



AUSTRALIAN MEDICAL
ASSOCIATION

ABN 37 008 426 793

T | 61 2 6270 5400

F | 61 2 6270 5499

E | info@ama.com.au

W | www.ama.com.au

42 Macquarie St Barton ACT 2600

PO Box 6090 Kingston ACT 2604

AMA submission to the Medical Board of Australia on the Draft revised Good practice guidelines for the specialist international medical graduate assessment process.

Medical Board of Australia
medicalboard@ahpra.gov.au

Thank you for giving the AMA the opportunity to comment on the proposed changes to the good practice guidelines (now Standards). The AMA supports robust but fair assessment of international medical graduates seeking to practise in Australia.

Overall the AMA supports the revisions and proposed changes. However, the AMA maintains some concerns and has some suggestions. These are similar to the feedback the AMA provided during the preliminary consultation phases. These will be addressed in response to the questions posed in the consultation document.

1. Are the proposed Standards, clearer and easier to read? In particular, are there any areas of the proposed Standards that could be clearer about the precise requirements of the assessment processes?

The proposed standards are clear and easy to read.

2. Does the rewording and restructure of the comparability definitions make the distinction between substantially comparable, partially comparable and not comparable SIMGs clearer or are they open to interpretation? If they are not clear, how should the definitions be reworded or what additional explanation should be included in the proposed Standards?

The AMA supports the rewording and restructure.

3. For the definition of substantially comparable, do you support replacing the term 'peer review' with the term 'supervised practice'? If not, please give reasons.

The AMA supports this change.

4. Do you support a mandatory minimum period of supervised practice for all SIMGs assessed as substantially and partially comparable? If not, please give reasons. If yes, are the minimum periods proposed appropriate?

The AMA supports the introduction of a minimum period of supervised practice, noting that the relevant College will determine the appropriate period within the minimum and maximum periods set by the MBA. In determining the relevant period, the AMA would suggest that the guidelines make it clear that Colleges should be satisfied that the period provides sufficient clinical exposure, taking into account the administrative burden often involved in supporting this process.

5. Do you support the proposal for a Summary of preliminary findings as part of the comparability assessment process? If not, please give reasons.

The requirement to produce a summary of findings (SoF) before the interim assessment decision has been finalised provides an IMG with the opportunity to provide the relevant College with additional information or correct errors of fact. This is an important part of ensuring that the assessment process is fair. Colleges will need to ensure that this is applied in a way that does not have the unintended consequence of extending the time taken to assess applicants.

6. Is the timeframe for providing a SIMG with a Summary of preliminary findings and the timeframe for receiving feedback from the SIMG appropriate? If not, what should the timeframes be?

The timeframe seems appropriate.

7. Is the level of information to be included in the Summary of preliminary findings appropriate? Is there any additional information that should be included?

The level of information is appropriate.

8. Is the proposal for when it is appropriate to conduct an area of need assessment only, helpful and appropriate? If not, please give reasons.

Area of need has been a long standing feature of registration arrangements to deal with identified workforce shortages.

The AMA is aware that areas of workforce shortage are not clearly decided in an accountable way against objective, equitable and consistent criteria and are not always aligned between the states/territories and the Commonwealth. The AMA supports the development of clear and objective criteria along with the AMA and a single accountable decision-making entity.

The AMA is also aware that many IMGs have been approved for AON registration and allowed to remain in these positions for many years without progression to the relevant Australian qualification. In more recent years, the MBA has implemented changes to its standards and processes to address this. While the AMA has supported this more rigorous approach, there is no doubt that it has caused concern within local communities about the potential loss of a local doctor as well imposing significant stress on those IMGs who have found themselves struggling to comply with requirements to progress to the relevant qualification.

The decision to be more explicit about the purpose of AON is welcome and ensures that IMGs know the rules 'up front' and meet objective standards for the delivery of care. Given the history of AON applicants staying in Australia well beyond four years, even if that was not their original

intent, we suggest that it be made clear that if an IMG decides to stay beyond the four period that they will be required to meet the appropriate Australian qualification and/or will need to undertake the normal specialist assessment pathway.

9. Is the proposal for colleges to publish a minimum list of requirements for eligibility to apply for assessment (specialist recognition and area of need) appropriate? Are there any other minimum requirements that should be included?

In the interests of transparency, this information for applicants is useful and Colleges should publish to the full extent possible all relevant information about the requirements of the assessment process. In this regard, the AMA would question the use of the word – ‘minimum’. It should simply be the full list of requirements.

10. Is the revised guidance on assessing SIMGs for a limited scope of practice clearer? If not, which aspects are unclear and what additional information should be included?

The revised guidance is clearer.

11. Is there anything missing that needs to be added to the proposed Standards?

The AMA welcomes the requirement that colleges produce guidelines on supervision, but the roles and responsibilities of the supervisor should be described in greater detail to ensure that supervisors are assessing the SIMG, not merely providing oversight. The AMA would also like to see some minimum standards for the competence of the supervisor in that role and the requirement to undertake an induction (this could be online) to ensure that the supervisor is aware of their role and responsibilities. The MBA could consider evaluating the supervision guidelines and providing feedback to the colleges to facilitate this.

12. Do you have any other comments on the proposed Standards?

The AMA again thanks the MBA for the opportunity to provide feedback on the draft Standards. The document is a positive development and we look forward to continuing to work with you. If you have any questions, please contact [REDACTED] or [REDACTED].

Yours sincerely,



Dr Tony Bartone
President

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