

SUBMISSION

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AMA submission to the draft revised registration standard: specialist registration

By email: SIMGPathwaysReview@ahpra.gov.au

The Australian Medical Association is supportive of reducing the unnecessary regulatory burden for proven medical practitioners hoping to bring their skills to Australia. Much of the work to reduce duplication and delay in the migration process that started during the Kruk Review was long overdue. The AMA is generally supportive of the proposed revisions to the revised registration standard, however this should not be considered an endorsement of the changes to processes and the pathway behind the standard.

As stated in our submissions to the Kruk Review, the AMA is supportive of amendments to the Health Practitioner Regulation National Law, specifically sections 57 and 58, that would clarify the extent to which relevant comparable experience can be used in facilitating registration.

The AMA's position was that these changes should assist the medical colleges in the assessment of specialist international medical graduates (SIMGs) as it is fundamental to our system that the medical colleges continue to set standards for training, education and practice. Provided the colleges remain meaningfully involved in the Medical Board's development, monitoring and management of new pathways, the AMA is ready to support the revisions. However, the AMA understands some of the colleges involved in the first tranche have outstanding concerns with the process. The Medical Board must continue to work with the colleges to address these concerns before the AMA can fully support the process. The AMA would also strongly encourage greater engagement with the medical defence organisations that will be required to provide medical indemnity insurance to these new practitioners.

The AMA believes that a safe, supported pathway is achievable given appropriate time to consult and develop clear pathways based on clear advice from medical colleges. The rapid timeframe dictated by health ministers for achieving this outcome is unrealistic and does not allow sufficient time for proper consideration of all the issues involved in what are very significant changes. It is imperative these reforms support the continued high standard of service delivery within the Australian medical workforce. All parties involved in the process, including the colleges and the Medical Board, must be provided with sufficient time to get these changes right.

This submission will address the questions in the consultation and provide additional general feedback.

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

The AMA believes the revised structure has been formed in a helpful, clear, relevant and workable manner. Simplifying content and removing unnecessary double ups to increase clarity is a positive change.

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

The AMA is supportive of the wording and structure of the draft revised specialist registration standard.

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 AMA does not feel any groups in particular are likely to be negatively affected by the proposed amendment to the standards. However, the AMA would reiterate that simply streamlining application processes for SIMGs does not improve the support systems or integration processes for doctors from different cultures and backgrounds who arrive in Australia and are expected to immediately provide high-quality support and healthcare to Australian citizens. While cultural safety training is expected to be provided, this alone will not act as the holistic support system necessary to fully integrate SIMGs.

It is also important to note the period of supervised practice and orientation to the Australian health system is an essential and significant aspect of the revised standard. It is important this period is approached in a thorough, comprehensive manner and does not cut any corners. While the AMA is supportive of removing unnecessary barriers to high-quality, experienced doctors from joining our medical workforce, it is imperative this process does not result in a lowering of Australia's high standards for our medical practitioners.

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

Cultural safety is central to Aboriginal and Torres Strait Islander peoples and their interaction with the health system. The AMA advocates for medical education and training providers to integrate cultural safety into education, training and continuing professional development programs at all stages of the medical education and training continuum.

IMGs and SIMGs should be held to the same standard of cultural competence as the broader Australian health workforce and encouraged to undertake reflective practice about their role in integrating cultural safety into their clinical practice at all stages of their career, outside of, and in addition to, formal medical education and training that should be made accessible to them.

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

The AMA urges the Medical Board, along with the health ministers responsible for guiding holistic workforce planning, to consider the broader investment necessary to achieve the goal of effectively integrating more SIMGs into Australia's workforce. Simply reducing the regulatory burden and system

duplication for SIMGs will not provide the wholly integrated, culturally safe and fully activated workforce that could be achieved with an effective workforce planning strategy.

Australia is experiencing serious workforce shortages across a range of health professions, with SIMGs and overseas health professionals playing an important part in building a fully resourced workforce for now and the future. However, streamlining processes to increase our intake of doctors from overseas should not come at the expense of Australia's high standards, patient safety and quality care. It is essential the regulatory landscape is balanced so highly competent doctors are incentivised to begin practice in Australia, while guaranteeing Australia's world-leading standards of care are in no way compromised.

To achieve genuine workforce reform, Australia must increase our investment in holistic and data driven workforce planning. The AMA has proposed the establishment of an [independent national health workforce planning agency](#) to achieve this. Such an agency would introduce a coordinated ability to collate, analyse, and use health workforce data to inform evidence-based policies and strategies to meet the evolving needs of our communities.

While reform is needed to streamline the entry process into Australia for IMGs, the Kruk Review placed too great an emphasis on speeding up entry processes and too little emphasis on the necessary supports needed for IMGs to work in a supported environment that is safe for patient and clinician. The onus is on Australia's health ministers to work collaboratively with each other and their jurisdictional health departments to develop a holistic support network for doctors arriving in Australia.

Some of the biggest challenges still facing IMGs in Australia that require urgent attention include:

- a lack of personal, family and cultural supports, as well as social isolation due to poor orientation into local communities
- a lack of access to education, training and professional support, such as poor orientation to the Australian health system and barriers to accessing training and education support resources
- racism and discrimination from patients, colleagues, employers and within structural systems
- employment conditions, including exploitative contracts and pay discrepancies compared with Australian trained doctors.

For overseas health practitioners to become truly integrated into Australia's health system, it is also essential for educational and transitional supports to be provided for new arrivals, noting that many are placed in some of the most challenging working environments, including rural and remote Australia.

General comment

The new SIMG pathway will increase the workload of the Medical Board as it will begin receiving and processing applications for SIMGs to work in Australia. The AMA has been frustrated that the costs of the reforms to date have been borne by doctors and other registered health professionals through their Ahpra registration fees. Health ministers must provide appropriate funding for this work,

particularly as it is a result of the lack of investment and deliberate decisions to withdraw health workforce infrastructure.

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