## Stakeholder details

## **Initial questions** To help us better understand your situation and the context of your feedback please provide us with some details about you. These details will not be published in any summary of the collated feedback from this consultation. Question A Are you completing this submission on behalf of an organisation or as an individual? Your answer: Name of organisation: The Royal College of Pathologists of Australasia (RCPA) Contact email: □ Myself Name: Click or tap here to enter text. Contact email: Click or tap here to enter text. Question B If you are completing this submission as an individual, are you: ☐ A registered health practitioner? Profession: Click or tap here to enter text. ☐ A member of the public? ☐ Other: Click or tap here to enter text. Question C Would you like your submission to be published? ☐ Yes, publish my submission without my name/ organisation name ☐ No – do not publish my submission

1.		ntent and structure of the draft revised specialist registration standard helpful, evant and workable?
Please see below.		
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2.		ny content that needs to be changed, added or deleted in the draft revised t registration standard?
(a)	specia of any standa	ms clear from subsection 57(1)(b)(i) of the National Law that a prerequisite to eligibility for elist registration in a recognised specialty in a health profession is successful completion period of supervised practice in the specialty required by an approved registration and for the health profession. Consistent with this, the draft reviewed registration and: specialist registration states:  To satisfy the requirements of section 57(1)(b) of the National Law, you will have successfully completed six months of satisfactory supervised practice approved by
	The D	the Board in the specialty within Australia.
	(i)	CPA makes the following comments:  It is not clear from the revised registration standard how the SIMG obtains registration as a medical practitioner with AHPRA on 'Day 1' that will enable them to undertake the six months of satisfactory supervised practice.
	(ii)	Is it proposed that the registration standard for 'Limited Registration for Postgraduate Training or Supervised Practice' will also be revised to provide a SIMG with limited registration so they will be able to work as a medical practitioner for six months until they are eligible for specialist registration under the revised registration standard: specialist registration? Or is it anticipated that all SIMGs eligible for the expedited specialist pathway will be eligible to apply for provisional registration via the <a href="Competent Authority Pathway">Competent Authority Pathway</a> that would enable them to work as a medical practitioner for six months?

- (iii) Is the six month period of satisfactory supervised practice intended to be six months full time equivalent? If so, it should be expressed in the revised registration standard as "six months FTE".
- (iv) Six months is not a long time for a SIMG adjusting to a new health system and new workplace. It may take a SIMG who has recently arrived in Australia six months to 'find their feet'. The RCPA submits that the supervision period should be lengthened to 12 months FTE.

- (b) The revised registration standard does not provide any guidance on the supervision requirements that will apply during the 6 months of supervised practice. For example:
  - (i) How many supervisors will be required?
  - (ii) Will the supervisors need to be Fellows of a specialist college?
  - (iii) Does the six months of supervised practice need to be undertaken in a workplace that has been accredited by a specialist college for training in the relevant specialty/field of specialty practice?
  - (iv) Do the supervisors need to have held specialist registration in the specialty for a minimum period (e.g. 5 years)?
  - (v) Will a supervisor be granted a personal indemnity under the National Law (or otherwise) unless it can be proved that they did not exercise their responsibilities as a supervisor in good faith? If so, the legislative basis for such an indemnity should be footnoted in the revised registration standard.
  - (vi) Will a supervisor's employer (which may be held responsible for the actions of their employee) be granted an indemnity under the National Law (or otherwise) unless it can be proved that their employee did not exercise their responsibilities as a supervisor in good faith? If so, the legislative basis for such an indemnity should be footnoted in the revised registration standard.
  - (vii) How will the potential for supervision arrangements to be compromised by a conflict of interest be managed (e.g. if a supervisor was subject to pressure by their employer to rate the SIMG's performance during the 6 months as satisfactory)?
  - (viii) The revised registration standard employs the term 'satisfactory supervised practice approved by the Board'. The *New Oxford Dictionary of English* defines the word 'satisfactory' as:

"fulfilling expectations or needs; acceptable, though not outstanding or perfect"

The revised registration standard, or some other document (see next point), should provide guidelines on when a SIMG's performance during their period of supervised practice will be approved by the Board as 'satisfactory' or not approved as 'satisfactory'.

- (ix) Will the Medical Board of Australia issue guidelines on the supervision of SIMGs on the expedited pathway similar to the 'Guidelines: Supervised Practice for International Medical Graduates' (effective 4 January 2016) for IMGs who have been granted limited registration or provisional registration?
- (c) The revised registration does not require any doctor applying for specialist registration to provide evidence of successful completion of a medical internship or comparable as the existing registration standard does. There does not appear to be any explanation of this omission so it is not clear whether it is intentional.
- 3. Are there any impacts for patients and consumers, particularly vulnerable members of the community that have not been considered in the draft revised specialist registration standard?

The RCPA does not have any comments to make in response to this question.

4. Are there any impacts for Aboriginal and Torres Strait Islander Peoples that have not been considered in the draft revised specialist registration standard?
Depending on the SIMG's potential interaction with Aboriginal and Torres Strait Islander People, six months to learn about cultural safety, on top of everything else required to operate in the Australian health system, does not seem like sufficient time.
5. Are there any other regulatory impacts or costs that have not been identified that the Board needs to consider?
The RCPA does not have any comments to make in response to this question.
6. Do you have any other comments on the draft revised specialist registration standard?
No.