AUSTRALASIAN COLLEGE FOR EMERGENCY MEDICINE

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Medical Board of Australia Proposed registration standard for consultation

The Australasian College for Emergency Medicine (ACEM) appreciates the opportunity to provide comments with regard to the proposed registration standard for granting registration as a medical practitioner to Australian and New Zealand medical graduates on completion of intern training.

The College supports the concept of improved national consistency in the intern year and standardisation across jurisdictions. The critical issue is the achievement of skills, knowledge and experience which will ensure competence as a safe, entry level medical practitioner able to practise within the limits of their training. From an emergency medicine perspective, the key skills, knowledge and experience include the prioritisation of patients under time pressure, recognition of 'sick' or 'well' patients, developing a safe, systematic approach to the potentially critically ill patient and competence in basic resuscitation.

ACEM have identified a number of issues related to the proposed standard; this submission will outline the major points and provide some recommendations for the further development of the registration standard.

- 1. The proposal of undertaking a term in "emergency medical care" as opposed to "emergency medicine" suggests that the settings in which the term is to take place have been expanded to include alternative settings such as General Practice. It is very unlikely that the key skills and experiences listed above can be replicated in a GP (or alternate) setting. The exposure to a variety of presentations with differing levels of acuity considered critical to emergency medicine experience will not be available, thus ACEM is unable to support this proposal in its current form.
- 2. In order for interns to be appropriately guided in their learning and to achieve maximum benefit from this term, it is considered important that supervision be undertaken by an experienced emergency medicine physician. Currently, there is inconsistent supervision being provided to interns and the proposal in its current form would lead to further supervision inconsistencies potentially resulting in the compromising of patient safety.
- 3. The proposal for an emergency medicine care term of eight weeks duration will not necessarily provide interns with adequate time to consolidate the complex problem-solving skills required for basic competence. Emergency departments act as an interface between many other specialty areas within the hospital. Increased exposure to this unique environment would assist in promoting optimal interactions and improved communication between the various areas.
- 4. The current proposed standard does not provide any indication of the competencies required for successful completion of the intern year. Traditional time-based measures will not necessarily ensure adequate achievement of skills and knowledge and the absence of competency standards will lead to further inconsistencies.

Recommendations

- ACEM would expect to be closely involved in (if not responsible for) the development of guidelines determining the suitability of 'emergency medical care' placements. This would include exposure to the critical skills, knowledge and experience required for an emergency medicine term.
- Consideration should be given to the Emergency Medicine Capacity Assessment study (available on the MTRP website) which suggests under utilised intern training capacity. There are various capacity expanding measures currently in existence such as the "More Learning for Interns in Emergency" program in Queensland which could also provide useful models.
- Close supervision should be provided by suitably qualified and experienced emergency medicine physicians.
- Emergency medical care terms should be a minimum of ten weeks duration in order to provide adequate exposure to the skills, knowledge and experience required.
- Consideration should be given to the development of competency standards for the intern year to ensure consistency in the skills and knowledge achieved during this period.

The Australasian College for Emergency Medicine thanks you for the opportunity to participate in this process and would appreciate remaining involved through representation and consultation wherever possible.

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Dr. Sally McCarthy President Australasian College for Emergency Medicine