

Dr Simon Chu Chair, SIFT Working Group Australasian College for Emergency Medicine 34 Jeffcott Street WEST MELBOURNE VIC 3003

Dear Dr Chu,

## Re: AIDA submission to ACEM Selection into FACEM Training (SIFT) Consultation Paper

The Australian Indigenous Doctors' Association (AIDA) appreciates the opportunity to offer feedback on the consultation paper on the selection into the ACEM specialist training program. I would also like to apologise for our delayed response to the request for our submission and thank the college for the additional time.

AIDA is the national peak body representing Aboriginal and Torres Strait Islander doctors and medical students and advocates for improvements in Aboriginal and Torres Strait Islander health. We work to achieve parity of Indigenous health professionals across the health sector, and shape a health system that is culturally safe, high quality, reflective of need, and which respects and incorporates Aboriginal and Torres Strait Islander cultural values.

As you would be well aware, AIDA has a productive working relationship with ACEM on a number of levels; as colleagues at the CEO and President level through representation at the Council of Presidents of Medical Colleges, through AIDA representation on the ACEM Indigenous Health sub-committee, through ACEM attendance and participation at the AIDA annual conference, between our respective policy teams and through engagement on the development of the *ACEM Innovate Reconciliation Action Plan January 2017 – December 2018* (ACEM RAP). The invitation to offer feedback into this consultation is a further example of our work together in 2017, and I hope you will find the following comments to be of use.

AIDA recognises that Aboriginal and Torres Strait Islander health professionals play an important role in improving health outcomes, given their unique ability to align clinical and socio-cultural skills to improve access to services and provide culturally appropriate care for Aboriginal and Torres Strait Islander people. AIDA is of the overall view that the currently proposed processes for selection into the ACEM specialist training program would be improved and strengthened by considering and building on the actions and goals stipulated in the ACEM RAP, in particular those pertaining to increasing the number of Aboriginal and Torres Strait Islander Emergency Physicians.

We note that Action 13 of the ACEM RAP is focused on "Continuing to encourage and support Aboriginal and Torres Strait Islander medical students and graduates to pursue emergency medicine as a career". The deliverables against this action in the ACEM RAP are very much essential components to achieving this goal, however AIDA suggests that strengthening this in the selection processes for entry into the ACEM specialist training program is an opportunity for further tangible action in this regard. We note that under the eligibility requirements outlined in the consultation paper, 'Indigenous identity' is taken into consideration, and we would be interested in further detail around this in terms of what it means in the selection process.

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A further suggestion AIDA makes regarding college policy and processes for specialist training positions is the importance of alternative pathways for entry for Aboriginal and Torres Strait Islander trainees. While AIDA is fully supportive of merit-based and transparent selection processes into these highly competitive areas, we also strongly advocate for equity to ensure that future Indigenous specialist doctors have the same opportunities to compete as the mainstream cohort. To this end, we suggest that further consideration of what the college could do in this regard would further strengthen the intent of the ACEM RAP by offering additional opportunities to encourage applications from Aboriginal and Torres Strait Islander doctors into the specialist training program.

I would also like to emphasise the value AIDA places on specialist medical colleges' commitment to creating identified specialist training places for Aboriginal and Torres Strait Islander trainees. We know the impact of this initiative from colleges can positively impact on workforce growth of Indigenous doctors and will continue to work with all medical specialist colleges around this possibility. AIDA encourages ACEM to consider this in light of the other positive work underway between our organisations, and more broadly under the range of goals emerging from the ACEM RAP.

The work of ACEM is of critical importance to broader Aboriginal and Torres Strait Islander health outcomes, in the context of Emergency Departments being staffed by well-trained doctors with the cultural and clinical skills to work with Indigenous people. AIDA encourages ACEM to continue working towards the creation of a culturally safe education and clinical training environment for emergency physicians, along with developing practical measures such as the Joseph Epstein scholarship. We are supportive of your commitment to encourage more Aboriginal and Torres Strait Islander medical students and graduates to pursue a career in Emergency Medicine and emphasise the effect of tangible measures to achieve this end.

If you would like to engage with AIDA further on any of the issues raised above, please contact our CEO, Mr Craig Dukes, on (02) 6273 5013 or by email at <u>Craig.Dukes@aida.org.au</u>.

Thank you for the opportunity to provide our input into this process and we look forward to continuing working on issues of shared interest between AIDA and ACEM.

Yours sincerely

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Craig Dukes Chief Executive Officer

2 May 2017