

**THE LEGISLATIVE COUNCIL SELECT COMMITTEE ON REGISTRATION OF OVERSEAS-TRAINED MEDICAL PRACTITIONERS MET IN THE CONFERENCE ROOM, GOVERNMENT OFFICES, 68 ROOKE MALL, DEVONPORT.**

**Mrs JENNIFER ANNE GILBERT** WAS CALLED, MADE THE STATUTORY DECLARATION AND WAS EXAMINED.

**CHAIRMAN** (Mr Wilkinson) - Jenny, I know your full name has just been given but for the sake of the committee can you give it again, please, and your address and the capacity in which you are before us.

**Mrs GILBERT** - Jennifer Anne Gilbert, 57 Wilmot Street, Port Sorell, and I am here in the capacity that I have been working in the health region for 23 years, but I am solely here because Dr Iastrebov looked after my father.

**CHAIRMAN** - In summary, if I can help - please give your evidence as you feel most comfortable and it is informal so do not feel nervous in any way - we have had a number of people come before us and we have also spoken with a number of people when the bill first came before the Legislative Council to say what a good operator and specialist Dr Iastrebov is. A number of those people have said, 'Look, because of his expertise and because of the way that he treated certain people he should be registered'. So if that assists, we already accept that. What we are looking at are ways of allowing Dr Iastrebov and people in his same situation to remain in the areas that they are in and to give the good service that they have been giving for extended periods other than its conditional period of two years and we are looking at ways that that can occur.

The Medical Council are saying, 'You have to sit the exam', it would seem, 'otherwise you are not going to be a specialist and you have to move on after your registration period has expired' and we are looking at ways of allowing people to remain in the area to continue with their good work. So if you can give us any good conclusions to that we would love to hear them.

**Mrs GILBERT** - I have absolutely no doubt in my mind that he is more than capable of filling that position at Latrobe. Through my father, through work colleagues, through any patient that has been through there - I am talking so critical the condition that in normal circumstances they would not survive - dad would not have survived as long as he did without him, there is no doubt.

**CHAIRMAN** - What happened to your father?

**Mrs GILBERT** - He actually was ventilated for twenty days - he had lung problems, he had a burst caecum. Initially we were transferred to Launceston, mainly because no one here had the qualifications or the know how or experience and expertise to bring him through it.

**CHAIRMAN** - When he was transferred to Launceston, what pressures did that place on the family?

**Mrs GILBERT** - Shocking, because I came from Burnie then and every other day - I mean, I have a husband and two children, I am one of five and mum - this is my mother sitting behind me - did not drive which meant that we were backwards and forwards. One of us would want to be there with mum the whole time. We were not sure whether dad was going to make it from one minute to the next.

He survived Launceston then to come back home. We had other complications which we were very nervous about because it was an aneurism which meant that it was going to grow, which meant we had to make that decision again where to go to, whether he would survive that. Dad was so fed up by this

whole experience of having to go from pillar to post. He did not like being in hospital which put a lot of pressure on everyone.

Mr Lamont at Latrobe, in his initial surgery, had saved him when he was a locum here from Sydney. Since then Mr Lamont has decided to stay. Mr Lamont got him through that first horrendous emergency critical care, and then when it came to the second operation it was even more crucial because it was an aneurism which is life and death. You die or - I mean, how can I put it? - it is like your whole life depends on this one doctor, every breath he takes is an anaesthetist and dad decided to go to Latrobe. We were very nervous about it, very nervous, because we had been through it. I had previously helped look after my father-in-law. It is ten years now looking after two critically ill people. We had done the same for my husband's father.

**CHAIRMAN** - Where did your mother and father come from, from Burnie as well?

**Mrs GILBERT** - From Devonport.

**CHAIRMAN** - So that is why he went to Latrobe as opposed to Burnie?

**Mrs GILBERT** - Yes, and by that time I had moved over here in my job because it was too difficult for us as a family - we had a shack at Port Sorell - to be running backwards and forwards to two fathers in a time when we had to be there.

**Mr SQUIBB** - So your father-in-law was at Latrobe as well?

**Mrs GILBERT** - He was at Latrobe and Launceston, and back to Latrobe and Launceston because there was no one there at that time.

**CHAIRMAN** - Do you think that members of Parliament who have not got the expertise in the medical field - some say have not got expertise anywhere - but have not got expertise in the medical field, to be involved in registering a doctor because what might occur is - and this is a worse case scenario - as members of Parliament have not got the expertise they might register somebody that they later find out is not a specialist in that field.

**Mrs GILBERT** - That is right. You have to experience from a bed level, you have to be there nearly 24 hours a day with a ventilator patient like my father to experience the care that is involved. They do not even have the strength to wipe dribble from their chin, they are hopeless. They are so helpless that without somebody like Dr Iastrebov there. The trouble is the people that are making these decisions for our little community like Latrobe and around here, they live in Melbourne, Canberra and Hobart. They have no idea what it means to have to travel for sick patients.

**CHAIRMAN** - A lot of people say the Mutual Recognition Act has not worked because all that happens is that people come down here and then they get sucked into Sydney or Melbourne or the bigger cities, and therefore they leave Tasmania without the doctors that they should have.

**Mrs GILBERT** - From my personal position, I feel that without him at Latrobe I can see us in the future returning to Launceston. We have excellent doctors here but when you come across someone with exceptional values and will fight for anybody - I mean, there have been cases where he has helped people out so much that it is just unbelievable. And people that have not been there have no idea, no idea at all and our health above everything else is really important to us - without that none of us have anything.

**CHAIRMAN** - Except that.

**Mrs GILBERT** - Yes, except that - and I feel that he deserves to be here. He has proven beyond doubt to our family, to other patients, to everybody.

**Mr LOONE** - Would it be your opinion that in a case like Dr Iastrebov where - and I am only using him as an example because this is not all about Dr Iastrebov, this is about the registration of overseas-trained doctors - that in a case like Latrobe or Burnie or any isolated area that cannot retain or get an

Australian-trained specialist, that those areas be given special consideration? And that it be a registration that restricts him only to practising in that given area for a given time, rather than having a fully qualified specialist, or sending him on a temporary basis for twelve months or two years until they, hopefully, get an Australian-trained specialist?

In a case like Dr Iastrebov where you have someone who is a specialist and wants to stay, he cannot meet the full registration qualifications but he be given a regional registration so that he can remain here of an extended period, do you think that is the way to go?

**Mrs GILBERT** - I think they have to be treated - it is a personal thing medicine. Some doctors - I mean, I am talking overall everything - I would be hesitant to register like anyone. If you do not know them personally or do not know how they operate you are not going to back people that you do not really know - I mean, like any one of us would not. In my case I have no doubts and I think it is unfair for someone like this who wants to be here, would like to settle here, is doing a wonderful job at Latrobe - I mean, you cannot really -

**CHAIRMAN** - What has happened already - if I can cut in and I think what Mr Loone is saying is, and I am not saying at all that Dr Iastrebov will not stay here - but what can easily happen is like what happened to Dr Kehilia on the west coast. He came before the Legislative Council a couple of years ago and said, 'He loves it on the west coast, he's never going to leave, he has his family here, he has set up a hospital, he's done terrific work around there, the community needs him'. He became emotional and then he got his full registration and he was off. So what we are saying is you do not want to open the floodgates for that to happen and you want to retain those people in the areas that they undertake and promise that they will never leave because they are enjoying it so much and they are offering such a good service, you want to retain them in those areas otherwise you do glut the market.

**Mrs GILBERT** - I can just show you this is three years of struggle to get someone like him to stay here and he wants to stay. I cannot see why somebody cannot make some sort of decision. It is unbelievable what is in here - things like this, one man's fight to serve his patients. It is unbelievable the public support that I have in here - paper things. Why would so many people back such a person if he was not what we want him to be.

**CHAIRMAN** - You are just one of a number of people who have spoken in glowing terms about him.

**Mrs GILBERT** - My original letter was to Mr Rundle. I did not expect anything like this to come of it and it just snowballed from there. My personal experience is solely for Dr Iastrebov because of dad and I cannot speak highly enough of him and I have been in health for 23 years myself.

**CHAIRMAN** - When you say that you have been in health -

**Mrs GILBERT** - Everywhere. I have worked in hospitals starting as a nurses aide. I have worked as a nurse, I have worked for a cardiac physician from Launceston who was based in Burnie at the private hospital. I have been around long enough to know the difference.

**CHAIRMAN** - Thank you very much. Thank you for your interest and thank you for coming along and putting your presentation to us.

**Mr SQUIBB** - Just one question, because this inquiry is about overseas-trained doctors and many of them of course come from non-English speaking backgrounds and we have heard from previous witnesses how important it is that the doctor is able to communicate with patients, I am just interested in your comments regarding the ability of overseas-trained doctors to be able to communicate with their patients. And in particular, I suppose Dr Iastrebov, who I think most of us are aware has a fairly good command of the English language.

**Mrs GILBERT** - Yes, a very good command of the English language and I do not think his background should be held against him.

**Mr SQUIBB** - What I am asking is, did you or your family have any difficulty in communicating with an overseas-trained doctor and did you find his bedside manner, for instance, any different to those

who were trained locally?

**Mrs GILBERT** - Truthfully, I can say, the difference was Dr Iastrebov spoke to us every day, sometimes twice a day, and he made the effort. For ten years between Launceston, Latrobe and Launceston - when you have somebody on a ventilator you need to speak to who is in charge at least that amount of times a day, because you are sitting there in this little, dark, pokey waiting room waiting to hear whether he has survived or not and he came out, he spoke to us, filled us in on every little step that was going to happen through the day and it was only through him that we survived that time in that room. It was awful.

**CHAIRMAN** - Thank you very much.

**THE WITNESS WITHDREW.**