100 000 population; the Northern Territory has 115.1 doctors per 100 000 population; and the Australian Capital Territory has 124.5 doctors per 100 000 population. At 98.7 doctors per 100 000 population, members can see Western Australia is way behind the Australian average. When we add together the diverse nature of Western Australia and the tyranny of distance, this figure becomes even more alarming. Just to bring Western Australia up to the national standard we need to employ another 300 doctors today.

Since 1999 Western Australia has recruited 240 overseas-trained doctors, or approximately 60 per year. The situation becomes even worse when we understand that some of these doctors are working on their own in remote places with very little support.

I will now refer to the number of students being allowed to study medicine in Western Australia. This year 134 places were made available to medical students in Western Australia. A total of 103 places were available for school leavers; 31 places for non-school leavers, meaning mature age students or people wanting to transfer from other courses; three places for Aboriginal students; and 10 places for our international quota. The point is that we are allowing 134 students to go into medicine. In 1990 we allowed 120 students into medicine; from 1991-96 the figure was 125 students a year, and in 1997 it changed to 123; in 2001 it was 141; in 2002 it was 134; and in 2003 it is 134. The number of applications received for student places in medicine in 1990 was 340. In 2001, 1 020 students applied for medicine, all with TEE scores of 95-plus, and 141 were accepted. This year, a total of 1 132 students with TEE scores of 95-plus applied for medicine and did not get in. On top of that, 471 other students applied for medicine and did not get in. Even if we were to allow an extra 80 places, it would not help, because that is the current capacity at UWA in Perth. Last year the University of Notre Dame Australia applied for another medical school in Western Australia, with the possibility of providing 40 places. The federal Government knocked that back. UWA also applied for extra places, and it was knocked back as well. Again we are left with 134 places for medical students. Even today, if we were to make available the extra 80 places, it would take 14 years to meet the shortage of GPs facing this State now. It is an absolute disgrace!

We take great pride in and like to boast about the standard of our doctors. Every time there is a discovery or some achievement we all stand up and say how wonderful we are. Today we have 1 500 students with TEE scores of 95-plus who could be absolutely fantastic doctors, and we are not even allowing them to start - we are not giving them the opportunity to get into medicine. We talk about being the clever country and educating people, but these students do not have the opportunity to start in medicine. They would be great doctors for the community. More importantly, we should support the youth in our community. Worse still are the doctors we pinch from overseas - the 240 doctors we have recruited over the past four years. These doctors are coming from Third World countries, and those countries need the doctors far more than we do, yet we are taking them away and are not funding places here in Western Australia. It costs \$30 000 a year to train a medical student. For \$2.4 million the federal Government could fund those extra 80 places, which would go towards resolving the health crisis in this State and the shortage of GPs. More importantly, politicians on both sides need to look after the youth in our community and give them a chance to become doctors and to fulfil the need in our community.

MR A.J. CARPENTER (Willagee - Minister for Education and Training) [9.59 am]: I thank the member for Ballajura for his grievance. It is a very good grievance. It goes beyond being an individual grievance and points to a fundamental issue which is having a very big impact on the Western Australian community. Not as many people as we would like understand the fundamental problems that confront the health system, where the responsibility for these problems lies, and how they should be addressed. It is too easy for this issue to dissolve into an argument about what the State Government should be doing and so on. I am very grateful for the

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member's grievance, because it illustrates beautifully the under-supply of general practitioners in our community. It is almost unbelievable that this situation has been allowed to occur. We have raised the issue of the under-supply of funded places at universities with Brendan Nelson, the federal Minister for Education, Science and Training; he acknowledges it and we are hopeful - although I do not know how realistic that hope is - that some provision may be made in the forthcoming budget -

Mr J.B. D'Orazio: His track record is not very good.

Mr A.J. CARPENTER: We are hopeful, but I do not know about optimistic. The member for Ballajura said in his grievance that currently Western Australia is approximately 300 doctors short. The information I have been given in preparation for this grievance is that we are more like 500 doctors short in Western Australia. This is an enormous problem. A State as big as Western Australia geographically, with its high percentage of Aboriginal population and the inherent health issues associated with that, demands adequate health services and a good supply of GPs, and we are simply unable to provide that.

It could be inferred from some of the statistics raised by the member for Ballajura that we are doing everything humanly possible to raise education standards of students in our schools; we are trying to get more people through the TEE at school so that they can access universities, and we are succeeding for the first time in decades. We are getting more people through with higher scores. That is a great achievement. What happens to these kids when they get through? They apply to a university with a high tertiary entrance rank, which in any other State would probably guarantee them access to courses such as medicine, and cannot get in - not because they are incapable of completing the course but because there are no places. I read in the newspapers that the federal Government suggests that people should pay to go to university, as opposed to its providing funded places. People can purchase a place in these courses. It is a major issue. Country members - there are not many present in the Chamber - continually raise the issue of the provision of good quality health services from general practitioners.

Mr J.B. D'Orazio: And in the outer metropolitan area.

Mr A.J. CARPENTER: Yes, and in my electorate and in the Pilbara.

Brushing away all the politics and the rhetoric, it gets down to the fact that a thousand or more young people would dearly like to study medicine. Their school records indicate that they could do it on their ear, but they cannot get into a university in WA because there are no funded places for them. This issue must be addressed.

The Commonwealth has said that there is an oversupply of doctors in other States and that, therefore, all those doctors should come to Western Australia because there is a demand for them here. Reality is not like that. As the member for Ballajura pointed out, WA recruits doctors from overseas, because we are desperate to get doctors here, yet we draw them from areas where they are also desperately needed. Nobody is a winner in that situation.

A good example is the Australian Capital Territory, which has the highest rate of clinicians in the country. The Commonwealth recently approved a new medical school for Canberra, although it had some problems raising funds for the infrastructure. We could send a thousand or more young Western Australians to Canberra, but I do not know how many would come back.

Mr L. Graham: About 2 000, I reckon.

Mr A.J. CARPENTER: Canberra might send 2 000 others over this way. The fact is that those students would have to stay there for six to 10 years to get their medical qualifications and we would lose them. The undersupply of medical personnel in WA is a major issue at all government levels - state and local authorities - and has a significant impact on the quality of the life of people, particularly outside the metropolitan area where there is no alternative. Country members constantly criticise the Government because they cannot get doctors to work in their area. What can we do? We are lobbying the Commonwealth Government, as we should, and are getting nothing in return. The University of Western Australia and the Western Australian Higher Education Council have argued that there is an under-supply of medical students in WA. They have noted that the Commonwealth has acknowledged that argument for many years but has done nothing about it; it has largely ignored the argument. The State is significantly under-supplied in the overall number of commonwealth-funded university places. We are under-funded across the board to a minimum 1 200 places. It is actually more like 2 500 places at university level, although perhaps not specifically at medical school level.

Western Australia is suffering because the Commonwealth Government is giving inadequate attention to that reality. One aspect that has inhibited the Commonwealth's provision of additional medical places is the cost of providing courses to medical graduates. The standard commonwealth funding formula assumes only a four-year course with a 25 per cent annual attrition rate. Both these assumptions are inappropriate for medicine. The University of Western Australia has the infrastructure to take on at least another 40 new students. It has the

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capacity and is willing to do it, but the Commonwealth will not fund the places. These places need to be approved and appropriately funded by the Commonwealth to enable the cost to students to remain at a reasonable level. The Commonwealth's alternative is that if they can pay, they can get in.

The University of Notre Dame Australia, as the member said, should be congratulated for a very good initiative. It is working very closely with the University of Western Australia and several other universities in the proposed development of a medical school based on a graduate school model. The approval of the Australian Medical Council is required before it can be implemented; however, it could be funded under the Commonwealth's postgraduate education loans scheme. To date there has not been a positive reception from the Commonwealth to that concept.

Here we are in Western Australia at state government level - I will go back one step to the community level. The community quite rightly says that it needs more doctors. We read about that every day in the newspapers and hear it in the Parliament. The State Government is doing its best promoting the education system and getting more people through the system with higher scores to attain the necessary qualification standards to get into medicine. I congratulate the University of Western Australia for providing special places for Aboriginal students and for marking the scores of rural students differently and so on; it is making all those adjustments. However, we are being blocked by the Commonwealth Government. The Commonwealth Government knows the problem but it is not acting. It must act. I believe that if WA were closer to Canberra, people would get out their pitchforks and flaming torches, march on Parliament House and refuse to leave until something was done about it