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Submission

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

RAPTS Program

Clinical Workforce Solutions Unit

Queensland Health

February 2011

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1.0 Introduction

Queensland Health supports the inquiry into Registration Processes and Support for Overseas Trained Doctors and in preparation of this submission has undertaken a process of consultation with internal stakeholders (attachment one).

Queensland Health employs approximately 1,000 Overseas Trained Doctors (OTDs) who hold limited registration with the Medical Board of Australia (MBA). This represents approximately 14.2% of the medical workforce employed in Queensland Health.

Queensland Health recognises the vital and significant input that OTDs have on the provision of health services in Queensland and maintains consistent and unique focus on standard processes and support for OTDs through Clinical Workforce Solutions (CWS), a centralised and dedicated work unit.

Currently the MBA and the Australian Medical Council (AMC) are reviewing the Non-Specialist OTD pathways. For the purpose of this submission Queensland Health will focus on OTDs who are on the pathway to specialist medical registration.

2.0 Terms of Reference (1):

Explore current administrative processes and accountability measures to determine if there are ways OTDs could better understand colleges' assessment processes, appeal mechanisms could be clarified, and the community better understand and accept registration decisions;

In 2008 the state medical boards implemented nationally consistent assessment processes for OTDs which included standardised pathways for registration. This provided standardisation and streamlining of the assessment of OTDs and defined the pathways for general or specialist registration in Australia.

For overseas trained specialists (OTS) the predominant change has been the adoption of standard terms to define the specialist recognition (comparability) assessment outcomes by all specialist medical colleges. These categories are:

- i Non-comparable OR
- ii Partially comparable OR
- iii Substantially comparable:
 - Substantially comparable
 - Fellowship

These comparability outcomes by the specialist medical colleges also define the supervision and/or upskilling that are required for an OTS to be considered for specialist recognition.

The involvement of specialist colleges in the assessment of OTS may increase the recruitment and registration time of an OTD by three to six months. This highlights the need for review and enhancement of the policies, practices and processes of OTS assessment and registration within the specialist pathway.

2.1 Issues with the consistency of processes for the Area of Need and or Specialist Comparability Assessments

Initially an OTS must apply to the AMC for the correct specialist assessment(s). There are three options, the specialist recognition (comparability) assessment, the area of need (AON) assessment or both. Further complicating the matter is that there are 14 different specialty colleges which have different internal assessment processes and requirements to undertake the above assessments.

One example that highlights the different assessment requirements and processes is the significant differences in assessment fees charged by the specialist colleges. In some instances the cost of an AON and Comparability Assessment can reach \$12,025 (Royal Australasian College of Surgeons) compared to \$195 (Royal Australian College of General Practitioners).

Australia. *Australian Medical Council Limited* [Online] {Cited 10 January 2011}
Available from: <http://www.amc.org.au/index.php/img/spec/assessment-mainmenu-200>

For OTS who are commencing a new life and work in Australia, the costs associated with the specialist assessment, registration and immigration for themselves and family can be a disincentive to seeking employment in Australia. In some cases, OTS have reported that they intend to delay applying for the specialist comparability assessment with their college, in order to spread their costs to another financial year or after they start earning Australian dollars.

Additionally, college fees can place extra financial strain on the employer in regards to AON and or Comparability Assessments. The Australian and New Zealand College of Anaesthetists (ANZCA) requires that, an employing hospital pays \$1500 plus any reasonable expenses for an assessing Anaesthetist to attend the hospital and conduct an AON assessment on the OTS, two months after they commence employment. This requirement places an increased burden on an employer who employs an OTS to provide the required healthcare for the community. CWS is not aware of any other specialty college which requires a payment from an employer and the OTS before undertaking the comparability assessment of an OTS.

2.1.1 Separate and / or simultaneous assessment processes

The different processes used by colleges are highlighted by the practice of six colleges which do not offer a simultaneous assessment (i.e. an AON assessment and a Comparability Assessment at the same time) despite the introduction of the standardised assessment processes two years ago. The colleges currently not offering a simultaneous assessment are:

- Australian and New Zealand College of Anaesthetists (ANZCA)
- Australasian College for Emergency Medicine (ACEM)
- Royal Australian College of General Practitioners (RACGP)
- College of Intensive Care Medicine of Australia and New Zealand (CICM)
- Royal Australasian College of Medical Administrators (RACMA)
- Royal Australian and New Zealand College of Radiologists (RANZCR)

Issues arising with non-simultaneous assessments, include the OTS' confusing a successful AON assessment with the college's comparability assessment. This can adversely impact the OTS' ongoing registration with the MBA by hindering the OTS' ability to meet progress requirements. Additionally, an OTS is able to be registered to practice following a suitable college AON assessment only. If the college completes the comparability assessment and requires the OTS to obtain experience, outside their place of intended employment in order to achieve fellowship /specialist recognition, the health service district will be short a doctor. Perhaps more significant is the occasion of an OTS being given AON support from a college, obtaining registration, commencing work and being subsequently found to be 'not comparable'.

Other complications caused by non simultaneous assessments include a duplication of applications and requirements. The following example highlights this issue:

Two OTSs have been employed at the same level but within different specialties. One OTS is a surgeon and is able to apply to the AMC for a simultaneous assessment, involving one application to the AMC. The other OTS is an anaesthetist and will need to lodge two applications to the AMC, one for Specialist Comparability and one for AON assessment.

2.1.2 Role of the AMC, MBA and Specialist Colleges

The AMC, MBA and relevant specialist colleges all undertake a role in the specialist assessment of an OTS. The role and sequencing of these organisations in the specialist assessment is poorly delineated.

An application for comparability assessment takes a pathway through the three organisations as follows:

- A. OTS makes application to AMC for specialist pathway assessment
- B. AMC liaises with OTS on further information if incomplete application is submitted
- C. AMC forwards application to college
- D. AMC notifies the OTS that they are eligible to contact the college to initiate the college's comparability assessment process
- E. College reviews application and can request that further information be forwarded to the college
- F. College conducts assessment and sends outcome report to AMC
- G. AMC forwards outcome report to the OTS and MBA
- H. Candidate can now apply to MBA for registration. An application for registration requires the OTS to outlay another \$1300 and provide further documentation, some of which would have been provided to the AMC and college already, such as copies of primary medical degrees, identification documents and CV.

The complexity of this pathway leads to a lack of clarity in the boundaries and responsibilities of each organisation and where the responsibility for the final decision on comparability and subsequent registration lies. This process should be linear, with each organisation's process completed before moving to the next and monitored by a body which is responsible for making the final determination on the OTS suitability for registration.

Provisions should be made to consider utilising resources already in place, such as the MBA, whose role as stated under the Health Practitioner Regulation National Law Act 2009 (HPRNLA) includes:

- register medical practitioners and medical students
- assess International Medical Graduates who wish to practise in Australia
- approve accreditation standards and accredited courses of study

The MBA by taking control of this assessment process from the AMC will aide the transparency and consistency of the process reduce delays and reduce cost.

2.1.3 Duplication of Information

The information and documentation required from an OTS for specialist assessments is not communicated fully at initial application. As highlighted above, at step “E” an OTS may be required to provide further documentation. This leads to confusion, an increase in time taken for the assessment and possible increased expenses for the OTS.

In an attempt to assist OTS the AMC and colleges provide a checklist with each of its forms which details the required information and documents to be submitted. However as these checklists occur over multiple forms and are required for different organisations there is often duplication of requirements or requests for the same information in different formats.

For example an OTS needs to provide the following to all three bodies:

- completed application forms often asking for similar information (qualifications, registration and practicing history [also contained in the CV])
- documents to support identification, qualifications, CV, professional development, training and referees etc.

The following examples highlight the above issues:

- the AMC has recently introduced a standardised CV template across all 14 colleges to assist the assessment process. The MBA also has a standard CV template. The CV templates are not consistent. This impacts on the OTS as they are required to provide two CVs in different format during the assessment and registration process.
- the AMC and colleges request certificates of registration status (CORS) as part of an application for assessment. This request is then duplicated with the MBA who request CORS to be sent directly to them as part of the registration application process. CORS are only valid for a three month period and the requirement to continually request this document is an onerous task which causes increase expense and delays with little to be gained from the assessing authority.
- a comprehensive checklist the AMC has recently made available to assist OTS in providing all documentation in the correct format and certification for the AMC’s purposes. However this checklist does not contain all subsequent information or documentation a college may require due to different documentation requirements and processes for each college. This checklist also does not list subsequent

requirements of the MBA; this is a further duplication of requirements of the AMC and colleges.

If the MBA was to become the centralised body for the organisation and co-ordination of the assessment the above examples could be reduced as the MBA, could specify a single comprehensive checklist for use by all the organisations.

Proposal:

- 2.1 A linear assessment process be instituted with one centralised body such as the MBA acting as the main referring organisation, co-ordinating with the AMC and Colleges to undertake one comprehensive assessment of the OTS for both comparability and suitability for a nominated position.

2.2 Clarity of Information and Terminology

2.2.1 Information

The ability for an OTS to determine the appropriate specialist assessment to apply for, based on factors such as intended career, public employment versus private employment, and registration requirements is difficult given this is their first interaction with an Australian regulatory environment.

The information available publicly is not structured and not consistent across the AMC, MBA and colleges. Some key examples of this are demonstrated below:

- The operational processes for specialist assessments are complex and can lead to confusion, expense and delays. For example:
 - A. Original applications for Area of Need (AON) assessment go to the college with a copy to AMC.
 - B. Original applications for specialist comparability go to the AMC who after assessment then notifies the applicant to apply to the college. Further documentation may be required to be forwarded to the college from the OTS.
 - C. Applications for simultaneous area of need and specialist comparability follow the area of need assessment process (above at i)
 - D. After completion of College's assessment process a subsequent application is then made to the MBA.
- Scheduling – Information available on OTS interview schedules and application submission processes differs across the colleges.

- Cut off periods for applications or interview schedule closures should be adequately explained to ensure the OTS does not miss scheduled interviews, as this could cause delays of up to 2-3 months in the processing of their application.
- These timeframes should be made publicly available by all colleges, to avoid significant delays to an OTS's assessment which will impact on their ability to obtain a visa, registration and commence employment.
- The definitions of comparability are recognised by all colleges; however each college stipulates extra requirements beyond the comparability definition without clear explanation of the reason. There have been occasions where colleges make decisions that are inconsistent with the approved comparability definitions, e.g. ANZCA advised an OTS they were suitable for an AON position in August 2010 and in January 2011 advised them they were 'potentially' partially comparable without explanation or defining 'potentially'.
- Further to the above, the criteria used by the colleges in their assessments are ambiguous or not clearly available for OTS to view before undertaking the assessment. If the criteria were to be clearly documented and available it would aide in the OTS' understanding of the assessment process.

The lack of structured and comprehensive information regarding the complexity and variability of the application processes used by the AMC and colleges leads to increased expense to the OTS and delays, that subsequently impact on service provision.

2.2.2 Terminology

Inconsistent use of terminology and multiple uses of similar terminology are confusing issues. This occurs where terms have evolved or been changed over time but have not been reflected consistently in the information and documentation across all relevant organisations.

For example, the term 'pathway' is used for both medical registration and AMC/college assessments. The term 'specialist pathway' is used to refer to both registration pathway (i.e. standard, competent authority and specialist pathways) and for specialist comparability recognition by the AMC and Colleges.

Another example is highlighted in regards to the comparability assessment outcomes of:

- i Non-comparable OR
- ii Partially comparable OR
- iii Substantially comparable:
 - Substantially comparable
 - Fellowship / specialist recognition

Terminology with dual meaning such as 'substantially comparable' can cause significant confusion to the OTS and have registration implications. For example an OTS found to be substantially comparable by the college may be either eligible for Specialist registration with the MBA or eligible for limited registration with the MBA as they are subject to a period of

12 months oversight. Therefore notwithstanding the College's assessment outcome as 'substantially comparable', the further condition of a period of oversight adversely impacts on the OTS' visa/permanent residency, registration, Medicare and employment.

Proposal:

- 2.2 Comprehensive, current and consistent information that has clear, unambiguous terminology should be available on all college, AMC and MBA websites and any other relevant organisations.

2.3 College timeframes and demand for OTS assessments

2.3.1 Timeframes

As previously discussed, some colleges undertake separate AON and comparability assessments. The AON assessment is generally the first assessment completed with the comparability assessment being undertaken subsequently, up to a few months later. This gap in time can raise issues for the OTS and MBA.

Highlighted in section 2.2.1 is the need for the colleges to be consistent in the application of the comparability definitions in their requirements for fellowship or specialist recognition recommendations. The requirements have set timeframes to be met and these can be impacted by medical registration timeframes set by the MBA.

The MBA requires OTDs to progress to either general or specialist registration within four years. An OTS registered for AON, is required to obtain their comparability assessment within the first 12 months of registration. If the doctor is unable to show progress they will be required to show cause as to why the board should renew their registration.

Due to the conditions and timeframes set by the MBA on an OTS's registration, lack of consistent college timeframes and clear requirements, may prevent doctors from meeting the requirements of the college and/or board.

2.3.2 Anticipated demand for OTS assessment

As Queensland continues to increase the number of domestic graduates, there will be a reduction in the need for junior level OTDs. However the need for OTS will continue to ensure capacity within the expanding public hospital system and to assist in meeting the training and upskilling needs of the domestic graduates. Colleges should undertake a review of anticipated demand for specialist comparability assessments and their scheduling requirements in order to meet the demand.

Proposal:

- 2.3 That colleges review current timeframes for each assessment and undertake projection exercises with assistance from Health Workforce Australia to anticipate demand for specialist comparability assessments and increase their capacity to meet the workforce demand.

3.0 Terms of Reference (2):

Report on the support programs available through the Commonwealth and State and Territory governments, professional organisations and colleges to assist OTDs to meet registration requirements, and provide suggestions for the enhancement and integration of these programs; and

3.1 Clinical Workforce Solutions – Support and Assistance for OTS

Due to the unique requirements of OTDs as highlighted in the Queensland Health Systems Review ('Foster Review') and its subsequent recommendations, the Registration, Assessment, Placement, Training and Support (RAPTS) unit for OTDs was established in September 2005.

In July 2008 RAPTS merged with the Queensland Health Recruitment Unit (QHRT) to form Clinical Workforce Solutions (CWS). Operating through several teams, CWS offers recruitment of high quality candidates, programs and funding opportunities which offer Queensland Health Service Districts strategic and practical solutions in growing their own skilled clinical workforce.

Enhanced by a Ministerial Taskforce in 2010 which focused on improving access and funding to medical training structures, Queensland Health's approach to OTDs is one of integration in to the medical hierarchy and workforce. OTDs are encouraged to train for Australian specialist qualifications and become members of the training tiers for future Australian graduates. This provides both a level of experienced specialist trainers, succession planning and a stable workforce.

CWS has achieved enhanced quality of support for OTDs through its teams Work for Us, RAPTS and CIMG.

3.2 Work For Us

The Work For Us team is the clinical recruitment arm of Clinical Workforce Solutions. Work For Us actively help health service districts (HSD) fill critical vacancies by sourcing and placing interstate and overseas trained doctors, nurses and allied health professionals across the state.

Since 2005 Clinical Workforce Solutions' Work For Us team has helped position Queensland Health as an "Employer of Choice" within the interstate and global clinical marketplace.

3.3 RAPTS

RAPTS has been pivotal in developing standardised systems to improve the recruitment, orientation and registration processes for Queensland Health employed OTDs, detailed below are the current programs and support provided to OTDs.

3.3.1 RAPTS - Programs

Transition to Clinical Practice in Queensland Health: Orientation Program for IMGs

An orientation 'Welcome Pack' has been developed and written to support OTDs who are new to Australia and Queensland Health. The information provided helps them to transition to safe and effective clinical practice in the public health system of Queensland.

The key areas covered by the program include:

- Healthcare system in Australia
- Working in Queensland
- Legislation and professional practice
- Rural and remote health services in Queensland Health
- Communication and cultural safety
- Living in Queensland

The Orientation 'Welcome Pack' includes an Orientation Manual and references to orientation, induction and training requirements, and standard resources and information across districts. These resources assist OTDs in meeting the orientation requirements of registration under the Nationally Consistent Assessment processes for OTDs introduced by COAG in 2008. In 2011 the Orientation 'Welcome Pack' will be published electronically allowing OTDs to access the orientation information at a time and place suitable to them.

Clinical Attachment Program

The Clinical Attachment program is a centrally coordinated program to support unemployed OTDs who are permanent residents in Australia and who are seeking familiarisation with the Queensland and Australian healthcare system, for the purpose of employment. The program supports eligible OTDs by providing access to a structured and supportive learning environment in which they may improve their knowledge of the health system through interaction with professional clinical staff, observe and learn clinical skills and codes of conduct which are expected of employees in Queensland Health.

The program is recognised by MBA for its limited scope of practice and safety allowing OTDs a valuable upskilling / re-entry program.

3.3.2 RAPTS - Teams

Queensland Health Registration Team (QHRT)

The Queensland Health Registration Team (QHRT) focus is to streamline the process for limited registration applications for OTDs appointed to positions in Queensland public hospitals and other associated facilities. Complete applications are submitted to the Australian Health Practitioner Regulation Agency (AHPRA). This is achieved through ongoing communication with the applicant and/or recruitment agency, health service district and AHPRA.

The QHRT has significantly improved processing timeframes of limited registrant applications by:

- Direct contact with HSD / recruitment agency / OTD;
- Providing a point of contact for the HSD and AHPRA;
- Maintaining updated knowledge of MBA policies;
- Providing accurate advice to HSD;
- Following up with districts to ensure that applications don't lapse; and
- Developing resources for the OTDs and/or HSD to use – such as a Registration Guide and OTS Assessment Guide, checklists, education sessions.

Centre for International Medical Graduates (CIMG)

The CIMG supports the OTD workforce through the provision of programs designed to assist OTDs progress through the AMC examinations. CIMG provides professional development for OTDs by providing clinical preparation programs which are video conferenced weekly to participating hospitals in Queensland, South Australia, Northern Territory, Tasmania, Australian Capital Territory, and New South Wales. The programs upskill the OTD workforce in clinical knowledge, medical communication and cultural skills in the Australian healthcare context. Skills are further enhanced by follow up small group video conference sessions into individual hospitals. CIMG also provides support to OTDs and districts by providing hospital based medical communication workshops and individual communication assessments. All programs are designed to hone OTDs medical communication and cultural skills in the Australian healthcare setting.

Pre-employed Structured Clinical Interview (PESCI) Team

In January 2009 Queensland Health commenced a phased implementation of the PESCI as a pre-requisite for employment for Junior Medical Officer (JMO) positions. Currently, Queensland Health standard pathway (AMC examination) Principal House Officers / Registrars in Emergency Medicine, Anaesthetics, Intensive Care, Obstetrics and Gynaecology, General Medicine and Psychiatry are required to undergo a PESCI. Since implementation 206 PESCI's have been undertaken across the state.

An evaluation of the PESCI process has been conducted and found that PESCI is having an overall positive impact on the recruitment of OTDs to Queensland Health. The PESCI process provides health service districts with the confidence that they are receiving an OTD with suitable knowledge and experience and the OTD is confident in knowing more about the expectations and their ability to undertake the role.

Ministerial Taskforce on Medical Staffing, Education and Training in Regions

In January 2010 funding was allocated by Queensland Health for the implementation of the recommendations of a Ministerial Taskforce on Medical Staffing, Education and Training in the Regions designed to enhance the medical staffing, education and training and the provision of sustainable medical services in targeted regional public hospitals.

The funding has facilitated the establishment of systems, resources and programs to support OTS/ OTDs and the hospitals that employ them, these include:

- State-wide candidate care guidelines, standardised templates and tools to facilitate and support the OTDs integration into both Queensland and the healthcare setting
- Establishment of district hospitals candidate care positions to support medical staff
- Registration assistance to OTDs – which has included

- training and ongoing assistance to medical administration staff on registration changes
- assistance to help OTDs progress towards general or specialist registration to meet ongoing registration requirements
- information guide and resources on specialist assessment of OTS by the AMC and colleges
- Visiting Medical Officer/Staff Specialist Liaison Officer positions that liaise and support senior medical staff and Overseas Trained Specialists in the Taskforce’s regional hospitals
- Queensland Health Overseas Trained Specialist Support Scheme (QOTSSI) that provides support to OTS in progressing towards recognition and fellowship with the relevant specialist college.

3.3.3 Funding programs

Queensland Overseas Trained Specialist Support Initiative (QOTSSI)

QOTSSI aims to facilitate increased supervision, upskilling and assessment of Overseas Trained Specialists employed within Queensland Health, while these doctors undertake upskilling requirements with the relevant Australian medical specialist college.

In 2010-11 funding of \$2,619,542 from a total budget of \$3,138,541 has been allocated to date following two of four application rounds. Successful applicants have included

- 5 Anaesthetists, 3 Physicians, 2 Obstetrician and Gynecologists, 2 Surgeons and 1 Pediatrician
- Statewide OTS Anaesthetics upskilling program
- Statewide OTS Psychiatry upskilling scheme

Funding available through this initiative will contribute to an increase in the medical specialist capacity of Queensland Health regional and metropolitan public hospitals, enhancing the key role these hospitals play in the provision of regional specialist services, including 24 hour emergency services and sub specialties.

QOTSSI is an acknowledgement that Queensland Health invests in its staff and supports them to meet their regulatory requirements whilst meeting critical needs for health services where they are needed most.

It has enabled OTS to obtain their Fellowship quicker by providing financial support to regional facilities to maintain staff (i.e. locums, increase in supervision) to allow the OTS time to undertake required training on or off site.

Overseas Trained Specialist Anaesthetics Pathway Orientation Program (OTSAPOP)

The program draws together elements from a number of RAPTS programs and teams including the Orientation Program, CIMG, QOTSSI and the Ministerial Taskforce.

This program will develop a sustainable, evidenced based, best practice model of orientation and communication resources designed to enhance the medical communication and cultural awareness skills of OTS Anaesthetists who are seeking fellowship with the Australian and

New Zealand College of Anaesthetists (ANZCA). The participants will be OTS engaged in the statewide OTS Anaesthetist upskilling training scheme. A pilot orientation workshop will be delivered in 2011 with the view of rolling out the workshop to other specialties.

Commonwealth's Specialist International Medical Graduate Program in Queensland Health

Queensland Health administers the *Specialist International Medical Graduate Program* funding agreement from the Department of Health and Ageing which supports Queensland OTS to achieve College Fellowship. The OTS program has transitioned in 2010 to become a component of the Commonwealth's Specialist Training Program (STP).

The agreement provided \$620,000 for the 2010 calendar year to support 11 OTS across the Gold Coast Health Service District, Mackay Hospital, Rockhampton Hospital, the Royal Brisbane and Women's Hospital and the Prince Charles Hospital.

In 2009 \$625,000 was allocated to the Gold Coast Health Service District, The Prince Charles Hospital, Mackay Hospital and the Royal Brisbane and Women's Hospital, to support ten OTS. Of these ten, five achieved Fellowship and the remaining five continue to work towards obtaining Fellowships in the near future.

4.0 Terms of Reference (3):

Suggest ways to remove impediments and promote pathways for OTDs to achieve full Australian qualification, particularly in regional areas, without lowering the necessary standards required by colleges and regulatory bodies.

It is essential that the OTS is given access to appropriate upskilling and training opportunities in order to meet their registration, Fellowship and professional development requirements.

This is fundamental to their role in the development of a sustainable medical workforce through enhancement of the quality and capacity of prevocational and vocational training of all facilities, and in particular in regional areas.

In doing so the standards required by colleges and regulatory bodies are maintained and upheld.

The following recommendations are Queensland Health suggestions to remove inherent barriers and promote the specialist pathway for OTDs:

1. A linear assessment process be instituted with one centralised body such as the MBA acting as the main referring organisation, co-ordinating with the AMC and colleges to undertake one comprehensive assessment of the OTS for both comparability and suitability for a nominated position.
2. Comprehensive, current and consistent information that has clear, unambiguous terminology should be available on all college, AMC and MBA websites and any other relevant organisations.
3. That colleges review current timeframes for each assessment and undertake projection exercises with assistance from Health Workforce Australia to anticipate

demand for specialist comparability assessments and increase their capacity to meet the workforce demand.

4. The support programs and teams that Queensland Health has initiated and developed are considered as a national model to support OTDs and assist them in meeting college and registration requirements.

5.0 Conclusion

Queensland Health values the significant role that its OTDs contribute towards providing essential health services in Queensland.

Queensland Health supports the legislative scheme, policies and standards which ensure healthcare provided by medical practitioners is delivered in a professional, safe, and competent way. It is essential that processes and requirements of the scheme are readily accessible, comprehensible, streamlined and simplified. The policies and standards developed to apply the legislation must continually evolve to meet the demands of the medical workforce and improve the sustainability of the scheme.

Hence, Queensland Health strongly supports the inquiry into registration processes and support for OTDs and has provided considered proposals for a consistent and equitable process for OTDs on the assessment pathway to Specialist registration in Australia.

Attachment One

Consultation Group

- Office of Chief Health Officer (CHO), Area of Need (AON) Unit
- Directors of Medical Service Advisory Committee (DOMSAC)
- Medical Advisory Panel (MAP)
- Director's of Medical Workforce Advice and Co-ordination Unit (MWAC)
- Queensland Medical Education and Training (QMET)
- Clinical Workforce Solutions' RAPTS, Centre for International Medical Graduates (CIMG) and WorkforUs
- Statewide Anaesthetic and Psychiatry Overseas Training Specialist Upskilling Programs