January 25, 2023



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To whom it may concern

Re: Medical Board of Australia: Public consultation on a revised registration standard -Granting general registration to Australian and New Zealand medical graduates on completion of intern training'.

The Royal Australasian College of Medical Administrators (RACMA) welcomes the opportunity to provide comment on the draft revised registration standard.

Responses to the questions for consideration presented below.

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

In general, the content and structure to the draft revised standard are satisfactory. Suggested changes are addressed in question 2 below.

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

The following comments relate to the section titled "Intern training requirements":

- It is considered that the second sentence in the introduction to item 1.c. is confusing, and the following revision is suggested: "Each term must include direct clinical care of patients predominately in no more than one or two of the types of patient care below" AND ALL FOUR CARE TYPES MUST BE EXPERIENCED during the 47 weeks."
- There is no statement indicating that the intern MUST do all four care types.; assuming this is the case, there should be a statement explicitly confirming this.
- Subsection 2 states the following: "For the 47 weeks FTE experience, you can only practise a maximum of 25% in any one subspecialty and a maximum total of 50% in any one specialty (including its subspecialties). For example, you may not practise more than 50% in surgical terms or paediatric terms."; it is considered that the areas of practice and their percentages in a particular term need to be carefully specified; this is to assure consistency when accrediting terms, to ensure that the prescribed duration of experience is undertaken in all the four areas and to minimise confusion and the possibility of gaming.

In the section titled "Are there exemptions to this standard?" it is suggested that the title of the subsection "Intern training completed outside of Australia or New Zealand" is changed to "Intern training undertaken outside of Australia or New Zealand." The following two paragraphs should then have the headings partial and complete respectively. This suggestion is for greater clarity.

There is no reference to medical practitioners who have undertaken their training with or without undertaking internship in countries other than Australia of New Zealand and are seeking general registration. It is recommended that there is reference to this cohort in the "More Information" section to indicate that there is separate guidance for them and inclusion of links to associated documents.

Although not the subject of this consultation it is noted that the Ahpra standard for Granting General Registration to Medical Practitioners who hold an Australian Medical Council Certificate (February 2018) requires 47 weeks with specified terms. It is suggested that the term structure for this group (and those undertaking the work-based assessment pathway) should be the same as for Australia and New Zealand (ANZ) graduates and for them to be treated as equivalent to this group with the same four care types needed, supervision and protected education time.

# 3. Are there any impacts for patients and consumers, particularly vulnerable members of the community that have not been considered in the draft revised standard?

It is considered there are no impacts.

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

It is considered there are no impacts.

### 5. Do you have any other comments on the draft revised standard?

N/A

Thank you for the opportunity to comment. If RACMA or its Members can be of further assistance in this matter, please contact the undersigned.

Yours sincerely

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