



## **IMG Guide III**

# **A Guide for Substantially Comparable IMG Surgeons Undergoing Clinical Assessment**

Revised November 2016

© Royal Australasian College of Surgeons

Royal Australasian College of Surgeons  
College of Surgeons' Gardens  
240 Spring Street  
Melbourne Victoria 3000  
Australia

Phone +61 3 92491242  
Fax +61 3 9249 1219  
Email : [IMG.enquiries@surgeons.org](mailto:IMG.enquiries@surgeons.org)  
Web: [www.surgeons.org](http://www.surgeons.org)

## INTRODUCTION

This guide has been produced by the Royal Australasian College of Surgeons (RACS) as an aid for you while you complete your specialist assessment to achieve specialist recognition and Fellowship of RACS.

The RACS will have assessed you as “substantially comparable” to an Australian and New Zealand trained surgeon and recommended that you complete the following in order to attain Fellowship of the College:

- Satisfactorily complete a period of up to 12 months of clinical assessment.
- Comply with the College’s prescribed IMG professional development activities for the duration of your assessment period.
- Complete any mandatory requirements and/or up-skilling training required.
- Attend the RACS’s IMG Induction Workshop within the first 6 months from commencement of clinical assessment.
- Complete Let’s Operate with Respect eLearning resource available on RACS website [prior](#) to commencement of clinical assessment.

The RACS will have recommended that you find hospital employment suitable for conducting the clinical assessment and providing sufficient scope of practice.

By now you will have written to the RACS accepting the recommendation and signed the IMG Agreement. The RACS will have notified you of the requirements regarding accreditation of an IMG post, submission of an IMG Post Description Form (IPDF) and in relation to formal commencement of clinical assessment. You will also be registered with the RACS as an active IMG on a specialist pathway.

## WHO ARE YOUR KEY RACS CONTACTS DURING THE CLINICAL ASSESSMENT PERIOD?

Your specialist assessments will be managed by the Department of IMG Assessments at RACS (or other delegated administrative support). The key contact person during your clinical assessment is the Business Support Officer, IMG Assessments.

The contact details for the Business Support Officer are:

Business Support Officer	
Department of IMG Assessments	
Royal Australasian College of Surgeons	Phone: +613 613 9249 1124
Surgeons’ Gardens	Fax: +61 3 9249 1240
Spring Street	Email: <a href="mailto:MG.Enquiries@surgeons.org">MG.Enquiries@surgeons.org</a>
Melbourne VIC 3000	Web: <a href="http://www.surgeons.org">www.surgeons.org</a>

The other key contacts during your clinical assessment will be

- your Clinical Assessors, who will also be Fellows of the College appointed by the Board of Surgical Education and Training (SET); and
- the Clinical Director, IMG Assessment and Support who is able to advise and assist you independently from the specialty training board.

The contact details for the Clinical Director, IMG Assessment and Support are:

Clinical Director, IMG Assessment and Support



Department of IMG Assessments  
Royal Australasian College of Surgeons  
Surgeons' Gardens  
Spring Street  
Melbourne VIC 3000

Phone: +613 613 9276 7479  
Fax: +61 3 9249 1240  
Email: MG.Enquiries@surgeons.org  
Web: www.surgeons.org

## OVERVIEW

Clinical Assessment is undertaken within the guidelines by RACS and the Medical Board of Australia (MBA) on Supervised Practice For International Medical Graduates .

Decisions regarding Clinical Assessment are made by the relevant Specialty Board in which the IMG is being assessed. The Board may delegate its decision making authority to an individual or to a sub-committee. When a delegation authority is exercised the decision of the delegate is a decision of the Board.

A substantially comparable IMG is required to undertake a period of up to 12 months of clinical assessment commencing on MBA Level 3 supervision requirements, progressing to MBA Level 4 supervision based on satisfactory performance.

You will have 4 years from commencement of clinical assessment to complete all components of the Initial Recommendation.

### Overview of assessment of clinical practice by supervision



## FINDING SUITABLE EMPLOYMENT

Your first task is to find a suitable hospital position. You need to ensure that the position you are seeking for clinical assessment purposes provides:

- appropriate scope of work
- the appropriateness of the designated Fellows to provide clinical assessment
- opportunities for continuing education
- the suitability of infrastructure for clinical assessment



The RACS does not provide recruitment advice nor does it have an exhaustive list of positions available other than those positions published in the Surgical Positions Available section of the website. You may want to contact specialised recruitment agencies to assist in finding a suitable position. Further information on finding a job is available on [www.doctorconnect.gov.au](http://www.doctorconnect.gov.au)

When you find a position that appears suitable you will be required to refer to the IMG Assessment Post Accreditation policy and submit a RACS IMG Post Description Form (IPDF), which is available on the RACS website and return the completed form to the Department of IMG Assessments.

Applications for accreditation of an assessment post will only be assessed for IMGs who have completed the RACS "Operating With Respect" eLearning module.

The relevant Specialty Chair or nominee will determine whether the position is accredited for assessment purposes and confirm the suitability of the two clinical assessors nominated on the IPDF who will monitor your progress throughout the assessment period. You will be advised of the outcome of its review.

Once the RACS has accredited the hospital position, the clinical assessment period will formally commence (subject to the College's standardised three monthly reporting periods) and you have 4 years from commencement of clinical assessment to complete the requirements for specialist recognition and Fellowship of RACS.

## **STANDARISED THREE MONTHLY REPORTING PERIODS**

All IMGs commencing clinical assessment are subject to the RACS's standardised three monthly reporting periods. The standard three monthly periods of assessment commence on 1 February, 1 May, 1 August or 1 November.

You will nominate a commencement date of clinical assessment to coincide with one of the commencement dates listed above. You can start your employment at any time prior to formal commencement of your clinical assessment.

IMGs who nominate a start date of clinical assessment but start employment at a later date will have their commencement date default to the next quarterly start date.

### Note for IMG surgeons in Area of Need positions

Area of Need positions are administered through the government health jurisdictions. Generally, an IMG surgeon who is in an Area of Need position is also undergoing assessment for specialist recognition and Fellowship of the College. Further information on the specialist pathway for Area of Need is available on the RACS website.

## **APPOINTMENT OF CLINICAL ASSESSORS**

You or your employing hospital may nominate two clinical assessors. The RACS, however, will make the final decision regarding the appointment. The Clinical Assessors will have Fellowship of the RACS in the discipline in which you are being assessed. Further information with regard to the role and responsibilities of Clinical Assessors can be obtained from the RACS website:

- Clinical Assessors of IMGs policy
- A Guide for Clinical Assessors



## PURPOSE OF CLINICAL ASSESSMENT

As you have been assessed as substantially comparable, the RACS will recommend that your clinical assessment will commence on MBA Level 3 supervision, progressing to MBA Level 4 supervision based on satisfactory performance.

This means that your clinical practice will be monitored and assessed by two Clinical Assessors who are Fellows of the College. Your Clinical Assessors will be aware of your interim recommendation and will be able to provide you with feedback on your clinical performance and progress towards completion of requirements for specialist recognition and Fellowship of RACS. Clinical assessment will be performed by two Fellows nominated by the assessing Specialty Board Chair or nominee, and it may be performed from a distance once you have progressed to MBA Level 4 supervision.

Supervision of your surgical practice provides assurance to RACS, the Medical Board of Australia (MBA) and the community that your surgical practice is safe and is not putting the public at risk. It also provides RACS the evidence that you possess the competencies, skills and attributes of an Australian or New Zealand trained surgeon. The period of supervision will also introduce you to a culture of continuous learning and professional development.

Satisfactory performance against the required standards confirms that the recommended pathway for you is an appropriate one.

Your responsibilities under **MBA Level 3 supervision or MBA Level 4 supervision** include to:

- Schedule regular meetings with your Clinical Assessors and make all reasonable efforts to ensure that these meetings take place;
- Set supervision and development goals, together with your Clinical Assessors;
- Submit the completed assessment reports and operative logbook summary to RACS for review by the Specialty Board Chair or nominee no more than two weeks after the conclusion of each three month period;
- Contact your Clinical Assessor(s) early if you have a problem;
- Recognise the limits of your professional competence and seek guidance and assistance from your Clinical Assessor(s);
- Obtain approval from the RACS for any proposed changes to clinical assessment arrangements, including any changes to Clinical Assessor(s) and/or hospital position;
- Inform the RACS if requirements of your clinical assessment are not being met eg. If your Clinical Assessor(s) is unable to provide the necessary levels of supervision or attend meetings;
- Inform the RACS if the hospital position is not providing you with the appropriate scope of work or requisite scope of work as recommended by the Specialty Board;
- You have completed an IMG Orientation Program via RACS eLearning resource available on RACS website within the first 3 months from commencement of clinical assessment;
- Participate in the IMG Induction Program within the first 6 months from commencement of clinical assessment.



## WHAT IS THE ROLE OF THE CLINICAL ASSESSOR?

The role of your Clinical Assessor **under MBA Level 3 or MBA Level 4 supervision** is to assess you to determine if you possess the necessary attributes to achieve comparability to an Australian or New Zealand trained surgeon. Clinical assessment requires you to have regular meetings with your Clinical Assessors, and for them to have direct observation of your clinical practice on a regular basis. In addition, your Clinical Assessor needs to:

- ensure that he/she is accessible by telephone or video link if they are not physically present; and
- conduct performance assessment meetings and provide constructive feedback to you; and
- complete periodic assessment reports as required by RACS. The Clinical Assessor is expected to liaise with other members of the hospital unit to ascertain your performance across all of the RACS competencies; and
- address any problems that are identified.

The role of your Clinical Assessor specifically is to observe your clinical practice to ensure that you are safe to practice independently as a specialist surgeon. The Clinical Assessor will also assess whether you are practising at the level of a Fellow of the RACS on day one of practice.

Under **MBA Level 3 supervision or MBA Level 4 supervision** it is envisaged that you will have regular contact via face-to-face, email or telephone with your clinical assessors. This will enable you and your assessors to work together through various issues including, but not limited to:

- Identifying aspects of practice where you require support and assistance
- Negotiating plans of action in order to meet needs and goals
- Selecting Continuing Medical Education activities and audit options to complement and support specific aspects of your surgical practice
- Determining the focus and design of audit activities
- Reviewing the results of audit activities
- Addressing any deficiencies which are revealed as a result of audit activities and performance review

It is expected that your Clinical Assessors will liaise with other members of the hospital unit to ascertain your performance across all RACS competencies before completing periodic assessment reports.

Details on the RACS competencies can be found on the RACS website.

The clinical assessor under MBA Level 3 supervision and MBA Level 4 supervision is not ‘training’ you.

## RECEIVING FEEDBACK

Meaningful feedback is at the heart of clinical assessment. It is a vital part of the assessment process where you are told how you are performing. It needs to be based on first hand observation of your performance and it will provide you with an opportunity to clarify your strengths and weaknesses. It will encourage self reflection, raise your self awareness and assist you to plan for your future development.

Feedback will be planned, not rushed, and wherever possible it will be given in a timely fashion, as close to the observed behaviour as possible. It will be specific and you will be told precisely the



areas in which you have performed well. Where possible you will be given illustrative examples, for example;

“When you told the patient their diagnosis you used clear and simple explanations and checked for their understanding”.

Similarly your Clinical Assessors will be discussing areas that need to be improved. They will endeavour to be clear and specific; for example

“When you told the patient their diagnosis you used technical terms that they appeared not to understand, you were rushed and appeared insensitive to their concerns”.

Your Clinical Assessors will want to ensure that feedback provided to you is **specific** and **constructive** and **given in such a way that you will listen to and act on it**.

Your Clinical Assessors may ask questions about areas you believe you are performing well and areas where you think you could improve.

## QUARTERLY CLINICAL ASSESSMENT REVIEW AND REPORTS

A Fellow providing clinical assessment under MBA Level 3 or MBA Level 4 supervision is required to undertake a review of your surgical practice. You will be required to meet quarterly with your Clinical Assessors for a performance review. To facilitate the work of the Clinical Assessors undertaking the review, it is expected that your employer will establish a mechanism of feedback from appropriate staff as to your professional relationship and communication with patients, relatives and staff.

The Clinical Assessors should ensure that they personally interview appropriate surgical and anaesthetic staff, junior medical staff, allied health and nursing staff to explore these issues **prior** to meeting with you to discuss progress.

At the conclusion of each three month assessment of clinical practice period you must submit to the Specialty Board via the IMG Department (or other delegated administrative support), a **consensus** assessment progress report from the clinical assessors.

This process involves:

1. You to initiate a meeting with your clinical assessors to discuss progress. This meeting should take place, no more than two weeks after the conclusion of each three month period.
2. You to initiate the online assessment progress report to one of your clinical assessors prior to the meeting.
3. The assessment progress report to be completed by the clinical assessor nominated by you during or following your meeting. Note: *The completed online assessment progress report is based on a consensus assessment by all clinical assessors.*
4. You to review the assessment progress report prior to submission to RACS (or other delegated administrative support).
5. A copy of the assessment progress report is emailed to you and your clinical assessors.

It is essential that the results of the review undertaken with your clinical assessors is recorded on the assessment progress report assessing your surgical performance and progress.

The clinical assessor completing the assessment progress report must ensure **all sections of the assessment progress report is completed**. Additional information relating to any matter can be addressed within the form.



In addition to undertaking quarterly (3-monthly) performance reviews, you will be required to undertake the following assessment tools (administered online) during your period of clinical assessment:

- Annual Multi-Source Feedback (MSF)
- 3-monthly Direct Observation of Procedural Skills (DOPS) and
- 3-monthly Mini Clinical Examinations (Mini-Cex) assessments

Details for all these assessment tools are available on the RACS website.

The Specialty Board will review your assessment reports and logbook data to ensure you're your performance meets the required standards.

The IMG Assessment Department (or other delegated administrative support) will record whether your progress is satisfactory or unsatisfactory in your assessment record and they will confirm this with you in writing.

At the end of each year you will receive a transcript of your progress to retain as a record.

## **MANAGEMENT OF UNSATISFACTORY PERFORMANCE**

If the Specialty Board Chair or nominee determines that an IMG surgeon's performance is unsatisfactory the Department of IMG Assessments (or other delegated administrative support) will contact the IMG in writing. The correspondence will be copied to the Clinical Assessors.

The Department of IMG Assessments (or other delegated administrative support) will also schedule a performance counselling interview, which will be attended by the Specialty Board Chair or nominee, the IMG, and both the Clinical Assessors.

Within seven days of the interview written notification of the outcomes will be provided to the IMG and the Clinical Assessors and may include:

1. Identification of the areas of unsatisfactory performance.
2. Confirmation of the remedial action plan.
3. Identification of the required standard of performance to be achieved .
4. Review of the approved assessment post.
5. Possible implications if the required standard of performance is not achieved.

## **REMEDIAL ACTION PLAN**

Preparation of the Remedial Action Plan will be co-ordinated through the Department of IMG Assessments (or other delegated administrative support) in consultation with the Clinical Assessors, the Specialty Board Chair or nominee, and the IMG surgeon. This process will be commenced as soon as possible after the quarterly performance review meeting.

The plan fulfils four functions, which are;

1. To identify the areas in which an IMG's performance is below standard
2. Specify areas where up-skilling is required
3. Define the assessment method and criteria
4. Record the performance grade at the end of the rotation

The Department of IMG Assessments (or other delegated administrative support) will send a copy of the agreed plan to the IMG surgeon and the Clinical Assessors and this plan will be used during the next three-monthly rotation. As soon as the IMG surgeon and the Clinical Assessors have a copy of the Remedial Action Plan, the IMG surgeon will be required to attend a meeting to incorporate the





education and assessment requirements needing development into the intentions for the term. The Clinical Assessors will notify RACS that this meeting has occurred.

Throughout the term the Clinical Assessors will monitor and record the IMG surgeon's progress.

To prepare for the next clinical assessment review the Clinical Assessors will consult with medical and nursing staff concerning progress, to consolidate views. They will schedule a meeting with the IMG surgeon to discuss progress. The Clinical Assessors will write comments in the progress reports for each area where performance had been assessed as below standard. They will also record a performance grade

The RACS will review progress and determine whether or not a further Remedial Action Plan is required for the next quarterly period. This process will continue until the Specialty Chair and/or IMG representative is satisfied that the IMG has achieved a satisfactory level of performance and shown sustained improvement. It is therefore likely to last a minimum of two quarterly periods.

If there is no improvement RACS may determine that the IMG is unable to reach the required standard and that a reassessment is required. The result of that reassessment may be that the IMG is not "substantially comparable" but rather "partially comparable" or "not comparable".

This indicates the discovery that an IMG surgeon is required to undertake further assessment and/or sit the Fellowship Examination. If the IMG surgeon is deemed 'not comparable' they will require further training and can no longer continue on a specialist pathway. Such a decision is not made lightly and all efforts are made to help an IMG surgeon deemed "substantially comparable" to reach the goal of attaining specialist recognition and Fellowship of the College.

In order to clarify an IMG surgeon's performance the Specialty Board Chair or nominee may request an independent assessment or audit of the IMG surgeon's performance during the development process.

Should a period of unsatisfactory performance by the IMG be determined to potentially endanger the welfare of patients, RACS reserves the right to make a notification to the MBA. The legal requirements of mandatory reporting will be followed.

## **PROFESSIONAL DEVELOPMENT ACTIVITIES**

All IMG surgeons undergoing clinical assessment are required to participate in the RACS Professional Development Activities. This program is managed through the RACS Department of IMG Assessments. Further information is available on the RACS website.

## **MAINTENANCE OF PROFESSIONAL STANDARDS (MOPS)**

An IMG must register for the MOPS program in January of the year following completion of clinical assessment if they have not attained fellowship, and remain in that program until Fellowship is attained or the pathway to Fellowship ceases

## **ELIGIBILITY FOR FELLOWSHIP**

When all requirements for Fellowship have been successfully completed the Specialty Board Chair or nominee will review your specialist assessment reports and make a determination concerning recommendation for specialist recognition and Fellowship of RACS. This process takes approximately 3 weeks and you will be advised of the outcome. If you have been recommended for Fellowship, the College will notify you and forward instructions regarding making an application for Admission to Fellowship.



## WHO CAN SUPPORT YOU WHILE YOU ARE BEING ASSESSED?

RACS has experienced IMG Assessment managers and a Clinical Director, IMG Assessment and Support who can support you as you progress through your specialist assessment. Contact them for help and advice as required.

## WHAT FEES ARE PAYABLE FOR CLINICAL ASSESSMENT AND WHAT DO THEY COVER?

The fees for clinical assessment are set annually and published on the RACS website. There are two sets of fees; one for Level 3 supervision which requires on-site clinical assessment and the other for Level 4 supervision which may be off-site clinical assessment. Your fees may be a combination of off-site and on-site.

Once you have paid the annual fee, you will be entitled to the following RACS services:

- Surgical News magazine
- ANZ Journal of Surgery
- Password access to the members sections of the College website
- Four formal review meetings per year with each of your Clinical Assessors and additional communications according to your assessment recommendations
- Access to College online assessment tools including MALT
- Access to surgical education and training material on a user pays basis
- Administrative support from the Department of IMG Assessments and Clinical Director, IMG Assessment and Support in accordance with the requirements of your recommendation

## Complaints and Appeals

RACS has implemented a formal process for handling complaints and appeals. These must be lodged within three months of receipt of notice of original decision.

Requests for review or reconsideration of RACS decision following specialist and/or Area of Need outcome must be lodged in writing within **20 Victorian working days** of receipt of original decision, and sent to:

The Manager  
IMG Assessments  
The Royal Australasian College of Surgeons  
Surgeons' Gardens  
Spring Street  
Melbourne VIC 3000

Complaints or appeals must be lodged in writing within **three months** of receipt of notice of original decision and sent to

Executive Director of Surgical Affairs  
The Royal Australasian College of Surgeons  
Surgeons' Gardens  
Spring Street  
Melbourne VIC 3000

Further details may be obtained by referring to the Appeals Mechanism policy on the RACS website.



## **POLICIES**

RACS Policies relevant to the clinical assessment period are:

- Assessment of Clinical Practice of IMGs in Australia
- Specialist Assessment of IMGs in Australia
- Professional Development Opportunities for IMGs
- Clinical Assessors of IMGs
- International Medical Fees
- IMG Assessment Post Accreditation
- Appeals Mechanism

## **FORMS**

Forms relevant to the clinical assessment period are:

- IMG Post Description Form
- Remedial Action Plan Form
- Professional Development Activities

## **ONLINE ASSESSMENT FORMS**

Details for the following assessment tools are available on the RACS website.

- Assessment progress report
- DOPS
- Mini-Cex
- MSF

## **LOGBOOKS**

Details on how to access the RACS Morbidity Audit and Logbook Tool (MALT) for the recording of your surgical procedures is available on the RACS website.

## **ADDITIONAL RESOURCES**

The College provides some programs which are designed to assist IMG surgeons in their professional practice. Please refer to College website for a complete listing of courses and workshops to assist you with your professional practice.

