



## Communiqué

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### Medical Board of Australia meeting: 18 April 2012

The Medical Board of Australia (the Board) is established under the *Health Practitioner Regulation National Law Act* (the National Law) as in force in each state and territory.

#### **Social media policy**

The Board provided input into a draft policy on social media which will be released shortly for public consultation. The policy is consistent with the advice provided by the Board in the Medical Board Update, Issue 2 (the Board's newsletter) and it confirms that health practitioners must abide by the relevant laws and their Board's codes and guidelines when they use social media.

The policy includes advice that when using social media, registered medical practitioners should comply with the National Law, "Good Medical Practice: A code of conduct for doctors in Australia" and the Board's advertising guidelines. In particular, practitioners are advised:

- To meet their professional obligations
- To ensure that they do not breach their patient's confidentiality or privacy
- To present information in an unbiased, evidence informed context and not make unsubstantiated claims and
- Not use testimonials or purported testimonials.

The Board will invite feedback on the draft policy when it is released on behalf of all Boards.

#### **All Boards consult on international criminal history checks**

The National Law requires that before making a decision about an application for registration, National Boards must check the applicant's criminal history. For the purposes of checking an applicant's criminal history, the National Board may obtain a written report about the criminal history of the applicant from any of the following—

- a. CrimTrac
- b. a police commissioner
- c. an entity in a jurisdiction outside Australia that has access to records about the criminal history of persons in that jurisdiction.

The National Law defines criminal history as:

- a. every conviction of the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law
- b. every plea of guilty or finding of guilt by a court of the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law and whether or not a conviction is recorded for the offence

- c. every charge made against the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law.

The National Law requires that the Board consider criminal history from jurisdictions outside of Australia. The current approach of the Board and AHPRA to checking criminal histories involves:

1. Seeking an Australian criminal history through CrimTrac and
2. Requiring the applicant to sign a declaration on the application form disclosing their criminal history in all countries including Australia.

When a criminal history is disclosed, further investigations are made and the criminal history is assessed according to the relevant Board's Criminal History Registration Standard.

To balance the requirements for public protection with the need for responsive and timely application and assessment processes for health practitioners seeking registration in Australia, National Boards and AHPRA have been considering possible options to refine the mechanisms for international criminal history checks.

A consultation paper will be released shortly which explores the issues associated with a range of options and will seek feedback on the best approach.

The consultation paper acknowledges that the options and issues are complex. The scope and content of criminal history documentation is likely to vary across countries. In addition, different approaches to the criminal law and varying political environments may mean that it may be difficult to determine the accuracy of an international criminal history, or the weight to be assigned to a particular offence.

Four options have been included in the paper. These are:

1. Applicant declaration only – no additional evidence of criminal history is required, sought or obtained from jurisdictions outside Australia. This is the current approach.
2. Applicant provides criminal history clearance evidence with application
3. AHPRA obtains clearance/information from jurisdictions outside Australia when processing applications
4. Applicant makes a declaration and AHPRA undertakes random sample audit

The Board welcomes feedback from all stakeholders during the consultation.

### **Specialist registration and A1 Medicare rebates**

Some medical practitioners who are currently eligible to bill A1 Medicare items but who are not qualified for specialist registration have expressed concern that the Board and/or AHPRA will affect their eligibility to bill these items in future as they will not be on the specialists register.

The Board and AHPRA have released a statement that confirms who is eligible for specialist registration and to confirm that eligibility to bill items under Medicare is determined by legislation and regulations administered by the Department of Health and Ageing (DoHA) and the Department of Human Services (DHS).

DoHA has confirmed that the introduction of the Specialist Register does not change current eligibility to access the MBS. Practitioners who are not included on the Specialist Register but who are currently eligible to bill A1 items (e.g. by virtue of participating in various current Australian Government programs), will continue to be eligible to bill A1 items, (provided they continue to meet the requirements of the program in which they are participating).

The statement can be accessed at [www.medicalboard.gov.au](http://www.medicalboard.gov.au) under "News".

## National Specialist IMG Committee

In the communiqué following the meeting of the Board in March 2012, the Board reported on the appointment of the National Specialist IMG Committee. The Committee membership includes representatives of medical, accreditation and government stakeholders as well as of medical recruiters and a consumer representative. The Committee will provide advice to the Board on issues related to the assessment of specialist international medical graduates.

The Committee held its first meeting on 28 March 2012 and a communiqué of that meeting is published at on the Board's website at [www.medicalboard.gov.au](http://www.medicalboard.gov.au) under "News" and "Specialist IMG Committee".

The Committee examined ways in which the process for IMG specialist assessment could be improved and streamlined without impacting on the standards required to ensure that only IMGs who are suitably trained and qualified to practise in a competent and ethical manner are registered. The Committee also looked to the recommendations made in the report by the House of Representatives Standing Committee on Health and Ageing on the inquiry into the registration processes and support for overseas trained doctors, for any additional views on how the process could be improved.

The Committee agreed to a work plan which included:

1. Engaging with the AMC, specialist colleges and the Australian Health Practitioner Regulation Agency to review how the assessment process and outcomes are currently being applied
2. Defining the requirements of the specialist assessment pathway and simplifying the process where possible. This will include a review of documentation requirements with the aim of reducing duplication of the documents required to be provided by IMGs to the AMC, specialist colleges and the Board
3. Investigating the feasibility and utility of a central repository for documents provided by IMGs so documents only need to be provided once and accessed by authorised agencies
4. Improving communications so stakeholders can better understand processes for specialist IMG assessment.

## Board specific consultations

The Board is currently consulting on the following matters:

1. Registration standard for endorsement for acupuncture – consultation closes 14 May 2012
2. Draft Supplementary Guidelines on Cosmetic Medical and Surgical Procedures for "Good Medical Practice: A code of conduct for doctors in Australia – consultation closes 22 May 2012

All stakeholders are invited to provide feedback to the Board on these matters.

**Dr Joanna Flynn AM**

**Chair, Medical Board of Australia**

19 April 2012