

# Communiqué

# Medical Board of Australia meeting: 14 September 2012

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

### **New Board composition**

The Board held its first meeting in its new composition, which included three newly appointed Board members who replaced Board members whose terms expired on 31 August 2012. The Board welcomed Robert Little a community member from the ACT, Dr Rakesh Mohindra a practitioner member from South Australia and Adjuvant Professor Peter Wallace OAM a practitioner member from Western Australia. More information about the new Board members will be available shortly on the Board's website at <a href="www.medicalboard.gov.au">www.medicalboard.gov.au</a> under "About". The Board thanks retiring National Board members Ms Sophia Pangiotidis, Dr Trevor Mudge and Professor Mark McKenna for their contribution to the Board in its first three years of operation.

# **Review of accreditation arrangements**

An important objective of the National Law is to facilitate the provision of high-quality education and training of health practitioners. The accreditation function is the primary way of achieving this. The National Law defines the respective roles of the Board and its appointed accreditation authority, the Australian Medical Council (AMC), in the accreditation of medical schools and medical specialist colleges.

Health Ministers first appointed the accreditation authorities for each of the 10 original professions in the National Registration and Accreditation Scheme (the National Scheme), before it began. The National Law requires National Boards to review the arrangements for the exercise of the accreditation functions by 30 June 2013.

The Board has written to the AMC inviting them to indicate whether they wish to continue exercising accreditation functions for the medical profession, and if so, to provide a report to the Board. The AMC has done so and provided the Board with a comprehensive report. The Board has reviewed this and has formed a preliminary view that the current arrangements for the accreditation function are satisfactory, taking into account the Board's experience with the AMC over the past two years.

In its last Communiqué the Board announced that it was undertaking a short preliminary consultation with key stakeholders on the review of the accreditation arrangements, before wider public consultation. The preliminary consultation has been completed and did not identify any issues that required the Board to reconsider its preliminary view. The public consultation opened on 20 September 2012 and will close on 2 November 2012. The consultation paper is available on the Board's website at <a href="https://www.medicalboard.gov.au">www.medicalboard.gov.au</a> under 'News'.

#### **Public consultation on Social Media policy**

The National Boards in the National Registration and Accreditation Scheme (National Scheme) will release a consultation paper on a social media policy in October/November 2012.

A preliminary draft of the social media policy was released to some stakeholders for initial feedback, ahead of a wider public release. The preliminary consultation process aims to 'road test' the initial draft to weigh operational impact, issues or initial concerns.

The Board welcomes the significant interest in the preliminary draft, especially on social media. National Boards are monitoring this feedback closely and will take the issues raised into account when refining the draft social media policy before it is released for public consultation on the National Boards' websites.

The Board encourages feedback from registered health practitioners and members of the community when the public consultation on the draft policy opens in the next few months.

The Board will post the public consultation document on its website at <a href="www.medicalboard.gov.au">www.medicalboard.gov.au</a> under "News".

## Renewal of registration for 2012/13

Medical registration is due to expire on 30 September 2012 for medical practitioners holding general and/or specialist registration or non-practising registration. At the time of writing this Communiqué, around 68% of medical practitioners had renewed their registration, more than 98% of them online.

Under the National Law, practitioners who do not renew their registration within one month of their registration expiry date must be removed from the Register of medical practitioners. Their registration will lapse and they will not be able to practise medicine in Australia until a new application for registration is approved. Renewals received within the month of their registration expiry date will incur an additional late fee, which reflects the cost of managing late renewals.

Medical practitioners who have previously provided an email address to the Board have been reminded by email to renew their registration on a number of occasions. Hard copy reminders have also been posted to medical practitioners who have yet to renew online. The Board encourages all practitioners to act on reminders to renew if they wish to continue to practise.

#### **Audit Framework**

All health practitioners registered under the National Law are required to comply with a range of registration standards. The registration standards are developed by each Board after wide-ranging consultation and must be approved by the Australian Health Workforce Ministerial Council. All health practitioners must comply with the relevant registration standards for English language, criminal history, recency of practice, continuing professional development and professional indemnity insurance. The registration standards for medical practitioners are published on the Board's website at <a href="https://www.medicalboard.gov.au">www.medicalboard.gov.au</a>.

AHPRA is currently developing an auditing framework through the Practitioner Audit project. As part of this large program of work, a pilot was conducted with the pharmacy profession earlier this year. A second phase of the pilot is being run at renewal this year with the optometry, pharmacy and chiropractic professions. In conjunction with the National Boards for each of these professions, the steering committee will work to deliver a set of findings and recommendations that will eventually be used to develop a robust auditing framework that can be used across all 14 National Boards. This will be developed through analysis of data and process information from the both phases of the pilot.

This second phase will begin in October 2012 and run for approximately three months. Practitioners will be randomly selected across these three professions when they apply to renew their registration for the 2012-13 period. This will apply to both paper and online renewal applications.

Those selected to participate will be audited for compliance against their board's registration standards: criminal history, professional indemnity insurance, recency of practice and continuing professional development.

No dates have yet been set for the extension of the audit to medical practitioners.

In the meantime the Board has commenced work with the Colleges to enable it to understand how Colleges currently record and/or audit continuing professional development of their Fellows to ensure that the processes for audit of medical practitioners do not create unnecessary duplication.

# **Community engagement strategy**

AHPRA and National Boards recently took the first steps in implementing their community engagement strategy, by holding community briefings in Western Australia – one face to face with representatives from the community health sector, health groups and interested members of the public, and a video conference with community representatives from nine remote sites.

The forum provided an opportunity to meet members of the community to discuss issues surrounding health practitioner regulation and learn where the community's interest lies. AHPRA has since entered into a partnership with the Consumer Health Forum of Australia (CHF) to engage with health consumers and the broader community. CHF is the national peak body representing the interests of Australian healthcare consumers.

The AHPRA and CHF partnership aims to:

- raise community awareness of health practitioner regulation
- increase community access to information about health practitioner regulation
- facilitate community input into the development of standards, codes of practice, guidelines and policies for health practitioners and
- increase transparency, particularly in relation to the processes in place for managing complaints about registered health practitioners.

A series of community forums have been scheduled between October and December in each state and territory to provide an opportunity to brief the community about health practitioner regulation and its role in protecting the public and facilitating access to health services, and to learn more about issues of interest to the public. For further information, including a forum schedule flyer, please email communications@ahpra.gov.au.

Dr Joanna Flynn AM Chair, Medical Board of Australia

24 September 2012