

16 December 2013

Australian health Practitioner Regulation Agency
Email: standard.consultation@ahpra.gov.au

Thank you for the opportunity to comment on the public consultation “Review of criminal history registration standard and English language skills registration standard”.

Review of Criminal history registration standard

The existing criminal history registration standard is the same for all professions in the National Scheme. While the Pharmacy Council of New Zealand (PCNZ) operates under different legislation, it has an interest in the consultation because of the reciprocal registration requirements under TTMRA and because of its commitment to international best practice.

1. In our view, the 10 factors for consideration align with the factors that we currently use to review individual application for registration. They also align with the principles of natural justice. We agree that the considerations outlined in the standard work well.
2. PCNZ have not identified any specific issues or impacts on registration for Australian registered pharmacists applying for registration under TTMRA.
3. The registration standard content is clear, relevant and helpful.
4. PCNZ has not identified any content that needs to be changed, deleted or added to the registration standard.
5. Given that there are no significant issues with the current standard, PCNZ agrees that the status quo is maintained – option 1.

English language skills registration standard

1. How is the current registration standard working?
 - As in Australia, New Zealand legislation (Health Practitioners Competence Assurance Act 2003) requires registrants to satisfy PCNZ that their *ability to communicate in and comprehend English is sufficient to protect the health and safety of the public*.
 - The current standard requires all overseas applicants to undertake an English language skills test. The first decision for pharmacy should be whether the candidate is from a Stream A or Stream B country. If Stream B, there should be no requirement for an English language skills test, however some research suggests there is evidence that even some native speakers of English perform poorly in language testing.
2. Should the exempt countries in the standard be consistent with the Immigration Dept.? If so, should the recognition of South Africa as an ‘exempt’ country be phased out over time?
 - The difficulty for making a blanket rule for South Africa is the mix of tertiary education and practice environments in either English or Afrikaans. Although English is an official language in South Africa, and most of the PCNZ applicants graduate from universities where English

was the sole language of instruction, we also have applicants from Afrikaans-speaking universities. As a result South African applicants can only get an exemption if they satisfy all the requirements in the point below.

- A better way to assess Stream B countries, which includes South Africa, is to apply all of the following:
 - English is recognised as an official language of the country (see - CIA World Factbook), and
 - where tertiary education is delivered in English, and
 - if there is independent evidence from an employer that English is the language used in the current work environment.
3. Additional evidence for additional countries to be recognised for their English language skills?
We are not aware of any evidence of other countries that should be recognised for their English language skills.
4. How to approach test results that are very close to, but below the current standard?
 - The English language ability of all health professionals impacts on public safety. Accommodating test results to allow those who are close but who have not achieved the agreed standard may have unintended negative implications. While some candidates improve with English over time, others regress and there is no certainty that an individual's English ability will improve; therefore allowing lower test results as a 'pass' mark implies the standard is not set correctly and may be open to challenge.
 - PCNZ requires a higher standard of English language skills for overseas applicants than universities do for entry into health sciences. In 2008 PCNZ reviewed the English policy and resolved to keep the IELTS test for overseas pharmacists but removed the test for the domestic students. Universities have put in place some diagnostic English language testing and have remedial programmes for graduates who required it. However, some graduates with English as a second language require further remediation once in the intern training programme even though they have been successful in attaining an academic qualification.
5. Should Boards accept results from more than one sitting?
 - PCNZ accepts the direction from IELTS and OET about amalgamating test results. A combination of test results within a one-year period was allowed but it became problematic to enforce. A review of the English language policy found that those who had combined test results were not performing as well in the workplace. Making decisions on candidates outside the rules set by the testing organisations is open to challenge and is not a risk PCNZ is prepared to take.
 - For IELTS, PCNZ requires a minimum score of 7.0 in each of the four bands with a minimum overall band score of 7.5 in the Academic category, results must be achieved within one sitting and within two years of date of application to show currency
 - For OET, an A or B score in each band must be achieved but can be achieved in multiple sitting provided that it's within a two year period
6. Is the content of the draft standard helpful, clear and relevant?
 - The draft standard appears somewhat confusing at first glance, particularly the first section. An algorithm that outlines the various options in this section may be more useful for people who have English as a second language.
7. Other comments
 - The standard required should remain at a higher level if no summative assessment of effective communication is done prior to registration. PCNZ uses an objective structured clinical examination (OSCE) process, which includes an assessment of communication, as a

summative assessment. It's at this point that intern pharmacists with communication concerns may be directed to further remediation or a change of training site and more time in the intern programme to resolve communication issues.

- IELTS is designed to test readiness for tertiary study, not broader workplace communication skills but is less expensive and more readily available than OET. If this is the most commonly utilised test then PCNZ believes a summative assessment of communication skills is essential.
- In terms of having a generic test compared to a field-specific test, PCNZ places its emphasis on the intern training programme formative assessment and on the final summative assessment before registration, so the IELTS and OET tests are used primarily as a screening test.

A handwritten signature in black ink that reads "Claire Paget-Hay". The signature is written in a cursive, flowing style with a long horizontal stroke at the end of the name.

Claire Paget-Hay
Chief Executive and Registrar