

Thank you for the opportunity to comment on the proposed changes to the specialist training pathway. I have been involved in the RACP OTP assessment program for many years and am currently [REDACTED]

I applaud the decision by MBA to address this area of medical workforce that has become an area of considerable difficulty for those of us trying to administer the current system. I think the proposed changes go a long way to addressing the current problems and significantly clarify the pathway.

I believe the “short term training pathway” a very valuable instrument that allows Australia to play a significant role in globally improving medicine without poaching the cream of third world medical graduates. For the reasons set out in answering the specific queries below I believe there needs to be a clear distinction between this training pathway and immigration pathways.

Kind regards,

[REDACTED]

[REDACTED]

Question 1: Do you support the proposed name change? If not, do you propose an alternative name for this pathway?

Yes – a clearer explanation of the intent of the pathway.

Question 2: Are the eligibility criteria for this pathway appropriate? If not, in what way should they be changed?

Yes. Would suggest that “enrolled in a specialist training program in country of origin” could replace the 2 year requirement. Not sure of the purpose of “within 2 years” and can be difficult to judge. This change dependent on a clear separation between short term specialist training and the OTP pathway.

Question 3: Is it reasonable to have an exemption for IMGs with general scope registration in New Zealand who are accredited college trainees?

Yes. If accredited trainees in NZ should be able to move freely. We have a single recognised fellowship.

***Question 4:** Is the role of the specialist medical colleges as described in the draft guideline appropriate. If not, what changes do you propose?*

The devil is in the detail here. Only time will inform the harmony between the College and the Board. If agreement no problem. Any resolution of potential disagreement?

***Question 5:** Is the process for applying directly to the College on a Board application form appropriate? Can you propose a more streamlined process?*

Seems a good starting point

***Question 6:** Is the information that the IMG is required to provide to the college sufficient for colleges to advise the Board about the IMG's suitability for the short-term training in a medical specialty pathway? If not, what additional information should be requested?*

Yes

***Question 7:** Is this approach appropriate for practitioners in this pathway who apply to renew registration beyond 24 months? If not, why not?*

I believe this is an inappropriate use of this pathway. This should be a training pathway that enables overseas trainees to take advantage of the possibly superior training opportunities available in Australia. As such it can be seen as a “win win” situation in that the trainee gains valuable experience, his country of origin gains a well trained doctor and Australia benefits by filling the middle grade training positions that cannot be filled by our own graduates. I strongly believe that this pathway should be clearly separate from an immigration / OTP pathway.

Applicants who feel they want to stay in Australia should either make application at the outset or return to their country of origin to make such an application after completion of their specialised training. Allowing applicants to freely swap between these pathways creates a 2 tier training program whereby those on a specialist training pathway lack the rigorous prospective approval of training and the multilayered assessment tools that are built into PREP. This significantly disadvantages our own trainees.

***Question 8:** Some medical practitioners undertaking short-term training in a medical specialty may decide to apply to the specialist college for specialist recognition. Are there any barriers to this?*

Please see above. I would suggest a clean separation between the 2 pathways with assessment for the OTP pathway occurring concurrent with the training application or not until the applicant has returned to their country of origin. This is the way the system used to work 15 – 20 years ago when training was tied to a 457 visa.

***Question 9:** Is it appropriate for the specialist colleges to provide advice to the Board about the suitability of training for a medical practitioner in the circumstances described above?*

I think it essential that any change of circumstance be treated with the rigour of a new application. This is a very valuable pathway that is open to abuse by the applicants

who see it as a backdoor immigration pathway and by the employers who see it as a way of filling service jobs with minimal training opportunity. Both sides of the deal need watching.

Question 10: *Are the definitions under section 8 appropriate? If not, what changes do you propose?*

Yes