

Consultation

26 March 2013

Consultation on proposed changes to the competent authority pathway and specialist pathway for international medical graduates

Summary

The National Registration and Accreditation Scheme (the Scheme) has opened up opportunities to streamline and simplify the assessment and registration of international medical graduates (IMGs).

One of the fundamental aims of the 2011/12 House of Representatives Standing Committee on Health and Ageing inquiry into registration processes and support for overseas trained doctors was to reduce red tape, duplication and administrative hurdles faced by IMGs whilst ensuring that the Australian standard continues to be rigorously applied. This proposal goes a significant way towards meeting this aim.

This consultation paper proposes changes to the:

- 1. Competent authority pathway and
- 2. Specialist pathway

The proposed changes to the **competent authority pathway** are substantial and take advantage of the provisions in the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The National Law gives the Medical Board of Australia (the Board) the power to grant provisional or general registration on the basis of equivalency of qualifications or through the successful completion of an examination. IMGs no longer have to be granted the Australian Medical Council (AMC) certificate in order to be granted provisional or general registration.

It is proposed that the Board grant provisional registration to IMGs who qualify for the competent authority. IMGs in the competent authority pathway will be required to undertake a 12-month period of supervised practice to confirm that their performance is at least equivalent to that of a locally-trained intern at the end of their intern year, prior to being eligible for general registration. It is not proposed that the provisional registrant in the competent authority pathway be required to complete an accredited intern year. There is no proposal to change the eligibility for the competent authority pathway although this proposal does not preclude changes to the eligibility in the future.

The proposed changes to the **specialist pathway** are largely administrative. They streamline the process for assessment of specialist IMGs, make the process more transparent and clarify accountabilities. The proposed changes include that the IMG in the specialist pathway will communicate directly with the relevant specialist college, rather than through the AMC, and that much of the communication between agencies involved in the assessment of IMGs be done through a secure portal. The proposal also reviews the various definitions of comparability to ensure that they are consistent across all specialist colleges and explains when fees might be charged.

Submissions

The National Law requires the Boards to ensure there is wide-ranging consultation on the content of any proposed code or guideline.

The Board is now seeking feedback on the proposed changes and is interested in comments from a wide range of stakeholders.

Please provide written submissions by email, marked 'Consultation – Pathways to registration' to <u>medboardconsultation@ahpra.gov.au</u> by close of business on **31 May 2013**.

Submissions by post should be addressed to the Executive Officer, Medical, AHPRA, GPO Box 9958, Melbourne 3001.

The Board publishes submissions on its website to encourage discussion and inform the community and stakeholders. We will not place on our website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the reference. Before publication, we may remove personally identifying information from submissions.

The views expressed in the submissions are those of the individuals or organisations who submit them and their publication does not imply any acceptance of, or agreement with, these views by the Board.

The Board also accepts submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982* (Cth), which has provisions designed to protect personal information and information given in confidence.

Please let us know if you do not want us to publish your submission, or want us to treat all or part of it as confidential.



Consultation

26 March 2013

Review of the competent authority pathway

Summary

This consultation paper proposes significant changes to the competent authority pathway for international medical graduates (IMGs). The changes aim to simplify and streamline the assessment and registration processes for IMGs in the competent authority pathway and are possible because of the establishment of the National Registration and Accreditation Scheme (the National Scheme).

This paper proposes that the Medical Board of Australia (the Board) will grant provisional registration to IMGs in the competent authority pathway, to enable them to undertake a period of supervised practice. After completing the period of supervised practice satisfactorily, they will be eligible for general registration.

The main changes proposed are:

- To remove the requirement for IMGs in the competent authority pathway to obtain a Certificate of Advanced Standing from the Australian Medical Council (AMC) before being eligible for registration
- To remove the requirement for IMGs in the competent authority pathway to be awarded the AMC certificate before being eligible for general registration
- The AMC will no longer have a role in the assessment of IMGs in the competent authority pathway, other than for primary source verification (PSV). This will reduce much of the complexity in the current process to achieving general registration
- IMGs in the competent authority pathway will be eligible for provisional registration and will not be required to apply for limited registration. This will reduce the administrative burden associated with limited registration that is on IMGs, employers and supervisors, and the Board and AHPRA
- There will be no requirement for authorities to be accredited by the AMC and to provide feedback to the AMC on individuals before they are awarded the AMC certificate. The Board and AHPRA will review performance assessment reports from supervisors and on the basis of those reports, will decide whether to grant general registration. This parallels the process for Australian and New Zealand qualified interns and IMGs on the standard pathway.

It is not proposed that there be any change to the current requirement for primary source verification conducted through the AMC.

This consultation paper seeks feedback from stakeholders on the proposal to streamline the competent authority pathway and its associated registration processes.

Background

A COAG initiative

At its meeting in February 2006, the Council of Australian Governments (COAG) agreed "to a national assessment process for overseas qualified doctors to ensure appropriate standards in qualifications and

training as well as increase the efficiency of the assessment process."¹ The pathways to registration were established as part of this COAG initiative and are the:

- Competent authority pathway
- Standard pathway (AMC examinations)
- Standard pathway (AMC MCQ exam and workplace-based assessment)
- Specialist pathway

The competent authority pathway was implemented in July 2007.

What is the competent authority pathway?

The competent authority pathway allows IMGs who have completed specified examinations or accredited training and assessment in countries that have both a similar health care system, and similar training, assessment and registration systems to those in Australia to receive advanced standing towards the AMC certificate.² IMGs in the competent authority pathway do not have to sit the AMC examinations but they are required to undertake a workplace-based performance assessment by an AMC accredited authority while working under supervision.

The competent authority pathway assessment model is based on the recognition of prior assessment, rather than the recognition of prior registration or primary qualification. The recognised examination processes include the Professional and Linguistic Assessments Board (PLAB) examination in the United Kingdom, the Medical Council of Canada Licensing Examination (MCCLE), the United States Medical Licensing Examination (USMLE) and the New Zealand Registration Examination (NZREX) examination. The accredited training/assessment programs are medical qualifications awarded for courses conducted in the United Kingdom by universities that have been accredited by the General Medical Council and medical qualifications awarded by medical schools in Ireland that have been accredited by the Medical Council of Ireland (where the training has been undertaken in Ireland).

A key principle of the competent authority pathway model is that assessments by the competent authorities are assessments of "competence", rather than of "performance". Therefore, to be eligible for the competent authority pathway, candidates are required to complete 12 months post-examination/qualification experience in a designated competent authority country to ensure that the applicant has demonstrated performance in the relevant health system.

Details on the eligibility for the competent authority pathway are at Attachment 1A.

The requirement for the AMC certificate

When the competent authority pathway was developed, there were eight state and territory medical boards that were operating under eight different pieces of legislation. Some of the states and territories were not able to grant general registration to applicants that did not have either an Australian or New Zealand medical qualification or the AMC certificate. The competent authority pathway was therefore constructed to allow for the awarding of the AMC certificate, which would lead to a qualification for general registration.

The National Scheme commenced on 1 July 2010 (and 18 October for Western Australia). The eight state and territory Medical Boards were replaced by the Medical Board of Australia and all states and territories adopted the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). Part 7 of the National Law which relates to registration is the same in all states and territories.

The establishment of the National Scheme and the adoption of the National Law have provided an opportunity to review the competent authority pathway and in particular, the requirement to award the AMC certificate.

¹ <u>http://archive.coag.gov.au/coag_meeting_outcomes/2006-02-10/index.cfm</u> accessed 31 December 2012

² McLean, R and Bennett J. Nationally consistent assessment of international medical graduates. Med J Aust 2008; 188: 464 – 468

Section 53 of the National Law defines the qualifications for general registration. It states:

An individual is qualified for general registration in a health profession if-

- (a) the individual holds an approved qualification for the health profession; or
- (b) the individual holds a qualification the National Board established for the health profession considers to be substantially equivalent, or based on similar competencies, to an approved qualification; or
- (c) the individual holds a qualification, not referred to in paragraph (a) or (b), relevant to the health profession and has successfully completed an examination or other assessment required by the National Board for the purpose of general registration in the health profession; or
- (d) the individual—
 - holds a qualification, not referred to in paragraph (a) or (b), that under this Law or a corresponding prior Act qualified the individual for general registration (however described) in the health profession; and
 - (ii) was previously registered under this Law or the corresponding prior Act on the basis of holding that qualification.

Section 53 gives the Board the power to grant general registration to applicants who do not have the AMC certificate.

Section 53 (b) could apply to applicants in the competent authority pathway as follows:

Graduates of medical courses conducted by a medical school in the United Kingdom that has been accredited by the General Medical Council

Graduates of medical courses conducted by a medical school in Ireland that has been accredited by the Medical Council of Ireland

Section 53(c) could apply to applicants in the competent authority pathway as follows:

Applicants who have successfully completed the PLAB test since 1975

Applicants who have successfully completed the licentiate examinations of the Medical Council of Canada (LMCC) since 1992

Applicants who have successfully completed the USMLE Step 1, Step 2 and Step 3 since 1992

Applicants who have successfully completed the NZREX.

Note: to be eligible for the competent authority pathway, IMGs must have completed the necessary clinical experience, in addition to holding the qualification/assessment/examination listed above.

Eligibility for provisional registration

Applicants in the competent authority pathway are currently required to undergo a workplace-based assessment while practising under supervision before being eligible for the AMC certificate and subsequently, general registration. This workplace-based assessment has a range of purposes, including ensuring that registrants are orientated to the Australian health care system and confirming that they are safe practitioners, practising at least at the level of an Australian or New Zealand qualified intern at the end of their intern year.

This period of supervised practice and assessment provides an additional safeguard prior to granting general registration and it is proposed that the Board grant provisional registration to applicants in the competent authority pathway. Section 62(1)(a) of the National Law provides for this. It states:

An individual is eligible for provisional registration in a health profession, to enable the individual to complete a period of supervised practice that the individual requires to be eligible for general registration if the individual is qualified for general registration in the profession.

The Board does not propose to define specific rotations that IMGs in the competent authority pathway have to undertake, nor that they have to complete an accredited intern position. The proposal recognises that the IMG has undertaken post qualification/assessment experience and that this 12 month period of supervised practice is consistent with requirements for IMGs in all other pathways to registration, enabling orientation to the Australian health care system and confirming the IMG's safe practice.

The proposal for the competent authority pathway

The following table compares the current requirements for applicants who are eligible for the competent authority pathway with the proposed requirements. It is a summary version of the current process. For the full description of steps and accountabilities for the competent authority pathway, refer to **Attachment 1B**.

Current process	Proposed process
The IMG with the necessary qualifications/assessment and experience approaches the AMC. The AMC issues a Certificate of Advanced Standing	This step is eliminated
The IMG receives an offer of work and applies to the Board for <i>limited registration</i>	The IMG receives an offer of work and applies to the Board for <i>provisional registration</i>
The Board grants limited registration allowing the IMG to practise in a supervised position and to undergo a workplace based assessment	The Board grants provisional registration allowing the IMG to practise in a supervised position and to undergo a workplace based assessment
Workplace based assessment is undertaken and submitted to an authority accredited by the AMC to sign off workplace-based assessments NOTE: Many of these authorities are state AHPRA offices. For the full list, see Attachment 1C	Workplace based assessment is undertaken and submitted for assessment by the Board. The requirement to accredit authorities to sign off workplace-based assessments is eliminated
The authority accredited by the AMC to sign off workplace-based assessments sends a letter of recommendation for the AMC certificate to the AMC	This step is eliminated
The AMC issues an AMC certificate	This step is eliminated
The IMG applies to the Board for general registration	The IMG applies to the Board for general registration

It is not proposed that there be any change to the current requirement for primary source verification conducted through the AMC.

Submissions

The Board is seeking feedback on the proposal to streamline the competent authority pathway and its associated registration processes and is interested in comments from stakeholders.

Stakeholders are invited to make general comments about the proposal. The Board is also interested in views about:

- 1. Whether it is appropriate and reasonable to grant provisional registration to applicants in the competent authority pathway.
- 2. The length of supervised practice. Is 12 months too long or not long enough?
- 3. Should IMGs in the competent authority pathway be required to complete specific rotations?

Attachment 1A: Requirements for the eligibility for the competent authority pathway

Category	Requirements for eligibility for the competent authority pathway	
Category A	UNITED KINGDOM General Medical Council (GMC)	
	Successful completion of the Professional and Linguistic Assessments Board (PLAB) test since 1975, AND :	
	Successful completion of the Foundation Year 1 or 12 months supervised training (Internship equivalent) approved by the General Medical Council in the United Kingdom or another AMC designated Competent Authority country.	
Category B	UNITED KINGDOM General Medical Council (GMC)	
	Graduate of a medical course conducted by a medical school in the United Kingdom accredited by the General Medical Council, AND:	
	Successfully completed the Foundation Year 1or 12 months supervised training (Internship equivalent) approved by the GMC in the United Kingdom or another AMC designated Competent Authority country.	
Category C	CANADA Medical Council of Canada	
	Successful completion of the licentiate examinations of the Medical Council of Canada (LMCC) since 1992	
Category D	UNITED STATES Education Commission for Foreign Medical Graduates	
Successful completion of the United States Medical Licensing Examination Ste and Step 3 since 1992 AND		
	Successful completion of a minimum of two years of graduate medical education within a residency program accredited by the Accreditation Council of Graduate Medical Education.	
Category E NEW ZEALAND Medical Council of New Zealand (MCNZ)		
	Successful completion of the New Zealand Registration Examination AND Successful completion of the required rotating internship (four runs accredited by the MCNZ).	
Category F	IRELAND Medical Council of Ireland	
	Graduate of a Medical School in Ireland accredited by the Medical Council of Ireland AND	
	Successful completion of an internship in Ireland (certificate of experience) or in another Competent Authority country approved by the Medical Council of Ireland	

Attachment 1B: Steps for the Competent Authority Pathway

The following table describes the steps and accountabilities for the Competent Authority Pathway in **hospital-based practice**.

	Steps for the Competent Authority Pathway in hospital-based practice		
Step	Who	Task	
1	Candidate	Candidate to check eligibility criteria – See Table 1	
2	Candidate	Candidate to apply to the Australian Medical Council (online or on the application form specified) for an Advanced Standing Certificate	
3	AMC	AMC determines if the candidate meets the eligibility criteria and if eligible issues the Advanced Standing Certificate for the candidate	
4	Candidate	Following receipt of the Advanced Standing Certificate from the AMC the candidate applies for limited registration with the relevant state/territory office of the Australian Health Practitioner Regulation Agency (AHPRA) to work in a hospital-based position.	
		The candidate is required to meet the registration requirements associated with their limited registration. Depending on the type of position, the candidate may apply for limited registration for postgraduate training or supervised practice or limited registration for area of need. Requirements of registration are defined in the relevant registration standard (<u>www.medicalboard.gov.au</u>) and will include supervision and work reports to the Medical Board of Australia	
5	Candidate	If the candidate is granted limited registration by a state/territory office of the AHPRA and has the AMC Advanced Standing Certificate the candidate can apply to undertake work-based assessment under the Competent Authority Pathway with an accredited provider – See Table 2.	
6	Candidate	If the candidate is successful in their application to undertake the Competent Authority Pathway in a hospital-based position with an accredited provider then they must successfully complete the relevant 12-month performance assessment	
7	Accredited authority	If the candidate successfully completes the 12-month performance assessment required by the Competent Authority Pathway accredited provider, the accredited authority will forward the AMC a letter of recommendation for the AMC Certificate.	
		If the accredited authority is not an AHPRA office, it should send a copy of the letter of recommendation to the relevant state/territory office of the AHPRA for its records.	
8	AMC	If all primary source verification is complete, including EICS Verification, the AMC issues the AMC Certificate and forwards the candidate a letter of advice with notice for collection of certificate and advises the relevant state/territory office of the AHPRA.	
		Fees for the assessment process are outlined on the AMC website at: http://www.amc.org.au/index.php/img/fees	
9	Candidate	The candidate can then apply to the Medical Board of Australia (through the relevant state/territory AHPRA) for general registration.	

The following table describes the steps and accountabilities for the Competent Authority Pathway in **General Practice.**

	Steps for the Competent Authority Pathway in General Practice		
Step	Who	Task	
1	Candidate	Candidate to check eligibility criteria – See Table 1	
2	Candidate	Candidate to apply to the Australian Medical Council (online or on the application form specified) for an Advanced Standing Certificate	
3	AMC	AMC determines if the candidate meets the eligibility criteria and if eligible issues the Advanced Standing Certificate for the candidate	
4	Candidate	Following receipt of the Advanced Standing Certificate from the AMC the candidate applies for limited registration with the relevant state/territory office of the Australian Health Practitioner Regulation Agency (AHPRA). It would be usual for the candidate to apply for limited registration for area of need.	
		The candidate is required to meet the registration requirements associated with their limited registration, as defined in the relevant registration standard. Requirements may include successful completion of a Pre-employment Structured Clinical interview, supervision and work reports to the Medical Board of Australia	
5	Candidate	If the candidate is granted limited registration by a state/territory office of the AHPRA and has the AMC Advanced Standing Certificate the candidate can apply to undertake work-based assessment under the Competent Authority Pathway with an accredited provider – See Table 3	
6	Candidate	If the candidate is successful in their application to undertake the Competent Authority Pathway in General Practice with an accredited provider then they must successfully complete the relevant 12-month performance assessment	
7	Accredited authority	If the candidate successfully completes the 12-month performance assessment required by the Competent Authority Pathway accredited provider, the accredited authority will forward the AMC a letter of recommendation for the AMC Certificate.	
		The accredited authority should send a copy of the letter of recommendation to the relevant state/territory office of the AHPRA for its records.	
8	AMC	If all primary source verification is complete, including EICS Verification, the AMC issues the AMC Certificate and forwards the candidate a letter of advice with notice for collection of certificate and advises the relevant state/territory office of the AHPRA.	
		Fees for the assessment process are outlined on the AMC website at: http://www.amc.org.au/index.php/img/fees	
9	Candidate	The candidate can then apply to the Medical Board of Australia (through the relevant state/territory AHPRA) for general registration.	

Attachment 1C: Authorities accredited by the AMC to sign-off workplace-based performance assessments of IMGs

Hospital based positions

The following authorities are accredited by the AMC to sign-off the workplace-based performance assessment of IMGs undertaking the CA pathway for hospital based positions. The authorities are not accredited by the AMC to sign-off the workplace-based performance assessments of IMGs undertaking the CA pathway for general practice positions.

Table 2

State or territory	Accredited Authority
Australian Capital Territory	AHPRA Australian Capital Territory Office
New South Wales	NSW Health / AHPRA New South Wales Office
Northern Territory	AHPRA Northern Territory Office
Queensland	AHPRA Queensland Office
South Australia	AHPRA South Australian Office
Tasmania	AHPRA Tasmanian Office
Victoria	Postgraduate Medical Council of Victoria / AHPRA Victorian Office
Western Australia	WA Health / AHPRA Western Australian Office

General practice positions

The following authorities are accredited by the AMC to sign-off the workplace-based performance assessment of IMGS undertaking the CA pathway for general practice based positions. The authorities are not accredited by the AMC to sign-off the workplace-based performance assessments of IMGs undertaking the CA pathway for hospital based positions.

Table 3

State or territory	Accredited Authority
National	Australian College of Rural and Remote Medicine (ACRRM)
Under development – pilots approved	Royal Australian College of General Practitioners (RACGP)



Consultation

26 March 2013

Review of the specialist pathway

Summary

This consultation paper proposes changes to the specialist pathway for international medical graduates (IMGs). The proposal simplifies and streamlines the administrative processes for the specialist pathway, to make them more efficient and transparent.

Many of the proposed changes address recommendations made in the House of Representatives Lost in the Labyrinth Report released in March 2012 and are possible because of the establishment of the National Registration and Accreditation Scheme (the National Scheme).

The main changes proposed are:

- To review the current role of the Australian Medical Council (AMC) in the assessment of IMGs in the specialist pathway and to recommend that the AMC no longer assess applications. It is proposed that applicants have direct interactions with the specialist medical college (the college) that is conducting their specialist assessment. The AMC would continue to undertake primary source verification (PSV)
- Communications between the parties involved in the assessment of IMGs in the specialist pathway will
 be streamlined. The AMC currently coordinates much of the communications between parties. The
 reasons for this are historical, when there were eight state and territory Medical Boards. It is proposed
 that the parties correspond directly with each other and also upload key communications onto a secure
 portal that is accessible to applicants, colleges, the AMC and the Medical Board of Australia (the Board)
 and AHPRA. The use of the secure portal will reduce the administrative burden as assessment and
 registration bodies will be able to rely on information on the portal and the applicant will no longer be
 required to produce the same documentation multiple times
- Definitions of comparability will be clarified to ensure that all colleges apply them consistently. While the current definitions were applied consistently initially, some colleges have over time changed the definitions or requirements for comparability
- The fees that can be applied have been spelled out, improving transparency.
- It will be explicitly stated that comparability assessment should take into consideration the IMG's
 intended scope of practice. Where the intended scope of practice is limited, the college can
 recommend that conditions be imposed by the Board, rather than assessing for the full scope of
 practice. This is consistent with the Board's approved registration standard for specialist registration.

This consultation paper seeks feedback from stakeholders on the proposal to streamline the specialist pathway.

Background

A COAG initiative

At its meeting in February 2006, the Council of Australian Governments (COAG) agreed "to a national assessment process for overseas qualified doctors to ensure appropriate standards in qualifications and

training as well as increase the efficiency of the assessment process."³ The pathways to registration were established as part of this COAG initiative and are the:

- Competent Authority (CA) pathway
- Standard pathway (AMC examinations)
- Standard pathway (AMC MCQ exam and workplace-based assessment)
- Specialist pathway

What is the specialist pathway?

The specialist pathway is available to:

- 1. specialist IMGs applying for assessment of comparability to the standard of a specialist trained in that specialty in Australia (specialist recognition)⁴
- 2. specialist IMGs applying for an area of need position in Australia (area of need assessment)
- 3. specialist IMGs or specialists-in-training wishing to undertake a short period of specialist or advanced training in Australia.

This consultation is about the processes for IMGs undergoing specialist recognition assessment and assessment for area of need positions.

Specialist recognition (comparability assessment)

AMC-accredited specialist medical colleges assess the training and qualifications of specialist IMGs for comparability with the training and qualifications of specialists trained in Australia. Colleges can decide that an applicant is 'substantially comparable', 'partially comparable' or 'not comparable'. Where applicants are assessed as substantially comparable or partially comparable, colleges define what further oversight, training, assessment or examination is necessary for the applicant to gain the relevant specialist qualification.

Applicants are eligible for specialist registration after they have met all the college requirements and are eligible for the relevant specialist qualification.

At present, applications for specialist recognition are submitted to the AMC. The AMC acts as a clearing house for documentation, ensuring that all the documentation is complete and liaising with the applicant where it is not complete. The AMC forwards the documentation to the college to start the assessment after it is deemed to be complete.

The college reviews the documentation and may seek additional documentation or information. The college may also decide to interview the applicant. On the basis of the review of the documentation and the interview, the college will decide whether an applicant is substantially comparable, partially comparable or not comparable and will decide what further requirements need to be met for the applicant to be eligible for the specialist qualification. Much of the communication between the college, applicant and the Board/AHPRA is via the AMC.

Area of need assessment

AMC-accredited specialist colleges assess the suitability (qualifications and relevant experience) of IMGs to work in a specific position in a deemed 'area of need'. The assessment by the college is against the proposed position description.

'Area of need' is determined by the local responsible Minister.

At present, the AMC assesses the application and required documentation to determine the applicant's eligibility to apply for the pathway. The AMC confirms eligibility with the college and also acts as an intermediary for much of the communication between the college, applicant and Board/AHPRA.

³ <u>http://archive.coag.gov.au/coag_meeting_outcomes/2006-02-10/index.cfm</u> accessed 31 December 2012

⁴ To be eligible for the specialist pathway, IMGs must have completed specialist training and be recognised as specialists in the country that specialist training was undertaken

Review of the specialist pathway

In June 2012, the Medical Board's National Specialist IMG Committee (NSIMGC) mapped out the specialist pathway and noted that there are opportunities for the AMC, Board and AHPRA and the colleges to work together to streamline and simplify the processes and make them more efficient. The NSIMGC established a working party to review the specialist pathway, taking into consideration the recommendations of the House of Representative 'Report on the inquiry into registration processes and support for overseas trained doctors'. The working party has submitted a report, which includes the proposal to revise the specialist pathway. The proposal is at Attachment 2A.

The following is a summary of the current and proposed processes which aims to highlight where processes have been streamlined.

The proposal for the specialist pathway

Specialist Recognition

Current process	Proposed process
Receipt of application from applicant The applicant applies for specialist recognition to the AMC. The applicant provides the AMC with all supporting documentation. The AMC sends the applicant an automatically generated email confirming receipt of the application.	This step is eliminated.
Primary Source Verification (PSV) and AMC assessmentThe AMC assesses the application to ensure that all necessary documents have been provided as required by the relevant college.The AMC arranges PSV, issues the applicant with an EICS number, confirms the applicant's proof of identity and provides the college with a copy of the EICS certificate once the qualifications have been verified.	Application for primary source verification (PSV) of qualifications The AMC will no longer assess the application. The applicant applies for PSV to the AMC. The AMC arranges PSV, issues the applicant with an EICS number, confirms the photo and signature of the applicant and provides the college with a copy of the EICS certificate once the qualifications have been verified. A secure portal will be used to upload and view all relevant documentation, including the results of PSV. It will be used by the AMC, MBA and AHPRA and colleges.
Referral to the collegeReferral to the collegeThe AMC sends the application to the college after ithas assessed it as complete.The AMC advises the applicant by email that the application has been referred to the college.The AMC advises the applicant that they are required to complete the AMC Form SC* – Application for assessment by Specialist Medical College.	These steps and all associated correspondence are eliminated.
Applicant to send Form SC and assessment fee to college The applicant submits Form SC and the assessment fee to the college.	Applicant submits application for recognition to the collegeApplicant sends application and required supporting documentation to relevant college. The college ensures documentation is uploaded to portal.Applicant can also view documentation via portal.

College assesses the application The college assesses the applicant's previous training and experience to determine their comparability to the standard of an Australian trained specialist currently entering the work force and assesses the applicant's competency to practise in that specialty in Australia.	<u>College assesses the application</u> The college assesses the applicant's previous training and experience to determine the applicant's comparability to the standard of an Australian trained specialist in that field. The assessment will take into consideration the applicant's intended scope of practice. If the applicant will not be practising in the full scope, the college may recommend to the MBA that it impose a condition that reflects this.
Outcome of assessmentOn the basis of the initial college assessment, applicants will be considered to be –• Substantially comparable (SC), or• Partially comparable (PC), or	Outcome of assessmentOn the basis of this initial college assessment, applicants will be considered to be –• Substantially comparable (SC), or• Partially comparable (PC), or
• Not comparable (NC). The college determines what further requirements must be met for IMGs who are assessed as SC or PC to be eligible for the specialist qualification.	• Not comparable (NC). The college determines what further requirements must be met for IMGs who are assessed as SC or PC to be eligible for the specialist qualification. <i>Note: Definitions of these terms has been revised</i>
AMC to receive copy of Report 1 or Combined Report and forward to applicant The college provides the AMC with the applicant assessment outcome via Report 1. The AMC provides a copy of Report 1 with covering letters to the applicant and college. These documents are also uploaded to the AMC portal.	College informs the applicant of assessment outcomeThe college informs the applicant of assessment outcome via (equivalent of current) Report 1 and uploads outcomes of the initial assessment to the portal.The AMC is not involved in this step and the associated correspondence requirements are eliminated.
Partially comparable decision requirements for further training and/or examinationApplicants who are assessed as PC are required to write to the AMC to confirm their intention to comply with the training and/or examination requirements set by the college.Applicants assessed as SC who are required to undertake a period of oversight or practice under peer review are not required to write to the AMC to confirm their intention to comply with the requirements of the college.	Applicant confirms with the specialist college that they will comply with requirements Both PC and SC applicants are required to confirm to the college in writing their intention to comply with the requirements set by the college. Process is streamlined as all correspondence is to the college.
AMC to advise college of applicant's intention to comply The AMC formally notifies the college in writing of the applicant's intention to comply with the Report 1 or Combined Report requirements.	This step is eliminated.
College advises AMC of final assessment decision When the applicant has completed all the prescribed Report 1 requirements, the college will make a final assessment of the applicant's training and experience.	Decision regarding eligibility for fellowship When the applicant has completed all the prescribed (equivalent of current) Report 1 requirements, the college will review/confirm the assessment and make a decision regarding eligibility for Fellowship.

The college notifies the AMC of the final assessment decision by completing Report 2 which is sent directly to the AMC. The AMC provides a copy of Report 2 with covering letters to the applicant and college. These documents are also uploaded to the AMC portal.	The college will notify the applicant of the outcomes (via a Report equivalent to current) Report 2. The college will ensure that the MBA receives recommendations regarding scope of practice and conditions to be imposed on registration. <i>The AMC is no longer involved and communications</i> <i>have been streamlined.</i>
AMC notifies the Board of the applicant's eligibility to present for registration When the AMC receives formal notification from the college of the outcome of the applicant's assessment via Report 1, Report 2 or Combined Report, the AMC will upload these documents to the AMC portal.	<i>This step is eliminated.</i> Applicant is informed by the college that they are eligible for fellowship (the qualification).

Area of need

Current process	Proposed process
Receipt of application from applicant	Receipt of application from applicant
The AMC and the college conduct their assessments simultaneously. The applicant sends the original Form A and a copy of Form B to the AMC. At the same time, the applicant sends a copy of Form A and the original of Form B to the college. <u>Primary Source Verification and AMC assessment</u> The AMC assesses the application to ensure it contains all necessary information. The AMC arranges PSV, issues the applicant with an EICS number, confirms the applicant's proof of identity and provides the college with a copy of the EICS certificate once the qualifications have been verified.	 The AMC does not assess the application. The applicant sends the application directly to the college. The current administrative processes that are the result of assessments by both the AMC and college are eliminated. Application for primary source verification of gualifications Applicant sends request to the AMC for PSV. The AMC arranges PSV, issues the applicant with an EICS number, confirms the photo and signature of the applicant and provides the college with a copy of the EICS certificate once the qualifications have been verified. AMC provides college with confirmation of EICS so that college can proceed with application. A secure portal will be used to upload and view all relevant documentation. It will be used by the AMC, MBA and AHPRA and colleges.
Referral to the college When the AMC has determined an application is complete, it will send written confirmation to the college, employer, relevant AHPRA state office and applicant confirming the applicant has satisfied the application requirements for an area of need assessment.	The applicant deals directly with the college. The current requirements for multiple correspondence are eliminated

College assesses the application	College assesses the application
The college assesses the application. It assesses the individual IMG's suitability for a specific area of need position. Note: some colleges conduct concurrent AoN and comparability assessments at the same time.	The college makes an assessment of the individual's suitability for a specific AoN position against the key selection criteria in the position description. Note: some colleges conduct concurrent AoN and comparability assessments at the same time.
AMC to receive copy of Report 1 or Combined	Outcome of assessment
Report and forward to applicant The college provides the AMC with the applicant assessment outcome.	The college informs the applicant of the assessment outcome and uploads the outcome of the assessment to the portal.
The AMC provides a copy of a college assessment to the applicant and college. These documents are also uploaded to the AMC portal.	Where the applicant is assessed as suitable for the AoN position, the college will ensure that the MBA receives recommendations (via email alert with relevant details on prescribed form on portal) regarding scope of practice and conditions to be imposed.
	The administrative steps currently undertaken by the AMC are eliminated.
AMC notifies the Board that the applicant is eligible to present for registration	Applicant confirms with the college that they will comply with requirements
The AMC uploads the outcome of the applicant's assessment from the college to the AMC portal.	An applicant who is deemed suitable for the AoN position is required to confirm to the college in writing their intention to accept the position. The confirmation may also be received from the employer/recruiter.
	Supervision requirements are recommended by the college and imposed by the MBA.

Submissions

The Board is seeking feedback on the proposal to streamline the specialist pathway and is interested in comments from stakeholders. The full details of the proposal are at Attachment 2A.

Stakeholders are invited to make general comments about the proposal. The Board is also interested in views about:

- 1. The proposal for the AMC to no longer assess applications.
- 2. The revised comparability definitions.
- 3. The use of a portal for communication between agencies.



Committee of Presidents of Medical Colleges



Specialist pathway working group

Report from the Specialist Pathway Working Group to the National Specialist International Medical Graduate Committee

Context

International Medical Graduates (IMGs) comprise an important part of Australia's medical workforce. IMGs are often required to navigate a complex system in dealing with immigration, cultural, language and work related issues such as recognition of qualifications and experience, and registration requirements. The House of Representatives *Lost in the Labyrinth* Report released in March 2012 describes the experience of IMGs dealing with 'red tape, duplication and administrative hurdles'. The Report made 45 recommendations aimed at improving system efficiency, communication, coordination and accountability.

The recommendations referred to actions to be taken by a range of organisations, including the Medical Board of Australia (MBA) and the Australian Health Practitioners Regulation Agency (AHPRA), the Australian Medical Council (AMC), the specialist medical colleges and Health Workforce Australia, as well as the Commonwealth Government. In May 2012 representatives from the AMC, MBA, AHPRA and the CPMC (Committee of Presidents of Medical Colleges) established a working party which has already provided a consensus of responses to the Department of Health and Ageing in June 2012 regarding the *Lost in the Labyrinth* Report recommendations.

This current report pertains to the assessment processes for Specialist International Medical Graduates (SIMGs). The MBA National Specialist International Medical Graduate Committee (NSIMGC) has been established as an advisory committee of the MBA (taking on many of the roles of the previous Joint Standing Committee on Overseas Trained Specialists [JSCOTS]). The Committee's primary roles are to review the operation of SIMG assessment (both area of need and comparability specialist assessment) and to make recommendations to the MBA about policy issues that arise in relation to SIMG assessment.

The NSIMGC formed a view that there may be opportunities for the MBA and AHPRA, the AMC and the specialist medical colleges to collaborate to streamline and simplify the specialist pathway assessment processes to enhance their efficiency. On this basis the NSIMGC agreed to establish a Specialist Pathway Working Group to review the specialist pathway, taking into consideration the recommendations of *Lost in the Labyrinth* report.

This report to the NSIMG describes the work of the Working Group and outlines its recommendations for the SIMG assessment processes (both area of need [AoN] and comparability specialist assessment).

Terms of Reference for the Specialist Pathway Working Group

The Working Group was chaired by Prof Kate Leslie (Chair CPMC). The other members were Prof Richard Doherty (RACP), Mr Ian Frank (AMC), Dr Joanne Katsoris (AHPRA) and Dr Peter White (RANZCOG). The Group was supported by Dr Susan Sdrinis (consultant).

The terms of reference of the Working Group were to:

- 1. To review the processes for SIMG assessment and make recommendations to the NSIMGC on how to re-design the specialist pathway (comparability and AoN assessments) to achieve a more streamlined and efficient process. In reviewing and re-designing the specialist pathway, the Working Group will take into consideration the relevant recommendations from the House of Representatives *Lost in the Labyrinth* report
- 2. To review the assessment outcomes of the specialist pathway (substantially comparable, partially comparable, not comparable) and make recommendations about how these outcomes should be defined
- 3. To provide advice on strategies to ensure compliance with agreed processes, including monitoring.
- 4. To recommend an action and communications plan on how to consult on any proposed changes.

Working Group Outcomes

The Working Group met on five occasions between August and November 2012. The focus was on reviewing and streamlining the SIMG comparability and AoN procedures. In revising the two procedures, the Group initially set up two 'maps' which defined the current steps in each process (see attached). Each step was comprehensively reviewed from the perspectives of both potential applicants and of the organisations involved in the assessment processes. Where appropriate and where there was duplication, steps were deleted. Each revised step aims to maximise clarity, minimise duplication and ensure that terminology is current.

The attached tables comprise three columns each. The first column of each table defines the revised steps in the proposed assessment procedures. The second column identifies further work that is required to support the implementation of each revised step. The third column highlights which of the *Lost in the Labyrinth* report recommendations are addressed by the revised steps in the assessment procedures (the recommendations are numbered as in the *Lost in the Labyrinth* Report with a brief description of its content). The recommendations addressed by the revised processes are described in full at the end of this report.

The Working Group reviewed the assessment outcomes of the specialist comparability pathway i.e. substantially comparable (SC), partially comparable (PC) and not comparable (NC). The definitions have been streamlined, using consistent language across each definition and the key differences between SC, PC and NC have been emphasised. The maximum durations of peer review or oversight, and appropriate assessments for each category have also been included.

The assessment process by specialist medical colleges for the comparability pathway was also revised to ensure the steps involved in assessment are more clearly defined at both initial and final assessment.

The revised comparability definitions and assessment processes are attached as Appendices in the revised Specialist Pathway Assessment Procedure.

In both the revised SIMG comparability and AoN procedures, duplication of processes for SIMGs have been significantly reduced with the removal of submission to and checking by the AMC of complete documentation. It is proposed that in the revised procedures, the role of the AMC will be to undertake Primary Source Verification and allocate an ECFMG International Credentials Services (EICS) number to each applicant.

Both revised procedures are significantly streamlined through the use of a secure portal and electronic scanning and processing of documents. This is described in the relevant steps in the revised procedures.

The points in the revised procedures where medical colleges and the AMC may choose to levy fees have also been clearly identified.

In summary, the highlights of the report are:

- 1. The need for checking for complete documentation by the AMC prior to submission of the documentation to the relevant specialist medical college has been removed.
- 2. A portal for the lodgement of documents that is accessible to AHPRA, AMC, specialist medical colleges and the applicant is recommended. Instead of multiple communications between these parties, the parties will check progress via the portal.
- 3. Assistance to colleges for scanning and processing of documents electronically is recommended.
- 4. The definitions of comparability have been streamlined with the goal of emphasising the key differences between SC, PC and NC. The maximum durations of peer review or oversight, and appropriate assessments for each category have been included.

The Working Group proposes that the MBA should consult with the medical colleges and CPMC about the revised draft procedures for comparability assessment and AoN assessment of SIMGs.

Once the revised procedures are endorsed, compliance will be monitored as part of the processes required through the appointment by AHPRA of Colleges to undertake SIMG assessment and via the process of AMC accreditation of specialist medical colleges.

Further Issues

In its discussions, the Working Group identified a number of issues which were not within its terms of reference. These are listed below and we suggested that they could be considered by the MBA NSIMGC or another relevant body in the future.

(i) Specialists in Training

It was noted by the Working Group that there is variability in the 'pathways' for this group of IMGs. Some IMG trainees 'visit' Australia for a period of training. In the past, some IMGs in this group obtained specialist AoN positions as they could be matched to a specific position description. It was noted that if IMGs in this group wish to complete their training in Australia, they usually have to complete the AMC process and obtain general registration (although some have managed to bypass the AMC exams and gone straight to fellowship).

The Working Group agreed that the pathway(s) for this group of IMGs requires further clarification and that this will be recommended to the NSIMGC.

(ii) Funding assistance to Colleges to enhance their capacity to process documents electronically

The Working Group suggested that this be referred to AHPRA for further discussion with Health Workforce Australia.

(iii) Awarding of Fellowship ad eundum gradum and by election

The Working Group noted that some colleges award Fellowship *ad eundum gradum* (that is, by virtue of qualification) and some award Fellowship by election (that is, by virtue of eminence in the profession [*curriculum vitae* and references]). Both of these processes bypass assessment of performance in the workplace before the award of Fellowship, although some Colleges mandate a period of 'mentorship' after Fellowship has been awarded. The Group noted that these practitioners must meet the MBA Registration Standards in terms of English language proficiency, criminal history, recency of practice etc. and provide certificates of good standing. The Working Group believes that these processes are modified processes for "substantially comparable" specialists, even if they are not named as such. Scope exists to regularise these pathways by including them in the revised assessment procedures.

(iv) IMGs who achieve General Registration while working in specialist AoN positions

The Working Group noted that there is a group of SIMGs who are working in AoN posts who may have General Registration due to completion of the AMC Standard or Competent Authority Pathways while they are in the AoN post.

This group of SIMGs have reported difficulties in accessing MBS Item Numbers after General Registration is achieved.

The Working Group believes that the pursuit of general as well as specialist registration by SIMGs is laudable and therefore recommends that this is an anomaly requires further clarification and review by the NSIMGC.

The Working Group also noted that Australian medical graduates with general registration and an overseas specialist qualification are unable to gain a 19AB exemption to access MBS items when working in a district of workforce shortage. The Working Group noted that no such restriction is placed on SIMGs.

(v) Overseas specialist training that does not equate to an Australian specialist training program

Some SIMGs have undertaken specialist training overseas that does not equate to a training program offered by an Australian College. Sometimes, the overseas program is a subset of an Australian program (e.g. radiology excluding obstetric radiology). On other occasions, the overseas program may cross training programs without encompassing the entire scope of practice of both (e.g. trauma surgery includes elements of our general surgery and orthopaedic surgery training programs).

The Working Group has attempted to deal with this issue in Step 4 of the revised Specialist Pathway Assessment Procedure. However, further clarification may be required regarding the assessment and recommendations on scope of practice made by Colleges for this group of SIMGs. The Working Group recommends that this issue is taken up by the NSIMGC.

Attachment 1: Proposed Specialist Recognition Assessment Procedure

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
Step 1A - Application for primary source verification of qualificationsApplicant sends request to the AMC for primary source verification.AMC sends applicant an automatically generated email confirming receipt of request.AMC confirms photo and signature of applicant in appropriate document e.g. passport.AMC liaises with ECFMG to allocate EICS number.Fee charged by AMC.	A new request template for AMC Primary Source Verification and ID check needs to be developed (Action: AMC) Note that AHPRA and AMC currently have different ID requirements. AMC requires passport and overseas identity documents. AHPRA requires Commonwealth of Australia documents at the time of registration (100 point ID check). It is recommended by the Working Group that at this step only the AMC undertakes confirmation of ID and that this is limited to confirmation of photo and signature (as described). The Working Group suggests that the MBA registration standards for limited registration be reviewed by MBA to consider situations whereby applicant has a previously issued EICS. The Working Group strongly recommends that applicants should either have IELTS completed or the process underway prior to application to expedite the application and assessment process.	Rec 1 (MBA &AMC assist IMGs with delays in PSV) Rec 21, (MBA reviews English Language Standard) Rec 36 (uniform Fees) Rec 37 (MBA, AMC, Colleges review Fees)
Step 1B – AMC issues EICS number and confirms with applicant and College MC issues EICS number and notifies applicant by automated email. AMC also provides	The Working Group recommends that Colleges have access to the portal to view all	Rec 31 (up to date information)

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
College with confirmation of EICS so that College can proceed with application.	documents relevant to their applicants, including EICS verification.	Rec 33 (centralised repository)
Portal in place for all relevant documentation to be uploaded and used by the AMC, MBA and AHPRA and Colleges.	The Working Group recommends that HWA fund the Colleges to enhance their capacity to scan and process documentation electronically.	
	AMC to be notified of College and AHPRA staff who will need to access the portal to ensure that correct access permissions can be enabled (<i>Action: Colleges</i> <i>and AMC</i>).	
Step 2 – Applicant submits application for specialist		
recognition to the College Applicant sends hard copy version of full application and required supporting documentation to relevant College. College ensures documentation is uploaded to portal. Applicant can also view documentation via portal.	A new application template for College Specialist Assessment needs to be developed. (Action: To be developed by a working party of the SIMG Managers' Group with input from the AMC and College CEOs). The required supporting documents and guidelines for Colleges regarding appropriate documentation need to be determined. (Action: To be developed by a working party of the SIMG Managers' Group with input from the AMC and College CEOs). The portal should also enable applicants to upload relevant documents.	Rec 34 (develop consistency regarding documentation) Rec 36 Rec 37
Step 3 – College assesses the application The College assesses the applicant's previous training and experience to determine the applicant's comparability to the standard of an Australian trained	 Principles of comparability. Need to consider – Training and specialist experience Recency of practice 	<u>Rec 7 (agreed definitions and guidelines)</u> <u>Rec 8 (utilise WBA during</u> <u>Peer Review)</u>

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
specialist in that field. The assessment should take into consideration the applicant's intended scope of practice. The initial assessment procedures by the College will include review of documentary evidence with/without a formal interview (See Appendix 1). In some cases, the College may decide to reject an application without scheduling an interview with the applicant if it is clear to the College, following review of the documentation, that the applicant's training and experience bears little relationship to the standard expected of an Australian trained specialist in that field. A fee may be charged by the College for review of documentation. A further fee may be charged at the time of interview. See Appendix 1 for assessment procedures.	 Knowledge of, respect for, and sensitivity towards, the cultural needs of the community, including those of Indigenous Australians CPD Assessment should include identification of any gaps/deficiencies compared with Australian specialist training models. The statement of process used by the College to assess applicants must be published. (Action: Colleges). 	Rec 36 Rec 37
 <u>Step 4 – Outcome of assessment</u> On the basis of this initial College assessment, applicants will be considered by the College to be – Substantially Comparable (SC), or Partially Comparable (PC), or Not Comparable (NC). Therefore, the possible outcomes of the initial assessment are - recognise the applicant's training and experience as SC with/without the requirement to undertake a period of practice under peer review; or 	Prescribed Form for applicants detailing outcomes of College assessment (including recommendations regarding scope of practice) needs to be developed. (Action: To be developed by a working party of the SIMG Managers' Group with input from the AMC, College CEOs and AHPRA).	<u>Rec 7 (agreed definitions and guidelines)</u> <u>Rec 8 (utilise WBA during Peer Review)</u>

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
 recognise the applicant's training and experience to be PC and require the applicant to undergo additional upskilling/assessment +/- examination; or assess the applicant as NC. The application is discontinued. 		
If the applicant is deemed NC at initial assessment, the process ceases at this stage and the applicant may decide to either accept the assessment results or request reconsideration, review and appeal.		
Where the comparability assessment determines that an applicant, who is otherwise SC, has a scope of practice that is limited within a specialty field, the College will recommend to the MBA (via email alert with relevant details on prescribed Form on portal) that there are conditions to the scope of practice of that applicant. The MBA can impose conditions to reflect that recommended scope of practice and these can be documented on the public register.		
Applicants should note that if s/he is deemed to be either SC or PC at initial assessment, this will be confirmed at the end of the peer review or upskilling period.		
See Appendix 2 for the definitions and requirements of the agreed comparability standards.		
Step 5 – College informs the applicant of assessment outcome		
The College informs the applicant	A new template (Report 1	Rec 9 (appeals process) Rec 10 (publish information

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
of assessment outcome via (equivalent of current) Report 1 and uploads outcomes of the initial assessment to the common portal. Where the applicant is not satisfied with the assessment outcome he or she may contact the College for re-consideration, review and appeal of the decision. A Fee may be charged if an appeal is lodged.	equivalent) needs to be developed. (Action: To be developed by a working party of the SIMG Managers' Group with input from the AMC and College CEOs).	<u>about appeals process)</u> <u>Rec 38 (increase awareness of complaints and appeals)</u> <u>Rec 36</u> <u>Rec 37</u>
Step 6 – Applicant confirms with the College that they will comply with requirementsBoth PC and SC applicants who have received (equivalent of current) Report 1 are required to confirm to the College in writing their intention to comply with the requirements set by the College.The College is the primary point of contact for an applicant who is completing the IMGS assessment process.Fees may be charged by Colleges for the processes supporting the peer review or upskilling period, any formal assessments and any access to College resources.		<u>Rec 36</u> <u>Rec 37</u>
Step 7 – Decision regarding eligibility for fellowship When the applicant has completed all the prescribed (equivalent of current) Report 1 requirements, the College will review/confirm the assessment and make a decision regarding eligibility for Fellowship. The College will notify the applicant of the outcomes (via a Report equivalent to current) Report 2. The outcomes are:	A new template (Reports 2 equivalent) needs to be developed. (Action: To be developed by a working party of the SIMG Managers' Group with input from the AMC, College CEOs and AHPRA).	

Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
	Points/Issues for Further Consideration/Action (proposed group to undertake

Appendix 1: College Assessment of Application

Initial Assessment

The preliminary step in assessment is review of the documentary evidence of specialist training overseas and relevant experience (including recent specialist practice), a review of log books (where relevant) and evidence of continuing professional development. If it is deemed that the documents do not meet College assessment requirements, the College does not need to proceed with any further assessment (but the applicant may lodge an appeal).

Following assessment that the documentary evidence meets College requirements, a formal interview may be scheduled. Any interview should be undertaken by trained assessors who have been appointed by the College to undertake the assessment. The aim of the interview should be to confirm details of the training and experience provided in the written documentation.

At the end of the initial assessment, a determination is made regarding comparability. If the determination is that the applicant is SC, a period of practice under peer review for up to 12 months and possibly a workplace-based assessment (WBA) is required. If the applicant is assessed as PC, a period of up to 24 months of upskilling and/or further assessment and/or possible examination is required. Applicants assessed as NC at interview do not proceed further (but the applicant may lodge an appeal).

SC and PC applicants will be required to provide the College with regular assessment reports from peer reviewers or supervisors as appropriate.

Final Assessment

The final assessment procedure used by each College may include the following components:

- 1. For applicants deemed at initial assessment to be SC, the final assessment will consider the assessment reports provided by peer reviewers, evidence of ongoing CPD, updated log books (where relevant) and results of WBAs (if applicable).
- 2. For applicants deemed at initial assessment to be PC, the final assessment will consider the assessment reports provided by supervisors, evidence of ongoing CPD, updated log books (where relevant) and the outcomes of any examinations or other assessments required.

Examinations may include the Part 1 or Primary Examination of the relevant College (or a modified examination based on the Part 1 examination) and/or the Part II (Membership or Fellowship) Examination (or a modified examination based on the Part II Examination).

Following the final assessment, the applicant is deemed to be either SC or NC. If deemed to be SC, the applicant will be eligible for Fellowship. NC applications will be discontinued.

Appendix 2: College Assessment Outcomes for Specialist Recognition

Substantially Comparable

Substantially comparable applicants have been assessed as suitable to undertake the intended scope of practice, taking full responsibility for individual patients with only oversight of their practice by a supervisor. In order to be considered substantially comparable an applicant must have satisfied the College requirements in relation to previous training, assessment, recent specialist practice and continuing professional development (CPD). The applicant may be required to undertake a period of up to 12 months full time equivalent of practice under peer review by a reviewer approved by the College, which may involve the satisfactory completion of a workplace-based assessment (WBA). This is to ensure that the level of performance is similar to that of an Australian trained specialist, and to assist with their transition to the Australian health system, provide professional support and help them to access CPD. The length of peer review and nature of assessment is up to the individual College to determine on a case-by-case basis, but the peer review period must not exceed 12 months. Following satisfactory completion of this process, the applicant will be eligible for Fellowship of the relevant specialist College without formal examination, and may apply for registration as a specialist.

Substantially comparable applicants will not be eligible to apply for specialist registration during the period of peer review.

Partially Comparable

Partially comparable applicants have been assessed as suitable to undertake a defined scope of practice in a supervised capacity. In order to be considered partially comparable an applicant must have satisfied the College requirements in relation to previous training, assessment, recent specialist practice and continuing professional development (CPD) that will enable them to reach the standard of an Australian trained specialist within a maximum period of 24 months full time equivalent of practice. During this period, the applicant will undertake upskilling with associated assessment under a supervisor approved by the College and may be required to undertake formal examination(s). This is to ensure that the level of performance reaches that of an Australian trained specialist. This period of supervised practice will assist the applicant with the transition to the Australian health system, will provide them with professional support and assist with access to CPD. The length of supervised practice and nature of assessment is up to the individual College to determine on a case-by-case basis, but the supervised practice period must not exceed 24 months full time equivalent of practice. Following satisfactory completion of this process, the applicant will be eligible for Fellowship of the relevant specialist College and may apply for registration as a specialist.

Partially comparable applicants will not be eligible to apply for specialist registration during the period of supervised practice.

Not comparable

Applicants who do not meet the requirements of the relevant specialist College in regard to previous training, assessment, recent specialist practice and continuing professional development (CPD) or who are unable to reach comparability within 24 months full time equivalent of practice will be assessed as not comparable. They may be eligible to seek registration to practise in another capacity that will enable them to gain the AMC certificate, and subsequently seek formal College training and assessment.

Attachment 2: Proposed Area of Need (AoN) Assessment Procedure

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
Step 1A - Application for primary source verification of gualifications		
Applicant sends request to the AMC for Primary Source Verification. AMC sends applicant an automatically generated email confirming receipt of request. AMC confirms photo and signature of applicant in appropriate document e.g. passport. AMC liaises with ECFMG to allocate EICS number. Fee charged by AMC.	A new request template for AMC Primary Source Verification and ID Check needs to be developed. (Action: AMC) Note that AHPRA and AMC currently have different ID requirements. AMC requires passport and overseas identity documents. AHPRA requires Commonwealth of Australia documents at the time of registration (100 point ID check). It is recommended by the Working Group that at this step only the AMC undertakes confirmation of ID and that this is limited to confirmation of photo and signature (as described). The Working Group suggests that the MBA registration be reviewed by MBA to consider situations whereby applicant has a previously issued EICS. The Working Group strongly recommends that applicants should either have the IELTS completed or the process underway prior to application to expedite the application and assessment process.	Rec 1 (MBA &AMC assist IMGs with delays in PSV) Rec 21, (MBA reviews English Language Standard) Rec 36 (uniform Fees) Rec 37 (MBA, AMC, Colleges review Fees)
Step 1B – AMC issues EICS number and confirms with applicant and College AMC issues EICS number and	The Working Group recommends	Rec 31 (up to date information)
notifies applicant by automated email. AMC also provides College with confirmation of EICS so that College can proceed with	that Colleges have access to the portal to view all documents relevant to their applicants,	Rec 33 (centralised repository)

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
application.	including EICS verification.	
Portal in place for all relevant documentation to be uploaded and used by the AMC, MBA and AHPRA and Colleges.	The Working Group recommends that HWA fund the Colleges to enhance their capacity to scan and process documentation electronically.	
	AMC to be notified of College and AHPRA staff who will need to access the portal to ensure that correct access permissions can be granted (<i>Action: Colleges and</i> <i>AMC</i>).	
Step 2 – College assesses the application		
Applicant (or employer/recruiter) sends hard copy version of full application and required supporting documentation to relevant College. College ensures documentation is uploaded to portal.	A new template for College AoN Assessment needs to be developed. (Action: To be developed by a working party of the SIMG Managers' Group with input from the AMC and College CEOs).	Rec 34 (develop consistency regarding documentation) Rec 36 Rec 37
Applicant can also view documentation via portal.	The required supporting documents and guidelines for Colleges regarding appropriate documentation need to be determined. These include-	
	 A letter of offer from the employer An AoN declaration issued by the responsible Minister for Health The Position Description (PD) and key selection criteria (KSC) Position and location details Other supporting documentation (Action: To be developed by a working party of the SIMG Managers' Group with input from the AMC and College CEOs). 	
	Confirmation is required that these need to be the same as those outlined in the current AMC application Forms A and B	

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
	checklist. Note that the PD and KSC must be specific and accurate to enable the assessment to match the requirements and scope of practice of the position with the skills of the applicant.	
	designed to enable applicants to upload relevant documents if they have the necessary technology.	
Step 3 – College assesses the application		
The College makes an assessment of the individual's suitability for a specific AoN position against the KSC in the PD. Note that AoN assessment is not an assessment for specialist recognition or for College Fellowship. Although an applicant may be considered suitable for a specific AoN position, the AoN assessment IS NOT an assessment of comparability to an Australian trained specialist. Concurrent assessment as SC or PC may occur if the applicant requests combined/concurrent assessment for suitability for an AoN position and specialist recognition or if individual Colleges require dual assessment. Where it is not a specific requirement of the College, it is, nonetheless, strongly advised that applicants apply for both assessments to be conducted concurrently as this will expedite progress to specialist recognition for applicants intending to seek employment as a specialist in Australia beyond 4 years.	The outcome of the assessment should be to assess the suitability of the applicant against the KSC in the PD. The statement of process used by the College to assess applicants must be published. (Action: Colleges) New templates for College AoN Assessment and Concurrent/Combined Assessment need to be developed. (Action: To be developed by a working party of the SIMG Managers' Group with input from the AMC and College CEOs).	Rec 7 (agreed definitions and guidelines) Rec 36 Rec 37

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
A fee may be charged by the College for review of documentation.		
A further fee may be charged if an interview for AON is scheduled (or for concurrent/combined assessment for specialist recognition).		
Step 4 – Outcome of assessment		
The College informs the applicant of the assessment outcome via the AoN or Concurrent Assessment Form and uploads outcomes of the assessment (whether AoN or combined/concurrent) to the common portal).	New templates for AoN and Concurrent/Combined Assessment Outcomes (including recommendations regarding scope of practice) need to be developed. (Action: To be developed by a working party of the SIMG Managers' Group with	Rec 9 (appeals process)Rec 10 (publish information about appeals process)Rec 38 (increase awareness of complaints and appeals)Rec 36
Where the assessment relates to the AoN position, the possible outcomes are –	input from the AMC, College CEOs and AHPRA).	<u>Rec 37</u>
1. The applicant is suitable for the AoN position; or		
2. The applicant is not suitable for the AoN position.		
Where the applicant does not receive support from the College for the AoN position, the application is discontinued.		
Where the applicant is assessed as suitable for the AoN position, the College will ensure that the MBA receives recommendations (via email alert with relevant details on prescribed Form on portal) regarding scope of practice and conditions to be imposed.		
Where the applicant is not satisfied with the assessment outcome, he or she may request reconsideration, review and appeal of the decision.		
A Fee may be charged if an appeal is lodged.		

Steps	Working Group Discussion Points/Issues for Further Consideration/Action (proposed group to undertake Action)	Mapping to Lost in the Labyrinth Report Recommendations (with brief description of Recommendation)
<u>Step 5 – Applicant confirms</u> with the College that they will comply with requirements		
An applicant who is deemed suitable for the AoN position is required to confirm to the College in writing their intention to accept the position. The confirmation may also be received from the employer/recruiter.		<u>Rec 36</u> <u>Rec 37</u>
Supervision requirements are recommended by the College and imposed by the MBA.		
Fees may be charged for the processes involved in supervision and associated access to College resources.		
If the applicant has concurrently been deemed as PC or SC, Steps 4 to 7 of the Specialist Recognition Pathway also apply. Fees may be charged for the processes supporting the peer review or upskilling period, any formal assessments and any access to College resources		

Attachment 3: Recommendations from the Lost in the Labyrinth Report Addressed in the Revised Procedures

Recommendation 1

The Committee recommends that the Australian Medical Council (AMC), in consultation with the Medical Board of Australia (MBA) and international medical graduates (IMGs), take steps to assist IMGs experiencing difficulties and delays with primary source verification, including but not limited to:

- continuing to assist IMGs who have passed all requirements of a pathway towards registration as a medical practitioner, excepting primary source verification;
- liaising with the Educational Commission for Foreign Medical Graduates to ascertain and address any barriers to achieving timely primary source verification; and
- providing IMGs with up-to-date information relevant to their application, including the anticipated timeframe for response based on their application, or options on how they might hasten the process, such as contacting the institution directly.

Recommendation 7

The Committee recommends that the Australian Government Department of Health and Ageing and Australian Medical Council, in consultation with the Joint Standing Committee on Overseas Trained Specialists and the specialist medical colleges:

- publish agreed definitions of levels of comparability on their websites, for the information of international medical graduates (IMGs) applying for specialist registration;
- develop and publish objective guidelines clarifying how overseas qualifications, skills and experience are used to determine level of comparability;
- develop and publish objective guidelines clarifying how overseas qualifications, skills and experience are taken into account when determining the length of time an IMG needs to spend under peer review; and
- develop and maintain a public dataset detailing the country of origin of specialist pathway IMGs' professional qualifications and rates of success.

Recommendation 8

The Committee recommends that specialist medical colleges adopt the practice of using workplace-based assessment (WBA) during the period of peer review to assess the clinical competence of specialist international medical graduates (IMGs) in cases where applicants can demonstrate that they have accumulated substantial prior specialist experience overseas. As part of the WBA process the specialist medical colleges should make available the criteria used to select WBA assessors.

Specialist medical college examinations should only be used as an assessment tool where specialist IMGs are recent graduates, or where deficiencies or concerns have been identified during WBA.

Recommendation 9

The Committee recommends that all specialist medical colleges consult with the Australian Medical Council to ensure each college undertakes a consistent three-stage appeals process, incorporating the following:

- an automatic right for an international medical graduate (IMG) to undertake the next stage of appeal, following completion of each preceding appeal;
- the option for the IMG to retain an advocate for the duration of any appeal process to an Appeals Committee, including permission for that advocate to appear on the IMG's behalf at the appeal itself; and
- the capacity to expand membership of the Appeals Committee to include an IMG who holds full membership of the relevant specialist college, but has no involvement with the decision under review.

Recommendation 10

The Committee recommends that the specialist medical colleges undertake the following steps to ensure international medical graduates (IMGs) are aware of their right of appeal regarding their application for specialisation:

- publish information regarding their appeals process in a prominent place on their website, including information regarding each stage of the appeals process, timelines for lodging appeals and the composition of Appeals Committee membership; and
- ensure that IMGs are informed of their right to appeal when any decision is made regarding their application, with information regarding their right to appeal a particular decision provided in writing on the same document advising the IMG of the decision made regarding their application.

Recommendation 21

The Committee recommends that the Medical Board of Australia review whether the current English Language Skills Registration Standard is appropriate for international medical graduates.

The review should include consideration of:

- whether the International English Language Testing System and Occupational English Test scores required to meet the English Language Skills Registration Standard is appropriate; and
- the basis for requiring a pass in all four components in a single sitting.

Recommendation 31

The Committee recommends that the Australian Medical Council and the Medical Board of Australia/Australian Health Practitioner Regulation Agency ensure that computer-based information management systems contain up-to-date information regarding requirements and progress of individual international medical graduate's assessment, accreditation and registration status to enable timely provision of advice.

Recommendation 33

The Committee recommends that the Medical Board of Australia, in conjunction with the Australian Medical Council and specialist medical colleges, develop a centralised repository of documentation supplied by international medical graduates (IMGs) for the purposes of medical accreditation and registration.

The central document repository should have the capacity to:

- be accessed by relevant organisations to view certified copies of documentation provided by IMGs;
- be accessed by relevant organisations to fulfil any future documentary needs for IMGs without the need for them to resubmit non time-limited documentation multiple times;
- · form a permanent record of supporting documentation provided by IMGs; and
- comply with the Australian Government's Information Privacy Principles and Privacy Act 1988 (Cth).

Recommendation 34

The Committee recommends that the Medical Board of Australia/Australian Health Practitioner Registration Agency, the Australian Medical Council, and specialist medical colleges consult to develop consistent requirements for supporting documentation wherever possible. These requirements should be developed with a view to further reducing duplication by preventing the need for international medical graduates (IMGs) to lodge the information more than once and in different forms and formats.

This documentation should form part of an IMG's permanent record on a central document repository.

Recommendation 36

The Committee recommends that specialist medical colleges should consult with one another to establish a uniform approach to the fee structure applied to international medical graduates (IMGs) seeking specialist accreditation in Australia. This fee structure should be justified by the provision of clear and succinct fee information published on the Australian Medical Council and relevant college's websites, itemising the costs involved in each stage of the process. IMGs should be informed about possible penalties which may be applied throughout the assessment process.

Recommendation 37

The Committee recommends that the Medical Board of Australia/ Australian Health Practitioner Registration Agency, the Australian Medical Council and specialist medical colleges review the administrative fees and penalties applied throughout the accreditation and assessment processes to ensure that these fees can be fully justified in a cost recovery based system.

Recommendation 38

The Committee recommends that the Australian Medical Council and the Medical Board of Australia/Australian Health Practitioner Regulation Agency increase awareness of administrative complaints handling and appeal processes available to international medical graduates (IMGs) by:

- prominently displaying on their websites information on complaints handling policies, appeals processes and associated costs; and
- ensuring when IMGs are advised of adverse outcomes of any review, that the advice contains information on the next step in the appeal process.

References

House of Representatives Standing Committee on Health and Ageing (March 2012) Lost in the Labyrinth: Report on the inquiry into registration processes and support for overseas trained doctors. Canberra.