

Bonded Medical Schemes:

What do students think?



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INTRODUCTION

The Medical Rural Bonded Scholarship (MRBS) and Bonded Medical Place (BMP) schemes, commenced in 2001 and 2004 respectively, have recently been in the spotlight with regards to their efficacy in addressing rural health workforce shortages. The 'Review of Australian Government Health Workforce Programs' (2013)¹ and the Grattan Institute's 'Access All Areas' report (2013)² both cited anecdotal evidence that bonded students are not intending to fulfill their Return of Service Obligations (RSO).

Due to the significant time between commencing medical studies and obtaining fellowship, only small numbers of BMP and MRBS recipients have commenced their RSO at present.² However, despite the claims made in previous reports, there has been no published research on students' attitudes towards the schemes or on bonded students' intentions regarding their RSO.

WHAT ARE THE MEDICAL RURAL BONDED SCHOLARSHIP (MRBS) AND BONDED MEDICAL PLACE (BMP) SCHEMES?

Students accepting an MRBS receive approximately \$25,000 per annum for the duration of their medical degree in return for completing a 6 year RSO (subject to scaling) in an RA2-5 location after obtaining fellowship.

Students accepting a BMP must agree to complete an RSO in a District of Workforce Shortage of their choice for a period equal to the length of their medical degree, with up to half of the RSO being undertaken during prevocational and vocational training.

METHODS



Multiple logistic regression was used to explore the factors affecting bonded medical students' support for the BMP and MRBS schemes. Levels of support were compared between bonded and non-bonded medical students using chi-squared analysis.

ABOUT THE NRHSN

The National Rural Health Student Network (NRHSN) represents the future of rural health in Australia. It has more than 9,000 members who belong to 28 university Rural Health Clubs from all states and territories.

It is Australia's only multi-disciplinary student health network, bringing together people studying medicine, nursing and allied health, encouraging them to pursue rural health careers.

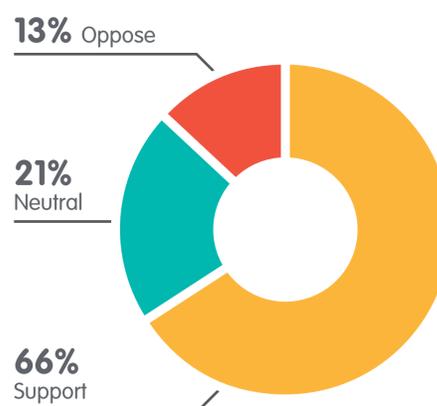
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- Mason J. 2013. Review of Australian Government Health Workforce Programs, Commonwealth of Australia, Department of Health and Ageing, Canberra.
- Duckett S, Bredon P & Ginnivan L. 2013. Access all areas: New solutions for GP shortages in rural Australia, Grattan Institute, Melbourne.

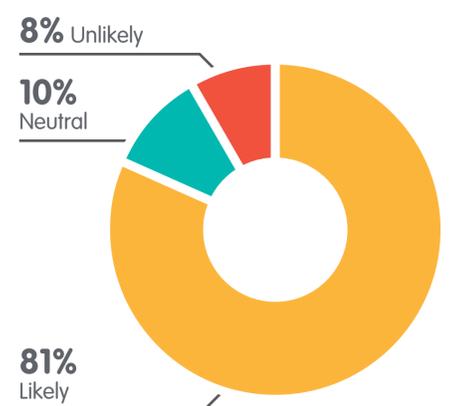
RESULTS

- No difference in support for the schemes between bonded and non-bonded medical students ($p=0.468$)
- There was a statistically significant difference in opposition to the schemes between BMP students (27%) and MRBS students (6%) ($p=0.004$)
- Increasing opposition with increasing year of study amongst bonded students (odds ratio 1.33 [95% CI 1.07-1.67]; $p=0.012$)
- 72% of nursing and allied health students in favour of similar schemes for non-medical students

Support for BMP / MRBS (All respondents, n=793)



Likelihood to complete RSO (Bonded students, n=302)



CONCLUSIONS

- Broad support for bonded medical schemes amongst NRHSN members
- Majority of bonded medical students intend to complete their RSO
- Merit in investigating potential for similar schemes for nursing and allied health students
- Future program monitoring could review where doctors are completing their RSO