

Regulation and licensing of healthcare professionals in Pacific Island countries

J. McKimm, P. M. Newton, A. Da Silva, J. Campbell, R. Condon, B. Kafoa, R. Kirition & G. Roberts

June 2013 · Human Resources for Health Knowledge Hub



Human Resources for
Health Knowledge Hub

visit our website: www.hrhhub.unsw.edu.au

or email: hrhhub@unsw.edu.au

A common registration and licensing system for health professionals in Pacific Island countries (PICs) would ensure patient safety and comparable levels of competence through the application of measurable standards at key stages in an individual's professional career.

What is regulation and licensing and why does it matter for health outcomes?

In order to provide effective and safe healthcare, new doctors, nurses and midwives need to be regulated from graduation and throughout their careers, typically through the initial awarding and subsequent renewal or extending of a licence to practice. This guarantees the quality of the healthcare workforce (*fitness for purpose*) as well as the quality and safety of the care they provide (*fitness for practise*) against agreed external standards.

What options are available?

Two broad models/types of licensing/registration are in common use based on: 1) achievement of educational qualifications/certification and/or 2) passing national or regional examination(s).

The choice of model is largely dependent on the complexity of a country's geographical, regional, political and administrative structures and the volume of practitioners that need to be registered. Countries with a large number of training schools in both public and private sectors (e.g. Indonesia) have opted for national examination of all graduates.

Most countries have clearly defined standards or competencies that professionals wishing to be admitted to the register (or part of it) have to achieve.

International collaboration

Many countries have reciprocal agreements designed to facilitate the free or less restricted mobility of doctors and other health professionals from a defined list of other countries. Countries with regional affiliations and workforce mobility (e.g. the Caribbean Community) have opted for regional examination of all graduates before national registration.

Overseas trained healthcare professionals

Outside of these reciprocal agreements, overseas-trained healthcare professionals arriving to practise in a country are typically required to take specific licensing examinations, or modified versions of the same licensing examinations as domestic graduates take prior to being admitted to the register. This often includes a language test.

The licensing/registration of qualified healthcare professionals is usually associated with fees, payable by the individual. Most countries operate a system whereby specific payment is required for each milestone in the career/registration process, plus annual renewal/re-registration fees. Where licensing examinations are required, fees are associated with each sitting of these. Where separate fee-paying arrangements exist for overseas-trained graduates, the fees required are generally higher than for locally trained graduates.

Why improve the registration and licensing processes in the Pacific?

The main rationale is to ensure public safety and confidence in the quality and competence of all health professionals practising in PIC health systems. As graduates return from an increasingly diverse training programs overseas, or graduate from private institutions, the need to ensure their quality and

National Library of Australia Cataloguing-in-Publication entry
McKimm, Judy.
University of Swansea, United Kingdom & Instituto de Cooperación Social Integrare, Barcelona, Spain
Regulation and licensing of healthcare professionals in Pacific Island countries / Judy McKimm ... [et al.]
9780733433054 (pbk)
Medical personnel – Islands of the Pacific
Medical personnel – Licenses
Public health personnel – Islands of the Pacific
Public health personnel – Licenses
Newton, Philip M.
University of Swansea, United Kingdom.
Da Silva, Ana.
University of Swansea, United Kingdom.
Campbell, James.
Instituto de Cooperación Social Integrare, Barcelona, Spain.
Condon, Rob.
Consultant, WHO South Pacific, Suva, Fiji.
Kafoa, Berlin.
Fiji National University.
Kirition, Revite.
College of Medicine, Nursing and Health Sciences, Fiji National University, Fiji.
Roberts, Graham
Deputy Director, HRH Knowledge Hub, School of Public Health and Community Medicine, University of New South Wales, Sydney, Australia.
353.6

competence to practise in the region requires common standards for registration/licensing.

The increased mobility of PIC healthcare professionals wishing to move between countries, or to a country other than the one in which they were trained presents the challenge of ensuring their professional competence to practise across the region. Differing standards and competencies currently present barriers to mobility that need to be resolved case-by-case; freer movement based on common regional standards would help recruitment and retention in places of need.

Registration and licensing in PICs

Current practices in PICs are variable, but most countries have their own registration and licensing system for doctors, nurses and midwives coordinated by the relevant Councils (typically a Medical and Dental Council and Nursing and Midwifery Council). Some PICs have additional Councils for pharmacists, scientists and allied health professions but these are in the minority.

Policy implications for the Pacific

The review of international trends and approaches suggests a number of areas with potential relevance to PICs:

Registration and licensing for all health professionals working in PICs

1. Commonly agreed registration and licensing requirements and processes in the Pacific could result from multi-country collaboration to guarantee the quality of health workers and to facilitate regional professional mobility, while also retaining the sovereignty of national councils or registration bodies.
2. Defining common competencies for each profession, contextualized specifically for PICs' needs, would enable benchmarking of health professionals wishing to obtain licensing or registration in the region.
3. Mapping the competencies of the Pacific Island graduates attained through the diversity of medical education programs now available will assist in identifying areas for supplementary training or orientation to contextualize their education to the Pacific region's health needs.
4. The international experience of countries with regional affiliations suggests the potential for regional examination(s) and/or an internship based on agreed, common competency standards to provide assessment of all graduates before entering practice or a common internship assessment, and to identify areas for supplementary training.

Overseas trained health professionals

5. International comparison provides examples for enabling automatic/simplified registration and visa requirements for healthcare professionals who currently have a licence to practise in countries with well-established education and regulatory systems.
6. Licensing and registration of overseas trained health professionals from countries without well-established systems of program accreditation, licensing and registration may include requirements to work within a defined/limited scope-of-practice, or a specific length of service, and/or require training to address areas of need/deficiencies. Similar considerations apply to medical graduates who have completed undergraduate training overseas but have not completed formal registration requirements before returning to the Pacific.
7. Good practice for the registration for overseas trained healthcare professionals entails establishing a health systems orientation program including a cultural assimilation component, and which includes a test of competency in the relevant language.

Health workforce planning

8. A review of existing formal and informal arrangements between the PICs in health workforce production, planning and deployment would identify areas for improved governance and stewardship in future licensing and registration mechanisms.
9. Leadership is needed to adopt a regional overarching framework that links commonly agreed sets of standards for accrediting health professionals' education programs with processes for licensing and with regulation mechanisms.
10. PICs may wish to commit to sustained political and financial support to establish regionally agreed standards in order to guarantee health professionals' competence to practice in the region, and to attract independent investment from development partners.

ABOUT: The HRH Knowledge Hub

The Human Resources for Health Knowledge Hub, funded by AusAID from 2008, forms part of the School of Public Health and Community Medicine at the University of New South Wales.

Our publications report on a number of significant issues in human resources for health. We have resources available on leadership and management issues, maternal, newborn and child health workforce, migration and mobility of the health workforce and human resource issues in public health emergencies.

For further information, as well as a list of the latest reports, summaries and policy briefs, please visit www.hrhhub.unsw.edu.au

