

Question on notice no. 4

Portfolio question number: Ahpra-2024.078

2024-25 Supplementary budget estimates

Community Affairs Committee, Health and Aged Care Portfolio

Senator Hollie Hughes: asked the Australian Health Practitioner Regulation Agency on 15 November 2024—

- (1.What is the total cost for a Specialist International Medical Graduate (SIMG) to complete the expedited pathway, inclusive of all fees expected to be paid?
- 2.What is the breakdown of total costs (including state and commonwealth contributions) to create and implement the expedited pathway?
- 3.We know that workforce shortages are impacting rural, regional and remote communities the most, how is AHPRA ensuring SIMG's are deployed to areas with the greatest need?
- 4.(Follow up) If addressing maldistribution is not under AHPRA's remit, where will this responsibility lie?
- 5.How will cultural competency for providing care to First Nations be assessed and measured? How/who will provide ongoing learning and development?
- 6.We know long-term retention of SIMGs has proven difficult; in New Zealand there is a marked difference in retention rates of overseas trained psychiatrists (64%) compared to locally trained psychiatrists (93%) ...
- 7.How does AHPRA intend to address retention rates of SIMGs and what will they do to retain SIMGs in areas of greatest need (I.E. rural, regional and remote areas) ?
- 8.SIMGs will need to undergo 6 months of supervision by another medical practitioner. Will supervisors be remunerated for this work? And how will this be funded?
- 9.Noting the number of SIMGs currently being processed by medical colleges, how many additional applicants does APHRA think will be added to the workforce through this expedited process? Is there a breakdown for individual jurisdictions?
- 10.What role do SIMGs have in the development of the domestic training pipeline (e.g. as supervisors) ?
- 11.How will AHPRA evaluate the effectiveness of the expedited specialist pathway program? Are there targets for workforce growth, addressing maldistribution, or service delivery and improved clinical outcomes?

12. Eligible applicants are automatically granted specialist registration - with conditions - to be assessed at 6 months. What will the final assessment comprise and will this be conducted by someone independent of the supervisor?

13. In the event that an applicant is unsuccessful during this final assessment, will there be additional assessments and training provided to support them?

14. Medical Colleges are responsible for training and maintaining professional standards for specialists in Australia. How were medical colleges consulted during this process? What will be the ongoing role of Colleges in relation to maintaining quality, safety and standards of internationally trained specialists entering the Australian workforce?

Answer —

Please see attached.

Senate Committee: Community Affairs Committee

QUESTION ON NOTICE

Supplementary Budget Estimates 2024-2025

Question Subject: Expedited Specialist Pathway

Type of Question: Written

Senator: Hollie Hughes

Question:

- 1. What is the total cost for a Specialist International Medical Graduate (SIMG) to complete the expedited pathway, inclusive of all fees expected to be paid?**

Answer:

There are different fees charged by different organisations for different purposes.

In relation to registration and assessment fees, The Australian Medical Council (the AMC) is the accreditation authority and charges a fee to establish an AMC candidate account to arrange a primary source verification (PSV) of qualifications. The Educational Commission for Foreign Medical Graduates (ECFMG) charge a fee for the EPIC PSV service. All IMGs, regardless of registration pathway, incur AMC and ECFMG costs. Fees will vary depending on the number of qualifications to be verified. The minimum cost for a specialist with one specialist qualification is \$1263.

Practitioners seeking registration pay an application fee of (\$1548) and a registration fee of (\$1027); totalling \$2,575. These are the fees agreed by the Medical Board of Australia and Ahpra.

Practitioner applicants are also responsible for the costs of two assessments completed as part of Supervised practice plan after registration. This includes a Multi-Source Feedback (MSF) assessment by a Board-approved provider (\$495) and one other assessment appropriate to the specialty (costs vary depending on assessment type).

This is a significant reduction in costs compared to the standard pathway to specialist registration.

- 2. What is the breakdown of total costs (including state and commonwealth contributions) to create and implement the expedited pathway?**

Answer:

The jurisdictions (states, territories and the Commonwealth) through the Health Chief Executives Forum provided funding for the development of the Expedited Specialist pathway in 2023-24, with the Australian Department of Health and Aged Care approving in principle funding for 2024-25.

The following is the breakdown of funding provided for the Expedited Specialist pathway.

Year	Funding source	Total
2023-24	Health Chief Executives Forum (Jurisdictions)	\$1,050,000
2024-25	Australian Department of Health and Aged Care (approval in principle)	\$ 877,270
Total		\$1,927, 270

3. We know that workforce shortages are impacting rural, regional and remote communities the most, how is AHPRA ensuring SIMG's are deployed to areas with the greatest need?

Answer:

The role of the Medical Board of Australia and Ahpra is to register qualified and competent practitioners. It is not in our remit under the National Law¹ to ensure that SIMGs are deployed to areas of greatest need.

4. (Follow up) If addressing maldistribution is not under AHPRA's remit, where will this responsibility lie?

Answer:

That is a matter for the Commonwealth, state and territory governments.

5. How will cultural competency for providing care to First Nations be assessed and measured? How/who will provide ongoing learning and development?

Answer:

The completion of cultural safety education is a mandatory requirement of the *Registration Standard- Specialist Registration standard*, that came into effect on 21 October 2024.

All specialists, including those on the Expedited Specialist pathway, must meet the Medical Board of Australia's requirements for cultural safety education. All specialists must complete a course, comprising cultural awareness and cultural safety education, that meets the minimum requirements set out in the Board's *Policy: Cultural safety education requirements for specialist registration*.

Appropriate cultural safety education courses will be approved by the Board, on the advice of the Ahpra Aboriginal and Torres Strait Islander Health Strategy Group. On this basis, the Medical Board has approved two cultural safety education programs:

- Australian Indigenous Doctors Association – Cultural Safety Training
- Joint Colleges Training Services – Cultural Education Workshop.

6. We know long-term retention of SIMGs has proven difficult; in New Zealand there is a marked difference in retention rates of overseas trained psychiatrists (64%) compared to locally trained psychiatrists (93%)...
7. How does AHPRA intend to address retention rates of SIMGs and what will they do to retain SIMGs in areas of greatest need (I.E. rural, regional and remote areas)?

¹ Health Practitioner Regulation National Law, as in force in each state and territory.

Answer:

Please refer to our response at Q.3 and Q4. Addressing retention rates of SIMGs is not in our remit.

8. SIMGs will need to undergo 6 months of supervision by another medical practitioner. Will supervisors be remunerated for this work? And how will this be funded?

Answer:

That will be an arrangement between the supervisor and the supervisee. As is currently the case, some supervisors may require specific funding, some working in organisations may be funded already for supervision and education activities, and others may do the work pro bono.

9. Noting the number of SIMGs currently being processed by medical colleges, how many additional applicants does AHPRA think will be added to the workforce through this expedited process? Is there a breakdown for individual jurisdictions?

Answer:

The expedited pathway for SIMGs (general practice) opened on 21 October 2024. As at 2 December 2024, 78 applications have been received and are being assessed. 79% of these applications have come from doctors with UK qualifications.

At this early stage, it is difficult to estimate the number of additional applicants that may be added to the workforce. However, we expect that the introduction of this expedited pathway will make Australia a more competitive and attractive practice destination for this cohort of well qualified medical practitioners who can serve our communities' medical needs.

10. What role do SIMGs have in the development of the domestic training pipeline (e.g. as supervisors)?

Answer:

It is the role of specialist medical colleges to provide specialist training. We have encouraged colleges to consider how SIMGs on the pathway may engage with the college. However, it will be up to colleges to decide how they might engage SIMGs as supervisors in college training programs.

11. How will AHPRA evaluate the effectiveness of the expedited specialist pathway program? Are there targets for workforce growth, addressing maldistribution, or service delivery and improved clinical outcomes?

Answer:

A Data and Reporting Framework is under development by the Medical Board of Australia and Ahpra to measure the registration progress and outcomes of the expedited specialist pathway with a particular focus on the implementation, experience and outcomes for SIMGs entering practice under the pathway.

Targets for workforce growth, addressing maldistribution, service delivery and clinical outcomes are in the remit of governments.

12. Eligible applicants are automatically granted specialist registration - with conditions - to be assessed at 6 months. What will the final assessment comprise and will this be conducted by someone independent of the supervisor?

Answer:

The Registration Standard – Specialist Registration requires all specialists to complete a period of 6-months supervised practice, orientation and cultural safety education, unless the Board determines that the specialist has already met these requirements and is exempted.

Supervisors of SIMGs on the Expedited Specialist pathway will submit a Supervisors report to the Medical Board at three and six months. The final supervisors report will sign-off whether the supervisor considers that the SIMG is safe and competent to practice unsupervised. This will be accompanied by evidence of:

- a Multi Source feedback (MSF) which has been undertaken by an independent Medical Board approved provider, and
- the successful completion of additional competency assessment, which may be one of three types of assessments appropriate to the specialty: Mini-clinical evaluation exercise (Mini-CEX), Direct Observation of Procedural Skills (DOPS) or Case-based discussion (CBD).

The Medical Board monitors the supervision period, and on successful completion and evidence of being a safe, ethical, and competent practitioner, the SIMG can apply for the conditions to be removed from their specialist registration.

13. In the event that an applicant is unsuccessful during this final assessment, will there be additional assessments and training provided to support them?

Answer:

At any stage during the period of supervised practice, supervisors and employers must advise the Medical Board/Ahpra of any concerns about the SIMG, if they form an opinion that there is a risk to the public.

The Board has a range of options under the *Supervised practice framework* and the National Law to manage concerns about a SIMGs performance. These are to:

- review the conditions, including to adjust or extend supervised practice arrangements
- conduct a Board-mandated performance assessment with independent assessors
- decide there are sufficient grounds to raise a notification under section 144 of the National Law, where the Board considers that a practitioner's health, conduct or performance has exposed or exposes the public to the risk of harm
- refuse an application for renewal of specialist registration.

14. Medical Colleges are responsible for training and maintaining professional standards for specialists in Australia. How were medical colleges consulted during this process? What will be the ongoing role of Colleges in relation to maintaining quality, safety and standards of internationally trained specialists entering the Australian workforce?

Answer:

All colleges in the priority specialist areas were consulted and provided advice on the qualifications that they considered suitable for the Expedited Specialist pathway.

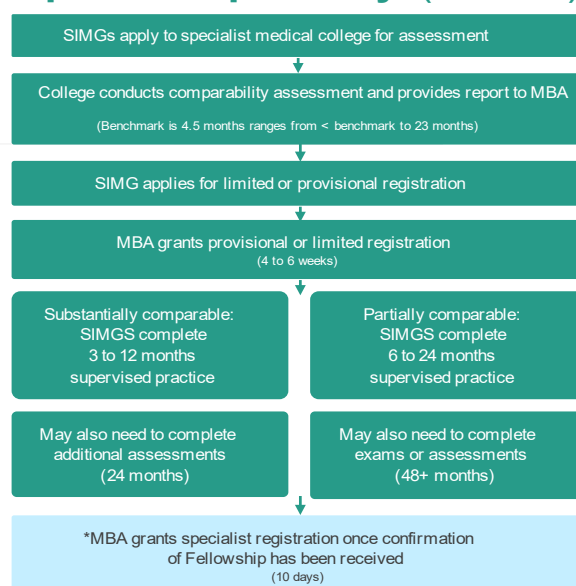
The Australian Medical Council (AMC) sought the advice of specialist colleges as part of the qualification assessment process. The AMC advice, along with the college advice, is considered by the Medical Board in determining what qualifications were considered substantially equivalent and based on similar qualifications to the specialty Fellowship qualification.

Medical Colleges will continue to assess internationally trained specialists on the standard specialist pathway (see diagram below). The specialist pathway applies to specialists who do not meet the qualification requirements of the Expedited Specialist pathway.

Expedited specialist pathway



Specialist pathway (current)



While assessment by colleges is not necessary for SIMGs with a pre-approved qualification on the expedited pathway; we consider that colleges can play an important role in supporting these practitioners. While attaining fellowship of the relevant specialist college is not a requirement of specialist registration, some SIMGs may choose to seek the Australian qualification. We will seek the permission of each applicant to share their details with the College.

We hope that colleges will create an inviting environment to support the SIMGs in their practice, particularly in relation to supporting streamlined fellowship opportunities, CPD and collegiate connection.