MJA Careers

THE MEDICAL JOURNAL OF AUSTRALIA

Managing chaos: a career in medical administration

DO you like the sound of a medical career away from a waiting room full of patients, with regular office hours and no on-call duties? Then don't go into medical administration. "It's a 24-hour a day job", exclaims Dr Karen Owen, Chief Executive of the Royal Australasian College of Medical Administrators (RACMA).

"But it's engaging, challenging and there's plenty of variety", she adds.

The term "medical administration" is a broad one. Doctors in the

medical administration specialty can be engaged in a wide variety of roles, not just in hospitals, but in a range of organisations, such as education, pharmaceutical or technology companies; or government departments

such as health,

defence, immigration and corrections where they run health services and advise on health policy and strategy.

But the "top rung" in this speciality is a position as Executive Medical Director or Chief Medical Officer (CMO) in a large, metropolitan teaching hospital, health service or private hospital.

The job is about as diverse as can be found in medicine. As well as managing the day-to-day business of health

services for communities, medical administrators oversee multimillion-dollar budgets, manage clinical workforces, oversee clinical support services, and manage capital investments such as buildings and biomedical technologies. They must regularly liaise with multiple stakeholders including hospital boards, health departments and ministers.

A major part of their role is in dealing with medicolegal and performance issues relating to clinical services and medical staff.

Dr Michael Walsh, RACMA Board
member and Fellow, says
these can be among
the most difficult
tasks as they involve
dealing with medical
colleagues, as in the
case of a surgeon
who has been
behaving in an
unprofessional
manner in
the operating
theatre.

So good

communication and collaboration skills are essential to the role, and not just with medical colleagues but with nursing staff, the hospital CEO, the finance manager, and others in the health care team. Maturity, flexibility, and good problem-solving and people skills are essential to the role, he says.

Most senior medical administrators are medically trained and have management training. Directors of medical services

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Start 22 Feb to 28 Feb 11	\$2000pd	Rural NSW	126306
Start 14 Mar to 21 Mar 11	\$2000pd	Rural NSW	126307
PHYSICIAN			REF
Start 7 Jan to 12 Jan 11	\$2000pd	Northern NS	SW 125961
Start 28 Jan to 2 Feb 11	\$2000pd	Northern NS	SW 125962
Start 28 Jan to 4 Feb 11	\$1800pd	Western NS	W 126344
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in metropolitan hospitals are usually doctors, although they don't always have management qualifications.

Dr Walsh says a clinical background adds credibility to the person and the role and makes consultation with the medical workforce smoother. Issues relating to medical procedures and treatments are easier to address because they're familiar to someone with medical training. Medical administrators are

often former specialist doctors seeking a new challenge.

Formal medical specialty training isn't always a prerequisite for a career in the field. Some people get there after gaining experiences in various management roles

such as head of department. Others get there after gaining postgraduate qualifications in health management or public health.

But the most respected qualifications are those in medical administration offered through the RACMA, the College recognised by the Australian Medical Council to offer specialist fellowship in medical administration.

Entrants into the RACMA's fellowship training must have an MB BS degree (or equivalent) and a minimum of 3 years of medical practice experience. They must also complete a master's degree (which may be in public health or health services management or, increasingly, an MBA) during training.

Fellowship training consists of 3 years full-time training, culminating in an oral examination. Advanced candidates with

5 or more years of experience in medical management and another fellowship may do it in less, under the College's Accelerated Pathway to Fellowship program.

Those who don't wish to do the full fellowship training may become an Associate Fellow, after successfully completing a 9-month part-time course of workshops and tutorials.

Employment prospects generally are excellent. There is a widespread shortage of medical administrators, with demand particularly high in rural hospitals, says Dr Owen.

Many doctors who do the College's training programs are already employed as medical managers and are undertaking the training to acquire the formal qualification. If not, they usually have a substantive job by the time they finish training.

There is also plenty of demand for locum medical

administrators, which may suit medical administrators who are semi-retired, says Dr Owen.

And demand for medical administrators is likely to remain high as funded training places are limited.

Public sector salary is in line with experienced hospital salaried staff specialists. Remuneration packages, including super, professional development allowances and (in some states)

on-call allowances, are usually in excess of \$300,000 per annum, but may be up to half a million dollars a year in more difficult-to-fill posts in some jurisdictions. In the private sector, contracts are negotiable. But the workload can be heavy, and the hours are well in excess of 40 hours a week, says Dr Owen. It's a stressful

job requiring a full-time commitment, she adds. Usually, you have to give up your clinical practice.

Hospital directors of medical services are constantly on call, Dr Walsh says, because many of the emergencies that require their intervention take place after hours — such as an emergency operating theatre or ambulance bypass crises.

So why do it, if it takes up so much of your life? It's challenging, interesting and there's plenty of variety, says Dr Walsh. "You're exposed to a wide range of clinical and management situations, even more so than in clinical practice." Just don't expect to put your feet up.

For more information on the RACMA http://www.racma.edu.au/



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C4

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ANAESTHETIST

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NSW Coast (ref:21918)

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Call Claudine 02 8353 9020

NSW (ref: 22025) 14 January to 11 April \$2000 p/day + travel/accom. Call Claudine 02 8353 9020

O&G CONSULTANT

WA (Ref: 23497) Feb 4th for 8 wks - part time \$2200 per day worked Call **Amber 02 8353 9011**

PSYCH - GENERAL ADULT

North West TAS (Ref: 18987) 4th Jan - 15th Feb \$2000 per day + On-call rates Call **Rebecca 02 8353 9042**

PSYCH REGISTRAR

NSW (JS091210-1) 03 Jan 2011 - Ongoing \$110 per hour worked Call **Lisa 02 8353 9034**

GENERAL SURGEON

WA (Ref: 23250) From 22nd April till 8th May 11 \$2000 per day worked Call **Nicole 02 8353 9012**

PAEDIATRICIAN

WA (Ref: 23431) Various dates until May 2011 \$2000 per day worked Call Amber 02 8353 9011

PSYCH - GENERAL ADULT

South East QLD (Ref: 20660) 1st Feb - end of April Locum Rates Call **Rebecca 02 8353 9042**

ORTHO REGISTRAR

QLD (MP011210-1) 31 Jan 2011 - 25 Feb 2011 \$1400 per day worked Call **Lisa 02 8353 9034**

ORTHO SURGEON

NSW (Ref: 22015) Various dates until June 2011 \$2500 per day worked Call Nicole 02 8353 9012

FACEM RETRIEVAL SERVICES

NT (Ref: 23528) ASAP - Ongoing \$2500 per day worked Call **Amber 02 8353 9011**

OPHTHALMOLOGIST

South East NZ (Ref: 23395) ASAP - 25th Feb NZD\$1500 per day Call **Rebecca 02 8353 9042**

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QLD (JM031210-1) 07 Feb 2011 - 28 Feb 2011 \$130 per hour worked Call **Lisa 02 8353 9034**

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O&G VMO					
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Central Tablelands NS	W From	10/03/2011 To	15/03/2011	\$2,000	n/d

GENERAL MEDICINE VMO							
South Eastern QLD	From	17/01/2011	То	21/01/2011	\$2,000	p/d	
Northern NSW	From	4/02/2011	То	11/02/2011	\$2,000	p/d	
South Eastern NSW	From	14/01/2011	То	23/01/2011	\$2,500	p/d	
Northern NSW	From	28/01/2011	То	2/02/2011	\$2,000	p/d	
Country NSW	From A	ASAP	То	31/01/2011	NEG	p/d	

GENERAL SURGERY VMO							
Rural NSW	From	17/01/2011 To	30/01/2011	\$2,000	p/d		
Country VIC	From	7/01/2011 To	10/01/2011	\$1,800	p/d		
Country QLD	From	ASAP To	10/01/2011	\$2,000	p/d		

PSYCHIATRY V	/MO		
Coastal QLD	From	ASAP To 10/01/2011 \$2,000 p.	/d
Far North QLD	From	ASAP To Permanent Billings p.	/d

PAEDIATRIC VMC)				
North East NSW	From	3/01/2011 To	10/01/2011	\$2,000	p/d
South Eastern QLD	From	17/01/2011 To	21/01/2011	\$2,000	p/d
Central Coast QLD	From	ASAP To	Ongoing	\$1,983	p/d
South Eastern NSW	From	3/01/2011 To	17/01/2011	\$2,500	p/d
Mid North Coast NSW	From	14/01/2011 To	20/01/2011	\$2,000	p/d

FACEM					
South East VIC	From	January To	Ongoing	\$2,000	p/d
ACT	From	To	Ongoing	\$2,600	p/d
Central Coast NSW	From	To	Ongoing	\$247	p/d

ORTHOPAEDIC SURGEON VMO						
North West NSW	From	January To	o Ongoing	NEG	p/d	
Northern NSW	From	21/01/2011 To	o 24/01/2011	\$2,000	p/d	
Mid North Coast NSW	From	Various To	o Ongoing	\$2,200	p/d	

GP					
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North Western NSW	From	Ongoing To	1 w eek/month	Neg	p/d
North QLD	From	Various To	Ongoing % o	f Billing	s
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There are mandatory qualifications outlined in the position description on our website including either current registration or the ability to gain in a timely manner, full registration as a Medical Practitioner by The Medical Board of Australia or eligibility for such full registration. Other desirable characteristics would include:

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	4	16 Aug	02 Aug	02 Aug
	5	06 Sept	23 Aug	23 Aug
	6	20 Sep	06 Sep	06 Sept
	7	05 Oct*	20 Sep	20 Sept
	8	18 Oct	05 Oct*	05 Oct*
	9	01 Nov	18 Oct	18 Oct
	10	15 Nov	01 Nov	01 Nov
	11/12	13 Dec	29 Nov	29 Nov
2011				
	1	03 Jan	20 Dec 10	20 Dec 10
	2	17 Jan	03 Jan	03 Jan
	3	07 Feb	24 Jan	24 Jan
	4	21 Feb	07 Feb	07 Feb
	5	07 Mar	21 Feb	21 Feb
	6	21 Mar	07 Mar	07 Mar
	7	04 Apr	21 Mar	21 Mar
	8	18 Apr	04 Apr	04 Apr
	9	02 May	18 Apr	18 Apr
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