

Hi,

I prefer the Option 4

(Option 4 uses the mechanism of a targeted audit to assure compliance with the declaration approach and recognises the minimal risk of registering an applicant with a significant criminal history. It also recognises that requiring CCCs with applications cannot extinguish the risk of registering an applicant with a criminal history given rehabilitation of offenders legislation in source countries. It is likely to be less expensive and time-consuming than option one.)

When we seek overseas trained clinicians especially in rural and regional areas of Australia it is very important we don't lose sight of the fact we need then urgently to fill the gaps in our service delivery within our Health system. The reason we are seeking international clinical graduates is even after all these years of planning and changes we are unable to meet our needs with the existing skilled medical and dental work force. The Australian Immigration department has a robust process with Police Clearance Certificates and check when the visa is processed .AHPRA do not need to duplicate this and create one more bureaucratic barrier. However it is important that the credentials, scope of practice and previous continuous record of registration and a certificate of good standing from the relevant overseas boards/registration bodies as well as the previous employment history be checked.

Clinicians are offered employment subject to -the appointment be only temporary, all the relevant checks completed which should include their statutory declaration in Australia regarding criminal history as well as random audit with their documentations. In this way the prospective Australian employer can employ a clinician with minimal time delays.

Moreover I suggest AHPRA consider this cost effective, less time consuming option initially for a trial period of 2 years and then review

Regards

Dr S Koshy