



Where we stand on national registration and accreditation

On 26 March the Council of Australian Governments (COAG) agreed to establish a new accreditation and registration scheme for the health professions including the medical profession. If implemented, these arrangements would have a profound impact on medical regulation and the quality of clinical practice and medical education in this country.

Currently the NSW Medical Board has 20 members, of whom eight are nominees of the state committees of the medical colleges and two are nominees of AMA (NSW). The board regulates the profession through a system of registration, sets standards for conduct and performance, helps the rehabilitation of sick or impaired doctors and receives, investigates and hears complaints.

The Australian Medical Council (AMC) includes nominees from each of the state and territory medical boards, plus additional experts in medical education. It accredits medical courses, specialist training and continuing development programs and assesses overseas-trained doctors.

The medical colleges set the standards for assessment and training by accrediting training posts, delivering training programs, assessing candidates and maintaining ongoing professional standards.

The new national accreditation and registration scheme is a radical departure from this effective system.

It proposes the establishment of consistent national registration arrangements and a national register, which is supported by the AMA. However, COAG has determined that a new National Medical Board located in Canberra will fulfil the current roles of all the state and territory boards in

addition to taking on the responsibilities of the AMC.

Clearly the voice of the medical profession in NSW will be greatly diminished under these arrangements. A token local presence will be established in each state to handle administrative and lower level complaints. Potentially there will be only one state office in Sydney for all nine health professions covered by the new scheme.

The Canberra-based proposals include not only a National Medical Board, but a National Office which will in effect control the administrative and financial functions of all nine National Boards. It will be directed by a management committee which in all probability will include no medical practitioners. Also proposed are unnecessary advisory committees.

Potentially, the greatest medium-to-long-term threat to standards of education and clinical practice in Australia is the inevitable supplanting of the AMC's role either directly by the government-appointed National Board or a new preferred accreditation provider. The role of the medical colleges will similarly be threatened by a shift in the accreditation of their training and continuing education programs away from the AMC to some other non-representative organisation.

The AMA supports consistent legislation in all states, the establishment of a

national register maintained by the AMC and portability of registration across states. However, there is no merit in establishing a Canberra-based bureaucracy remote from the medical profession to undertake the roles that are currently performed well by the state medical boards and the AMC.

Clearly it is imperative that the AMA and the profession vigorously resist proposals that imperil the standards of medical education and clinical care that have been built up in this country over generations.

AMA (NSW) supports

- Consistent national registration and a national register
- The AMC's role in accrediting standards of education and clinical practice in Australia
- The medical colleges' role in setting the standards for assessment and training
- The medical boards' role in setting standards for conduct and performance and investigating and hearing complaints

AMA (NSW) rejects

- A token local presence
- Unnecessary advisory committees
- Proposals that imperil the standards of medical education and clinical care
- A management committee that will probably include no medical practitioners