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 These details will not be published in any summary of the collated feedback from this consultation.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: Click or tap here to enter text.
Contact email: Click or tap here to enter text.
⊠Myself
Name:
Contact email:
Question B
If you are completing this submission as an individual, are you:
☐ A registered health practitioner?
Profession: General Medicine registrar
☐ 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□ No – do not publish my submission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

Tour responses to the concurtation questions
Is the content and structure of the draft revised specialist registration standard helpful, clear, relevant and workable?
Specialist registration via the expedited specialist pathway relies on the use of section 58(b) of the National Law. It will be available to applicants who have been deemed to hold a qualification which is substantially equivalent or based on similar competencies to an approved specialist qualification for the specialty. What this part mean?
2. Is there any content that needs to be changed, added or deleted in the draft revised specialist registration standard?
What about specialist registration for overseas trained physicians from countries other than Uk, Canada, Ireland? its really crucial for them to know. Because they need it assessment.
What a bout those with partially comparable? They need a Specialist registration while working under supervision as well.
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?
Specialist registration does not have any negative impact on patients while OTPs are working under supervision. Only supervision is very important regarding patients Safety. That is only a document . Specialists can work under a specific policy determined by Ahpra.
4. Are there any impacts for Aboriginal and Torres Strait Islander Peoples that have not been considered in the draft revised specialist registration standard?

Noting
5. Are there any other regulatory impacts or costs that have not been identified that the Board needs to consider?
College assessment is very expensive. Ahpra officers can do that with less cost. Ahpra is able to understand qualifications. If College wants do continue assessment, its really better to decrease the costs.
6. Do you have any other comments on the draft revised specialist registration standard?
What will happen for current registrars on training programs who need their specialist registration only as a positive skill assessment. It can be helpful in all kind of visa process and helps keep specialists in Australia rather than shift to other countries.
It has personally happened to myself hesitating to go to other countries like US, given I can not have my skill assessment until becoming near 45 years old. By that time I will lose my chance of permanent residency. So it is waste of time to work in Australia given other countries will give me PR but Australia No. No clear future.
It seems Colleges are happy to keep OTPs for a long time in position of a registrar to ask them more fees,
Although I have been assessed as partially comparable I definitely need specialist registration after for example 6 months of satisfactory report of supervisors. If I have specialist registration, I will be happy to work under supervision as far as needed