Consultative Committee on the revalidation of medical practitioners

Context
The Board is committed to developing a process that supports medical practitioners to maintain and enhance their professional skills and knowledge and to remain fit to practise medicine. This process is known as ‘revalidation’.

Purpose of the Consultative Committee
The Board has established the Consultative Committee to provide it with feedback on issues related to the introduction of revalidation in Australia.

Terms of reference
The Consultative Committee will:

1. provide a forum for discussion and exchange of views on what medical practitioners should do to demonstrate ongoing fitness and competence to practise
2. provide feedback to the Board on the:
   a. proposals for revalidation including whether proposed models for revalidation are feasible and acceptable
   b. proposed plan for piloting model/s of revalidation and their evaluation
   c. preferred option/s for revalidation and the implementation of any proposed revalidation activities
3. provide feedback to the Board about information and materials that are developed regarding revalidation
4. provide advice to the Board on wider consultation regarding revalidation.

Membership
The Consultative Committee includes:

Chair
- Chair of the Medical Board of Australia

Members
- Chair of the Expert Advisory Group

The Board will seek nominations from the following representative organisations:
- One nominee of the Australian Medical Council
- Three nominees of the Committee of Presidents of Medical Colleges
- Two nominees of the Australian Medical Association
• One nominee of the Deans of Medical Schools
• One nominee of the Australian Indigenous Doctors’ Association
• Two nominees of the Health Workforce Principal Committee of the Australian Health Ministers’ Advisory Committee – one member from a small jurisdiction and one from a larger jurisdiction
• Two nominees of AHPRA
• One nominee of the Medical Council of New South Wales

The Board will appoint:

• Two or three community members
• One or two members from Health Complaints Entities
• One member from a pre-vocational training organisation
• A person from a professional indemnity insurer

Secretariat
Strategy and Policy, Medical

Meetings and procedures

Frequency of meetings

The Consultative Committee will meet between quarterly and six-monthly.

Meetings can be:

• face-to-face
• via videoconference
• via teleconference

Procedures for meetings

The Chair is to preside at a meeting of the Consultative Committee. In the absence of the Chair at any meeting, the Chair of the Expert Advisory Group will preside at the meeting.

Materials will be provided to members at least five days prior to day of the meeting.

A report of the meeting will be drafted and circulated to members.

Reporting

The Consultative Committee will report to the Medical Board and AHPRA. Communication with the Board’s Expert Advisory Group will be through the Board, noting however that the Chair of that Expert Advisory Group is also a member of the Consultative Committee and will provide feedback to the Expert Advisory Group.

Payment and expenses

Community members will be paid an honorarium for their attendance and related expenses.

Other members will not be paid to attend meetings but travel and accommodation will be funded by the Board and arranged by AHPRA.