

Dr Joanna Flynn  
Chair  
Medical Board of Australia  
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Dear Dr Flynn

### Standard for Intern training

Thank you for the opportunity to provide comments on the *Proposed registration standard for granting general registration as a medical practitioner to Australian and New Zealand medical graduates on completion of intern training*. The implementation of the National Registration and Accreditation Scheme has provided a timely opportunity to examine the requirements for completion of internship. While the current arrangements have worked well to date this is an appropriate time to critically examine the strengths and weaknesses of the current approach and to develop a process that will ensure that new graduates completing their internship are able to work appropriately in our healthcare settings.

The draft standard in adopting the current requirements for interns to obtain general registration reflects a status quo approach. It would be appreciated if further information could be provided as to the rationale for continuing with the current mandatory term-based requirements. It would also be useful to understand if the pre-registration requirements in other similar jurisdictions, such as the United Kingdom and New Zealand, were considered in developing the registration standard.

The NSW Department of Health believes that there is merit in exploring a competency based approach or at least a hybrid competency /time based approach for interns to meet general registration requirements. This approach, it is believed, could provide greater flexibility and support capacity building to accommodate the increasing number of medical graduates entering the workforce and requiring completion of internship to be eligible for general registration. The requirement for interns to complete specific rotations rather than achieve specific competencies or training outcomes has the potential to create bottlenecks and may limit the number and location of suitable intern positions that can be provided in the future.

Specific comments on the draft registration standard are at **Attachment A**.

Should you require further information please contact Dr Linda MacPherson, Medical Adviser Workforce Development and Innovation

Yours sincerely



Karen Crawshaw  
**Deputy Director-General**  
**Health System Support**

## General requirements

It is noted that under general requirements the applicant is required to provide details of registration history and certificates of good standing/registration status from each registration authority with which the applicant has been registered in the last ten years. Given that this standard is applicable to Australian and New Zealand medical graduates completing intern training it is unlikely that they will have been registered as a medical practitioner in another jurisdiction in the preceding ten years. A clarification about this requirement is requested- does it refer to any other health professional registrations that the applicant may have held before becoming a doctor.

## Specific requirements

### Mandatory rotations in medicine, surgery and emergency medical care

It is important to critically examine the reasons for specifying mandatory rotations and to identify what are the unique competencies that are obtained in the mandatory rotations compared to other possible terms that the intern could undertake. In comparable countries such as the United Kingdom and New Zealand the requirements of the pre-registration year are different. The United Kingdom does not specify mandatory terms or rotations but competencies that must be met. As previously noted consideration of competencies or a hybrid competencies/time based approach in determining if an intern has completed requirements for general registration rather than completion of mandatory terms is supported. Requiring completion of mandatory terms limits the intern experiences to basically three specialities in acute settings and does not fully reflect the practice settings in which healthcare is delivered or the full range of specialities available.

It is acknowledged that there is currently strong support from stakeholders for interns to undertake a mandatory Emergency Medicine rotation and that this reflects current requirements. However, it is also recognised that providing an Emergency Medicine rotation for all interns is becoming challenging and has the potential to cause bottlenecks. Given that Emergency Medicine is not a mandatory requirement in other countries it is important to critically examine what are the reasons for requiring a mandatory rotation in Emergency Medicine and if the competencies associated with Emergency Medicine could be provided and assessed in other settings.

The Department has sought feedback from health services about the proposed draft standards. The comments received about the proposed changes to Emergency Medicine to Emergency Medicine Care have been variable -with some supporting the change and others indicating that they do not believe a general practice term with some emergency medicine exposure is a substitute for an Emergency Medicine term.

However, even where there is support for an emergency medicine care term reservations have been expressed concerning the ability of providing appropriate supervision by experienced general practitioners to interns in these settings. One Rural Local Health District indicated that they currently rely on short term locum staff at procedural sites to maintain staffing levels in order to keep Emergency Medicine Departments functioning at the required levels and therefore it would be difficult to meet intern supervision requirements at these sites. Until the requirements for this hybrid term are clearly outlined it is difficult to identify how many, if any general practice terms could meet this requirement in NSW. The feedback so far is that there would be limited opportunities for establishing emergency medicine care terms in NSW and therefore it would probably result in minimal overall increase in the emergency medicine term capacity for interns, at least in the short to medium term. It is important that further detail is provided as to the number of hours per day/week or term that an intern undertaking a general practice term would need to spend in the hospital emergency department to meet the requirements of the emergency medicine care term.

The reduction in the length of time required in ED to 8 weeks compared to 10 weeks for surgery and medicine will not substantially change emergency medicine term capacity for interns in NSW. It is noted that interns are required to complete 10 weeks of medicine and 10 weeks of surgery. Therefore to manage interns across the system all terms will need to be a minimum of ten weeks in length, irrespective of what specific rotation the intern may be undertaking. Moving interns out of ED after 8 weeks and into another placement for 2-3 weeks is not practical and reported to be disruptive to both the unit and the individual doctor. Shorter rotations can prevent trainees from fully integrating with the team they are working.

While the move away from general medicine and general surgery is welcome it is important to specifically identify the competencies that trainees are required to obtain during these terms to ensure the rotations they undertake are appropriate. Concerns have been raised that some sub speciality terms in medicine and surgery may not provide the appropriate type of experience for interns. Rather than providing a broad description of the terms the Australian Curriculum Framework for Junior Doctors could be used as the basis for competencies that the intern needs to obtain and these could be mapped against the terms.

### **Confirmation that the applicant has met the requirements for general registration**

The draft standard states that written confirmation that the applicant has met the requirements for general registration will be obtained by satisfactory term supervisor reports and an overall satisfactory rating awarded by the Director of Training/ Director Medical Services or other authorised person. It is unclear whether this means that term supervisor reports must be submitted to the Medical Board of Australia (MBA) as well as the advice from the Director of Medical Services about satisfactory completion or whether term supervisor reports are to be completed but not submitted and instead used to inform the decision made by the Director of Training/Director Medical Services.

The submission of satisfactory term supervisor reports for graduates of Australian and New Zealand universities completing internship had not been a requirement of the NSW Medical Board. Confirmation of satisfactory completion of internships has been through the submission of a Certificate of Hospital service completed by the Director of Medical Services or Director of Training to the Medical Board. The submission of term supervisor reports in addition to a Certificate of Hospital Service is not supported and clarification of the requirements would be appreciated.

It is noted that the requirements outlined in the draft standard are similar to those outlined in the registration standard *Granting general registration to medical practitioners in the standard pathway who hold an AMC Certificate* however the wording is not identical. The Department supports consistency of terminology and requirements for AMC graduates and local graduates applying for general registration where appropriate. The Standard for AMC graduates states that specific requirements include a letter of recommendation for general registration from the Director of Training/ Director of Medical Services on the satisfactory completion of supervised practice however for local graduates the Director of Training/ Director of Medical services is required to provide an overall satisfactory rating on the satisfactory completion of the internship but is not required to make a recommendation concerning general registration.

### **Specific circumstances**

#### **Part time internship**

Part time internships are available in NSW. Some feedback received indicates that it is beneficial for the intern if they are required to complete at least one term on a fulltime basis.

#### **Location**

The draft standard indicates that there may be specific circumstances in which graduates of Australian and New Zealand medical schools may be able to complete some or all of their internship outside of Australia. This is a significant change from current practice and requires careful consideration.

It is noted that currently medical practitioners from Competent Authorities are required to work under supervision for 12 months to be eligible for the AMC Certificate and then apply for general registration. It is understood that the requirement for supervised practice is to ensure that doctors from Competent Authority countries are familiar with the Australian healthcare system. Australian Medical Council

graduates are also required to complete 47 weeks of supervised practice to be eligible for general registration. It is recognised that it is important to have a process in place to ensure that medical practitioners are familiar with and able to work appropriately in the Australian healthcare setting.

If interns are able to complete an internship in part or fully overseas this is not consistent with the current requirements for International Medical Graduates who are required to complete 12 months supervised practice in an Australian healthcare setting. It is recognised that undertaking clinical placements in the Australian healthcare setting as medical students may decrease the time an intern requires to become familiar with their role as a medical practitioner in the Australian healthcare setting, however further review and information is required before the appropriateness of overseas internships can be determined. The role and responsibilities of a student are different to that of practising medical practitioners and it is noted that medical students are not granted general registration immediately after completing medical school. Interns need time to work in a supervised environment consolidate their knowledge and experiences of working in an Australian healthcare setting.

Any changes to internship requirements would also require a review of the requirements for International Medical Graduates to ensure a consistent approach. This would need to consider the purpose and length of the period of supervised training required by IMGS.

It may need to be considered whether graduates of Australian and New Zealand medical schools completing an internship overseas would require a further period of internship or supervised practice in Australia before being granted general registration to ensure that they are familiar with the Australian healthcare environment.

While outside of the scope of the registration standard it is recognised that there could be significant cost implications associated with accrediting overseas training facilities for internship. There are also significant operational issues that would need to be addressed if interns were to rotate overseas including costs of travel and accommodation, salary and other conditions in overseas countries.

### **Required experience not completed**

It is recognised that some interns may not complete all of the specific requirements within the anticipated period of time (12 months for full time internship, two years part time) and therefore the ability to apply for renewal of provisional registration is supported. However, it is important that the Medical Board of Australia takes a proactive role in determining the maximum period of time that provisional registration may be extended. The decision to renew registration or extend provisional registration should be made by the Board and should not be dependent on whether the registrant is able to obtain a suitable intern position.

The Department is aware of past examples where an applicant who has not completed their intern training requirements in the required time and has been terminated from their intern position is advised by the registration authority that they can regain registration if they can find a suitable position. These candidates have struggled to find a suitable position but continue to hold out hope that they can regain registration. If they are eligible for registration it should be granted irrespective of having a position or not and if they are not eligible for further registration they should be advised accordingly. It appears that in some past cases that the Board may have relied on an employment decision to determine a registration decision.