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Mr Elton Humphery  
Committee Secretary  
Senate Standing Committee on Community Affairs  
PO Box 6100  
Parliament House  
Canberra ACT 2600

1<sup>st</sup> May 2009

Dear Senate Committee members,

**Re: National Registration and Accreditation**

As the peak representative body for Australia's 12,800 medical students, the Australian Medical Students' Association is committed to ensuring the ongoing quality of medical education and training in Australia. We are concerned that the proposed national registration and accreditation system will jeopardise the independence and international standing of the accreditation of medical education in Australia. Please find attached our submission which outlines our concerns and the measures we believe need to be taken to ensure the ongoing independence of the accrediting body for Australian medical schools.

Thank you for the opportunity to comment on this issue.

Yours sincerely,

A handwritten signature in black ink that reads 'Tiffany Fulde'.

Tiffany Fulde  
National President  
Australian Medical Students' Association

## National Registration

The Australian Medical Students' Association (AMSA) is broadly in support of the principles underpinning national registration. AMSA strongly supports the creation of a national registration database of medical practitioners as a means to improve patient safety, ensure ongoing public trust in the medical profession, and increase workforce mobility. In addition, AMSA recognises the benefits of registering medical students within a national registration database in a system where medical students are introduced into clinical settings at a very early stage. Any such scheme would need to be introduced in consultation with medical students, medical faculties and members of the profession.

## Complaints Processes

While we broadly support registration, AMSA would like to see that consideration be given to the notifiable requirements imposed on medical students or their faculties. The manner in which complaints, health and disciplinary matters concerning student registrants are dealt with under the proposed system will need to be considerably different to that of medical practitioner registrants.

The system should operate on an overarching principle of open communication between the National Medical Board and universities. Universities, under their pastoral care responsibilities, should maintain responsibility for performance and unsatisfactory professional conduct (minor conduct) matters, whereas professional misconduct (serious conduct) matters might more appropriately be dealt with in cooperation between the National Medical Board and universities.

However, AMSA also believes that the legislation needs to consider the professional responsibilities of students and practitioners in a different manner. A requirement imposed by every medical course on students in Australia, is the learning of professionalism. There is a need for the recognition that professional conduct is learnt over many years during medical schools and the pre-vocational years. AMSA believes it would be inappropriate to impose identical expectations and reporting requirements on students.

If students are to be the subject of committee and panel hearings, it is appropriate that students should be given representation on board committees and panels when a notification concerns a student registration.

## National Accreditation

AMSA is the peak representative body for Australian Medical Students, and as such, is committed to a high quality process for the accreditation of Australian Medical Schools, which is independent of both Government and the profession. We believe the independent setting of standards of training is essential to ensuring patient safety and maintaining the international standing of Australian medical graduates. This view is in keeping with the World Health Organisation and the World Federation for Medical Education Guidelines for Accreditation of Basic Medical Education (1).

Currently the Australian Medical Council's (AMC) Medical Schools Accreditation Committee (MedSAC) is responsible for accrediting medical school courses in Australia and New Zealand. AMSA is concerned that the proposed National Registration and Accreditation system will impose government oversight of the AMC and MedSAC and give the Health Ministers' Council discretionary powers over the setting of medical school standards in Australia.

Our chief concerns are that:

A. Government control of accreditation of medical education and training will subordinate the setting of medical education standards to workforce reform agendas.

B. The international regard for graduates of Australian Medical Schools will be diminished, jeopardising future employment prospects for graduates.

### **A. Workforce Reform**

While it has been suggested that the Health Ministers' Council will not seek to intervene in the accreditation of individual medical school courses, there is no legislative guarantee that this will not occur.

One of the stated objectives of the proposed National Registration and Accreditation Scheme within the Intergovernmental Agreement is to "enable the continuous development of a flexible, responsive and sustainable Australian health workforce and enable innovation in education and service delivery" (2). In light of this objective, AMSA is concerned that the proposed system will enable the Health Ministers' Council to:

- Reduce the minimum length of medical school courses in order to expedite the production of doctors for the Australian healthcare system;
- Remove essential course components, such as clinical placements in emergency departments, to overcome bottlenecks in clinical training and facilitate further increases in medical student numbers; and
- Intervene should an individual medical school face disaccreditation.

Any of these interventions would compromise the quality of medical graduates being produced, which would ultimately result in a reduced standard of patient care.

### **B. International Standing of Australian Medical Graduates**

The recognition of Australian medical school courses by the international medical community is contingent upon Australia's compliance with the World Health Organisation and the World Federation for Medical Education Guidelines for Accreditation of Basic Medical Education.

These guidelines require that the medical school accreditation process be independent of both Government and the profession. AMSA is concerned that Government oversight of medical school accreditation standards, which will be introduced by the proposed National Registration and Accreditation system, will jeopardise the international recognition of Australian medical qualifications. Currently it is estimated that over twenty percent of Australia's 12,800 medical students are international students (3). These students make important contributions to the Australian healthcare system through helping to fund University medical courses and by often choosing to stay and work in Australia upon graduation. If the international medical community ceases to recognise Australian medical qualifications, Australia's medical schools will no longer be able to compete to attract International medical students. This will result in reduced funding to medical schools and a reduction in the number of medical graduates being produced annually.

### **Proposed Solutions**

In order to ensure that patient safety is maintained through uniformly high accreditation

standards and that Australian medical school graduates remain competitive in the international market, the accreditation of Australian medical school courses must remain independent from both Government and the profession.

To ensure this occurs:

- The function of accrediting Australian medical school courses should be indefinitely assigned to an independent body with representation from the medical profession, medical education institutions, medical students and healthcare consumers. MedSAC would satisfy these requirements.
  - The members of the independent accrediting body should be independently appointed.
  - The Health Ministers' Council should have no role in approving the medical school accreditation standards set by the independent accrediting body.
- Should the Health Ministers' Council retain a role in approving medical school accreditation standards, the Council should only be able to approve accreditation standards based on the advice of the independent accrediting body.
- Should the Health Ministers' Council retain a role in approving medical school accreditation standards, the advice provided to the Council by the independent accrediting body should be freely available in the public domain.
  - Should the Health Ministers' Council retain a role in approving medical school accreditation standards, where the standards approved are not totally consistent with the advice of the independent accrediting body, the decision should be referred back to the accrediting body for further input.
  - Should the Health Ministers' Council retain a role in approving medical school accreditation standards, the Council should be prohibited by the legislation from intervening in decisions relating to the accreditation of individual medical schools.

### Conclusion

AMSA believes the concerns raised are essential to ensuring patient safety and maintaining the international standing of Australian medical graduates. Subordinating the standards of medical education to workforce reform agendas will have long term ramifications for the quality of health services delivered by Australian medical graduates.

### References

1. The World Health Organisation and the World Federation for Medical Education Guidelines for Accreditation of Basic Medical Education. Geneva/Copenhagen 2005
2. Intergovernmental agreement for a National Registration and Accreditation Scheme for the Health Profession. Section 5.3 (e).
3. Joyce CM, Stoelwinder JU, McNeil JJ, Piterman L. Riding the wave: current and emerging trends in graduates from Australian university medical schools. Medical Journal of Australia 2007; 186: 310-312