



PRESIDENT

Associate Professor

David A Scott

MB, BS, PhD, FANZCA,
FFPMANZCA

June 9, 2016

Executive Officer
Medical, AHPRA
GPO Box 9958
Melbourne 3001

By email: medboardconsultation@ahpra.gov.au

Dear Dr Flynn,

Re: MBA Public-consultation: Draft revised registration standard for specialist registration

Thank you for seeking feedback from the Australian and New Zealand College of Anaesthetists (ANZCA) on the above proposal. As you know, ANZCA is responsible for the training, examination and specialist accreditation of anaesthetists and pain medicine specialists and for the standards of clinical practice in New Zealand and Australia. ANZCA's mission is to serve the community by fostering safety and high quality patient care in anaesthesia, perioperative medicine, and pain medicine.

ANZCA has reviewed the above proposal, and responses to the consultation questions are set out below.

From your perspective, how is the current registration standard working?

ANZCA considers that the current registration standard is working well.

Is the content and structure of the revised standard helpful, clear, relevant and more workable than the current standard?

The proposed changes to the draft revised registration standard are clear and well-reasoned.

ANZCA supports this draft revised registration standard, especially with respect to Australian and New Zealand medical graduates with 'international' specialist qualifications.

Is there any content that needs to be changed or deleted in the draft revised registration standard?

ANZCA suggests the following content changes be made to the draft revised registration standard:

1. On page three, the second dot point of the draft revised registration standard states that "... holding a qualification relevant to a recognised speciality that has not been approved by the Board and successfully completing an examination or other assessment required by the Board (known as

the specialist pathway – specialist recognition)” may be confusing. This could be interpreted as meaning that successfully sitting an exam is an entitlement to the qualification. It would be clearer to state that all IMGs must complete the requirements of the specialist pathway, which would embrace all of the requirements as applied by the Specialist Medical Colleges and AHPRA.

2. As Specialist Medical Colleges will be encouraged to notify the Board if fellowship or membership is revoked on the basis of failure to comply with CPD, we recommend the term fellowship be clarified in keeping with the proposed changes earlier in the standard. It is also noted that the standard states practitioners who are CPD non-compliant will remain on the specialist register until the individual practitioner surrenders their registration or a Tribunal removes them. This means that there are limited consequences for practitioners who do not meet the registration requirements for CPD. To partially remedy this, in particular, if the specialist college’s revocation of membership means that the specialist post-nominals are no longer able to be used, and the Board has been so notified, then those post-nominals should be removed from the specialist practitioner’s personal details on the MBA website and from all MBA communications.

Is there anything missing that needs to be added to the draft revised registration standard?

ANZCA suggests the following content be added to the draft revised registration standard:

1. It is suggested that reference be made to individual Specialist Medical College practice guidelines regarding recommendation for IMGs specialist registration eligibility for Fellowship.
2. Page four of the draft revised registration standard contains a proposal to remove the reference to a specific organisation completing the verification of documents. Would guidance be provided on how this verification should be conducted? For example, would IMGs qualifications verified by an organisation other than the Educational Commission for Foreign Medical Graduates (ECFMG) be acceptable?
3. As the Board allows specialist practitioners to undertake a self-directed program of CPD, such practitioners would not be under the governance of the relevant specialist college. In this circumstance, non-compliance would go undetected unless discovered by a random audit conducted by the MBA. This creates a ‘double-standard’ whereby practitioners who comply with College CPD programs are more strictly governed than those who chose to ‘opt-out’ of such programs. The Board might consider requiring specialist practitioners undertaking self-directed CPD programs to submit themselves to mandatory triennial audit eg by the MBA or by the relevant specialist college. The costs of such an audit should be borne by the specialist practitioner.

Do you have any other comments on the draft revised registration standard?

We have no further comments.

Thank you once again for the opportunity to provide feedback on the above proposal. If you have any questions about this submission, please contact [REDACTED]

Yours sincerely

A handwritten signature in black ink, appearing to read 'David A Scott', with a long horizontal flourish extending to the right.

Associate Professor David A Scott
President