

Q1.

Review of the English Language Skills registration standards

Introduction

The Chinese Medicine, Chiropractic, Dental, Medical, Medical Radiation Practice, Nursing and Midwifery, Occupational Therapy, Optometry, Osteopathy, Paramedicine, Pharmacy, Physiotherapy, Podiatry and Psychology Boards of Australia (National Boards) are participating in the joint review of the English Language Skills registration standards (ELS Standards). To practise safely in Australia, registered health practitioners must have effective English language skills. This includes being able to communicate effectively with patients/clients/consumers and their relatives and carers, collaborate with other health care professionals and keep clear and accurate health records.

The National Boards set requirements for English language skills to make sure all registered health practitioners can provide safe care and communicate effectively in English. The ELS standard helps to ensure that everyone who registers as a health practitioner in Australia has these skills, regardless of their language background. The ELS standard is one of the five core registration standards required by all National Boards and applies to all applicants at initial (first) registration, whether they qualified in Australia or overseas.

The National Boards and the Australian Health Practitioner Regulation Agency (Ahpra) are seeking feedback about the proposed revised ELS Standards. Please ensure you have read the public consultation papers before answering this survey, as the questions are specific to the revised ELS Standards.



Q3. Publication of responses

The National Boards and Ahpra publish submissions at their discretion. We generally publish submissions on our websites to encourage discussion and inform the community and stakeholders. Please advise us if you do not want your submission published.

We will not place on our websites, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the subject of the consultation. Before publication, we may remove personally identifying information from submissions, including contact details.

The National Boards and Ahpra can accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences 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.

Published submissions will include the names (if provided) of the individuals and/or the organisations that made the response unless confidentiality is requested.

Please select the box below if you do **not** want your responses to be published.

☐ Please do **not** publish my responses

Q1. About your responses

Are you responding on behalf of an organisation?

☒ Yes

☐ No

Q2. Please provide the name of the organisation.

Australian Traditional Medicine Society

Q3. Which of the following best describes your organisation?

☐ Health services provider

☐ Professional indemnity insurer

☐ Legal services provider

☒ Professional body (e.g. College or Association)

☐ Education provider

☐ Regulator

☐ Government

☐ Ombudsman

☐ Other

Q4. Please describe your organisation.

This question was not displayed to the respondent.

Q5.

Your contact details

First name:

[REDACTED]

Q6. Last name:

Q7. Email address:

Q8.

Which of the following best describes you?

This question was not displayed to the respondent.

Q9. Please describe.

This question was not displayed to the respondent.

Q10.

Which of the following health profession/s are you registered in, in Australia?
You may select more than one answer.

This question was not displayed to the respondent.

Q11. Please describe.

This question was not displayed to the respondent.

Q12.

General

Ahpra and the National Boards (excluding the Aboriginal and Torres Strait Islander Health Practice Board of Australia) have reviewed their respective ELS standard to ensure that it stays current and keeps pace with our changing and dynamic environment.

We are only proposing changes to the common ELS standards where real improvements have been identified to align with available evidence, clarify processes, reduce duplication, streamline and remove unnecessary information and address gaps in content. We have based any changes on research and international benchmarking and our regulatory experience.

The main changes proposed to the ELS standard common for all professions (except the NMBA) involved in the review are:

- clearer naming of the pathways in the standard
- renaming the current 'primary pathway' to the 'school pathway' to have a clear differentiation between the pathway and primary education
- strengthening and renaming the extended education pathway
- aligning with the Department of Home Affairs (DoHA) requirements by removing South Africa from the recognised country list
- adding the Cambridge C1 advanced and C2 proficiency tests to the accepted English language tests
- reorganising content to make the sequence more logical
- minor changes to improve wording and expression, and

- more active and personal language, making the ELS standards speak more directly to practitioners where appropriate.

The following questions will help us to gather information about the revised ELS Standards.

Please ensure you have read the public consultation paper (including the revised ELS Standards) before responding, as the questions are specific to the revised ELS Standards.

Q13. Is the content, language and structure of the proposed revised ELS standards clear, relevant and workable? Why or why not?

Yes, as it maintains the existing pathways and provides 2 additional options for testing.

Q14.

Is there any content that needs to be changed, added or removed in the proposed revised ELS standards? If so, please give details.

Consider increasing the current limitation to a maximum of two test sittings in a 12-month period.

Q15.

Please see consultation paper for all proposed changes to the ELS pathways. Some of the main changes proposed to the ELS pathways are:

- clear naming of four pathways within the standards
- reorganised content to make the sequence more logical, and
- minor rewording

Are the proposed pathways clear, relevant and workable? Why or why not?

Yes, subject to considering increasing the number of tests in a 12 month period.

Q16.

The pathways have been re-named to help applicants understand them better. The pathways have been reordered and additional guidance provided to applicants on which pathway may be suitable.

It is proposed to name the four pathways as follows:

1. Combined education pathway (no change to current pathway name)
2. School education pathway (currently named the primary language pathway)
3. Advanced education pathway (currently named the extended education pathway)
4. Test pathway (no change to current pathway name)

Are the new names for the pathways helpful and clear? Why or why not?

Yes.

Q17. Is it helpful to include examples in the definitions section of the ELS Standards? For example, those included in the *Full time equivalent definition* or would the examples be better placed in the supporting material (for example in Frequently asked questions)? Why or why not?

Yes.

Q18.

The current ELS registration standards allow applicants to combine test results from two sittings within six months subject to certain requirements as set out within the respective National Boards' ELS registration standards. The revised ELS standards is proposing to change the time period for accepting test results from two test sittings to 12 months.

Is the proposed change to the time period for accepting test results from two test sittings from, a maximum of six months to 12 months, workable? Why or why not?

No, ATMS recommends increasing the maximum number of tests above 2 over a longer time than 12 months.

Q19.

Is there anything else the National Boards should consider in its proposal to revise the ELS standards?

The Boards need to consider what plans will be put in place for current conditionally registered practitioners. ATMS recommends current conditional registration continue.

Q20.

Additional English language test types or modalities

National Boards are aware of the evolving modalities/types of English language tests such as those delivered fully or partially by remote proctoring.

The proposed draft standard sets out the currently accepted English language test types and modalities. It provides that National Boards could approve additional test types and modalities if satisfied that these tests meet the requirements of a high stakes test for the purpose of registration. Information about any additional tests approved by National Boards would be published on the Ahpra website.

Are there any additional considerations National Boards should be aware of when deciding whether to approve a new test modality or type by an accepted English language test provider as suitable for the purposes of meeting the ELS standards?

Outside of our scope of contribution.

Q21.

Additional questions

Would the proposed changes to the ELS pathways result in any adverse cost implications for practitioners, patients/clients/consumers or other stakeholders? If yes, please describe.

Yes, if current conditionally registered practitioners fail to continue then that reduction in practitioners will have an adverse impact on the supply of services and in turn ATMS membership. Some conditionally registered practitioners may change practitioner pathways to services that are not registered with any national board, for example myotherapy.

Q22. Would the proposed changes to the ELS pathways result in any potential negative or unintended effects? If so, please describe them.

Yes. Acupuncture skills may perpetuate under another treatment name.

Q23.

Would the proposed changes to the ELS standards result in any potential negative or unintended effects for people vulnerable to harm* in the community? If so, please describe them

*Such as children, the aged, those living with disability, people who are the potential targets of family and domestic violence

Yes. If Acupuncture skills perpetuate under another treatment name, it may change the forms of public funding and treatment rebates. It may also impact professional conduct.

Q24.

Would the proposed changes to the ELS standards result in any potential negative or unintended effects for Aboriginal and Torres Strait Islander Peoples? If so, please describe them.

See above.

Q25.

Do you have any other feedback about the ELS standards?

ATMS supports a clear resolution on this issue to allow Chinese Medicine to take its place as a full participant as an Australian allied health profession.

Q26.

Thank you!

Thank you for participating in the public consultation.

Your answers will be used by the National Boards and Ahpra to improve the proposed revised ELS Registration Standard.