

Ms Bronwyn Nardi
Chair
Practitioner Regulation Sub-Committee
Health Workforce Principals Committee
NRAIP@dhs.vic.gov.au

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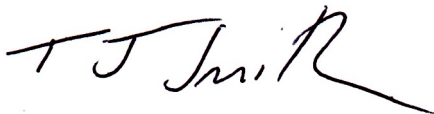
Dear Ms Nardi,

As the peak representative body for Australia's 12,800 medical students, the Australian Medical Students' Association (AMSA) is committed to ensuring that medical students are able to actively contribute to the provision of safe, high quality patient care.

AMSA is supportive of the concept of medical student registration within the framework of the proposed National Registration and Accreditation System. We note however that the manner in which complaints, health and disciplinary matters concerning student registrants are dealt are likely to be significantly different to other practitioners.

Please find attached our submission on the proposed arrangements for handling complaints and dealing with performance, health and conduct matters under the National Registration and Accreditation Scheme.

Yours sincerely



Timothy Smith
Vice President (External)
Australian Medical Students' Association

Australian Medical Students' Association

Submission on the proposed arrangements for handling complaints and dealing with performance, health and conduct matters under the National Registration and Accreditation Scheme

The Australian Medical Students' Association (AMSA) recognises the potential value of registration of medical students, and is supportive of the inclusion of student registration within the framework of the proposed National Registration and Accreditation system. The manner in which complaints, health and disciplinary matters concerning student registrants are dealt with under the proposed system will need to be considerably different to that of medical practitioner registrants.

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

Notifications to the board

With respect to proposal 4.6.1, that the board have the power to initiate an investigation into a matter on its own motion without a notification, AMSA believes that the board should only have the right to investigate a student registrant in the event of a complaint. The majority of performance and conduct matters concerning student registrants will likely be dealt with by universities, and the board should only be empowered to investigate matters which are sufficiently serious to be referred by universities, students' health worker colleagues, or members of the public.

Under proposal 5.5.1, it is proposed that following preliminary assessment of a notification by the notification assessment committee, the committee is empowered to take a number of actions. In addition to the existing list of actions available to the committee, in the case of student registrants, the committee should have the ability to refer the matter to the appropriate body within the university at which the student is undertaking their course. This will enable universities to deal with performance and unsatisfactory professional conduct matters.

Summary

1. The board should only be empowered to investigate student registrants in the event of a notification being made.

2. The notifications assessment committee should be empowered to refer notifications to be managed by a student registrants' university.

Management of Competency/Performance Matters

Under proposal 6.1.1, it is proposed that the legislation make provision for boards to deal with practitioners whose performance is unsatisfactory. This function of the board should not be extended to student registrants. The most appropriate body to deal with performance matters pertaining to students are universities. Any notification received by the board about competency or performance matters relating to a student registrant should be referred by the notifications assessment committee to the appropriate body within the student registrants' university.

Similarly, AMSA believes the board should not be empowered to require student registrants to undertake any form of competency assessment. It is the role of universities to assess students' competency to practice while enrolled in a medical course.

Summary

1. Performance matters concerning to student registrants should be managed by universities.

Management of Health/Impairment Matters

AMSA supports the proposal that boards be empowered to manage student registrants whose clinical practice, by virtue of a physical or mental impairment, drug or alcohol dependency, may compromise patient safety.

Health assessment of student registrants should only be required in exceptional circumstances where a notification has been made and where the physical or mental health of a student might reasonably be thought to impact adversely on patient safety. In this circumstance, student registrants should have the right to choose the health practitioner who performs the assessment, in order to ensure that the practitioner is not involved in teaching or assessment at their university. A student registrant should incur no costs for any board mandated health assessment.

Student registrants should only be subjected to having conditions placed on their registration by the board when all other appropriate avenues to remediate their health impairment have been exhausted.

Student registrants have the right to privacy concerning their health status. Details of a student registrants' health status should never explicitly or implicitly be made available in that part of the register which is open to the public. Details of a student registrants' health status should only be disclosed to the students' university with the consent of the student registrant and where conditions placed on their registration may impact on their ability to complete the academic requirements of their course.

Summary

1. The board should be empowered to manage student registrants' health impairments where patient safety may be compromised.
2. A student registrant should only have practice conditions placed on their registration when other management avenues have been exhausted.
3. Details of a student registrants health status should not be disclosed to universities or made available to the public without consent.

Management of Conduct/Disciplinary Matters

The conduct and disciplinary issues affecting student registrants are likely to be significantly different to those affecting medical practitioner registrants. Under proposal 8.2.2, it is proposed the conduct management committee is empowered to take a number of actions to manage matters pertaining to conduct. In addition to the existing list of actions available to the committee, in the case of student registrants, the committee should have the ability to refer the matter to the appropriate body within the university at which the student is undertaking their course.

Matters of unsatisfactory professional conduct (as defined in Appendix 1 of the discussion paper) concerning student registrants should be dealt with preferentially by universities, under their pastoral care responsibilities. This will enable a student registrants' conduct to be remediated appropriately at the local level under the supervision of their academic supervisors.

Matters of professional misconduct (as defined in Appendix 1 of the discussion paper) should be dealt with by the board in consultation with the student registrants' university.

Summary

1. The conduct management committee should have the ability to refer conduct matters concerning student registrants to universities.
2. Matters of unsatisfactory professional conduct should be preferentially managed by universities.
3. Matters of professional misconduct should be managed by the board in consultation with universities.

Mandatory Reporting Requirements

AMSA is strongly opposed to mandatory reporting of and by student registrants. While it is important that the system exists to protect the public from inappropriate practice by student registrants, mandatory reporting is not the most effective means to ensure this occurs.

Health practitioners in a treating relationship with a fellow registrant should not always be required to notify the board of health impairments which are likely to affect the registrants practice. Such a requirement is likely to act as a disincentive for self help seeking and may encourage student registrants to obviate their responsibility to seek help or undergo testing for conditions such as blood borne infectious diseases. It would be more productive if the treating health practitioner was permitted to take into account specific circumstances before choosing whether a notification to the board is indicated.

Furthermore, mandatory reporting requirements should not require health practitioner registrants to report on student registrants' performance, health or conduct. Such a requirement would likely result in notifications to the board about matters concerning student registrants which are more appropriate to be dealt with at the university level, such as performance and minor conduct matters.

Similarly, mandatory reporting requirements should definitely not apply to student registrants. Student registrants are likely to lack the experience required to make

judgments about their senior colleagues performance and professional behaviour, and as such it is unreasonable to extend mandatory reporting requirements to them.

Finally, universities should not be extended mandatory reporting requirements about student registrants. Such a system would require universities to report on performance and minor conduct matters which are more appropriately managed locally.

Summary

1. Mandatory reporting requirements should not apply to treating relationships.
2. Mandatory reporting requirements should not be extended to all registrants, especially student registrants.
3. Mandatory reporting requirements should not be extended to universities.

Right to legal representation and confidentiality

With respect to item 9.3, the right to legal representation for registrants at committee and panel hearings, AMSA believes registrants should have the right to legal representation or a person to accompany them who may speak on their behalf.

Committee and panel hearings concerning a registrants' health status should be confidential. Committees and panels should have the discretion to make hearings about performance and conduct matters confidential if they choose.

Summary

1. Registrants should have the right to legal representation at committee and panel hearings.
2. Hearings about a registrants health status should always be confidential.

Student representation on boards and panels.

If students are to be the subject of committee and panel hearings, it is appropriate that students should be given representation on board committees and panels when a notification concerns a student registrant. As outlined above, the health, conduct and disciplinary matters concerning student registrants are likely to be significantly different to those concerning medical practitioner registrants. In sitting in judgment on matters concerning student registrants, committees and panels can only be truly representative of the profession and the community if they contain at least one student registrant member.

Summary

1. A student representative should be included on committees and panels hearing matter concerning a student registrant.

Conclusion

With consideration of the factors outlined above, and with ongoing consultation with medical students, medical educators and the medical profession, student registration can be implemented within the framework of the proposed National Registration and Accreditation system, providing benefit to patients and students alike.