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 These details will not be published in any summary of the collated feedback from this consultation.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:
⊠ Organisation
Name of organisation: Alecto Australia
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 with my name/organisation name
☐ Yes, publish my submission without my name/ organisation name
□ No – do not publish my submission

Your responses to the consultation questions

1. Is the content and structure of the draft revised specialist registration standard helpful, clear, relevant and workable?

Overall, the content and structure of the draft revised specialist registration standard is primarily clear. However, we believe there needs to be further clarification regarding the implications of holding Specialist Registration without General Registration. Specifically, it is unclear whether there are differences in conditions between those who achieve Specialist Registration solely through this new pathway and those who have previously held General, Limited, or Provisional Registration before gaining Specialist Registration or holding FRACGP.

Additionally, we had understood that there was the potential requirement for Workplace Based Assessments. It remains uncertain who will be responsible for conducting these assessments that are currently completed by the colleges. Otherwise, can it be confirmed that no assessments are required.

Lastly, the draft mentions the necessity for either:

- Six months of satisfactory supervised practice approved by the Board within Australia.
- An examination or assessment approved by the Board to evaluate the ability to practice the specialty competently and safely.

Given these requirements, further guidance would be beneficial on how international applicants can effectively meet these conditions. As they would not have held registration before and can not complete the six months of supervised practice, could the standard specify the exact nature of the examination or assessment that would be undertaken?

We believe that addressing these concerns more specifically will enhance the clarity, relevance, and workability of the standard, ensuring that it accommodates the diverse backgrounds and circumstances of all applicants.

2. Is there any content that needs to be changed, added or deleted in the draft revised specialist registration standard?

In reviewing the draft revised specialist registration standard, there are several areas where content could be adjusted to provide greater clarity and support for candidates:

- Role of Colleges: It should be explicitly stated whether the Medical Colleges have a role at any
 stage of the initial granting of specialist registration, especially during the period when
 candidates are required to complete certain requirements. Clarification on this point will help
 candidates understand the expectations and the process more clearly.
- Requirement for Fellowship Qualifications in the future: The standard should address
 whether candidates are required to obtain fellowship qualifications in order to maintain their
 specialist registration after the initial registration period or if they remain eligible for specialist
 registration indefinitely. If such a requirement exists, details on the timing and the process for
 achieving this milestone should be clearly outlined. This will ensure that all candidates are fully
 aware of the long-term commitments and achievements needed to sustain their specialist
 status.
- Location Restrictions for GPs (19AB): Given the specific challenges and regulations surrounding the practice locations for GPs, particularly under the 19AB/19AA legislation, the standard should discuss if there are any location restrictions. This information is crucial for GPs to plan their career paths and meet compliance requirements effectively.

By addressing these areas, the draft revised specialist registration standard can better meet the needs of the diverse group of medical professionals seeking specialist registration in Australia.

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 draft revised specialist registration standard is expected to positively impact patients by increasing access to high-quality medical care, especially in underserved areas. This increase in specialist availability should help alleviate some health system burdens. Additionally, greater competition among doctors may enhance care quality and provide patients with more choices, potentially easing the significant workload and burnout currently experienced by GPs.

4. Are there any impacts for Aboriginal and Torres Strait Islander Peoples that have not been considered in the draft revised specialist registration standard?

The pathway may further benefit by mandating completion of training modules on Aboriginal and Torres Strait Islander health issues for all practitioners prior to or within the first 3 months of commencing work in Australia.

Such training would ensure that healthcare professionals are better prepared to address the unique health challenges and cultural sensitivities associated with these communities. This inclusion would not only enhance the standard of care provided but also foster greater trust and understanding between healthcare providers and Aboriginal and Torres Strait Islander Peoples.

5. Are there any other regulatory impacts or costs that have not been identified that the Board needs to consider?

Several additional regulatory impacts and costs require the Board's consideration to ensure the effectiveness and equity of the revised specialist registration standard:

1. Medicare/Services Australia Considerations:

- How will Medicare/Services Australia view specialists registered through the expedited pathway, particularly if they have conditions? Will these practitioners be treated the same as others holding specialist registration?
- It is crucial to clarify whether these specialists will face different treatment under current 19AB and 19AA restrictions and if they will be eligible to bill at full A1 rates under this pathway.

2. Registration Costs:

- It is Important that the costs of registration are significantly lower than current college programs.
- Currently the costs are a barrier to practitioners considering the move to Australia. The
 current system inadvertently discriminates against those coming from poorer countries such
 as Malaysia where doctors still earn a very low amount and cannot afford registration costs
 at their current level through specialist colleges (if they have the relevant skills and quality)

3. Market Competition:

The potential increase in competition among medical practitioners should be carefully
monitored to prevent any negative impacts. This has the potential to improve the quality of
medical practices as there will be more competition for positions and for hospitals to be
more selective and choose the best practitioners, however, it is important to consider how
this might affect current practitioners and healthcare settings.

4. Hidden Costs:

 Consideration should be given to the indirect costs borne by recruitment agencies, clinics, and individuals. These costs impact the overall affordability and accessibility of medical services and could influence decisions made by potential practitioners considering working in Australia.

6. Do you have any other comments on the draft revised specialist registration standard?

1. Addressing Control of Workforce Numbers:

This draft represents a crucial step towards balancing the control previously held by medical colleges over workforce numbers. Historically, these colleges have had the unilateral ability to regulate the number of practitioners entering the profession, often with a potential conflict of interest that could lead to an artificial restriction of new entrants. The introduction of an independent body to oversee this process is a welcome change, offering a fair and accountable system that ensures qualified practitioners can serve the community.

2. Benefits Beyond Healthcare:

The revised standard should also consider the broader impacts on practitioners' well-being, including mental health and financial stability. Facilitating smoother pathways for international medical practitioners not only enriches our healthcare system but also provides significant personal benefits for those moving to Australia. The current pathways through the colleges can be confusing, and long and do have an impact on not just the practitioner's financial situation, but also their mental wellbeing especially when there are limited opportunities for unbiased right for appeal or consideration of unique situations. The new pathway will give these practitioners a more positive first experience with the Australian system.

3. Alignment with International Standards:

By revising this standard, Australia moves closer to aligning with international best practices, as seen in countries like New Zealand and the United Kingdom.

These changes are essential for creating a more inclusive and equitable system that not only meets the healthcare needs of the Australian public but also supports the medical practitioners who dedicate their lives to this profession.