

10 May 2013

Dr Joanne Katsoris
Executive Officer
Medical
Australian Health Practitioner Regulation Agency
GPO Box 9958
Melbourne 3001

By email to medboardconsultation@aphra.gov.au

Dear Dr Katsoris

Consultation – pathways to registration

The Health Quality and Complaints Commission (HQCC) is an independent statutory body dedicated to improving the safety and quality of healthcare in Queensland. We regulate health services under the *Health Quality and Complaints Commission Act 2006*.

We work with healthcare providers, consumers and other organisations to prevent patient harm and improve service quality. To achieve our aim of better healthcare for Queenslanders, we:

- manage complaints about health services
- investigate serious and systemic issues and recommend quality improvement
- monitor, review and report on healthcare quality
- identify healthcare risks and recommend action
- share information about healthcare safety and quality, and
- promote healthcare rights.

As the HQCC has a clear interest in the quality and safety of healthcare services provided in Queensland, we welcome the opportunity to provide comment on the proposed changes to the competent authority pathway and specialist pathway for assessment and registration of international medical graduates (IMGs).

Summary

The HQCC endorses the requirement for IMGs to have their medical qualifications accredited and their medical knowledge and skills assessed before being allowed to practice medicine in Australia.

The HQCC supports providing an efficient system for the accreditation and registration of all health professionals, including actions to reduce the administrative burden on IMGs.

Any improvements in registration processes for IMGs must be achieved without compromising the rigour of assessment and registration or the high standards of knowledge, clinical skills and professional attributes that Australians expect from medical practitioners.

Assessment and registration processes for IMGs must ensure that all doctors practising medicine in Australia meet a standard equivalent to their Australian trained counterparts. This ensures the continued high standard of quality and safety in our health system.

Our submission (Attachment 1 – response to consultation questions) has been prepared in consultation with our Clinical Advisory Committee.

If you have any questions, please contact Rose Bovey on [REDACTED] or by email
[REDACTED]

We wish you well with the consultation.

Yours sincerely

A handwritten signature in blue ink, appearing to read "Cheryl Herbert", followed by a period.

Adjunct Professor Cheryl Herbert
Chief Executive Officer

Submission on *Proposed changes to the competent authority pathway and specialist pathway for international medical graduates*

Proposed changes to competent authority pathway

No	Question	Comment
1.	Whether it is appropriate and reasonable to grant provisional registration to applicants in the competent authority pathway?	The HQCC supports the granting of provisional registration to applicants in the competent authority pathway.
2.	The length of supervised practice. Is 12 months too long or not long enough?	<p>The HQCC supports each IMG undertaking a period of supervised practise to establish clinical competency and gain an understanding of the Australian health care system.</p> <p>The HQCC supports the proposed 12 month period of supervised practise, which accords with the requirement for Australian medical graduates to complete a 12 month internship as well as the requirement for IMGs in all other pathways to registration.</p>
3.	Should IMGs in the competent authority pathway be required to complete specific rotations?	<p>The HQCC supports the requirement for IMGs to be required to complete specific rotations. This mirrors requirements for Australian medical graduates who must complete medicine, surgery and emergency medicine rotations during a 12 month internship. Such a requirement would allow for clinical competency to be more thoroughly assessed across a variety of clinical settings and patient pathology.</p> <p>Requiring completion of specific rotations as part of supervised practise could also offset the limitations associated with long term placement of new IMGs in areas where they are professionally isolated, with very limited access to a support network of a wide range of professional colleagues. Requiring a rotation in a teaching hospital, for example, would assist IMGs to establish support networks to assist them if they were to later move to rural or remote locations.</p>
4.	Other comments.	<p>The HQCC notes that the process for the assessment and accreditation of IMGs via the competent authority pathway is very dependent on access to competent supervisors and assessors.</p> <p>It is critical that workplace-based assessments are of high quality in order to ensure that doctors are safe, competent and able to work as independent practitioners.</p> <p>Requiring the endorsement of workplace-based assessments by an authority accredited to sign off on the quality and independence of these assessments would appear to be an important quality assurance process.</p>

		The HQCC is concerned about the removal of this requirement and suggest that it be retained.
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Proposed changes to specialist pathway

No	Issue	Comment
1.	Proposal for the AMC to no longer assess applications.	The HQCC supports the removal of the requirement for the Australian Medical Council to assess applications.
2.	The revised comparability definitions.	No comment.
3.	The use of a secure portal for communication between agencies.	<p>The HQCC supports the establishment of a secure portal to allow applicants and agencies, such as the Specialist Medical Colleges, the AMC and the Medical Board, to exchange the necessary information for registration and accreditation.</p> <p>The use of a single point of access to the required documentation should improve the management of accreditation and registration and streamline the processing of documentation.</p> <p>The use of portals where administrative procedures can be completed and data re-used between agencies is consistent with state and national government aims to minimise administrative and regulatory burden.</p>
4.	Other comments.	None.