



Australian Government
Department of Health and Ageing

Executive Officer
Medical, AHPRA
GPO Box 9958
MELBOURNE 3001

Medical Board of Australia (MBA): Proposed registration standard for granting general registration as a medical practitioner to Australian and New Zealand medical graduates on completion of intern training.

Thank you for providing the opportunity to comment on the Medical Board of Australia's proposed registration standard. Medical education and training in Australia is rated highly by international standards and maintaining these standards is important to the Australian Government.

The proposed standard has been considered by the Department of Health and Ageing and the Department welcomes, in particular, the potential for a broader range of appropriately accredited settings to be used for intern training and explicit recognition of part-time internships.

The opportunity for junior doctors to train in high quality accredited training posts outside of major metropolitan teaching hospitals is likely to assist with facilitating a more equitable distribution of Australia's health workforce. Specific comments on the proposed standard are attached.

If you require any further information, please contact Mr Tony Hyland, Director, Medical Training Policy Section, Health Workforce Policy, Data and Analysis Branch

Yours sincerely

A handwritten signature in cursive script, appearing to read 'Ros Bauer'.

Ros Bauer
Acting Assistant Secretary
Health Workforce Policy, Data and Analysis Branch
Health Workforce Division
12 September 2011



Australian Government

Department of Health and Ageing

Department of Health and Ageing response to the Medical Board of Australia *"Proposed registration standard for granting general registration as a medical practitioner to Australian and New Zealand medical graduates on completion of intern training"*.

The Australian Government Department of Health and Ageing ("Department") is committed to the vision of better health and active ageing for all Australians through a world class system. The education and training of our doctors is integral to this vision and it is important that the standard for general registration as a medical practitioner takes into consideration the important priorities of patient safety and the interests of the trainees whilst addressing the need to maintain quality and improve efficiency in the intern training year.

General Comments

The Department supports the move to a national standard for medical internship to improve national consistency in the intern year and increased flexibility in training to address workforce needs.

Whilst being supportive of increasing the range of settings where intern training can occur, this needs to be managed carefully to ensure capital and human resources are used effectively and efficiently as the health system undergoes reform and during a time of increasing financial constraints.

The proposed standard may have implications for programs managed by the Department such as the Prevocational General Practitioner Practice Program (PGPPP) which is available to junior doctors including interns and offers well supervised and educational general practice placements of varying duration approximately of 10-12 weeks. The Departments response suggests careful consideration of expansion to meet a number of challenges.

Specific Comments

Comments relating to the six main areas of the proposed registration standard are as follows:

1. Scope of application

The scope of application is supported.

2. Requirements

GENERAL REQUIREMENTS

The General requirements are supported.

SPECIFIC REQUIREMENTS

1. The requirement for evidence of completion of at least 47 weeks equivalent full-time experience as an intern is supported.
2. The Department has a number of comments in regards to the evidence of satisfactory performance under supervision as set out in the standard:

- It is not clear in the supporting information or the proposed standard why emergency medical care requires a term of at least eight weeks whilst medicine and surgery require at least ten weeks. The reasons for emergency medical care terms to be of a different duration to medicine and surgery are not apparent. This would appear also to potentially restrict flexibility of annual leave arrangements, preventing this from happening during the designated “medical” or “surgical” term if the intern is in a jurisdiction running a five term year.
 - The change from “emergency medicine” to “emergency medical care” will require careful development of guidelines on requirements to ensure the comparability of settings and experience aligns closely with those available in emergency departments under the supervision of emergency medical clinicians. The term in “emergency medical care” is often one of the few areas in a hospital where an intern is able to fully practice their diagnostic and investigation skills.
 - The actual capacity within the system for alternative settings to provide the required term of emergency medical care is unknown. The Department has some concerns around the potential increase in supervisory loads and accreditation burden to organisations with responsibility for accreditation of intern training posts. Careful management of expansion will be required particularly to ensure patient safety and the interests of the trainee are protected.
 - The proposed standard notes guidelines on requirements are being developed for alternative settings and the Department will consider these once they are released for consultation.
 - The move away from general medicine and general surgery for terms in “Medicine” and “Surgery” is supported and will now match up with what is the reality for most interns.
3. The requirement for written confirmation that the applicant has met the specific requirements is supported.

SPECIFIC CIRCUMSTANCES

3. Part-time internship

The explicit recognition of part-time internship is supported.

4. Location

The proposal to allow consideration of internships completed in full or part outside of Australia by graduates of approved Australian or New Zealand medical schools, with appropriate mechanisms in place, is supported. Any mechanism must ensure consideration is only given to applicants who have worked in an offshore medical facility accredited to the Australian standard where clinical experience is equivalent to that in Australia. It would be helpful to have further information when it is available regarding how clinical experience would be prospectively approved and how accreditation of offshore medical facilities to the Australian standard would be facilitated.

5. Required experience not completed

The Department supports the Board considering applications for renewal of provisional registration.

6. Exceptional Circumstances

The standard does not make it clear what the purpose of considering exceptional circumstances is nor does it make clear whether it is the Board that will consider an application or whether this will be carried out by another body. Further clarification on the intent of this particular standard is required.