

# Supporting Colleagues in Difficulty



Reading time:  
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Healthcare practitioners are not immune to the mental health issues that face many Australians. A cocktail of long working hours and high-pressure situations means healthcare practitioners can potentially be more at risk of experiencing mental health issues. So how would you handle the challenge of dealing with a colleague in difficulty? Workplace pressures cannot be ignored and there are many signs that can help you recognise if a colleague is experiencing issues that may affect their professional lives.

## Some common things to look out for are:

- Consistent tardiness or often working long hours
- Skipping lunch breaks
- Frequently calling in 'sick'
- 'Grapevine' rumours from other staff
- History of unwell relatives/recent bereavements/divorce
- Unrealistic work load – may reflect financial pressure
- Looking tired and/or untidy
- Often appearing hungover
- Any clear shifts in behaviour
- Changes in mood/disposition eg angry, irritable, emotional
- Social withdrawal/avoiding social gatherings
- Changes in work habits

## Issues of incompetence

If you are a supervisor, you have an obligation to raise these issues in the interests of patient and public safety. Workplace performance review and constructive feedback may be necessary to ensure any major issues are addressed in a professional and timely manner.

## Remember:

- If intervention is carried out appropriately and actions managed reasonably, this is not bullying.
- Personality clashes have the potential to cause workplace conflicts, but if the supervisor remains professional, acts reasonably and focusses on improved competence this is not bullying.
- Always offer assistance and resources at these difficult times.

## Possible course of action

- Approach the practitioner and ask, 'Are you okay?'
- You may need to be respectfully persistent if response is not consistent with observed behaviour
- Encourage the colleague to seek advice from:
  - Their supervisor/senior colleagues
  - Their GP – ask if they have one
  - Hospital Employee Assistance Program (EAP)
  - MIPS clinico-legal advisers
  - AMA - members have access to the AMA's Peer Support Service
  - Their 'local' Doctors Health Advisory Program

- A range of mutual help organisations
- If a colleague is senior and unapproachable, speak to someone senior or contact MIPS regarding your concerns

## Self-reporting

In the first instance, MIPS recommends that where there are significant and/or persistent/ long standing and material issues that members self-report to AHPRA, so they can get in first where possible. Boards generally consider that a self-reporting practitioner shows considerable insight and in MIPS' experience this may prevent 'immediate action'.

Immediate action doesn't always lead to punitive sanctions. The main aim of the Immediate Action Committee is to ensure the public is protected and there is a reduction of risk to the community and worsening of consequences for the practitioner.

## Cause for concern

In extreme cases where you believe patient safety is at risk, consider your mandatory notification requirements. [The Australasian Doctors' Health Network](#) sets these out as:

## Notifiable conduct

1. practised the practitioner's profession while intoxicated by alcohol or drugs; or
2. engaged in sexual misconduct in connection with the practice of the practitioner's profession; or
3. placed the public at risk of substantial harm in the practitioner's practice of the profession because the practitioner has an impairment; or
4. placed the public at risk of harm because the practitioner has practised the profession in a way that constitutes a significant departure from accepted professional standards.

## Regulator's code

The theme of taking care of yourself and practising only when competent is thoroughly canvassed by AHPRA and your Registration Boards in your code of conduct and your conduct will be judged against this code. Always remember that ignorance of the code is not a defence.

## AHPRA's Code of Conduct

AHPRA assists the medical dental and other health boards in their role of protecting the public by setting and maintaining standards.

## AHPRA Code - 11 Ensuring your health

11.2 Your health. Good medical practice involves:

11.2.1 Having a GP

11.2.2 Seek independent, objective, medical advice

11.3 Doctors have a responsibility to assist medical colleagues to maintain good health

Don't self-diagnose or self-prescribe (or to friends/family) ie Just don't do it!

11.3 Other practitioners' health

Practitioners have a responsibility to assist their colleagues to maintain good health. When treating a fellow practitioner, you must exercise the same quality of care you provide other patients. It is your professional and statutory responsibility to notify the relevant boards if you are aware that your patient may be impaired and may be placing patients at risk. If you become aware of a colleague whom you are not treating who may be ill or impaired, encourage them to seek help and consider notifying their relevant board, employer or Doctor's Health Advisory Service (DHAS). If you are in a position to facilitate safe working hours, recognise the impact of fatigue on colleagues and assist where possible.

"Healthy doctors, healthy patients" or indeed "healthy doctors better medicine" are well-known sayings in the medical profession whereas as the term "Physician, heal thyself", which has been around since the ancient Greeks must no longer be taken literally. It is important to know your limits when it comes to your own health and ensure you are at the top of your game when treating your patients.

All healthcare practitioners need to be well themselves to be able to provide high-quality healthcare to their patients and the community and to experience medicine as a rewarding and satisfying career. Research shows that doctors with good personal health practices are more likely to talk positively to their patients and pass on healthy behaviours.

## Mandatory reporting

The question we often get asked at MIPS is should the notification come from the hospital, someone else or you personally?

If the hospital or someone else has already made a notification, then the onus may not fall on you. However, we urge you to check your local protocols and make sure you are careful and certain as this is a serious matter. As always, our advice is that you first get advice about this from MIPS.

For more information, you can contact MIPS 24hr Clinico-Legal Support on 1800 061 113

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