



**House of Representatives Standing Committee on Health and Aging.**

**Submission – overseas medical graduates.**

I am writing a submission for the House of Representatives Standing Committee on Health and Aging, looking into the registration processes of overseas medical graduates (OMGs), and the support they receive in the registration process. In my submission, I would like to particularly focus on the support that OMGs receive in relation to the English requirements, and inform the committee that this support is actually decreasing at the moment.

I have until recently been a teacher at the Sydney Institute of TAFE, Ultimo, Sydney. I have a medical degree (MBBS, Sydney) and practised for 17 years in general practice in Sydney, prior to obtaining a post graduate certificate in Teaching English to Speakers of Other Languages (TESOL). For 9 years, I have taught a course of Advanced English for Overseas trained Health Professionals. Each semester-long course (approximately 250 to 300 hours, and occasionally longer) has majored on the teaching of communication skills as used in the health professions in Australia. The course has been run in the Multicultural Education Unit, at Ultimo TAFE, and the funding has been sourced, until recently, from the LLNP (Language, Literacy and Numeracy Programme, Australian Government). The majority of students have been doctors, but each class has had other professions such as dentists, nurses, pharmacists, and occasionally others such as vets or physiotherapists. The focus of the teaching has been to raise the proficiency of English to the point that the students can successfully communicate in English in the roles that they would be required to undertake as health professionals, and to prepare them to sit the Occupational English Test (or the alternative test, IELTS). These language tests are a requirement for overseas trained health professionals to gain recognition in their profession in Australia.

I would like to make several observations that I hope will assist the committee.

1. The level of English required by the various boards that control the registration of health professionals is very high. It is my observation that the level required is significantly higher than it was when I first started teaching in 2002, and that many students struggle to reach the required results. Whilst it may be debated whether that very high requirement is really necessary, it is nevertheless now the case that passing the English test is, for most students, even more difficult than passing the written and clinical medical examinations. There have been considerable levels of disquiet among candidates about the Occupational English Test (OET), and in particular about the speaking test, in which candidates are interviewed by interlocutors untrained in any English teaching skills. The statistical hurdle of obtaining a 'B' pass in all 4 skills at the one sitting (reading, writing, speaking and listening) is arguably unnecessarily difficult. Many candidates have sat the test on multiple occasions, each time getting 3 'B' and one 'C' mark, and so have to resit again and again (at a considerable cost in time and money).

2. In view of the language difficulties, many students require assistance to achieve the desired English levels. Despite Sydney being the largest city in Australia, and having a large percentage of the migrant intake, there have been few classes

available for students. In my particular case, we have run classes every semester for 9 years (and the programme had existed for several years before then) and so I have been able to assist in the development of approximately 40 students per year. The NSW Institute of Languages has also run a program for some years, partly government funded. In the context of the large number of OMGs in Sydney, the coverage of assistance in public education is significantly incomplete.

3. Most OMGs, upon arrival in Australia, have all the expected issues of life to deal with – housing, food, family issues, and a source of income. This is a time of great change and stress for them, and so they need assistance in this phase of life. For many, the challenges of the English requirements are daunting. Some attempt the OET or IELTS, and fail, and are tempted to give up. Others press on, hoping to pass next time, only to fail again. In this situation, a mentor, to assess their situation and their progress, is needed. And they need to be able to access courses where their English communication skills are developed as quickly as possible. If they wait 6 or 12 months or even longer for a course, it is time wasted for them (and for the Australian community). It is a situation where public education has a key role to play, to provide free or subsidised education to maximise the potential of these OMGs for their own sakes and that of the community.

4. The LLNP (Language, Literacy and Numeracy Program) funding, from the Commonwealth Government, has recently been awarded to a private provider, and has been lost by TAFE. This means that the course I have taught can no longer run. The Sydney Institute of TAFE has failed to continue the course under any other funding arrangement. As of this week, there were 101 applicants who had registered for this course, (for 20 places!) and the majority of these were doctors. Despite the huge demand for this course, it can no longer run, due to this loss of funding.

5. It is my opinion that the course running at TAFE, and the similar one at the NSW Languages Institute, have been a valuable service to the Australian community, and functioning well to assist overseas medical graduates to achieve their goals of registration, and assist their entry into the medical workforce. I feel that public education has a vital role in continuing this process. The course, along with the support that it receives at TAFE (student services, library etc) has been very successful for a long time, with an experienced team of teachers and support staff to provide it. In my opinion, to dismantle this facility (as has just occurred) is completely counter-productive, and significantly lowers the support available to OMGs. It would be a great pity if a decision made in the Education Department of government caused such a negative impact on the development of the careers of health practitioners, and consequently the availability of health practitioners throughout the country, especially in regional Australia.

6. In summary, it is clear that the long process for overseas medical graduates to obtain Australian registration needs to be made as ‘user friendly’ as possible. I would recommend that the committee examine as a matter of urgency the restoration of programmes to assist the candidates in the various steps required, particularly in the English requirements, and in particular look at returning and indeed increasing public education to its central role in this. Apart from the professional and educational value to the OMGs themselves, the efficiency of the process would be of financial and medical benefit to the Australian community.

My strong recommendations are:

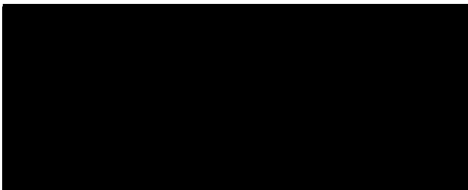
1. The establishment of a system of assessment and mentoring of new OMG arrivals by people trained in medicine, and English teaching. It would be quite appropriate for retired health professionals to be involved in this process, as they could undertake a course in TESOL or similar training for the teaching of speakers of other languages. I would recommend initial assessment of OMGs (and other health professionals) soon after their arrival, and at regular intervals. They can be given staged advice about the best career path for them (whether it be further basic English development, advanced English training, or medical refresher courses etc), and receive monitoring, advice and encouragement through this process.

2. The reinstatement of public education facilities to get through the major blockage that most OMGs face in their path to recognition of their qualifications, namely, their development of advanced English skills. Although in the past, the number of positions available has not been adequate, at least there was a system available that could help many people achieve the levels of English required by the registration bodies. The dismantling of this system in recent months is nonsensical, and needs to be reversed now.

I am available to be contacted by the committee at any time, and everything I have written can be used in public discussion.

Thank you.

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