



Speech by

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MEDICAL PRACTITIONERS REGISTRATION AMENDMENT BILL

Mr LANGBROEK (Surfers Paradise—Lib) (5.30 pm): It is my pleasure to rise this evening to speak to the Medical Practitioners Registration Amendment Bill, which amends the Medical Practitioners Registration Act 2001 and the Medical Practitioners Registration Regulation 2002.

I note that the bill implements provisions in anticipation of future national changes to streamline the registration of international medical graduates. Further, it gives the Australian Medical Council more flexibility in certifying qualifications for general registration, it allows the Medical Board of Queensland to delegate more decisions to board members, and it requires the board to notify the minister if it fails to decide a registration application within 25 working days.

I note the comments of my colleague the member for Moggill and shadow minister for health. I agree with him that it may have been more desirable to better resource the Medical Board rather than give it an inflexible time frame, given the checks and processes that the board may have to undertake.

I note the basic requirements for registration at present. These include English competency, the obtaining of a certified English translation of documentation and that they be of good standing and have certification in this regard. I also agree with the shadow minister—as do many other Queenslanders and members on the other side of this House—that Queensland patients want doctors who can speak English. There are doctors who want registration and cannot access the English test as quickly as they would like. I have received representations from constituents and other doctors and dentists who find this very frustrating. That is a matter that people would like addressed. However, patients would like doctors who can speak English.

The bill enables qualifications for general registration to include medical qualifications recognised by a prescribed foreign regulatory authority—the bill refers to the General Medical Council of the United Kingdom; I will come to my specific thoughts on that in a moment—for registration in a class of registration corresponding to general registration, for example “full registration” by the General Medical Council of the United Kingdom’. I note that this is dealt with in clause 7(1) in relation to section 44(d), to which the shadow minister will move an amendment. It states—

(d) the applicant has a prescribed qualification that has been recognised by a prescribed entity for the purpose of a corresponding general registration.

I am concerned that we will have to do a lot of prescribing and keep monitoring the organisation recognised by that prescription. In the example of the General Medical Council’s assessment of the doctor’s training jurisdiction, we will have to constantly rely on its assessment. However, we need to be confident in the training in that jurisdiction and confident that the doctor has been registered to practise and is practising or has practised in that jurisdiction. We can assume that the General Medical Council would not register any unsuitable person, but if we in Queensland have had problems with registering doctors then so potentially does the General Medical Council. Unless we can be confident that it is adequately assessing foreign regulatory authorities, and every one of them, and ensuring that those authorities are keeping up their standards, we will be accepting the word of the General Medical Council as to the standard of the applicant.

I would like to quote the example of dentistry. My cohort of dentistry, who graduated in 1983, were able to practise in the UK by presenting proof of our qualification and certification of our mental health and good standing. That applied for years because their accreditation board recognised our dental degrees. However, for some period after I graduated—it may have been from the late eighties through to the mid-nineties—a cohort of Australian dentists were unable to be registered by the General Dental Council because their accreditation board was not given a trip to Queensland to assess our dental graduates. This means that a whole cohort of Australian dentists who are just as good as the ones who went before and the ones who have graduated since are not recognised by the General Dental Council. In relation to that cohort who graduated in the late eighties through to the mid-nineties, if we were to accept the General Dental Council's recommendations as to their suitability for registration we would miss out on some dentists who, I assure members, are as good as the dentists who went before and who have come after. My point is that we should not look to the General Medical Council, although it may be a very good organisation. I think Queenslanders want us to assess the ability of the people who seek to be registered here.

That brings me to the amendment foreshadowed by the shadow minister. The current legislation has created a loophole for foreign trained medical officers to be registered in Queensland due to their registration in a foreign country. They meet the criteria to fulfil the requirements of the overseas registration entity but do not meet Australian Medical Council requirements. The objective of these amendments is to legislate to amend the Medical Practitioners Registration Amendment Bill 2006 to ensure that registration of overseas trained medical officers applies only to applicants who have completed their training in an accredited training facility that is recognised by Australian standards and the Australian Medical Council. I think that is what Queenslanders want—not passing it off to the General Medical Council or to anywhere else. However, if it is passed to them, we should at least make sure the doctor is practising or has practised there and has registration there.

The main reason for these amendments is to ensure that the highest medical standards are met for the people of Queensland by providing accredited and fully trained overseas medical officers who have been certified by the Australian Medical Council. This is essential to alleviate the possibility of an overseas trained medical officer who has done their training in a non-accredited training facility working in Queensland.

The amendment to clause 7(1) does not seek to alter proposed section 44(c), which refers to certification by the Australian Medical Council, but inserts a new paragraph (d), which states—

(d) the applicant—

(1) has a prescribed qualification from an entity in the jurisdiction of a prescribed entity—

that is, we will do the prescribing and we will do the monitoring. It continues—

(2) has a corresponding general registration in that jurisdiction; and

(3) is practising, or has practised, the profession in that jurisdiction.

I think that is what Queenslanders want. I reiterate our support for the bill but commend the amendment to be moved by the shadow minister that finetunes the bill. That will ensure the registration of doctors in whom all Queenslanders can have confidence.