



**Queensland
Government**
Queensland Health

SUBMISSION TO:

- ☒ General Manager (Health Services)
☐ Deputy Director-General, Policy and Outcomes

DATE: 25 June 2003

PREPARED BY: Denis Lennox, Medical Advisor, Health
Advisory Unit

Contact No: 4699 8671

CLEARED BY:

Contact No:

**SUBMITTED
THROUGH:** Sue Norrie, A/State Manager Organisational
Development

Contact No: Ext: 41046

DEADLINE:

File Ref:

SUBJECT: Future Management of Overseas Trained Doctors

APPROVED / NOT APPROVED

COMMENTS

30/6/03 → GMMH

5/5/05 → still to GMMH

(Dr) S Buckland
General Manager Health Services

PURPOSE:

To seek approval for the continuation of the Centre for Overseas Trained Doctors (COTD), operating under a "user-pays" principle from 1 July 2004, for the purposes of securing a competent supply of Overseas Trained Doctors (OTDs) for Queensland Health.

BACKGROUND:

- QH has provided annual funding of \$108,000 since 1996, to the University of Queensland COTD for a bridging course for the Australian Medical Council (AMC) first part MCQ exam.
- In 2001/2002, the arrangement with COTD was renegotiated to provide 2 Preparation for Employment (PFE) Courses per annum, plus a revised bridging course, without funding change – approved by GMHS.
- The COTD provides a screening and assessment service, ensuring OTDs recruited through this service meet standards in relation to clinical competence, language, cultural safety and knowledge of the health system.
- QH hospitals have indicated a high level of satisfaction with doctors supplied through the COTD
 - over 80 assessed and oriented OTDs provided to QH in 2002 (2 to Mt Isa) with significant retention rate into PHO and Registrar posts.
- The Director-General has directed that QH funding be limited to \$108,000 per annum with additional cash flow obtained from implementing a user pays arrangement.

ISSUES:

- Loss of Commonwealth funding which supported COTD infrastructure for QH funded courses threatens the closure of the Queensland COTD from 30 June 2003.
- The current allocation to the COTD, of \$108,000, would provide (see attachment 4):
 - assessment of Seekers screened to be AMC candidates as well as applicants for courses and provision of Career Advice
 - assessment of MCQ Bridging Course students and provision of Career Advice
 - assessment of Preparation for Employment Course students and provision of Career Advice
 - one Preparation for Employment course (running July to November 2003)
 - one multi-station Clinical Assessment Task Scenario weekend workshop for Clinical Examination (October 2003).
- Commonwealth funding for the AMC clinical exam bridging course was withdrawn in 2002 in favour of a HECS style funding arrangement (user pays):
 - lack of OTD interest has caused collapse of clinical bridging courses nationally.
- Queensland Health services are threatened by loss of OTD supply:
 - Queensland Health currently employs 586 OTDs and Temporary Resident Doctors (TRDs)
 - evidence confirms traditional UK, Irish and SA trained doctors targeted by Queensland's 12 year old overseas recruitment campaign now have multiple options and are no longer a reliable supply.
- Significant pool of Australian resident / citizen OTDs seeking to return to medical workforce representing good source of supply of RMOs. These require:
 1. Screening & assessment to select those best able to make the transition
 2. Assistance to prepare for AMC examinations
 3. Preparation for employment and post preparation assessment
 4. Mentoring, supervision in practice until gaining general registration
 5. Case management of progress to vocational practice
 6. Career Advice.

- Management of Australian resident/citizen OTDs is part of larger system of management of OTDs. Table at Attachment 1 categorises OTDs systematically into management groups and identifies management requirements for each and functions currently performed by COTD and MJ@H.
- Systematic analysis of system identifies:
 1. Current management is incomplete, fractured and wasteful
 2. Opportunity to secure OTD workforce supply to QH from all categories of OTD
 3. Opportunities for user payments @ minimum cost and minimum detriment to recruitment
 4. Opportunity and need for effective, integrated management of OTDs that:
 - is comprehensive – applying to all five categories of OTD
 - Adequately assesses OTDs qualifications, competence & capability to ensure right OTDs in right practice opportunities
 - adequately prepares OTDs for practice opportunity in Qld
 - adequately prepares & supervises OTDs towards vocational status
 - achieves above in collaboration with the Skills Development Centre
 - case manages the complex status of OTDs regarding registration, immigration, Provider No., training & supervision status & trailing spouse & family circumstances
 - achieves above at best value for money.
- Logical conclusions of this systematic analysis of OTD management in Qld are presented in:
 - Attachment 2 charts conclusions, representing recommended management and funding.
 - Attachment 3 outlines proposed organisational arrangements
 - Attachment 4 outlines proposed deliverables
 - Attachment 5 outlines funding considerations
 - Attachment 6 demonstrates competitive environment in OTD management in Australia.

BENEFITS AND COSTS:

Benefits & Revenue

- Fully integrated management of OTDs.
- OTDs who are:
 - fully assessed as fully competent and prepared for practice prior to employment
 - supervised and mentored as appropriate until attaining vocational status
 - case managed in respect of registration, immigration, and Provider Number status, and progress towards vocational status as appropriate
 - progressing to permanent resident practice having access to bridging courses.
- Reduced costs to Districts – advertising, recruiting, Private Agency placement costs, costs of adverse outcomes.
- Maintaining for Districts essential supply of OTDs well prepared for RMO and SMO practice.
- User pays operation without detriment to recruitment in a seekers' market (excess demand):
 - OTD payments Preparation for Employment
 - Employer payments for Placement.

▪ Annual expected revenue from 1 July 2004 (conservative estimate)			
Public Area of Need:	550 (1 May 02 - 1 June 03) @ \$4,000 (av)		\$2.2M
Global Area of Need:	252 (1 May 02 - 1 June 03) @ \$4,000 (av)		\$1.0M
Private Area of Need:	345/2 ¹ (May 02 to May 03 numbers) @ \$4,000 (av)		\$0.7M
TOTAL annual revenue of integrated OTD Management (from 01.07.04)			\$3.90²M

Costs

▪ In 2003/04:			
To UQ for COTD operation until 31 October 2003			\$108,000
To operate functions within QH from 31 October 2003 until revenue streams established from 1 July 2004			\$230,000
Fully operationalised MJ@H (inter alia) as per ODB Strategic Recruitment Project			\$465,000
Total 2003/04 cost of integrated OTD Management			\$803,000
▪ Additional costs per annum from 1 July 2004:			
Fully operationalised MJ@H (inter alia) as per ODB Strategic Recruitment Project			\$465,000
Integration of COTD operations with MJ@H			\$425,000
TOTAL annual expected cost of integrated OTD Management (from 01.07.04)			\$890,000

CONSULTATION:

Centre for Overseas Trained Doctors
 Medical Superintendents – Advisory Committee and Medical Workforce Group.
 Professor Ken Donald – School of Medicine, UQ
 Professor Michael Ward – Program Director, Skills Development Centre
 MWAC-Q – Colleges, AMAQ, Commonwealth DHA

ATTACHMENTS:

- Attachment 1 – Management of OTDs – Current Status
- Attachment 2 – Management of OTDs – Proposed Best Value for Money Strategy
- Attachment 3 – Management of OTDs – Organisation
- Attachment 4 – Management of OTDs – Deliverables
- Attachment 5 – Management of OTDs – Funding
- Attachment 6 – NSW Health Department programs & services for overseas trained doctors

RECOMMENDATION(S):

1. That approval be granted for a renegotiation of the contract with the UQ COTD to permit full current operation of the Centre until 31 October 2003 with funding of \$108,000 from QH.
2. That \$230,000 be approved for operation of the functions of the COTD within QH's MJ@H from 1 November 2003 until 30 June 2004.
3. (Subject to implementation of the ODB Strategic Recruitment Project Business Case,) approval be granted to implement fully-integrated OTD Management within QH's MJ@H in collaboration with the Skills Development Centre and the Medical Board of Queensland:
 - 3.1. Addressing issues of Agency Status, *Trade Practices Act* implications, standards etc;
 - 3.2. Taking over functions contracted to Global Medical Staffing from 1 July 2004;
 - 3.3. Preparing for fee-charging from 1 July 2004.

QHB.0011.0001.00232

¹ On basis that not all private AoN applications represent actual employment & some may not utilise MJ@H processes.

² Of which \$1.2M expected from private sources (\$0.5M from employees (conservative) & \$0.7 from private employers.

MANAGEMENT OF OVERSEAS TRAINED DOCT. IN QUEENSLAND – CURRENT STATUS

Incomplete operation of Medical Jobs@Health from July-03 Centre for OTDs Joint AMCH & COTD Federal Medical & Training Some Private Sector		OTD CATEGORY		PLACEMENT						BRIDGING COURSES						
				SEEKER REGISTRATION	SCREENING & CAREER ADVICE	1st ASSESSMENT, REFEREE CHECKS & CAREER ADVICE	2nd ASSESSMENT (Fitness to Practice) & CAREER ADVICE	Prep for Employment	Employment	Mentoring & Supervision	Case Management	Career Advice	AMC MCQ	AMC Clinical	Fellowship	
Category 1 Citizens and permanent residents who are graduates of AMC examination, receiving or eligible for general registration by the Medical Board without Area of Need limitation.		Category 2 Citizens and permanent residents who are Fellows of an Australian Medical College registered by Medical Board without Area of Need limitation.	2A Registered as a Specialist	Yes	Yes	Case x Case	Required Case x Case	If not prev	N/A	N/A	Required	N/A	N/A	N/A	N/A	
			2B Registered as a General Practitioner	Yes	Yes	Case x Case	Required Case x Case		N/A	N/A	Required	N/A	N/A	N/A	N/A	
		Category 3 Citizens, permanent residents and temporary residents progressing towards permanent resident practice, and registered by the Medical Board for practice limited to Areas of Need and for a limited period	3A Progressing via the AMC examination pathway	Yes	Yes	Yes, if not previous	Yes if not previous	Yes	Yes	Required	Required	Yes	Yes	Yes	N/A	N/A
			3B Progressing via the College Fellowship pathway	Yes	Yes	D4B Required Case x Case	D4B Required Case x Case	Required	Yes	Some	Required	Yes	N/A	N/A	Required	
		Category 4 Temporary residents not progressing via either the AMC examination or College Fellowship pathways towards permanent resident practice, but registered by the Medical Board for practice limited to Areas of Need for a limited period.	4A English speaking Australian equivalent training	Yes	Required	Required	Required	Required	No public sector charge – high Agency charges	Some	Some	Required	N/A	N/A	N/A	N/A
4B Non-English speaking training, unknown Australian equivalence	Yes		Required	Yes	Case x Case	Required	Yes	Some	Yes	Yes	N/A	N/A	N/A	N/A		
Category 5 Citizens, permanent or temporary residents whose professional credentials are yet not assessed, who are not progressing on a pathway to permanent resident practice and not registered.			Yes	Yes	Required Case by Case	Required Case by Case	No public charge – substantial charges by Agencies	No public charge – substantial charges by Agencies						Category 5 OTD proceeds into category 1-4 following assessment or is deemed unsuitable for medical practice in Australia		

Category 5 OTD proceeds into category 1-4 following assessment or is deemed unsuitable for medical practice in Australia

³ Upon attaining AMC Examination or College Fellowship, proceed to Categories 1 and 2 respectively⁴ May proceed to Category 3 if seeking permanent resident practice.

Medical Jobs @ Health incorporating COVID

Private Sector

OVERSEAS-TRAINED DOCTOR CATEGORY												
Category 1 Citizens and permanent residents who are graduates of AMC examination, receiving or eligible for general registration by the Medical Board without Area of Need limitation.												
Category 2 Citizens and permanent residents who are Fellows of an Australian Medical College registered by the Medical Board without Area of Need limitation.												
2A Registered as a Specialist	Yes	Yes	Yes - Case X Case	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
2B Registered as a General Practitioner	Yes	Yes	Yes - Case X Case	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Category 3 Citizens, permanent residents and temporary residents progressing towards permanent resident practice, and registered by the Medical Board for practice limited to Areas of Need and for a limited period												
3A Progressing via the AMC examination pathway	Yes	Yes	Yes - Case X Case	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
3B Progressing via the College Fellowship pathway	Yes	Yes	Yes - Case X Case	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Category 4 Temporary residents not progressing via either the AMC examination or College Fellowship pathways towards permanent resident practice, but registered by the Medical Board for practice limited to Areas of Need for a limited period.												
4A English speaking Australian equivalent training	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
4B Non-English speaking training, unknown Australian equivalence	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Category 5 Citizens, permanent or temporary residents whose professional credentials are yet not assessed, who are not progressing on a pathway to permanent resident practice and not registered.												
Category 5 OTD proceeds into category 1-4 following assessment or is deemed unsuitable for medical practice in Australia												

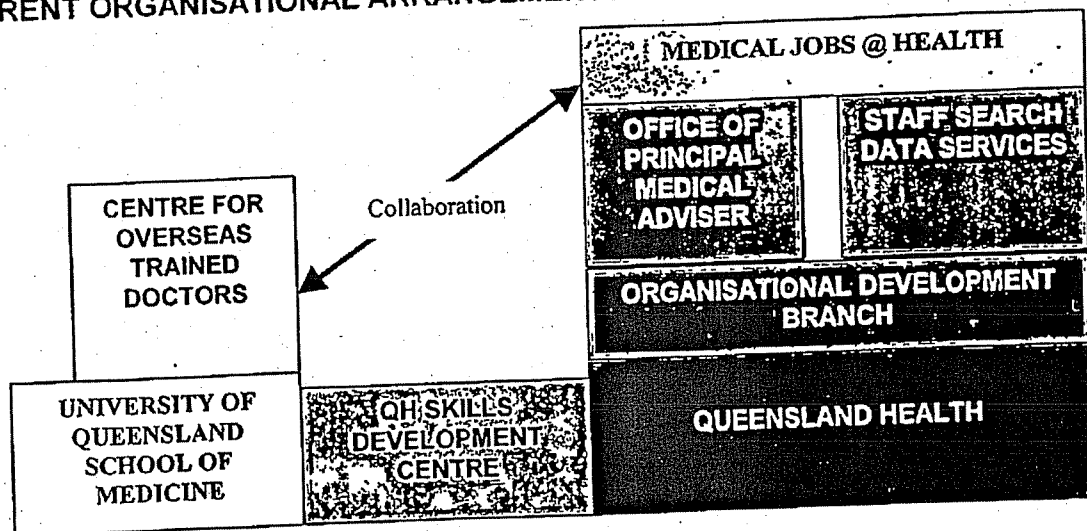
Queensland Country Doctors
(10yr Provider No. Program)Doctors for the Bush
(5yr Program)

* Preferably accredited by Medical Board of Queensland and by the Skills Development Centre.

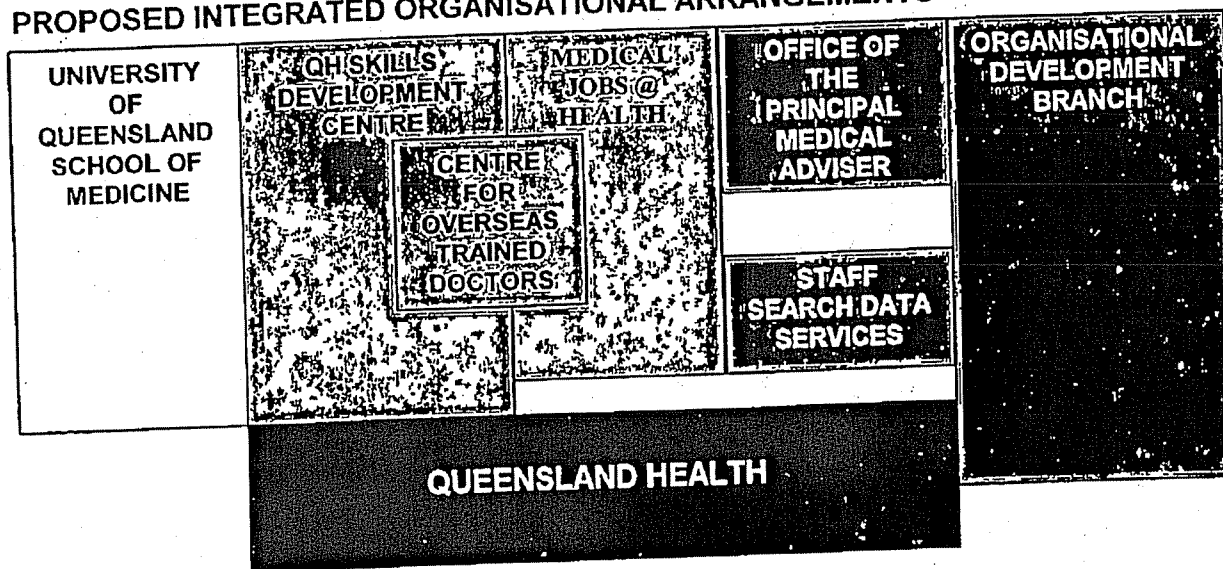
* Preferably accredited by the Skills Development Centre.

* Preferably College accredited.

CURRENT ORGANISATIONAL ARRANGEMENTS



PROPOSED INTEGRATED ORGANISATIONAL ARRANGEMENTS



Deliverables in the Proposed Integrated Management of OTDs

1. Period 1 July 2003 to 31 October 2003

The COTD continues to operate as at present and provides:

- assessment of Seekers screened to be AMC candidates as well as applicants for courses and provision of Career Advice
- assessment of MCQ Bridging Course students and provision of Career Advice
- assessment of Preparation for Employment Course students and provision of Career Advice
- Preparation for Employment course July 2003 to November 2003 & Post Course Assessment
- multi-station Clinical Assessment Task Scenario weekend workshop for Clinical Examination October 2003.

MJ@H continues to operate in limited capacity as at present or if funded according to the ODB Strategic Recruitment Project Business Case begins to expand into full capacity operation.

2. Period 1 November 2003 to 31 June 2004

COTD integrated within MJ@H and (subject to implementation of the ODB Strategic Recruitment Project) establishes full operation of integrated management of OTDs and provides:

- assessment of seekers screened to be AMC candidates as well as applicants for courses and provision of Career Advice
- assessment of Preparation for Employment Course students and provision of Career Advice
- MCQ Bridging Course November 2003 for 20 weeks to prepare for AMC May 2004 MCQ Examination
- Multi-station Clinical Assessment Task Scenario weekend workshop for Clinical Examination February 2004
- Preparation for Employment Course February 2004 to June 2004 & Post Course Assessment
- development of Modularised Preparation for Employment Course (2 days) available in each regional and major rural centre in Queensland.

MJ@H if funded according to the ODB Strategic Recruitment Project Business Case begins to operate at full capacity, providing comprehensive:

- seeker (including all categories of OTDs) registration
- seeker (including all categories of OTDs) assessment
- preparation of OTD seekers for employment
- placement of OTD seekers.

3. Period 1 July 2004 and beyond

MJ@H with its COTD and in association with the Skills Development Centre provides:

- revenue of approximately \$3.9M per year
- comprehensive OTD management:
 - effective operation in the international market
 - recruitment and preparation or practice and vocational status of competent and capable OTDs
 - service of excellence to District and private employers
 - service of excellence to OTDs.

Summary of Conclusions regarding funding for OTD management

(reached in consultation with the Medical Superintendents Medical Workforce Group)

Revenue Options for Current Operation of COTD (ie. for OTD Category 3A)

Assessment

A reasonable charge may be determined for assessment but would doubtless be a detriment to recruitment. At this stage of the process an employer is not likely to have interest in an OTD to underwrite the fee.

Bridging Course

Charges may be made for bridging courses.

A charge for the MCQ Bridging Course is likely to result in the same outcome as the HECS style funding of the Clinical Bridging Course. At this stage of the process, an employer is not likely to have an interest in the OTD to underwrite the fee.

A charge for the Clinical Course is likely to achieve the same outcome as the HECS style funding. However, it is likely that an employer may have sufficient interest in the OTD at this stage of the process to underwrite the fee. However, if Queensland's action is out of step with southern states, we are likely to lose OTDs interstate. Nevertheless charging a fee for the Clinical Bridging Course remains feasible.

Preparation for Employment Course

Charges may be made for the Preparation for Employment Course. If the OTD has been offered a position, then payment is likely to be accepted. However, if employment is not immediately in view, OTDs are not likely to be prepared to pay for the course. This will work against the intent to ensure all OTDs are adequately prepared for practice in Queensland.

General

Charging fees for the current operation of the COTD is problematic. Collection of multiple fees provides a considerable administrative challenge and an expensive one.

Revenue Options for an Integrated Management of OTDs – All Five Categories

Integrated management of OTDs offers distinct advantages in raising revenue to underwrite the cost of the operating the process, ie. opportunity:

- for a single charge per OTD
- for minimised administration for revenue collection
- for much more substantial revenue base
- to raise revenue without detriment to recruitment (in a seekers' market (excess of demand), inappropriate placed fees risks a loss of recruits.).

The most logical point to raise revenue in the OTD management process within a seekers' market is at the point of employment. Hence a Placement Fee is proposed – appropriate to the nature of the placement. The placement process incorporates:

- Preparation for Employment
- Engagement in employment
- Mentoring and Supervision
- Case Management
- Career Advice.

A modest placement fee is proposed which includes an employee element (for the Preparation for Employment Course – long course or short course depending upon requirements) and an employer element. Depending upon the circumstances, the employer may choose to reimburse at an appropriate interval or underwrite the employee fee.

For a conservative estimate of potential revenue, an average placement fee of \$4,000 is chosen. The number of OTDs is determined from a review of Area of Need (AoN) approvals for period 1 May 2002 to 31 May 2003:

▪ General public AoN applicants	550
▪ Global AoN applicants	252
▪ Private AoN applicants	345

For the estimate, the number of private AoN applicants is reduced by one half on the basis that not all private AoN applications proceed to employment and the proposal provides for an alternate private supplier of the OTD management elements (assessment, bridging courses and/placement). A private supplier is not likely (at least in the short term) given QH's strategic position in the process and sheer volume in the public sector. However, a monopoly is not built into the proposal design.

Estimated annual revenue based upon the OTD rate is therefore \$3.9M of which \$1.2M is expected of private sources (\$0.7M from private employers and \$0.5M from employees).

Prerequisite to raising revenue as proposed is the establishment of full operation of the integrated OTD management process. This cannot be achieved immediately. An additional consideration is that QH has contributed \$108,000 to the COTD for 2003/04. The following process is therefore proposed:

1. Continue current full operation of COTD until \$108,000 is exhausted – 31 October 2003.
2. Subsume the operation of the COTD within QH's MJ@H from 1 November 2003 to establish full operation of the MJ@H management of OTDs
 - 2.1. Subject to implementation of the ODB Strategic Recruitment Project; and
 - 2.2. Including the TRD program at the conclusion of the contract with Global Medical Staffing from 1 July 2004;
 - 2.3. Requiring one-off funding of \$230,000.
3. Charge Placement Fees from 1 July 2004.

NSW Health Department - Programs and services for overseas trained doctors

- **Funding for clinical bridging courses**

The NSW Health Department provides funding of up to \$90,000 per annum for the administration of a Clinical Bridging Course for overseas trained doctors seeking recognition of their overseas qualifications and skills. The University of NSW administers this course that is offered at Liverpool Hospital.

- **Information Seminars- 'Pathways to Qualifications Recognition'**

The NSW Health Department runs two full day information seminars each year to help permanent resident overseas trained doctors develop an understanding of key processes in the pathway to the recognition of overseas medical experience and qualifications, available resources and possible employment opportunities. Speakers at the seminars include representatives from the Australian Medical Council, the NSW Medical Board, Language Australia, the Post Graduate Medical Council, the Clinical Bridging Course, General Practice Education Australia and the NSW Rural Doctors Network. Approximately 60 Permanent resident overseas trained doctors attend each seminar.

- **Written and web based information on skills/qualification assessment and recognition, bridging courses and employment**

The NSW Health Website provides current information related to the steps for assessment and recognition of overseas trained doctor qualifications. It also provides up-to-date information on the Area of Need program which is a potential source of employment for suitably qualified overseas trained doctors.

- **Funding for the Australian Medical Council (AMC) Pre employment orientation program for AMC graduates**

The Postgraduate Medical Council (PMC) on behalf of the NSW Health Department conducts the AMC pre employment program for AMC graduates twice annually. This is a 4 week program that aims to familiarise the AMC graduates with Australian health system and facilitate a smooth transition into supervised training. It is coordinated twice a year.

- **Direct administrative support for the Australian Doctors Trained Overseas Association (ADTOA)**

In 2002/03 NSW Health provided \$32,000 over 3 years to support the administration of the Australian Doctors Trained Overseas Association, to support information dissemination to this group on issues related to skills recognition, assessment, employment and registration.

- **Funding for scholarships for Overseas Trained Doctors in Area of Need position, seeking to obtain specialist general practice qualifications**

The NSW Health Department approved one off funding in the 2002-03 financial year to the NSW Rural Doctors Network (RDN) for the Coordination of Overseas Recruitment and GP Alternative Pathway Scholarship Projects.

Through the GP Alternative Pathway Scholarship Project, 10 scholarships of \$15,000 each were awarded. Five were awarded to permanent resident overseas trained doctors working in Area of Need positions and five were granted to fully registered general practitioners working in rural NSW. All participants in the program commenced in early 2003 and are required to complete the course requirements by December 2004.

- **Rural Medical Observer ship Program for Permanent resident overseas trained doctors seeking employment in Area of Need positions**

The NSW Health Department allocated \$84,000 to the NSW Rural Doctors Network in 2002-03 to coordinate a pilot rural medical observership program for permanent resident overseas trained doctors seeking employment in Area of Need positions. The aim of the program is to provide an introduction into the NSW health system and skills revision.

The NSW Rural Doctors Network submitted a joint submission with General Practice Education Australia to rerun this program in 2003-04. This submission is currently being reviewed by the Department of Health.

- **Funding for a position responsible for overseas trained doctors**

MANAGEMENT OF OVERSEAS TRAINED DOCTORS IN QUEENSLAND – FUNDING ATTACHMENT 6

Funding for a full-time Project Officer position whose main role and responsibility is to provide policy advice and implement programs to support the delivery of education, training and support for overseas trained doctors in NSW. The officer is also responsible for managing the information service for overseas trained health professionals. In addition, a dedicated officer is available Monday to Friday from 8.30am – 5.30pm to answer phone enquiries, provide written information and provide direction to relevant organisations for overseas trained health professionals.

- **Scholarships for Permanent resident overseas**

The NSW Health Department is funding in 2003 up to 15 scholarships for permanent resident overseas trained doctors to participate in the MCQ Bridging course offered by General Practice Education Australia. The scholarship is available to permanent resident overseas trained doctors who have been living in Australia and out of the Medical workforce for up to 5 years. Eligible applicants must also have attempted the MCQ exam at least once. Eligible applicants will participate in a clinical scenario interview and the top 15 will be awarded a scholarship. The MCQ Bridging course will start on 6 June 2003 and run for 14 weeks.

Further Information: Please contact Margaret Banks, NSW Health Department on 02- 9391 9798 or via email mbank@doh.health.nsw.gov.au