



Submission to the Medical Board of Australia: May 2013

Proposed changes to the competent authority pathway and specialist pathway for International Medical Graduates

The Australasian College for Emergency Medicine (ACEM) welcomes the opportunity to provide feedback to the Medical Board of Australia (the Board) on the *Consultation on proposed changes to the competent authority pathway and specialist pathway for international medical graduates*

ACEM is a not-for-profit organisation responsible for the training of emergency physicians, and for the advancement of professional standards in emergency medicine (EM), in Australia and New Zealand. As the peak professional organization for emergency medicine in Australasia, ACEM has a vital interest in maintaining efficient and suitable processes and standards in relation to the assessment and management of overseas trained specialists (OTs) who are seeking to gain recognition as an emergency medicine specialist in Australia.

ACEM acknowledges the contribution of international medical graduates (IMGs) to the Australian health system and their role in providing emergency care to the community. ACEM accepts its obligation to assist Australian registration authorities in the assessment of the credentials of OTs who are seeking recognition as specialists in emergency medicine. ACEM notes an increasing numbers of specialist assessment applications from OTs, as well as increased complexity regarding the decision making related to these applications.

ACEM commends the Board, the Australian Medical Council (AMC) and the National Specialist International Medical Graduate Committee (NSIMGC) for responding to recommendations from the 2012 House of Representatives inquiry report '*Lost in the Labyrinth - Report on the inquiry into registration processes and support for overseas trained doctors*'. ACEM understands that the proposed changes to the Specialist and Competent Authority Pathways represent an effort to streamline the IMG medical registration processes in response to the *Lost in the Labyrinth* recommendations. Following review of the discussion papers regarding the proposed changes to the relevant pathways, ACEM provides the following comment:

REVIEW OF THE COMPETENT AUTHORITY PATHWAY

ACEM understands that proposed changes to the Competent Authority Pathway would eliminate a number of steps currently involving the AMC and change the registration eligibility for Competent Authority Pathway applicants.

Is it appropriate and reasonable to grant provisional registration to applicants in the competent authority pathway?

ACEM believes it is important for IMGs to demonstrate their competence across a range of areas of practice within the Australian context, prior to being eligible for general registration. ACEM therefore considers the current arrangements, whereby Competent Authority Pathway applicants are eligible to apply for provisional registration only, as appropriate. As these IMG doctors will ultimately receive general registration in Australia, ACEM contends that their provisional registration be limited until such time as their 12-month period of supervised practice and workplace based assessment is successfully completed.

Is 12 months of supervised practice too long or not enough?

ACEM considers the 12-month period of supervised practice is an appropriate duration and allows IMGs to gain adequate experience and undertake workplace based assessment prior to applying for general registration.

Should IMGs in the competent authority pathway be required to complete specific rotations?

ACEM believes it is important that IMGs on the Competent Authority Pathway are supervised and assessed for competency, across a range medical practice, specific to the Australian health care context. As such ACEM believes the 12-month period of supervised practice undertaken by Competent Authority Pathway applicants should include specified periods of clinical experience in (i) emergency medicine (ii) surgery and (iii) general medicine. ACEM contends that these clinical experience requirements should not adversely impact on the provision or availability of accredited intern placements for Australian medical graduates.

REVIEW OF THE SPECIALIST PATHWAY

ACEM notes that the majority of changes proposed to the Specialist Pathway relate to the administrative processes associated with the pathway. These changes effectively streamline this pathway by reducing the administrative steps delivered by the AMC, but will increase the role for specialist medical colleges and require the introduction of an online inter-agency portal to upload and share relevant Specialist Pathway applicant information.

The proposal for the AMC to no longer assess applications

While ACEM agrees, in principle, to the streamlining of communication processes, the proposed changes will significantly impact ACEM's administrative capacity. Should the Board determine the proposed pathway changes will be implemented, ACEM recommends that the Board address the following key issues:

- Adequate and timely information to key external stakeholders (Colleges, AMC and Specialist Pathway applicants) on the implementation of new pathway processes (i.e. key dates, contacts etc.);
- Provision of support to Colleges during this transition, including training on using the new portal and resources such as handbooks, operating procedures and reporting templates; and
- Provision of advice to the AMC and Colleges on communicating this change to Specialist Pathway applicants.

The revised comparability definitions

ACEM considers the comparability definitions to be appropriate.

The use of a portal for communication between agencies

ACEM agrees that the introduction of an online portal will facilitate inter-agency communication, and reduce confusion and duplication of administrative processes. However, ACEM strongly recommends that the new online portal be developed in close consultation with College end-users (SIMG Managers' Group and College CEOs) and is fully tested before implementation.

Furthermore, ACEM agrees with the NSIMGC recommendation, that the changes proposed to the Specialist Pathway administration be facilitated by Health Workforce Australia via the provision of additional funding to assist the Colleges in establishing new processes associated with this change. The removal of the AMC as a key intermediary in the Specialist Pathway process will result in an additional administrative load to ACEM and will require new procedures and potentially additional staff resources to ensure appropriate and timely service to OTS applicants.

Thank you for the opportunity to provide the Board with feedback on the *Consultation on proposed changes to the competent authority pathway and specialist pathway for international medical graduates*. ACEM looks forward to receiving further updates from the Board regarding the proposed changes, the timeline for implementation and how this will be managed. If you require any clarification or further information, please do not hesitate to contact the ACEM Director of Policy and Research, Dr Andrew Gosbell [REDACTED]

Yours sincerely,



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