

The Royal Australian College of General Practitioners Submission No. 67 (Overseas Trained Doctors) Date: 15/02/2011

## RACGP Submission to the House of Representatives Standing Committee on Health and Ageing

*"Inquiry into Registration Processes and Support for Overseas Trained Doctors"* 

4 February 2011

Supporting our communities

## Introduction

The Royal Australian College of General Practitioners (RACGP) thanks the House Standing Committee on Health and Ageing for their invitation dated 9 December 2010, to contribute to the committees' enquiry into the Registration Processes and Support for Overseas Trained Doctors.

The RACGP is the specialty medical college for general practice in Australia. It is responsible for defining the nature of the discipline, setting the standards and curriculum for education and training, maintaining the standards for quality clinical practice, and supporting general practitioners in their pursuit of excellence in patient care and community service.

The RACGP believes that public confidence in the quality of Australian general practice is paramount. It has demonstrated its commitment to improving the quality and safety of patient care through implementation of an innovative curriculum for general practice training, a continuing professional development program with a focus on quality improvement, and standards for general practice that are strongly evidence-based.

The RACGP is committed to ensuring that general practice remains the centre of high quality health care in Australia, and that general practice remains a satisfying and rewarding vocation for all general practitioners.

The RACGP strongly believes that regional, rural and remote communities deserve the same standard of medical care as other Australian communities.

The RACGP advocates that overseas trained doctors working in areas of isolation should be afforded direct supervision, education by an accredited training provider, mentorship, and appropriate orientation to Australian general practice and the health care system.

It is imperative that the Federal Government ensures that medical practitioners including overseas trained doctors who are working in Australian general practice but are not recognised general practitioners, are:

- Better supported in orientation to the Australian health care system and Australian culture
- Better supported to prepare for RACGP Fellowship
- Working to the same standards as those which apply to Australian graduates, including:
  - Access to adequate funding; and
  - Access to appropriate supervision; and
  - Access to continuing professional development.

## **RACGP** position – International Medical Graduates

The RACGP recognises overseas trained doctors or international medical graduates (IMGs) constitute up to 39% of the rural GP workforce in Australia. They provide a vital role in the delivery of primary health care to regional, rural and remote communities and will continue to do so for the foreseeable future.

The valuable role IMGs provide to the health of communities across Australia needs to be recognised, supported and adequately funded.

#### 10 Year Moratorium

The RACGP has never supported or endorsed the 10 Year Moratorium and believes the policy needs urgent review.

Under the 10 Year Moratorium, IMGs (including overseas medical students, first registered with an Australian medical registration board on, or after 1 January 1997) are unable to attract Medicare benefits for their services for a minimum period of ten years, unless they hold a section 19AB exemption. A section 19AB exemption requires an IMG to work in a district of workforce shortage (DWS) in order to access Medicare benefits. DWS are generally found in outer metropolitan lower socio-economic, regional, rural and remote areas of Australia.

The RACGP recognises that some IMGs affected by the Moratorium are working in areas of isolation with little or no support, or adequate supervision. Some enter general practice without appropriate orientation to Australian general practice, the Australian health care system, and Australian culture.

The RACGP acknowledges the severe rural doctor shortage in Australia and the valuable contribution made by IMGs to rural communities. However, the RACGP is concerned that doctors working in Australian general practice under the 10 Year Moratorium, are not subjected to the same entry standards as an Australian Medical Graduate (AMG) entering the vocational training program, and no universal requirement to participate in continuing professional education activities until they attain RACGP Fellowship.

#### Working toward RACGP Fellowship

Fellowship of the RACGP allows an IMG to gain professional recognition from their peers, the option to apply for permanent residency and the ability to work across Australia. Attaining RACGP Fellowship provides IMGs with professional flexibility and security.

When an IMG arrives in Australia, much focus is placed on passing the RACGP Fellowship exam. However an IMG can work in general practice having completed the Australian Medical Council (AMC) part 1 exam. Once AMC part 1 is completed IMGs are granted limited registration by the Australian Health Practitioners Regulation Agency (AHPRA). They are then able to work under supervision in general practice in an area of medical

workforce shortage. Limited registration is initially granted for a period of 4 years.

AHPRA expects IMGs with limited registration to achieve RACGP Fellowship within four (4) years of initial registration.

IMGs that have completed AMC part 1 and attained RACGP Fellowship are granted specialist registration by AHPRA to work as an unsupervised general practitioner. IMGs wishing to attain full general registration are required to also complete AMC exam part 2.

#### Supporting IMGs when they arrive in Australia

The RACGP understands that whist attaining fellowship is important to IMGs, other factors associated with working in medicine and living in rural Australia are central to their professional, personal and family wellbeing (Dr K Kirkpatrick, Australian Rural Doctor Magazine March 2010).

The RACGP acknowledges that IMGs often find it difficult to make the transition into working in the Australian health care system and adjusting to life in Australia's regional, rural and remote communities.

The RACGP offers a number of programs to assist IMGs to understand the Australian health care system and to prepare for the RACGP Fellowship exam including:

#### IMG Fellowship support program

The RACGP has sourced funding from the Commonwealth Department of Health and Ageing (DoHA) to support 300 IMGs at risk of losing their limited registration in 2011. The program will help IMGs to prepare for either the 2011.1 or 2011.2 RACGP Fellowship exam segments. Through the provision of examination support workshops conducted in each state and territory, IMGs with limited registration who meet the eligibility criteria can attend the program in person or join in by teleconference or 'webinar' linkup. Information on this program is available on-line by clicking the following link: <a href="http://www.racgp.org.au/fridayfacts/40970">http://www.racgp.org.au/fridayfacts/40970</a>

#### IMG bridging course

The RACGP and Australian Medical Council (AMC) bridging program has been developed to meet the needs of doctors with overseas qualifications who are preparing to sit the AMC part 1 and part 2 examinations.

The Programs are designed to rapidly improve candidates' professional knowledge in the areas necessary to pass the AMC examinations and for subsequent clinical practice. The RACGP offers the course 3 times a year.

#### • Exam preparation workshops and DVDs

Each RACGP state faculty provides information and practice opportunities together with exam preparation courses and seminars that IMGs are encouraged to attend. Topics such as instruction in examination techniques, clinical case discussions, and clinical practice sessions are

common components. During these sessions, candidates are tutored by experienced members of the FRACGP examination panels.

The RACGP National Rural Faculty has also produced an 11-DVD set covering a 19-week pre-exam tutorial series designed to assist IMGs, GP registrars, and other medical practitioners who are preparing to undertake the college examination. The series is regarded as the most comprehensive pre-exam tutorial program currently available to FRACGP exam candidates.

#### • IMG Support Committee (Victoria Faculty)

The IMG Committee is convened by the RACGP in Victoria to identify and assist the needs of IMGs living and working in Victoria.

#### • IMG Peer mentoring network

The RACGP sourced DoHA funding for a pilot of the IMG Peer Mentoring Network during 2009-2010. The pilot provided 60 IMGs newly arrived in Australia with a peer mentor to orient them to the Australian health care system, support them to achieve recognition as a GP through the attainment of RACGP Fellowship, and to facilitate their integration into their local community.

All RACGP mentors were IMGs themselves who had experienced a similar pathway to RACGP Fellowship.

The IMG Peer Mentoring network focused on the peer mentor relationship rather than formal medical education and clinical supervision.

One mentor involved in the program offered the following insight... "In our first session we spoke about my mentees life and how she was getting along. We talked through a lot of her work issues and her difficulties adjusting to the way medicine is practised in Australia." FRACGP, IMG, and GP mentor in WA

An external evaluation of the IMG Peer Mentoring network by Red Tree Consulting (2010) found that mentoring was strongly upheld as a practical resource by IMGs with almost universal support from mentors and mentees for the ongoing provision of IMG mentoring.

Another IMG provided the following thoughts on the peer mentoring project... "The project is a great vision and it is a fantastic effort for the College to start such a wonderful project with a huge potential to positively change/improve its relationship with IMGs." FRACGP, IMG, and GP mentor in rural QLD

A summary of the external evaluation and recommendations of the project can be found at:

http://www.racgp.org.au/Content/NavigationMenu/About/Faculties/NationalRuralFaculty/I MGPeerMentorProject/NRFMenteeProjectReport.pdf

In response to the *inquiry into registration processes and support for overseas trained doctors* being conducted by the House of Representatives Standing Committee on Health and Ageing, the RACGP has addressed the following areas for consideration:

- 1. Australian Medical Council and Australian Health Professionals Regulation Agency process
- 2. RACGP assessment processes
- 3. IMG support programs
- 4. Impediments for IMGs achieving Australian general practice qualifications and specialist registration

## 1. Australian Medical Council and Australian Health Professionals Regulation Agency process

The registration of IMGs is the responsibility of the Australian Medical Council (AMC) and Australian Health Professionals Regulation Agency (AHPRA). The RACGP does **not** have a role in this process.

*IMGs have advised the RACGP that the AMC process can be lengthy and frustrating. IMGs have also informed the RACGP that engaging with AHPRA can be a complicated process.* 

#### Australian Medical Council (AMC)

The AMC assesses IMGs who want to practise medicine in Australia. The assessment process follows one of four different pathways:

- Competent Authority Pathway
- Standard Pathway (AMC Examination)
- Standard Pathway (workplace-based assessment)
- Specialist Assessment Pathway (full comparability/Area of Need)

A flowchart with the AMC pathway is available in appendix (i) or click on the link below to view on-line: <u>http://www.amc.org.au/index.php/img</u>

#### Australian Health Practitioner Regulation Agency (AHPRA)

AHPRA is the organisation responsible for the registration and accreditation of 10 health professions across Australia including medical practitioners.

AHPRA supports the 10 National Boards that are responsible for regulating the 10 health professions. The primary role of the Boards is to protect the public and set the standards and policies that all registered health practitioners must meet. <u>http://www.ahpra.gov.au/</u>

From 1 July 2010, every doctor practising medicine in Australia must be registered with the Medical Board of Australia. There is a range of different types of registration to match different levels of training and experience. General practice was recognised as a specialty by AHPRA on 1 July 2010.

Limited registration is available to medical practitioners whose medical qualifications are from a medical school outside of Australia or New Zealand. Approved courses of study means that the applicant must be able to demonstrate that they have completed a medical curriculum of at least four academic years, leading to an entitlement of registration in the country issuing the degree to practice clinical medicine.

#### 2. RACGP assessment processes

The Fellowship of the Royal Australian College of General Practitioners (FRACGP) certifies competence to deliver unsupervised general practice services in any general practice setting in Australia including:

- urban
- regional
- rural
- remote
- very remote

The FRACGP is an internationally recognised qualification in general practice. Last year almost 1000 doctors attained the Fellowship of the RACGP.

Fellowship of the RACGP is granted to those who have undertaken suitable experience and/or training in general practice and demonstrated their competence by successfully completing the college examination.

The pathway to RACGP Fellowship that a doctor can choose is dependent upon their previous general practice experience and medical education, as well as their ability to meet certain eligibility criteria. The eligibility criteria to sit the FRACGP exam are different for IMGs and Australian graduands.

The pathway to RACGP Fellowship Flowchart is available in appendix (ii) or can be accessed by clicking on the link below to view it on-line:

http://www.racgp.org.au/Content/NavigationMenu/educationandtraining/Assessment/Pathway stoFellowship/PathwaysMap.pdf

#### **RACGP Specialist Pathway**

To assist IMGs to work towards RACGP Fellowship and a specialist registration the RACGP has developed the RACGP specialist pathway. This pathway is a nationally agreed assessment and registration process developed in conjunction with the AMC, AHPRA and the RACGP.

The RACGP specialist pathway recognises the qualifications that IMGs have obtained from their country of origin. The RACGP compares these qualifications with the standards for Fellowship of the RACGP. The RACGP specialist pathway allows IMGs to obtain RACGP Fellowship based on an assessment and recognition of their previous training and experience in general practice. There are several pathways available depending upon the country in which the IMG completed their general practice training.

The specialist pathway flow chart is available in appendix (iii) or can be accessed by clicking on the link below to view on-line:

http://www.racgp.org.au/scriptcontent/assessment/pathway/documents/Pathway\_Overview\_Fl owchart.pdf

#### **RACGP Practice Eligible Pathway**

To assist IMGs work towards RACGP Fellowship, the RACGP developed the practice eligible pathway. The RACGP practice eligible pathway is available to IMGs who have, amongst other qualifying criteria, at least four years of full time general practice experience, of which at least one year, has been gained in Australia. The RACGP is not aware of these doctors until they enrol for the first time in the RACGP examination.

The practice eligible pathway flow chart is available in appendix (ii) displayed in the green shaded boxes or click on the link below to view on-line: http://www.racgp.org.au/Content/NavigationMenu/educationandtraining/Assessment/Pathway stoFellowship/PathwaysMap.pdf

The following link provides details on the general practice vocational training standards: <u>http://www.racgp.org.au/vocationaltraining/standards</u>

The majority of candidates that enter the practice eligible pathway have not participated in a general practice training pathway and do not have general practice qualifications. These doctors are all subject to 19AB legislation and therefore are required to work in an Area of Need under the moratorium arrangements as described earlier. These doctors will be required to complete Parts 1 and 2 of the AMC examination before being entitled to receive limited registration from AHPRA.

In some states, these doctors will be required to also attend a Preemployment Structured Clinical Interview (PESCI). The purpose of the PESCI is to establish whether an IMG has the knowledge, skills and experience to practise safely and effectively in the position for which registration is being sought.

In South Australia and Tasmania, the RACGP convenes PESCIs on behalf of the state office of AHPRA.

An IMGs general practice experience is assessed by the RACGP prior to them enrolling in the RACGP Fellowship exam. An IMG must clearly demonstrate to the RACGP that they have the necessary experience in general practice or family medicine. A link to the criteria used by the RACGP to assess general practice experience is available by clicking on the link below:

http://www.racgp.org.au/assessment/img

Hospital time in an emergency department does not qualify as a general practice equivalent placement.

IMGs are required to have attained full general registration (AMC exam part 1 & 2) together with permanent residency in order to apply for a general practice vocational training program that is undertaken by Australian graduands. IMGs without AMC part 2 and permanent residency have no access to Australian formal vocational training programs. The RACGP is most concerned for this category of IMG doctors.

These IMGs will generally enrol in the RACGP examination without having any exposure to the formal vocational training program that is provided to Australian graduands. They are also less likely to have received general practice supervision, unless specifically required to do so by their state AHPRA office.

Not surprisingly, of all candidates for the RACGP Fellowship examination, IMGs with limited registration and no access to formal vocational training programs are the least prepared for the examination and over half will fail at least one segment of the examination.

The RACGP believes it is IMGs who are using the practice eligible pathway to attain RACGP Fellowship that are in most need of Commonwealth financial support.

The Commonwealth Government should consider financial support for IMGs with limited registration in the following ways:

- Directly offset the cost of appropriate and high standard general practice supervision.
- Provide grants to assist IMG access a range of general practice learning activities.
- Fund initiatives that introduce and integrate IMGs to the Australian community.
- Subsidise the cost of RACGP Fellowship exam preparation courses.
- Fund ongoing IMG peer mentoring programs.

### 3. IMG support programs

Common areas where IMGs have indicated to the RACGP that they require educational and cultural support include:

- Utilising Medicare and understanding the Pharmaceutical Benefits Scheme (PBS).
- Communication, including Australian colloquiums.
- English medical notation.
- Cultural aspects of providing health care to Aboriginal & Torres Strait Islander people.
- Customs of Australia's many multicultural groups.

In addition to the RACGP several organisations and funded initiatives have provided various forms of education and support for IMGs. However, it is generally recognised by IMGs that these support programs lack coordination and are often linked to one-off grant funding. The RACGP recommends a review by the Commonwealth into the education and cultural support programs provided to IMGs. A summary of 2 popular IMG support programs is outlined below.

#### The ROVE (Rural Outreach Vocational Training) program

DoHA has previously funded the ROVE (Rural Outreach Vocational Training) program that was delivered by Regional Training Providers (RTPs) and integrated with the Australian General Practice Training (AGPT). Funding for the program has lapsed. This program provided IMGs with educational resources, assessment processes and access to medical educators.

This program could be redeveloped and funded to provide an appropriate pathway to Fellowship by providing education and support towards a full vocational qualification and consequently specialist registration.

#### **Rural Workforce Agencies**

The role of Rural Health Workforce Australia (RHWA) is to work with the state based Rural Workforce Agencies (RWAs) to develop national solutions to improve the recruitment and retention of the health workforce throughout regional, rural and remote Australia.

RHWA and its member RWAs are funded by the DoHA to assist IMGs. RWAs also receive funding from their respective State Governments for various programs, services and projects for IMGs.

Further information on RHWA is available at: http://www.rhwa.org.au/site/index.cfm

# 4. Impediments for IMGs achieving Australian general practice qualifications and specialist registration

IMGs have repeatedly told the RACGP of the barriers they face in their personal and professional lives. A common cause for concern is the processes involved in registration and recognition of overseas qualification and experience. Detailed below is a summary of most frequently raised barriers experienced by IMGs:

- A complex and unclear registration process.
- The use of similar terminology for difference process and pathways by AMC, AHPRA, and the specialist college.
- The requirement to engage with a variety of stakeholders including AMC, AHPRA, DoHA, Medicare, State Governments, Specialist Colleges, Rural Workforce Agencies, employers, recruiters and migration agencies.
- The complexity of the Australian health care system.
- The complexity of Medicare Australia and the Pharmaceutical Benefits Scheme.
- Limited accessibility to relevant continuing professional development.
- Limited access to peer support networks in regional, rural and remote areas.
- A requirement to live and work in areas of medical workforce need, delivering health care in some of Australia's most challenging settings.
- No access to Medicare benefits for themselves and their families.
- Financial barriers restricting their children from accessing primary and secondary school.
- Poor information prior to entry into Australia on the processes and timelines required to achieve full registration/fellowship. For examples IMGs entering Australia should be provided with the following advice:
  - The need to secure a documented assessment of their overseas GP experience prior to their arrival in Australia.
  - That in the absence of completing the AMC part 2 exam, they are only going to be granted specialist registration upon completing the FRACGP exam.

- AHPRA provides 4 years of limited registration before registration lapses, during this time they are expected to attain the Fellowship of the RACGP
- Entry to RACGP assessment processes is defined by the RACGP and not the workforce recruitment agencies.

The RACGP recommends that the House of Representatives Standing Committee on Health and Ageing consider these impediments to successful integration by IMGs and undertake to recommend investment in programs to address these issues.

## 5. Concluding comments

The RACGP trusts that the information contained within this submission will help inform the House of Representatives Standing Committee on Health and Ageing with its enquiry.

It is imperative that the Federal Government ensures that medical practitioners including IMGs, who are working in Australian general practice but are not recognised general practitioners, are:

- Better supported in orientation to the Australian health care system and Australian culture
- Better supported to prepare for the RACGP Fellowship
- Working to the same standards as those which apply to Australian graduates, including:
  - Access to adequate funding; and
  - Access to appropriate supervision; and
  - Access to continuing professional development.

If the committee has any questions or comments regarding this submission, or requires the RACGP attendance at the public hearings for the enquiry please contact Professor Claire Jackson, RACGP President on (03) 8699 0472.







http://www.amc.org.au/index.php/img#ca