

## EXECUTIVE SUMMARY

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### **The Assessment of Applications for Recognition of Medical Specialties**

The Australian Medical Council (AMC) manages a process for assessing applications for the recognition of medical specialties and sub-specialties. Recognition through this process signifies that a medical specialty or sub-specialty is developing in Australia in response to a demonstrable need for specialist medical services and that its development is in the best interests of the Australian community.

This recognition process results in advice to the Minister for Health and Ageing to assist in deciding which medical specialties will be recognised for the purposes of being listed in Schedule 4 of the Health Insurance Regulations, 1975 (*Health Insurance Act 1973*(Cth)). The process managed by the AMC also provides for applicants seeking recognition for other purposes. For example, organisations may wish to have specialist medical skills and knowledge acknowledged, and the education and training programs that lead to these attributes accepted as the standard for a particular area of practice without seeking recognition for the purposes of the Health Insurance Act. Recognition of such specialties results in inclusion in a separate List of Australian Recognised Medical Specialties and Sub-specialties, maintained by the AMC.

### **The Purpose and Structure of this Report**

The Australasian Chapter of Addiction Medicine (AChAM) of the Royal Australasian College of Physicians has sought the recognition of Addiction Medicine as a medical specialty in Australia.

This report and its findings – as formally adopted by the Recognition of Medical Specialties Advisory Committee (the Committee) - is an assessment carried out by an AMC Recognition Review Group (the Review Group) of the case for and against recognition of Addiction Medicine against criteria established in the Guidelines for Recognition, *The Recognition of Medical Specialties and Sub-specialties*. These are:

- Criterion I     that the recognition of Addiction Medicine as a medical specialty would improve the safety of health care;
- Criterion II    that the recognition of Addiction Medicine as a medical specialty would improve the standards of health care;
- Criterion III    that the recognition of Addiction Medicine would be a wise use of health resources.

These criteria are, in turn, broken down into a series of sub-criteria, against which specific claims of the applicant body are tested. These sub-criteria are found in the Guidelines and at the head of each relevant section of the report.

### **Assessment of the Application by the Australian Medical Council**

An application from the Australasian Chapter of Addiction Medicine (AChAM) for the recognition of Addiction Medicine as a medical specialty was submitted to the

AMC on 4 November 2005. The Recognition of Medical Specialties Advisory Committee considered the suitability of the application for assessment at its November 2005 meeting.

The Australian Medical Council subsequently approved the application as suitable for assessment at its November 2005 meeting, following a recommendation from the Committee. The Council appointed a Recognition Review Group to assess in detail the case for recognition of Addiction Medicine against the criteria set out in the Guidelines.

The Review Group first convened in March 2006 to consider the application and develop an assessment program. The Review Group deemed it necessary to seek additional information from the applicant on a range of matters. With the additional assistance of the Recognition of Medical Specialties Economic Sub-committee, a series of questions was drafted and sent to the applicant.

In April 2006, the Chair of the Review Group met with the AChAM Executive to discuss the applicant's draft response to these additional questions prior to formal submission. The response was submitted to the AMC in early May, as requested.

The Review Group convened a second meeting in late May 2006, to consider further the application in light of the additional information and the public submissions. At this meeting, a program of clinical site visits and stakeholder consultations was drafted. The clinical sites selected allowed the Review Group to interview a mix of Chapter Fellows, GPs with a special interest in Addiction Medicine, as well as medical and other health practitioners from cognate disciplines, such as Psychiatry, Psychology, Addiction Nurses and Social Workers.

In July 2006, the Review Group undertook its program of site visits, with interviews conducted in Melbourne, Sydney and Brisbane. In the same month, the Review Group met with both the Royal Australian College of General Practitioners and the Royal Australian and New Zealand College of Psychiatrists, as key stakeholders in the application. The Review Group convened a third meeting in early August to discuss the site visits, and the applicant and stakeholder meetings. The Review Group decided to undertake further site visits in rural NSW (Orange) and Victoria (Ballarat and Warrnambool), and these took place later that month. In all, 29 sites were visited and a total of 66 medical and health professionals interviewed.

The Review Group completed its draft assessment report in October 2006. Along with comments from the applicant body, the report and its findings were considered by the Committee at its November 2006 meeting. The Committee formally adopted the assessment report and presented its recommendations to the Annual General Meeting of the Council in November 2006. The report that follows has been formally adopted by the AMC and provides the basis for its confidential advice to the Minister for Health and Ageing.

### **Comment on the Report Findings**

In producing its assessment report, the Review Group drew upon information from the written and oral submissions of the applicant body, the published literature, public

submissions, and information gathered from stakeholder consultations and the program of clinical site visits.

The case for recognition against the three criteria (and associated sub-criteria) is presented in *Sections 4, 5 and 6* of this report respectively. A summary of the findings is to be found at the conclusion of each section. The Review Group endeavoured to support its arguments with the best available evidence in line with the principles of evidence-based policy. Where anecdotal evidence is used, it is identified as such, and utilised in an illustrative rather than demonstrative manner.