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Year 5 Elective Placement Report

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I undertook my elective placement at the Royal Melbourne Hospital in Australia. I was working with the oral and maxillofacial surgery department under the supervision of one of the consultants specialising in reconstructive surgery for head and neck cancer patients, Mr Wong. I have a strong interest in this particular field, as prior to commencing my medical degree I worked as a nurse at St. Barts Hospital on the ENT and Maxillofacial Surgery ward and regularly looked after patients undergoing reconstructive surgery for the treatment of their oral cancer. I also completed my SSC at the Royal London in October last year in the same area, and was therefore eager to complete an elective in oral and maxillofacial surgery abroad to see how things differ between there and the UK.

I chose to undertake my elective in Australia, as I really wanted the chance to work within a unit in a developed country like the UK so that I could have the opportunity to compare and contrast how the treatment of head and neck cancer patients differs. I also chose to go to Australia as although a large percentage of the population live along the coastal areas, there is a rural population living far from any towns or cities in the middle of the country. These people have a really difficult time getting access to healthcare as they live so far from anywhere. There are also relatively few specialised centres that can care for patients with head and neck cancers so hospitals in major cities such as Melbourne are tertiary referral centres and can see very complex cases. Due to poor access to healthcare in remote rural areas I wondered if perhaps there would be more advanced cancer

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never seen so it was very interesting to learn about something completely different. I feel very privileged to have been able to see all of these different aspects of maxillofacial surgery and really enjoyed my time in this department.

Another objective of my elective placement was to find out more about the delivery of healthcare in Australia.

In Australia, there is a mix between the private and state sector. All taxpayers pay 1.5% tax, or 2.5% tax if they are higher earners to 'Medicare', the state system. Medicare will cover everyone for 100% of an inpatient stay and roughly around 75% of primary care charges. Most people have private 'top up' insurance to cover the shortfall. Medication is also more expensive in Australia with prescriptions costing roughly £24. Private healthcare does seem to be a lot more common in Australia, however. From speaking both to staff and patients I ascertained that approximately 60% have private health insurance and use it, as in the state sector there can be very long waiting lists for simple procedures, so many people use their private insurance as a way of moving up the list more quickly. Fees for dentistry and optometry are not covered by Medicare, and neither are ambulance fees, which also may encourage people further to have private insurance. All in all, the healthcare system in Australia seems to work well by mixing both private and state funded care and nearly every patient I spoke to about this was very happy with the care that they had received.

Overall, I really enjoyed my time in the oral and maxillofacial surgery department at the Royal Melbourne Hospital and had some great experiences. I learned a lot about a really interesting field and was lucky to assist in so many surgeries. It was also fantastic to experience healthcare in another country and to compare it to back home. The whole experience has made me definitely consider working abroad for a while, perhaps after FY2, which is something I had never thought about before. I would definitely recommend visiting Australia to other students planning electives.