



The Royal
Australian &
New Zealand
College of
Psychiatrists

Registration, Accreditation and Support Processes for Overseas Trained Doctors

Submission to the House of Representatives Standing Committee on Health and Ageing, February 2011

working
with the
community

Executive Summary

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) is pleased to have the opportunity to make a submission to the Inquiry on registration processes and support for overseas trained doctors. The RANZCP is committed to improving the processes in support of the overseas trained psychiatrists and medical graduates who apply to the College for Specialist Assessment or for approval to undertake Area of Need positions in psychiatry.

The College commends the Standing Committee for conducting this Inquiry. This submission highlights key areas that the RANZCP believes should be addressed as part of the Inquiry, specifically highlighting the issues relevant to its constituents who received their primary and or secondary medical qualifications in countries other than Australia or New Zealand.

Key messages from the RANZCP regarding overseas trained psychiatrists highlight the need for:

- Greater clarity, consistency and alignment between the requirements and processes within and between the AMC, AHPRA and other government agencies;
- A centralised system, as in New Zealand, for the assessment and verification of qualifications and training;
- The provision of a central contact point for overseas trained psychiatrists with enquiries about any aspect of their pathway to registration as specialist psychiatrists in Australia; and
- Enhanced support for specialist overseas trained psychiatrists in Area of Need or other situations prior to them receiving full specialist registration.

The issues concerning overseas trained specialist psychiatrists in Australia are outlined, with recommendations.

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Summary of Recommendations

The RANZCP respectfully recommends the following actions to mitigate the barriers currently faced by overseas trained psychiatrists (OTPs) wishing to practice as specialist psychiatrists Australia.

1. Establish a common pathway between the processes of the Australian Medical Council (AMC) and the College for Area of Need positions and specialist assessments, and the Australian Health Practitioners Registration Agency (AHPRA) for registration.
2. Establish consistent national timelines and associated guidelines for OTPs so that the requirements of the AMC and of AHPRA, and the consequences from these regarding registration and employment contracts, are aligned and clearly understandable for all candidates.
3. Establish a national agency as a component of the AMC, with responsibility for the assessment of the overseas training and qualifications of all OTPs applying for registration to practice in Australia, as occurs in New Zealand via the Medical Council of New Zealand.
4. Establish a robust help desk at AHPRA or the Medical Board of Australia where OTPs may have their queries about assessment, registration and employment answered in a timely manner.
5. Establish an office where OTPs with complex cases may receive one on one support, clarification and, if necessary, advocacy of their case. This agency would assist OTPs where there are issues which are interdepartmental, such as immigration or visa status.
6. Provide establishment and recurrent funding for positions of OTP Directors of Training in each state and territory, in each medical specialty, so as to facilitate support of OTPs as required, and to monitor progress.
7. Include in contractual agreements with employers for Area of Need (AON) positions an obligation to provide support and/or supervision for OTPs, and for salaried time / leave allowances for study and professional assessments.
8. Provide funding for videoconferencing facilities in remote and regional areas and in the medical colleges, for the support, mentoring and training of OTPs in remote locations.
9. Provide ongoing funding for projects which support OTPs working to complete assessments on their pathway to Fellowship and full registration as medical specialists.
10. Establish a service of locum specialists to enable the release of OTPs from duties to attend education, training and exam preparation programs.
11. Further support provided by government for the development and implementation of the substantial comparability pathway for OTPs
12. Conduct an evaluation of the Overseas Trained Specialist Specified Training (SST) pathway in particular to investigate whether there are any systemic failures of the program.

1. About the RANZCP

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) is the principal organisation representing the medical specialty of psychiatry in Australia and New Zealand and has responsibility for training, examination and award of the qualification of Fellowship. There are approximately 3200 Fellows of the RANZCP who account for approximately eighty-five per cent of all practising psychiatrists in Australia and over fifty per cent of psychiatrists in New Zealand. There are branches of the RANZCP in each state of Australia, the ACT and New Zealand.

Through its various structures, the RANZCP accredits training programs and administers: the training and assessment processes for qualification as a consultant psychiatrist for both trainee psychiatrists and overseas trained psychiatrists (OTPs) on a pathway to Fellowship; supports continuing medical education activities at a regional level; holds an annual scientific congress and various sectional conferences throughout the year; publishes a range of journals, statements and other policy documents; and liaises with government, allied professionals and community groups in the interests of psychiatrists, patients and the general community.

The RANZCP Education Department maintains and develops all aspects of the College's training, assessment and education programs. During 2010, the Education Department supported the College's 1073 trainees, 153 Fellows undertaking subspecialty Advanced Training, 297 OTPs and 3249 Continuing Professional Development participants.

This submission has been developed with input from the RANZCP's Overseas Trained Psychiatrists Committee, Board of Education, and Committee for Specialist International Medical Graduate Education.

2. Workforce and the role of overseas trained psychiatrists

The RANZCP recognises that workforce shortages and recruitment difficulties particularly pertain to psychiatry, and constitute a major challenge to service provision in Australia. There clearly is a discrepancy between the available psychiatric workforce and the mental health care needs of the population particularly outside major cities.

In Australia the distribution of psychiatrists does not reflect the distribution of the population. In Australia, 81% of psychiatrists service 66% of the total population, which leaves 19% of psychiatrists to service 34% of the population, that being the percentage of the population that live in rural Australia.

The RANZCP has collaboratively worked with government to begin to address these workforce issues through a number of initiatives aimed at encouraging the specialty of psychiatry among medical students and prevocational doctors and through expanding training settings. Efforts have also been made to improve distribution of workforce across rural and remote areas.

Recruitment of overseas trained psychiatrists (OTPs) has the potential to significantly alleviate workforce issues in Australia, although this recruitment should be done in a sensitive manner that does not seek to attract psychiatrists from developing countries where their skills are also needed. For OTPs who do move to Australia, the contribution to the delivery of mental health services in Australia is substantial. To ensure that the system works, both in terms of delivering benefits to Australian mental health services and supporting the needs of these doctors, there is a critical need to support OTPs in their work, particularly those working in rural and remote settings.

Challenges of rural practice include: professional isolation; social and family factors (including difficulties with spouses obtaining employment); career opportunities; size of client base; burden of travel to outreach services; lack of specialist positions at regional hospitals; and remuneration. Factors contributing to professional isolation may relate to deficits in after hours and sickness cover, peer support and review, access to ongoing educational and professional development, opportunities to train registrars and to have junior medical staff backup, collegiality, and the impact of chronic shortages on sustainable workloads.

For the reasons stated above, rural and remote settings are almost inevitably areas of unmet need, leading to a situation where a significant number of OTPs are employed. Problems of professional and social isolation are therefore particularly high in this group.

As well as improving administration systems and removing barriers to allow overseas trained doctors to meet registration requirements, it is equally important to focus attention on providing support both in terms of academic requirements and supervision, particularly in areas of unmet need. This submission makes a number of recommendations about how these issues can be improved for overseas trained psychiatrists.

3. Response to the Terms of Reference

In setting out its response to the terms of reference of the inquiry, the RANZCP believes it necessary to firstly outline its current administrative processes and accountability measures in respect of overseas trained psychiatrists to familiarise the committee with this process. The submission then highlights a number of issues with the current process as raised by overseas trained psychiatrists. The RANZCP is undertaking steps, where it is within its scope to do so, to improve these processes in consultation with its Overseas Trained Psychiatrists Committee and these are outlined in Section 3b below. This indicates that there is much that can be done to improve the experience of overseas trained psychiatrists. Substantive action at the College level relies upon primary action as recommended by the AMC, AHPRA and other government agencies. Where improvements are beyond the scope of the College, recommendations to improve these processes have been made.

3 a Current administrative processes and accountability measures for OTPs

RANZCP processes have the dual aims of introducing and supporting OTPs in their pathway to specialist registration in Australia and of maintaining high standards of practice and patient care.

At regular intervals throughout the year the College receives and processes applications for Specialist Assessment, Specialist Specified Training (SST) Applications and Area of Need (AON) positions. It manages the pathways of OTPs facilitating training, assessments and associated preparation workshops as required.

Type of applications processed by RANZCP:

Specialist assessment involves the assessment of OTPs' training, qualifications and overseas experience and determining the requirements for and exemptions from elements of the RANZCP training and assessment program. On completion of the requirements, OTPs are eligible to apply for Fellowship and hence specialist registration.

Specialist Specified Training (SST) application and endorsement allows specialist OTPs and senior registrars in the final two years of their specialist training overseas to apply via an employer or sponsor, to undertake supervised workplace-based training in Australia with a view to enhancing their level of practical skill in a particular area of expertise. Applicants are required to return to their country of origin to resume and complete their training after gaining this short term experience in Australia.

For **Area of Need (AON)** applications, OTPs who hold qualifications that allow practice and recognition as a specialist psychiatrist in another country may apply to have their specialist training and experience assessed by the RANZCP with a view to gaining approval to work in a designated AON position in Australia. AON positions are declared by the States and Territories in Australia when the positions are not filled by Fellows of the College.

The Committee for Specialist International Medical Graduate Education (CSIMGE) under the auspices of the RANZCP Board of Education (BOE) manages all processes for the assessment and pathway to Fellowship for all such OTPs. The work of the CSIMGE is supported by a team of four staff and by Fellows of the College, often working in a pro bono capacity, who act as committee members, supervisors and assessors.

3 a (i) Assessing OTPs' undergraduate and post-graduate / specialist qualifications

There is a wide variation in the substance and quality of undergraduate medical education overseas, and there are requirements external to the College through the Australian Medical Council (AMC) to ensure equivalence and competence of undergraduate (primary medical) education for OTPs wishing to practice within Australia.

For specialist OTPs proceeding toward specialist recognition, assessment of post graduate (secondary) training and qualifications in the specialty is delegated to the relevant medical college. In the case of the specialty of psychiatry, the relevant college is the RANZCP.

The secondary (specialist) psychiatry qualifications presented by OTPs also vary markedly, from diploma courses and three year medical courses to five year medical or fellowship courses. The five year courses are normally viewed by the RANZCP as indicating equivalence with the RANZCP training, and these OTPs may normally proceed to Fellowship via examination, with a small number of prescribed training experiences (Category II). OTPs with specialist qualifications of less than five years' duration are usually required to complete a further period of training before examination (Category I).

The assessment of OTPs' qualifications and training is currently undertaken on a case by case basis by state assessment panels, consisting of RANZCP Fellows, however with the planned introduction of the Substantial Comparability pathway the pre-identification of certain comparable qualifications is expected to facilitate the assessment process for graduates of particular institutions and healthcare systems identified as comparable.

3 a (ii) The Dual Pathway process

The RANZCP introduced the Dual Pathway process in October 2009. The Dual Pathway process combines the processes for assessing OTPs for Fellowship with the process for the approval of OTPs' suitability for Area of Need posts. Under the Dual Pathway process applicants applying for approval to work in an AON position must also apply for specialist assessment. Thirty-four Fellows, participating in state based assessment panels, assessed 76 Dual Pathway applications during 2010.

The steps involved in the Dual Pathway process are as follows:

- All applications from OTPs for specialist assessment and for AON positions are made through the Australian Medical Council. The AMC reviews the applicant's documentation to ensure they are eligible to proceed to assessment. Once the AMC has verified the application, it is forwarded to the RANZCP for assessment.
- Applications for specialist assessment and AON approval are received on a standard RANZCP form and include a comprehensive Curriculum Vitae and referee reports. Applications are forwarded to the state assessment panels for assessment, which includes an interview with the applicant.
- The assessment panels, comprising Fellows of the RANZCP of at least 5 years standing, determine whether a specialist OTP has training and qualifications which are substantially comparable, partially comparable or not comparable to that of an Australian or New Zealand trained psychiatrist.
- The assessment process involves the assessment of the formal training and assessment, clinical experience and standard of practice of each applicant against those of an Australasian trained psychiatrist. Subsequent clinical experience and the nature of the applicant's current practice including participation in continuing professional development activities and overall contribution to the profession is considered. Each case is considered individually and all applications

are assessed in accordance with the RANZCP Training and Assessment Regulations¹ and the Equivalence Guidelines². The Equivalence Guidelines indicate the categories of assessment currently available and indicate the nature of experiences and assessments required on the pathway to Fellowship, for the candidate.

Categories of assessment under the current College regulations (exemption status):

Not Comparable: An applicant is assessed as 'not comparable' and may pursue other options in order to practice psychiatry in Australia, such as applying to undertake the RANZCP specialist training program.

Partially Comparable:

Category 1: The candidate is required to undertake a significant number of training experiences and assessments, such as the RANZCP written and clinical examinations.

Category 2: The candidate is required to take fewer training experiences and assessments, because of demonstrated experience and comparability of training and qualifications with that of an Australian or New Zealand trained psychiatrist.

Substantially Comparable: This category is planned to be included from July 2011. See section 3a(vi) for further details.

Eminence (Category 3): The candidate is exempt from experiences and assessments because of a demonstrated excellence in administration and/or academia, and may proceed to Fellowship without further assessment, although specific experiences may be required such as Indigenous or Non-Government Organisations (NGO) experiences.

The College grants an initial 3 year period for the attainment of Fellowship. Subject to progress, a further two three-year extension periods may be granted, to a maximum of nine years on the Fellowship pathway. Recently a small group of OTPs were granted an additional year during which to complete outstanding tasks in their pathway to Fellowship.

The College's Dual Pathway assessment process takes 13 weeks from the application closing date to the final assessment outcome. All assessment outcomes are reviewed and ratified.

The process is aimed to streamline and expedite the assessment/approval processes and to enable entry standards to be upheld by the state assessment panels. As a result of a review of the process in August 2010, the RANZCP will enhance the process from 2011 to further reduce the time taken to reach an outcome of assessment/approval for applicants.

3 a (iii) Assessment requirements for OTPs who are partially comparable

OTPs whose qualifications are assessed as being partially comparable are required to undertake specified training and assessment requirements. The assessments include one or both of the following:

- The RANZCP Written Examination, also undertaken by RANZCP trainees, comprising two papers of three hours duration;
- The Exemption Candidate Clinical Examination (ECE), comprising two components, the Modified Observed Clinical Examination (M-OCI) and the Modified Objective Clinical Structured Experience (M-OSCE). It is a requirement to pass both components in order to achieve a pass in the ECE.

The number of OTPs sitting the Exemption Candidate Examination (ECE) in 2010 was 214 in comparison with 196 trainees sitting the corresponding Trainee Clinical Examination (TCE).

3 a (iv) Applications for extension, renewal or review of exemption status

The RANZCP considers all applications for extension, renewal or review of exemption status from exemption candidates. If an OTP's exemption status is due to expire before their training and examination requirements for admission to Fellowship have been completed, an extension may be granted for a further three years. If exemption status has expired, there is a process for reconsideration or appeal.

The RANZCP has a comprehensive "Reconsideration of Committee Decisions" policy and applicants may access the RANZCP appeals pathway on completion of the Education processes.

3 a (v) Entry to Fellowship on completion of assessment and training

On completion of the training and assessment requirements of the exemptions pathway, OTPs may apply for entry to Fellowship of the College. Processes are in place to ensure that this final entry to Fellowship stage is progressed in a efficient and timely manner.

3 a (vi) The Substantial Comparability Pathway

In November 2010, the General Council approved the implementation of the Substantial Comparability pathway for OTPs whose training and qualifications have been assessed as being Substantially Comparable to those of a RANZCP Fellow. Those OTPs will be eligible to apply for Fellowship following a period (generally 12 months) of peer-reviewed and supervised practice, and successful completion of workplace based assessments.

The Comparability Working Group was established in 2010 to facilitate the pathway and comprises, on a pro bono basis, both Overseas Trained Psychiatrists Committee representatives and other Fellows of the College with experience in OTP assessment and/or examinations. The appointment of an officer to facilitate the administration of the pathway is underway. The pathway developed will focus on similarity of training, comparability of health systems, and work place assessment.

3b Issues with current processes and measures to improve

Within the College many issues have been identified including those reported by OTPs who have themselves experienced difficulties in their pathway to Fellowship of the RANZCP in order to practice as specialist psychiatrists within Australia. Concerns have been identified about the processes both internal to and outside of the RANZCP sphere of influence. The College is also mindful of the role often played by specialised medical recruitment firms, in the recruitment of OTPs to the Australian psychiatry workforce. Such recruiters can play a critical role in providing (or not providing) information on processes and requirements to psychiatrists overseas, who may be considering applying to work in Australia.

The Overseas Trained Psychiatrists Committee is a committee of the RANZCP that works to bring such issues to the attention of both the College and Government bodies. The majority of the members of this

committee are OTPs. A paper developed by the committee on *International Medical Graduates/Overseas Trained Psychiatrists – Issues for Fellowship and Practice/Residence in Australia*³, has been used in the development of this submission.

The College's Committee for Specialist International Medical Graduates Education (CSIMGE) is responsible for: conducting assessments for exemption status, approval of Area of Need positions, validation of short term training places, and planning and conducting the ECE Preparation Workshop. The committee is committed to working to improve systems and processes for OTPs on a pathway to Fellowship. During 2009 the CSIMGE membership was expanded to co-opt OTP members as full voting representatives to ensure that the perspective of overseas trained psychiatrists are taken into account. Increased OTP representation on state assessment panels is a goal for 2011. During 2010 OTP representation on all relevant RANZCP Education committees was encouraged and has occurred.

The RANZCP is also working to develop enhanced record keeping and data extraction. The accessibility of current and historical data in relation to specialist assessments, AON positions and other data relating to OTPs within the College is under review. Improvements are underway to enhance efficiencies and to allow quality data to be more easily extracted to inform decisions to be made that address areas of disadvantage.

Outstanding issues for RANZCP OTPs, including action the College is taking to address such issues where it can, are summarised below. **The RANZCP believes that further action is required at AMC, AHPRA and other government agency level before many of these issues can be properly addressed by the College.**

3b(i) Confusing processes for OTPs as a result of multiple authorities with differing requirements and pathways

Registration, accreditation and support requirements and processes for OTPs are complex and cut across many levels and organisations.

The RANZCP has noted on many occasions the difficulties OTPs experience when attempting to navigate the requirements of the various authorities as they seek recognition as specialist psychiatrists in Australia. OTPs frequently have to deal with processes of several authorities concurrently, while they are navigating the RANZCP requirements to achieve Fellowship. The requirements of the AMC, the Australian Medical Board, the Department of Immigration, the Department of Health and Ageing, individual health services and recruitment agencies may also need to be managed. Staff of the RANZCP report handling frequent enquiries from OTPs, confused about the processes of different authorities. In some cases this confusion has led to steps being omitted and deadlines missed with residency consequences for the OTP concerned. Information given by personnel from different organisations may also serve to confuse rather than assist the situation for OTPs.

Where it is within scope, the RANZCP has worked to address these concerns. The RANZCP has a Manager within the Education Department who oversees all programs and processes for OTPs applying for and undertaking the exemptions pathway to Fellowship. The Manager is supported by 2 full-time staff members who are available to answer queries and to provide support for OTPs in managing both College and external processes. The difficulty of this work is exacerbated by the complexity and inconsistencies in processes outside of the College's influence.

In late 2010 the College website section pertaining to OTPs was reviewed with the aim of enabling greater clarity of information for OTPs. The website will be updated accordingly in early 2011.

Recommendation 1: Establish a common pathway between the processes of the Australian Medical Council (AMC) and the College for Area of Need positions and specialist assessments, and the Australian Health Practitioners Registration Agency (AHPRA) for registration.

Recommendation 2: Establish consistent national timelines and associated guidelines for OTPs so that the requirements of the AMC and of AHPRA, and the consequences from these regarding registration and employment contracts, are aligned and clearly understandable for all candidates.

Recommendation 3: Establish a national agency as a component of the AMC, with responsibility for the assessment of the overseas training and qualifications of all OTPs applying for registration to practice in Australia, as occurs in New Zealand via the Medical Council of New Zealand.

Recommendation 4: Establish a robust help desk at AHPRA or the Medical Board of Australia where OTPs may have their queries about assessment, registration and employment answered in a timely manner.

3b (ii) Visa and residency issues

The granting of a temporary work visa may require affirmation from a number of agencies including the AMC, RANZCP, employer and Medical Board. When a renewal is required, if paperwork is delayed, OTPs risk losing visa currency and this increases the stress on the individual. Currency requirements of the RANZCP and the Medical Board/s may exacerbate difficulties in this area.

There are some situations where permanent residence in Australia is not an issue, such as in the case of a spouse's eligibility, or being an Australian citizen who trained overseas, but for the majority of OTPs residency is a major issue.

This factor is beyond the scope of the RANZCP to improve although College staff are mindful of the issues and work to support the OTPs for whom this issue has been identified.

Recommendation 5: Establish an office where OTPs with complex cases may receive one on one support, clarification and, if necessary, advocacy of their case and expedite the renewal process. This agency would assist OTPs where there are issues which are interdepartmental, such as immigration or visa status.

3b (iii) OTPs in Area of Need positions: barriers to Fellowship

Many OTPs accept Area of Need (AON) positions in order to achieve their goals of living and working in Australia prior to achieving Fellowship of the College and registration as a specialist psychiatrist. The RANZCP has a recently revised mechanism through the Dual Pathway which requires that all novel applications for an Area of Need position, must simultaneously apply to enter the exemptions pathway. This places them on a monitored and timed pathway of training and assessment experiences pertinent to their assessed level of comparability with Australian psychiatrists in order to progress toward Fellowship whilst in AON positions. Those in an existing AON position who are moving to a new AON position must apply for a re-assessment pertinent to the new position.

However, often by virtue of their geographical situation, OTPs in AON positions face barriers to completing required training and assessments. These OTPs are often located at significant distances from larger learning centres, necessitating travel or technological solutions. Access to experiences to enable cultural and linguistic acclimatisation is often limited. There is also much variation in the support offered by employers to OTPs in AON positions required to undertake training and assessment requirements on the pathway to RANZCP Fellowship.

It has been reported that in many situations, opportunities for teaching/training toward Fellowship are minimal and the isolation of rural practice promotes disadvantage where peer support is limited or nonexistent. Supervision is often not available or provided on a limited or remote basis. Health Services are often understandably reluctant to grant release time for training and examinations, especially when time away from the service is extended by the necessity to travel to larger centres. For these OTPs particularly, the likelihood of achieving success in assessment requirements, in a timely manner, is markedly reduced.

These factors work to disadvantage OTPs in AON positions in achieving success in the RANZCP assessments in order to progress on their pathway to Fellowship. The College is aware of instances of candidates working in AON positions for up to nine years, failing to pass assessments and at risk of having to ultimately return to their countries of origin.

In contrast to the above situation, it is acknowledged that there are an increasing number of employers who actively support OTPs' training and examination preparation and OTPs who achieve their Fellowship requirements in the minimum time of between 3 and 5 years. The fact that OTPs in supported AON positions can achieve Fellowship in the minimum time is an argument for the provision of such support for all OTPs in these positions. OTPs being brought to the country to fill AON positions should be better cared for (by the College, AMC, employers and Government)¹.

The RANZCP recognises the issues and has moved in an effort to assist OTPs in this position. The appointment of Directors of Training (DOTs) for OTPs is one initiative underway. In several states/territories the Branch Training Committees of the RANZCP have appointed College Fellows in the positions specifically for the support of OTPs on the exemptions pathway to Fellowship. This support mechanism has been established along the lines of the Director of Training (DOT) positions in each region, which oversee the progress of College psychiatry trainees on their path to Fellowship. Such an appointment could ensure that all OTPs have a needs assessment developed, as well as ensure that required programs are available and undertaken by OTPs. The RANZCP commends this activity and has offered support for its broader implementation.

Implementation of support projects, as described in section 3c, is a further step toward providing support for OTPs in AON positions. The RANZCP further supports the call by the Council of Presidents of Medical Colleges for the establishment of a significant resource of locum specialists to enable the release of OTPs from their duties to attend education, training, and exam preparation programs provided by the College. Whilst this would be no small operation and costs significant, it would be the most effective initiative to give these doctors the professional support they deserve and need.

Recommendation 6: Provide establishment and recurrent funding for positions of OTP Directors of Training in each state and territory, in each medical specialty, so as to facilitate support of OTPs as required, and to monitor progress.

Recommendation 7: Include in contractual agreements with employers for Area of Need (AON) positions an obligation to provide support and/or supervision for OTPs, and for salaried time / leave allowances for study and professional assessments.

Recommendation 8: Provide funding for videoconferencing facilities in remote and regional areas, and

in the medical colleges, for the support, mentoring and training of OTPs in remote locations.

Recommendation 9: Provide ongoing funding for projects which support OTPs working to complete assessments on their pathway to Fellowship and full registration as medical specialists.

Recommendation 10: Establish a service of locum specialists to enable the release of OTPs from duties to attend education, training and exam preparation programs.

Non recognition of experience gained during AON service is also an issue. OTPs working as consultants in AON positions over a number of years, prior to achieving Fellowship and hence specialist registration, have argued that current/recent work experience gained in Australia should be recognised when decisions about exemption status are reviewed.

These are complex and difficult issues. For example, an OTP may be filling a consultant psychiatrist position in a small rural service with minimal opportunity for peer review activities, remote supervision and limited opportunity for formal learning. They may at the same time have been serially unsuccessful at the written or clinical examinations, or neglected to present for examination. Whilst the RANZCP considers the experience gained whilst working in Australia is broadly relevant it does not materially change the OTPs specific category of exemption assigned at the time of application. All individual applications on this matter are reviewed prior to decision being taken. However, the RANZCP is unable to assess experience only in terms of time served in a position as a way to satisfy Fellowship requirements, rather it assesses components of training and similar competencies.

As a result, many of the cohort will either suffer currency issues with the College or registration issues with the Medical Board. It has been estimated that 25% of the psychiatry workforce outside of metropolitan areas may potentially be affected by these factors.

The RANZCP recognises the concerns expressed by OTPs around the non-recognition of service by OTPs in unsupervised AON positions in their assessment for exemption status. The College believes that access to adequate training and support is the key factor and is keen to work with the government to ensure that all OTPs are placed in posts where there are adequate opportunities for learning and advancement.

3b (iv) Process of assessment of OTPs' qualifications

The interface between the College, the AMC and the Medical Board of Australia is problematic, especially with the College having to make decisions on the comparability of training and qualifications of OTPs. This situation differs from that in New Zealand where candidates are assessed at the point of entry via the Medical Council of New Zealand and hence are aware from the outset about their prospects, including the prospect of vocational registration which is not linked to Fellowship, as it is in Australia. It has been observed that the New Zealand process is considerably better resourced and organised than in Australia.

The Australian process relies considerably on Medical Colleges and hence, in the case of the RANZCP, on the pro-bono work of Fellows via state assessment panels and College processes. The process can thus be complicated by Fellows' availability, timetabling of panel hearings, recruitment, training and accreditation of assessors and the moderation of assessment decisions. Of these issues recruitment of assessors is the most difficult hurdle for the RANZCP to overcome, despite an honorarium being provided for the tasks.

Panel members assess candidates' application documents and then conduct an interview with each candidate. Fellows are remunerated for their time on assessment panels. Recruitment to these panels is

a limiting factor however, which means existing panels carry a larger load and timelines for OTPs awaiting assessment potentially extended. The RANZCP is in the process of streamlining the process and expanding recruitment to the panels wherever feasible.

The introduction of the Substantial Comparability pathway is expected to streamline the assessment for those OTPs whose qualifications and training are so deemed.

3b (v) Verification of OTPs' primary and secondary qualifications

The College needs to ensure that OTPs in Australia who are presenting for Fellowship have completed the verification process prior to admission to Fellowship and hence specialist registration being confirmed. Verification is administered by the AMC, which liaises with the awarding institutions of the overseas qualifications. Until the College recently took a proactive approach in the matter, instances of candidates waiting many years for this verification to be confirmed, and hence having their admission to Fellowship delayed, were common.

In 2010 the College conducted a review of the records of all OTPs on the exemptions pathway to ascertain whether Primary and Secondary qualification checks had been completed via the AMC. OTPs for whom verification processes had not been completed for either or both qualifications were contacted and encouraged to follow up with the relevant agencies and overseas institutions. The aim of this was to ensure OTPs are not delayed in being admitted to Fellowship, on completing the training and assessment requirements. This process has been established as standard operating procedure to avoid such delays in the future.

3b (vi) The nine year maximum for OTPs on the pathway to Fellowship

With respect to those OTPs who do not complete the requirements for Fellowship within the College's maximum nine year period, the College is concerned about the practice and residency options available to them if they are no longer eligible to remain on the exemptions pathway because of legislative requirements. These OTPs have often made a significant contribution to local psychiatry services filling roles in AON positions over an extensive period of time. It is estimated³ that there is a small but important group of OTPs in this position - 5 in 2011 and 6 in 2012 are at risk of losing exemption status currency after 9 years in Australia. A larger harder to quantify group, possibly 20¹, may lose Medical Board registration, depending on the arrangements for transferability with the establishment of the Medical Board of Australia.

It has been reported that in some instances in the past, the requirements and timelines of particular State/Territory Medical Boards were not congruent with the College's requirements, leading to significant confusion and disadvantage to the OTPs concerned. Understandably, OTPs who find themselves disadvantaged by this incongruity of systems feel unsupported and let down by the College and external processes.

An example of this is where state medical boards may grant AON status from 1 to 3 years, with many opting for a 1 to 2 year maximum. A short state/territory imposed service period can leave OTPs having to negotiate another AON position and geographical relocation, often interstate. For some OTPs this process is repeated several times within the allowable RANZCP nine year currency period, again adding to the confusion and stress of the practitioner concerned.

The RANZCP has recently introduced an additional one year to the nine year currency limit, with intensive educational support, for those OTPs who have reached their nine year limit for Fellowship

attainment. Currently three OTPs are in this situation. Registration, rather than College currency, is often the major issue, however and the College is unable to assist OTPs facing registration expiry issues.

The Medical Board of Australia proposal for the AON program to grant 12 months registration with 3 extensions, to a maximum of 4 years has also caused concern. After this period a fresh application would be required and the impression is that the criteria to extend beyond 4 years will be strict. It could be understood that in these circumstances, any 'currency' set by the College would be arbitrary and irrelevant.

Ensuring standards for Fellowship are met is consistent with the College's commitment to ensuring high standards of practice and patient safety. Ensuring OTPs have the support to meet these standards is a priority.

The College will monitor external requirements for registration and AON positions with a view to aligning currency with these as appropriate at some time in the future.

3b (vii) Uncertainty about registration timeframe and lack of communication about changes

Uncertainty exists in regard to the meaning of the four years' registration period recently announced by the Medical Board of Australia, and whether registration for OTPs in Australia commenced from 2010, irrespective of the duration of previous registration. It is unclear also whether OTPs who had exceeded the maximum nine years of College currency, and then appealed, would still have four years of registration from 2010.

Medical registration and associated communication on this matter is outside the scope of the College but must be improved.

3b (viii) Examination barriers to progress on the Fellowship Pathway

Of the 230 candidates who achieved a pass in the ECE (since it was introduced in 2006), 213 passed by their third attempt. However many of the OTPs on the Fellowship pathway do not progress as would be expected and hence experience the currency issues as described previously. For these candidates, a particular assessment such as the Exemption Candidate Examination (ECE) may constitute a barrier to progression, despite the candidate's demonstrated knowledge and years of experience in psychiatry practice in an AON position. Notwithstanding this, the ECE is a core assessment task, designed to model and assess a candidate's competence in conducting a clinical interview and assessment in psychiatry in an Australasian context.

Factors such as facility with English and acclimatisation to Australasian cultural factors and idioms may have a strong influence on outcomes in this domain for OTPs. Structural and methodological improvements to the written and clinical exams, informed by the 2009 external review of the College examinations, have been implemented to enhance the reliability, validity and feasibility of the assessment program for both OTPs and trainees.

Changes to the exemptions candidate clinical examination during 2010 included decoupling the ECE examination components and implementing criteria marking for the M-OCI component. The decoupling of components enabled candidates to carry forward a pass in the M-OSCE, notwithstanding a fail in the M-OCI, allowing candidates to concentrate their efforts in achieving a pass in the M-OCI component in a subsequent attempt. ECE pass rates are closely monitored and consideration undertaken for further improvements to enhance candidates' opportunities to achieve success.

Mandatory preparation workshops for the clinical examination have been implemented to provide candidates the opportunity to prepare fully for the experience of the ECE. These are consistently highly rated by candidates.

3b (ix) Limitations to implementation of the Substantial Comparability Pathway

The RANZCP is in the process of developing and implementing a Substantial Comparability pathway for OTPs whose training and qualifications have been assessed as being Substantially Comparable to those of a RANZCP Fellow. Those OTPs will be eligible to apply for Fellowship following a period (generally 12 months) of peer-reviewed and supervised practice, and successful completion of workplace based assessments. Phase 1 of the initiative, for OTPs holding certain qualifications, is already in place. There is a need to expedite the process for development of a comparability pathway, and specifically the assessment of a wider pool of qualifications as part of 'Phase 2'. This process is currently constrained by availability of pro-bono Fellow time; the availability of further resources to facilitate this process would be expedient. Development of this pathway is consistent with the College's commitment to ensuring high standards of practice and patient safety, whilst supporting and improving processes for OTPs.

Recommendation 11: Further support provided by government for the development and implementation of the substantial comparability pathway for OTPs

3b (x) The Specialist Specified Training (SST) pathway

Concerns have been expressed regarding this pathway and the potential for the misuse of it as an alternative entry pathway to ongoing practice in Australia, for which it is not intended. OTPs may enter Australia on the SST pathway with greatly reduced assessment criteria, however may not uphold the requirements of the pathway. At the conclusion of the placement, it has been asserted that some OTPs apply to stay in Australia and undertake alternative pathways such as AON positions.

Improvement to the SST program is beyond the scope of the College. The RANZCP will continue to monitor this process to ensure that it is appropriate to meet the requirements and needs of those on this pathway.

Recommendation 12: Conduct an evaluation of the Overseas Trained Specialist Specified Training (SST) pathway in particular to investigate whether there are any systemic failures of the program.

3c Support programs available to meet registration requirements

The RANZCP is appreciative of the funding received to date and the opportunity to work with Government agencies in the support of OTPs on a pathway to Fellowship. The following is a summary of projects and achievements undertaken over the past 12 months. The RANZCP looks forward to these projects continuing and if possible, expanding to meet the great need in this area.

3c (i) Specialist IMG (OTP) Support Project

The project was developed and implemented as a pilot program for the support of nine Specialist IMGs from an identified cohort who had not sat their final fellowship examination. A program for the use of Workplace Based Assessment (WBA) tools was developed and finalised to support and inform a learning plan for the individual OTPs.

3c (ii) Exemption Candidate Examination Preparation Workshop

The RANZCP has run the mandatory ECE workshop since 2006. To increase support for OTPs undertaking this workshop, the RANZCP engaged in the project to develop additional support materials as well as an accreditation process for external ECE workshop providers. Draft accreditation standards for external ECE workshop providers were developed for review and piloted in Queensland, and additional materials are currently being developed based on research undertaken. This process will be implemented throughout Australia during 2011.

3c (iii) Redevelopment of Online Modules

The RANZCP is currently investigating the real need of online resources for OTPs and the sustainability of the development of online resources in the current health climate. A survey of all OTPs was undertaken in 2010 and a focus group held with OTP supervisors and trainers to determine what support topics were believed necessary and the preferred method of delivery. The change of scope from any further development of the online resources to a hardcopy orientation resource pack has been approved.

3c (iv) OTP Upskilling

The project was initiated to increase support for OTPs in their progression to Fellowship of the RANZCP, through targeted and individualised support. The RANZCP provided funding to support initiatives coordinated by State established coordinators, to run localised support programs for OTPs. Contracts between RANZCP and respective State coordinators, for the provision of these localised support programs, were established and funds have been distributed. Programs have been initiated in the following areas: mentoring, practice exams, seminar series, expedition of training experiences, cultural and communication enhancement, development of language of speech clarity in clinical communication, skills enhancement program, learning plans for individual OTPS and support funding for regional and remote OTPs.

Assessment records indicate that enhanced support in programs such as the above have led to significantly improved examination pass rates. The RANZCP looks forward to continuing collaboration with Government in this area to provide support for this cohort.

3c (v) RANZCP NSW Branch Rural Psychiatry Project - International Medical Graduate Fellowship Support Workshops

One of the key aims of the RANZCP NSW Branch Rural Psychiatry Project (2009 – 2012) is to support psychiatrists in Area of Need positions and career medical officers (CMO's) within rural and metropolitan areas in NSW. The International Medical Graduate (IMG) Fellowship Support Workshops, run quarterly, have a training focus to prepare IMG'S for Fellowship of the RANZCP and assist them in their day to day clinical work.

3d Suggestions to remove impediments and promote pathways for OTPs

In consideration of the current situation of OTPs in Australia, and the disadvantages experienced by many due to systemic factors beyond their control, the RANZCP offers the following suggestions for the consideration of the Standing Committee to assist in achieving the above goals:

1. Establish a common pathway between the processes of the Australian Medical Council (AMC) and the College for Area of Need positions and specialist assessments, and the Australian Health Practitioners Registration Agency (AHPRA) for registration.
2. Establish consistent national timelines and associated guidelines for OTPs so that the requirements of the AMC and of AHPRA, and the consequences from these regarding registration and employment contracts, are aligned and clearly understandable for all candidates.
3. Establish a national agency as a component of the AMC, with responsibility for the assessment of the overseas training and qualifications of all OTPs applying for registration to practice in Australia, as occurs in New Zealand via the Medical Council of New Zealand.
4. Establish a robust help desk at AHPRA or the Medical Board of Australia where OTPs may have their queries about assessment, registration and employment answered in a timely manner.
5. Establish an office where OTPs with complex cases may receive one on one support, clarification and, if necessary, advocacy of their case. This agency would assist OTPs where there are issues which are interdepartmental, such as immigration or visa status.
6. Provide establishment and recurrent funding for positions of OTP Directors of Training in each state and territory, in each medical specialty, so as to facilitate support of OTPs as required, and to monitor progress.
7. Include in contractual agreements with employers for Area of Need (AON) positions an obligation to provide support and/or supervision for OTPs, and for salaried time / leave allowances for study and professional assessments.
8. Provide funding for videoconferencing facilities in remote and regional areas and in the medical colleges, for the support, mentoring and training of OTPs in remote locations.
9. Provide ongoing funding for projects which support OTPs working to complete assessments on their pathway to Fellowship and full registration as medical specialists.
10. Establish a service of locum specialists to enable the release of OTPs from duties to attend education, training and exam preparation programs.
11. Further support provided by government for the development and implementation of the substantial comparability pathway for OTPs.
12. Conduct an evaluation of the Overseas Trained Specialist Specified Training (SST) pathway in particular to investigate whether there are any systemic failures of the program.

4. Conclusion

The RANZCP is very supportive of the objectives of this inquiry. Overseas trained psychiatrists (OTPs) make a substantial contribution to mental health services in Australia and require adequate support in their practice. Consistent with its commitment to ensuring high standards of practice and patient safety are met, the College has an important role in ensuring that OTPs meet the standards of Fellowship. The barriers faced by OTPs however are significant. Registration, accreditation and support requirements and processes for OTPs are complex across levels and OTPs frequently have to deal with processes of several authorities concurrently. Opportunities for education and training activities are often limited, particularly for those working in Area of Need positions. The RANZCP is constantly reviewing and updating its processes to ensure that a pathway to Fellowship is clear and obtainable however, to support this work, wider systemic change is needed; substantive action at the College level relies upon primary action as recommended by the AMC, AHPRA and other government agencies.

The RANZCP would be pleased to provide any additional information or assistance to the Inquiry and would welcome the opportunity to meet with the House of Representatives Standing Committee on Health and Ageing to discuss this submission further.

5. References

1. RANZCP Regulations: Basic Training and Advanced Training
http://www.ranzcp.org/images/stories/ranzcp-attachments/PreFellowship/Training/Fellowship_Training/1_bt_regulations_v21b18012011.pdf
2. RANZCP Equivalence Guidelines: http://www.ranzcp.org/images/stories/ranzcp-attachments/PreFellowship/Overseas_Specialists/equivguide100921.pdf
3. International Medical Graduates/Overseas Trained Psychiatrists – Issues for Fellowship and Practice/Residence in Australia Ratified by OTP Committee 6 July 2010