The QDHP is an independent service supported through funding from the Medical Board of Australia.
It is with great pleasure that I present the first Annual Report for the Queensland Doctors’ Health Programme (QDHP) as the next chapter of the delivery of doctors’ health services in Queensland. This organisation builds on the incredible work, performed since 1989, by the Doctors’ Health Advisory Service (Queensland) (DHAS(Q)).

The opportunity to establish QDHP came about in 2016, initially supported by ‘arms-length’ funding from the Medical Board of Australia (MBA) to deliver a set of key services. Since then, QDHP has worked extensively to broaden its reach and to work with other like-minded organisations to establish a sustainable foundation.

The QDHP has recently endorsed a new strategic plan, focused on our expertise in the design and delivery of evidence-based programs delivered by the profession, aligned with the vision of the organisation. This builds on the broader objectives of DHAS(Q) to improve the health of doctors and medical students working in Queensland. Doctors’ health organisations such as QDHP occupy a unique position in supporting doctors and medical students to remain healthy. QDHP can operate as a trusted third party for the entire profession, providing support and guidance where practitioners may be unable, or not comfortable to, access mainstream health services. Similarly, we can help organisations design and deliver evidence-based programs that will meet the health needs of their doctors.

Following the strategic planning session, the QDHP Board has taken the decision to focus on six key activities to enhance the delivery of doctors’ health programs within Queensland.

We deliver these activities within an evidence-based framework that aligns our services with the needs of the practitioner or organisation requiring assistance. The six key activities are as follows:

- Direct Support
- Education
- Awareness
- Research
- Advocacy
- Networks

The continued existence of the QDHP would not be possible without the support of the experienced volunteer General Practitioners who staff the 24/7 help-line, and the consultant Psychiatrists who provide further support. I would also like to thank the Management Committee of the DHAS(Q) for their advice, support and oversight that ensures that the QDHP continues to meet the original mission, vision, and values of the DHAS(Q).

I would also like to formally acknowledge the work of my predecessor, Dr Frank New, as the inaugural Chair of the QDHP for his leadership in the establishment of the organisation. I would like to acknowledge Dr Margaret Kay, Chief Executive Officer/Medical Director, for her tireless service to doctors’ health in Queensland. Finally, I’d like to thank my fellow directors for their support and guidance.
I am pleased to provide the first annual report for the Queensland Doctors’ Health Programme that outlines the significant volume of work that has been delivered in the last eighteen months. I am proud to report that we have focused on developing a strong, sustainable foundation for the delivery of our core services, whilst retaining flexibility to develop new services as the needs of the professions change.

Operationally establishing a physical service has been a significant undertaking. For the first time, we have established an office from which to design and deliver our services. At the same time, we’ve been busy helping to develop the evidence base around doctors’ health through participation in key research initiatives, and further refining our internal processes to allow us to deliver high-quality, timely interventions.

In addition, we have recently conducted our strategic planning process to outline a clear path for the QDHP to ensure that it can continue to deliver high quality support to the profession into the future. The strategic plan has helped to identify the six key activities that allow us to deliver high quality services, wrapped up in the broader risk stratification and targeted delivery framework developed by QDHP to ensure that we can deliver effective and efficient services. These activities have allowed us to establish strong foundations through which we can operate a flexible array of programs and services as the need of the profession change and evolve.

Highlights in service delivery over the past year have included:

- Our key program is developing and maintaining the hotline and referral mechanism to provide support to practitioners who may not feel comfortable accessing mainstream services. A unique element of our service is that this service is provided by a panel of highly skilled general practitioners who voluntarily provide their time and expertise to act as a triage and first-contact support. Callers are then supported to engage with services that understand their needs. In 2016 – 17, we have been able to supplement this service with ‘in-hours’ support from a trained social worker operating out of the QDHP office, with ‘out-of-hours’ calls being taken by the general practitioners. This service has been supported with ‘arms-length’ funding from the Medical Board of Australia for registered medical practitioners within Queensland.

- QDHP is working with the Western Queensland Primary Health Network (WQPHN) to undertake a health needs assessment for medical practitioners in rural and remote western Queensland. This collaboration represents the ability of the QDHP to support health services and commissioning authorities to deliver programs that address the unique health needs of doctors.

- QDHP has also continued to deliver education across Queensland to administrators, the profession, and medical students to help build the capacity of organisations to deliver appropriate doctors’ health services. These educational programs will continue over the next year to align with the QDHP strategic plan. QDHP is also looking forward to expanding these services, where the profession requires, and partnering with other like-minded organisations.

Ultimately, enhancing physician health benefits the individual physician, their patients, their families, their colleagues, and the community. Research shows that doctors who practice positive health behaviours enable their patients to do the same. Doctors who maximise their health are more likely to perform better in their care delivery and less likely to suffer burn-out.
By working with other key stakeholders, and utilising an evidence-based methodology to design and evaluate programs, QDHP provides an independent option that practitioners and students can access to support their own health and wellbeing. To date, we have been supported in these endeavours by Avant Mutual Pty Ltd, the Australian Medical Association (Queensland) and Mater Health Services Queensland.

I would like to take the opportunity to acknowledge the support of Dr Frank New and Dr Ross Phillipson in their role as Chair as we commenced this journey with QDHP. I am grateful for the assistance of Mr William Custance who was our Community Board Member for many months. He provided many hours of counsel and wisdom as QDHP was established, continuing throughout our early establishment phase. As he has stepped down, I would like to welcome Mr Mark Herron who will be our newest Community Member bringing breadth to the skills mix of the Board. I would also like to thank the QDHP Board and the DHAS(Q) Management Committee for their support and guidance over the preceding year. Finally, I would like to acknowledge and humbly thank the dedicated and long-running support of the general practitioners and psychiatrists who have donated their time, energy and expertise to the on-call panel. These individuals have worked tirelessly to make QDHP a truly remarkable organisation.
**Background**

Doctors’ health, both physical and mental, has received significant media coverage over the past three years. This has been prompted by the National Mental Health Survey of Doctors and Medical Students, by beyondblue, released in October 2013. The research, as reinforced by later research supported by QDHP in Queensland, found that medical practitioners and students had levels of high and very high psychological distress that exceeded the general population, and other professionals. This effect was most pronounced where the practitioner was young, female, working in a hospital setting, or in non-metropolitan environments. The research also identified that the major drivers of distress were the conflict between career and family responsibilities, workload, and long working hours.

The leading research has also identified that medical practitioners may not feel comfortable accessing mainstream services due concerns over confidentiality and privacy and the fear of stigma and of the potential impact on their registration and right to practice.

In response to the research, and increasing public and professional attention applied to the issue, the Medical Board of Australia commissioned a review, conducted by DLA Piper, into the funding of doctors’ health services. The review found that doctors’ health services play an important role in delivering health services to a segment of the profession who are not comfortable accessing mainstream services, including Employee Assistance Programs or Workplace Support Programs.

The DHAS(Q) has been working in the area of physician health well before this recent increase in public attention. The DHAS(Q) was established in 1989 to help address the issue of doctors’ health, including providing a telephone support line that linked practitioners with trained general practitioners. These services were provided on a volunteer basis from a community of practitioners who were passionate about the health of the profession.

This led to activities such as playing a leading role in founding the Australasian Doctors’ Health Network (ADHN), and establishing the first national conference (in 1999).

The ADHN brought together, for the first time, the respective state and national doctors’ health organisations to share their respective experiences within the area.

When DHAS(Q) was provided with the opportunity to access funding to expand the range of services, utilising the QDHP as a vehicle, the organisation leaped at the opportunity to provide a broader range of services to support the physical and mental health of doctors and medical students in Queensland. The QDHP is an independent service supported through funding from the Medical Board of Australia, that is delivered at “arms-length” via the Doctors’ Health Service P/L and federal AMA.

Within this governance framework, the DHAS(Q) is led by a management committee of medical practitioners. The DHAS(Q) is the sole shareholder of the QDHP. The QDHP is itself overseen by a Board of Directors that includes two community representatives. This framework ensures that the QDHP and the DHAS(Q) can maintain their independence in developing solutions that improve the health of medical practitioners.

QDHP delivers a range of services through its focus on evidence-based interventions, collegiate support, and consistent focus on the issues underpinning poor physical and mental health of medical practitioners and students.

Based on the leading research in the area, and extrapolating these findings to 22,107 practitioners in Queensland, it is possible to estimate the number of Queensland doctors who may benefit from QDHP’s services:

<table>
<thead>
<tr>
<th>Level of Psychological Distress</th>
<th>Number of Practitioners (estimated)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very High</td>
<td>704</td>
</tr>
<tr>
<td>High</td>
<td>1531</td>
</tr>
<tr>
<td>Medium</td>
<td>4821</td>
</tr>
<tr>
<td>Low</td>
<td>15051</td>
</tr>
</tbody>
</table>
Medical practitioners may not feel comfortable accessing mainstream services to support their physical and mental health. This may be for a variety of reasons, compounded by medicolegal concerns, including mandatory reporting.

Employers, including Queensland Health, medical colleges and professional medical organisations have recently stepped up their focus on providing support for the mental and physical health of their employees, trainees, and fellows. However, concerns about career development and progression remain a major barrier to accessing help. As a result, even where these services are available, medical practitioners may not wish to access them, preferring an independent service.

QDHP provides an important option for these practitioners to enable access to the care they need. These services comprise several key activities that are wrapped up in a targeted framework that helps to provide individual doctors and students with the right service, at the right time. This methodology is pragmatic and evidence-driven.

While some practitioners have high or very high levels of psychological distress or require specific support for their personal health issue (physical or mental health issues), others require support to help maintain their wellbeing into the future. QDHP’s range of services ensures that both independent personal support as well as more systemic support for employers delivering effective programs are available.

Education to ensure that doctors are better able to support the health of their colleagues and deliver health care to their doctor-patients has been a key focus.

QDHP continues to provide education – lectures and resources – for medical students with a current focus on the three medical schools in South East Queensland. QDHP has been responsive to the needs of students and provided a dedicated part of the QDHP website with specific resources relevant to medical students, including access to the “GPs for medical students” site to facilitate access to care. Currently about 5% of contacts with the help line relate to medical students.

The six key activities of the QDHP, and a high-level summary of what they involve, is as follows:

**Direct Support**
- Providing direct support, including access to an independent on-call help line, case management, and complex case management

**Education**
- Delivering educational programs to doctors, medical students to enhance the capability of the profession to care for itself.

**Awareness**
- Increasing awareness of doctors’ health issues, QDHP, and the services that it provides.

**Research**
- Expanding the evidence-base of doctors’ health to better understand causes, and the effectiveness of differing interventions.

**Advocacy**
- Advocating for best practice in the development of policy (government and local policy) that could have an impact on the health and wellbeing of doctors.

**Networks**
- Working with like-minded organisations to drive evidence-based improvement across the sector.

These six key activities interact to form a robust service model designed to support the health and wellbeing of doctors and medical students at all stages of their careers.
Vision, Mission and Values

The QDHP’s core vision is the same as that practised by the DHAS(Q) since 1989, that:

“Queensland medical practitioners and medical students will be supported to achieve optimal health and wellbeing throughout their careers”

QDHP believes that the most effective way to achieve this vision is to enhance the role that the QDHP has in the delivery of doctors’ health services in Queensland, leading to the mission statement that:

“QDHP aspires to be the leading provider in Queensland of doctors’ health services to medical practitioners and medical students, encompassing advice, support, education and research”

QDHP has a series of qualities that allow it to occupy this position, such as its focus on evidence-based practice, best summed up in the core values of the organisation:

“Independence, Confidentiality, Integrity, Respect, and Empathy”

The QDHP utilises a robust project management methodology to guide the delivery of a variety of doctors’ health services. This provides the QDHP with flexibility in tailoring initiatives to the needs of differing funders, without compromising the integrity of the organisation.

The key activities of the QDHP can be described in the following domains:

• Working with stakeholders
• Organisational capacity and expertise
• Refining and implementing evidence-based interventions
• Stewardship and sustainability

Working with Stakeholders

SUMMARY:
The ability of the QDHP to work with a diverse range of stakeholders, including colleges, employers, regulators, medical organisations and advocacy groups to develop and deliver evidence-based programs

KEY ACTIVITIES:
Education – Awareness – Networks

Organisational Capacity and Expertise

SUMMARY:
The capacity of the QDHP to position itself as a leader in the field of doctors’ health, contribute to positive policy changes, and support the development of its staff and volunteers with the purpose of delivering high quality services

KEY ACTIVITIES:
Education – Research – Advocacy

Refining and Implementing Evidence-Based Interventions

SUMMARY:
The capability of the QDHP to design and deliver support and education programs that doctors want to use

KEY ACTIVITIES:
Direct Support – Education – Research

Stewardship and Sustainability

SUMMARY:
Ensures that the QDHP complies with all its regulatory requirements to allow it to operate in a sustainable and efficient manner

KEY ACTIVITIES:
Networks
Working with Stakeholders

The QDHP has developed and refined a series of programs and services over the past year, with the support of organisations including Australian Medical Association Queensland (AM AQ), Primary Health Networks (Western Queensland PHN and Darling Downs and West Moreton PHN), the Medical Board of Australia, Universities (including The University of Queensland, University of Southern Queensland, Griffith University) and Hospital and Health Services (including Metro South Health and Gold Coast University Hospital). These programs and services have been delivered in collaboration with the respective groups, to address their respective organisational needs and objectives in terms of workforce health and wellbeing.

Notably, in August 2017, QDHP was involved in establishing and facilitating a major forum with Queensland Health and AMA Queensland around doctors’ mental health that brought together a broad range of stakeholders to discuss the issues, and workshop potential solutions.

In the national arena, QDHP has been working with the Expert Advisory Council of the Doctors’ Health Services Pty Ltd (a part of the federal AMA) and currently chairs this group. QDHP is also a member of the Australasian Doctors’ Health Network. Through these national connections, QDHP has contributed significantly to the National Forum that was held in Sydney in September, 2017.

Telephone Support Line

The telephone help line remains the core service offered by QDHP, as it was with DHAS(Q). This service allows any medical practitioner, or student, to anonymously call a number and be confidentially connected with a trained counsellor who provides initial triage and support. The key to the success of this QDHP service is the support provided by a panel of volunteer general practitioners, who deliver a level of collegiate support not available through other telephone services. In 2016 – 17, there were 276 contacts on this phone line. In addition, the QDHP has established a relationship with Healthe Care to help provide immediate access to acute psychiatric support.

Staying Well Outback Project

QDHP has taken the opportunity to partner with the Western Queensland Primary Health Network (PHN) to provide a wellbeing check for doctors working in the remote areas of Western Queensland. This has provided QDHP the opportunity to engage a dedicated Project Officer to deliver the program, with comprehensive assessment and evaluation built into the project as a core feature. The QDHP would like to acknowledge the direct financial support provided by the WQPHN in delivering this project.

Education for Rural Doctors

Recognising that doctors working beyond the urban centres face more complex health access issues, QDHP has delivered face-to-face educational sessions in a number of rural and regional centres in South-East Queensland. This opportunity was supported by the Darling Downs and West Moreton PHN.

Stress Inoculation Workshop

QDHP has partnered with The University of Queensland Medical Society and the AMA Council of Doctors in Training to deliver a ‘stress inoculation workshop’ for medical students transitioning from university to professional practice. The focus of the program is to assist medical students to be better prepared for the reality of the ‘work’ of medicine and to enable their development of supportive strategies to manage the stressors of their intern year, and subsequent professional practice. As with the Staying Well Outback Project, comprehensive evaluation has been incorporated in this project.

Research Support and Assistance

QDHP has also worked with organisations, including Metro South Hospital and Health Service and Australian Medical Association (Queensland), to provide high level research support on interventions that provide access to better doctors’ health services. This includes an updated health survey, specifically examining the beyondblue methodology in Queensland, and providing support for the evaluation of the Resilience on the Run workshop series conducted by AMA Queensland.
Organisational Capacity and Expertise

Organisational capacity and expertise refers to the QDHP’s ability to maintain its recognised expertise in doctors’ health, providing an expert voice when policy makers consider changing policy that may impact on doctors’ health, and ensuring that staff and volunteers are empowered and supported to deliver excellent support.

Strategic Research Involvement

In 2016 – 17, QDHP co-authored two significant research presentations that were presented at the Australasian Doctors Health Conference (2017), namely ‘My Health – A Doctors’ Wellbeing Survey’ and “Metro South Health Doctors’ Wellness Program”. QDHP also delivered a workshop around managing bullying and harassment in the workplace. At an international level, QDHP has had its paper “Understanding My Health – A Mixed Method Study of Doctors’ Wellbeing in Brisbane” accepted at the International Meeting on Wellbeing and Performance in Clinical Practice, to be held in Greece in May, 2018.

QDHP has further collaborated with the Australian Institute for Suicide Research and Prevention, based at Griffith University, to develop a research proposal to better understand the experience of doctors who have experienced the loss of a colleague through suicide so that future support programs can be developed.

QDHP also has strong connections with international experts in the field of physician health.

Supporting Staff and Volunteers

In 2016 – 17 QDHP has updated the volunteer on-call panel to ensure that all the members of the on-call roster are provided with the support they need. This has included ensuring that members have access to education and resources to enable their care delivery. These volunteers are provided with ‘in-hours’ support through the addition of a dedicated social worker. The Medical Director also provides support for the GPs on-call when more active management for complex calls is required. During this time, QDHP has been supported by our Social Worker and Administration Officer, Hester Van der Elst, who has provided assistance to our On-Call Panel in providing support to our clients.

Refining and Implementing Evidence-Based Interventions

Refining and implementing evidence-based interventions refers to the ability of QDHP to develop services that doctors will want to use by identifying and resolving barriers.

Accessible Services

QDHP provides its services across the breadth of specialities and fields that encompasses medical practice, recognising the special needs of those at different stages of their career and working in different environments that add complexity to their capacity to maintain their personal health and wellbeing. While the current use of the services of QDHP indicates a positive level of engagement with its clients, QDHP recognises that there is a need to improve the accessibility to its services. In an area the size of Queensland, there are significant opportunities for further outreach and engagement.

The current website has recently been updated to increase its capacity to deliver more timely information about its educational sessions and in the near future, deliver online education that will suit a range of doctors. QDHP has been proactively engaging with Social Media using Twitter and Facebook (@DocHealthQLD) to reach the broader medical community.

In addition, QDHP continues to deliver a wide-range of education sessions across Queensland to help build the capacity of the sector to manage its own health.

Streamline QDHP Development and Delivery of Services

QDHP specialises in the design and evaluation of doctors’ health services. This has included providing support to a variety of organisations, such as AMA Queensland and Metro South Hospital and Health Service, to deliver novel interventions.
Stewardship and Sustainability

QDHP is a registered Charity. QDHP takes its responsibilities seriously, understanding its obligations to manage funds entrusted to it for providing doctors’ health services. QDHP proudly complies with the requirements of the Corporations Act 2001 (Cth), the Australian Charities and Not-For-Profits Commission Act 2012 (Cth), and the Collections Act 1966 (Qld) in the delivery of its services. Further details can be found in the Auditor’s report attached below.

People

QDHP is overseen by a diverse board of Directors with a range of perspectives and skills, including medical, legal, and business expertise. This ensures robust governance for the work of QDHP within a framework developed to sustainably pursue opportunities to improve the physical and mental health of medical practitioners and students.

Dr Ross Phillipson
Chairperson

Dr Kate Engelke
Company Secretary/Director

Dr Di Khursandi
Director

Ms Tracy Pickett
Director

Dr Margaret Kay
Chief Executive Officer/Medical Director

Mr William Custance
Community Board Member 2016 – 2017

Mr Mark Herron
Community Board Member from July 2017
Auditor’s Report and Financial Statement Summary

This is an abridged version of the auditor’s report. For the full copy please contact: medicaldirector@qdhp.org.au

QUEENSLAND DOCTORS' HEALTH PROGRAMME PTY LTD
ABN 35 611 984 920

FINANCIAL REPORT FOR THE YEAR ENDED
30 JUNE 2017

Phone: 1300 222 834
Email: admin@cbaudit.com.au
Website: www.cbaudit.com.au
AUDITOR’S INDEPENDENCE DECLARATION

This declaration is made in connection with our audit of the financial report of the company for the year ended 30 June 2017 and in accordance with the provisions of the Australian Charities and Not-for-profits Commission Act 2012.

I declare that, to the best of my knowledge and belief, there have been:

- No contraventions of the auditor independence requirements of the Australian Charities and Not-for-profits Commission Act 2012 in relation to this audit;
- No contraventions of the Code of Professional Conduct in relation to this audit.

Yours faithfully,

Matthew Williams
CB Audit Pty Ltd
Registered Company Auditor # 470 848
# QUEENSLAND DOCTORS' HEALTH PROGRAMME PTY LTD

## STATEMENT OF FINANCIAL PERFORMANCE

**YEAR ENDED 30 JUNE 2017**

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<td><strong>TOTAL EXPENSES</strong></td>
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<td><strong>PROFIT (LOSS) FOR THE PERIOD</strong></td>
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<td>22,280</td>
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