



Snapshot survey of Waikato members on the proposed Waikato medical school Waikato District Health Board

The Association of Salaried Medical Specialists (ASMS) is gauging the views of members on topical issues at selected District Health Boards (DHBs) through a new publication, *ASMS Snapshot*. These series of 'snapshots' will help us understand what members think about matters relevant to the work of senior doctors and dentists. This first *Snapshot* presents the findings of a survey of Waikato DHB members on the proposed Waikato medical school.

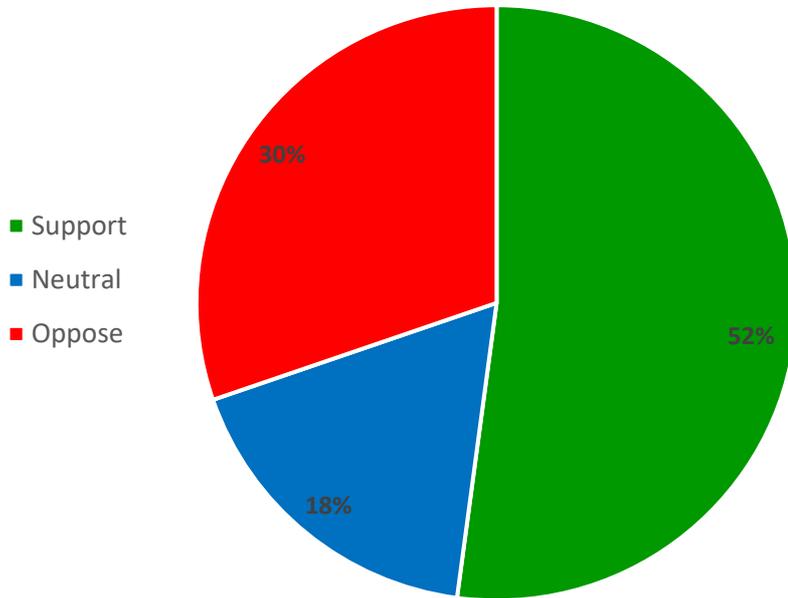
Introduction

In response to comments and correspondence from members, the ASMS was encouraged to survey the views of members at Waikato DHB about the proposed Waikato 'Community-Engaged Graduate Entry Medical School' (CEGEM) outlined in a business case released on 31 May 2017. The proposed medical school would be based at Waikato Hospital in Hamilton as part of a strategic alliance between Waikato University and the Waikato DHB.

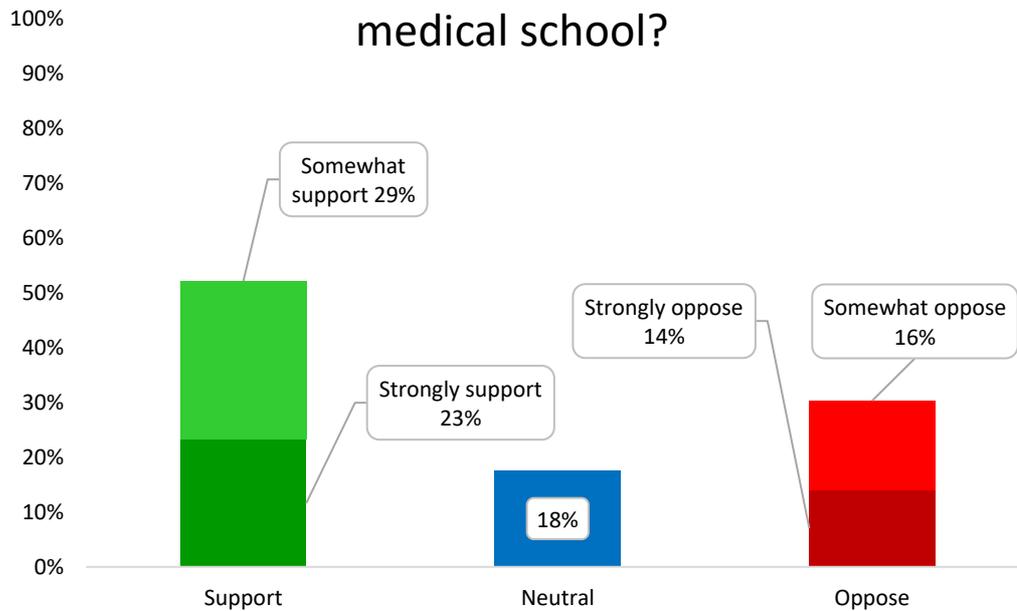
The survey aims were simple; find out what members think and whether they were involved in the lead-up to the business case. Of the 325 ASMS members at Waikato DHB, 142 took part in the survey, representing a 44% response rate. The results are included in full below. We have also included members' comments about the proposed medical school.



Do you support the proposed Waikato medical school?



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Comments from those who are strongly supportive:

Waikato region has a large population and awesome university. Medical school is long overdue.

Way overdue.

More NZ trained doctors please.

Good to widen intake.

Comments from those who are somewhat supportive:

I am worried about the impact on Waikato Hospital. We are not in a position to assist with training students, so students may suffer as a result.

I think it's a great idea, but I am not certain that it should aim to be any different from the other two medical schools.

I believe the idea has merit but I do not agree with the way it is being done or that the CEO is the correct person to be driving this when the fundamentals of running the hospital are being ignored. there is a need for more locally trained doctors, however I am not sure WDHB as the clinical resources (staff, space, patients) to add more medical students to the roster of those from Auckland that we already train.

I am a clinical academic and would in principle be delighted if there were a Waikato Medical School. We have been provided with no information about the venture however and so I currently have concerns that there will be an expectation that I and colleagues will be expected to deliver the curriculum without any idea as to whether we will be sufficiently resourced to achieve this.

Support it only if the DHB CEO steps away from limelight.

I'm concerned about whether we can do it well.

I am yet to be convinced of its benefits or its detriments.

Depends if it is able to truly achieve its goals with rural gp's working in rural locations.

I think there is a problem with insufficient rural GP's and neither Auckland nor Otago medical schools have adequately addressed this despite it being an ongoing obvious problem. I'm not sure that the Waikato solution will solve the problem but it has highlighted it.

We need to encourage students from outside of the main centres to attend medical school as they are less likely to want to work in Auckland. Graduate schools have worked well elsewhere e.g. Flinders.

No idea what it would mean for clinicians or those with academic appointments with Auckland University working here.

I don't think it's an efficient way of increasing the number of medical graduates, and I doubt that it would increase the number of gp's the way they think. However, it would benefit the hospital and it is a big hospital and probably warrants a medical school.

Comments from those who are 'neutral':

I think the idea is good but not sure about the basic sciences available at Waikato University and I am surprised we have not been consulted as the specialists that would be providing hospital based teaching for the clinical years.

Personally, I would favour the creation of a strong/sizeable proper clinical school on the Waikato Hospital campus, which is still part of the University of Auckland. We need more academic appointments, more research (particularly clinical research) and if needs be, a greater focus on rural health (but not exclusively so). We don't want a second-rate medical school, only training rural GPs. Seems like a diversion from the leadership crisis and incompetence in the management of the DHB.

I do not understand why the incumbent medical schools cannot address the maldistribution with graduate entry candidates targeted at rural placement. I am also concerned about how to redistribute the undergrads we currently have.

The additional work by SMOs will need to be addressed.

I can see the need for another medical school but have concerns about the current cohort who come to Waikato, and the proposed training plans.

As it stands, current new grads are struggling to get placements so another medical school will only make the situation worse. Also, I don't believe this will address the shortage in rural medical staff as there has been details on how they will bind these graduates to work within the rural community. My feeling is that this will be another route for future doctors to get into more urban specialist roles.

I see lots of potential problems with the new school, and don't have any information to defuse these concerns.

I know nothing about it.

Rural medicine needs a major boost.

The "disruptive technology" aspect is particularly appealing to me. The current medical schools have not been able to address the severe shortages of rural GPs. This is an opportunity to address that through a fresh approach.

Badly needed, right approach.

I think it would be a great thing for the region, the university and the hospital, provided appropriate resources are put in place including more staff for academic posts. We will not be able to teach more in our 'spare time' as we don't have spare time.

Comments from those who are strongly opposed:

Not dilute funding and produce second rate doctors. A world class medical school is inevitably part of a dynamic university that encourages debate and learning. I feel the plans for a medical school at the Waikato University are the result of egos that have a touch of grandiosity.

Service provision predominates management agenda - hard enough to manage trainee education and the current number of clinical students, let alone add in more.

That's ridiculous.

Empire building nonsense.

It displaces incumbent trainees from Auckland, no real gain in numbers. Empire building.

The premise behind the development of the medical school is dangerously flawed. It will result in rural GPs who will be expected to operate in small, often single handed rural practices, far from secondary care back up but hampered by a cut down training. Rural GPs often need a much broader range of skills and experiences, not narrower. This proposal will put those GPs at significant risk and also the communities that they serve.

This seems like empire building and nothing else, a half-baked response to a complex problem (GP shortage) that is fraught with unanswered questions.

My understanding is we have a huge number of young doctors coming on line who will not be able to gain access to advanced training. In addition, the purpose of the Waikato School is to promote rural medicine but there is as far as I am aware very little evidence to support this approach.

Would lead the medical unemployment and not enough training jobs.

Limited ability to teach and train current medical students and fundamentally don't think we need 3 medical school.

I have 3 main concerns: 1. I believe it is disingenuous to promulgate that this medical school will improve the numbers of rural GPs. Whilst I don't object to the concept of a 4-year post-graduate course, I do not believe that it will be any more successful than the Auckland or Otago approaches to this end. We can't indenture students to such a course. 2. I believe that this is an exercise by Waikato University to raise its profile/ranking by way of adding a Medical School to its faculties. Empire building by a University is no way to plan for future Health care or its workforce. 3. There has been no overt consultation in how we may be asked to provide clinical teaching for this new cohort of students. Our DHB leaders seem to like the concept but haven't done the maths.

Comments from people who are 'somewhat' opposed:

People starting training wanting to do one thing doesn't lead to occurring. Also, can't make people go to peripheries.

My understanding is that it is supposed to bond people to rural medicine. This will fail so I believe it is a flawed premise. Assuming what I have heard through word of mouth and media is right.

No departmental time exists to support this endeavour.

We have two world-class medical schools in the country. The programs are well-established and are training world class doctors. Instead of starting new medical school with the risk of being a second and third class medical school, and the significant cost involved, it would make much more sense expanding the existing medicals schools and introducing the bonding scheme.

We are an active clinical school already with a full complement of Auckland Students. I work in Paediatrics which is a useful area for GPs to have good skills. We aim to ensure all our students feel keen about paediatrics and that they understand about the role of the GP in the care of children. We also actively sell general practice as a valid option.

Waikato DHB has under recruited SMOs to a dangerous level. They need to get their house in order before taking on a vanity project.

Unnecessary and naive.

I don't think we need another medical school. Auckland students presently train at Waikato hospital.

Is there an assurance that the Graduates will become long term rural GPs? if so, what is that assurance?

We can't accommodate the current number of students in Waikato adequately (Auckland uni students), unless the Auckland students would then go elsewhere there would be no way of providing meaningful clinical experience at Waikato hospital.

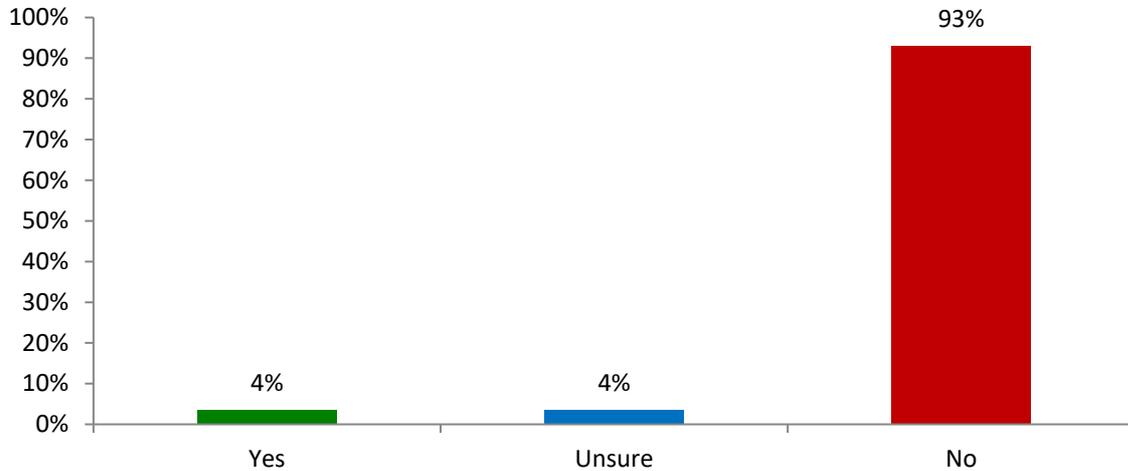
Waikato Hospital will be flooded with medical students.

My concern is that we are embarking on yet another initiative without yet addressing core inadequacies within the DHB. ED is in crisis on a daily basis, current RMO teaching is inadequate due to demands of rostering and RMO numbers and SMO numbers are inadequate to meet the growing demand from the Midland region. In addition, it is not clear why the current medical schools cannot be simply expanded to meet the need. It all strikes me as empire building at the expense of basic health care delivery to the community.

I know very little about the proposal's details but am concerned about costs to students with the current 8-year loan cap; medical coverage says this course will increase Maori participation but I'm concerned that it won't if loan issue is not addressed.

A proper clinical school in Waikato would be an excellent idea. This is half-baked idea for inadequate medical training on the cheap.

Was your opinion or advice sought in the development of the business case for the proposed Waikato medical school?



Comments from those who are supportive:

Emphatic no.

No consultation with SMOs as far as I am aware - this is very disappointing.

I would have been happy to provide any assistance if asked.

Comments from those who are neutral:

Never.

Absolutely no consultation at all.

We [our clinical unit] have been able to voice our support.

Comments from those who are opposed:

As a department, we do not believe that we were consulted with regards to the proposal. The lack of courtesy is alarming, and highlights the "narcissism", poor communication, and poor leadership of the Waikato DHB CEO Nigel Murray.

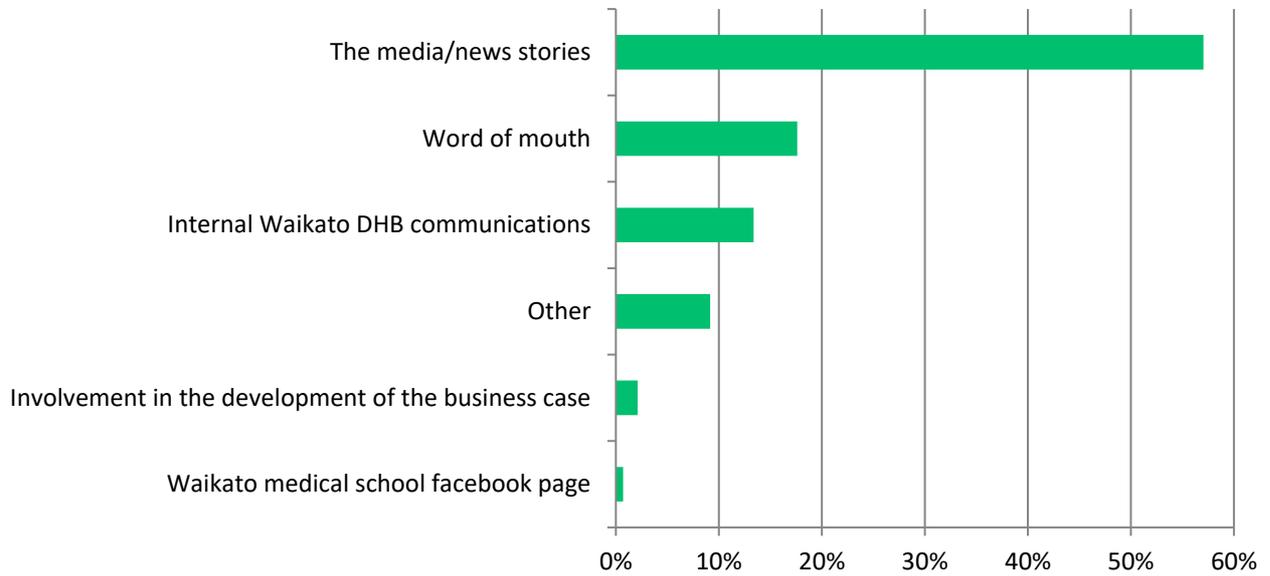
There was a grand round where the plan was presented. I could not attend and there has been no further information.

Disappointing engagement- as we as clinicians will provide teaching. Currently we have an excellent understanding of what is taught and levels of training in universities. Now we have little understanding of expectations etc.

I am a full time SMO, have not been consulted and rather cynically perhaps expect that I will be expected to teach.

Appalled at complete lack of transparency and consultation with the people that will be expected to provide bulk of clinical teaching aka the SMO group.

What has been your main source of information regarding the proposed Waikato medical school?



Other sources of information included the following:

- Grand rounds at Waikato hospital
- Presentations from and communications with Ross Lawrenson
- Direct communication with staff involved and colleagues.