

REG-2041

Supervised Practice of Specialist International Medical Graduates in Australia and Aotearoa New Zealand

1. Purpose and scope

- 1.1. This regulation defines the supervised practice of Specialist International Medical Graduates (SIMGs) in Australia and Aotearoa New Zealand on a pathway to Fellowship.
- 1.2. The purpose of supervised practice is to:
 - 1.2.1. Verify the performance of the SIMG in clinical practice matches the performance of an Australian and Aotearoa New Zealand trained surgical specialist commencing practice (at the level of a newly qualified Fellow)
 - 1.2.2. Support the SIMG to transition to the relevant healthcare system
 - 1.2.3. Assist the SIMG to access CPD programs

2. Definitions

- 2.1. The following definitions and acronyms apply for the purposes of this regulation:
 - a. **Commencement Period** shall mean the maximum time permitted to commence supervised practice and the requirements of the specialist assessment recommendation for a SIMG on a pathway to Fellowship.
 - b. **Validity Period** shall mean the maximum time permitted to complete the requirements of the specialist assessment recommendation for a SIMG on a pathway to Fellowship.
 - c. **CSET** shall mean the Committee of Surgical Education and Training.
 - d. **DOPS** shall mean Direct observation of procedural skills, a formative assessment tool designed to provide feedback on operating performance by observing an actual surgical procedure in the operating theatre.
 - e. **EVOPP** shall mean External Validation of Professional Performance, a comprehensive 2-day assessment using a variety of tools for confirming RACS Competencies.
 - f. **FEX** shall mean the RACS Fellowship Examination, the final examination for assessing the standard and level of competency equivalent to a consultant surgeon in their first year of independent practice.
 - g. **Mini-CEX** shall mean mini-clinical evaluation exercise, a formative assessment tool designed to provide feedback on skills essential to good medical care by observing an actual clinical encounter.
 - h. **MSF** shall mean Multisource feedback (or 360-degree evaluation), a questionnaire-based assessment method which rates interpersonal skills, professional behaviours and clinical skills by peers, patients and co-workers.
 - i. **SIMG** shall mean Specialist International Medical Graduate
 - j. **STC/B** shall mean the Specialty Training Committee or Board of the relevant specialty.
 - k. **RACS** shall mean the Royal Australasian College of Surgeons, including Specialty Training Committees or Boards

3. Governance

- 3.1. Decisions regarding supervised practice are made by the STC/B of the relevant specialty. The STC/B may delegate its decision making authority to an individual or to a sub-committee. When a delegation of authority is exercised the decision of the delegate is a decision of the STC/B.

4. Supervised Practice

- 4.1. Outcomes of assessment for comparability are outlined in RACS regulation: REG-2038 Assessing comparability of a SIMG to an Australia and Aotearoa New Zealand trained surgical specialist. The interim assessment informs the SIMG of comparability, requirements to be met, the period of supervised practice and timelines for satisfactory completion
- 4.2. Supervised practice requires the SIMG and the SIMG Supervisors to interact via regular face-to-face, email and/or telephone contact. This enables the SIMG and the SIMG Supervisors to work together through issues including, but not limited to:
 - a. Identifying aspects of practice where support and assistance is required.
 - b. Creating plans of action in order to meet needs and goals.
 - c. Selecting continuing medical education or professional development activities and audit options to complement and support specific aspects of surgical practice.
 - d. Reviewing the results of audit activities and addressing any deficiencies.
 - e. Monitoring preparation for satisfactory completion of the Fellowship Examination where required.
- 4.3. The responsibilities of SIMG Supervisors are outlined in RACS policy, POL-2042: Supervisors of Specialist International Medical Graduates in Australia and Aotearoa New Zealand.

5. Timeframes

- 5.1. A SIMG who accepts a recommendation of substantially or partially comparable must commence their supervised practice in a RACS approved post within 24 months of the recommendation date; otherwise, the recommendation expires and the SIMG will no longer be on a pathway to Fellowship. This period of 24 months is known as the Commencement Period.
- 5.2. SIMGs assessed Substantially Comparable must complete all elements of the recommendation within 24 months from the date the first supervised practice period commences; otherwise, the recommendation expires and the SIMG will no longer be on a pathway to Fellowship. This period of 24 months is known as the Validity Period.
- 5.3. SIMGs assessed Partially Comparable must complete all elements of the recommendation, within 48 months from the date the first supervised practice period commences; otherwise, the recommendation expires and the SIMG will no longer be on a pathway to Fellowship. This period of 48 months is known as the Validity Period.
- 5.4. A SIMG may apply for family or medical leave at any time after the commencement of supervised practice. This will extend the expiry date by the period of leave granted up to a maximum of 12 months.
- 5.5. On the recommendation of the relevant Specialty Training Board/Committee or equivalent, the validity expiry date may be extended by an additional 12 months.
- 5.6. Further extensions will only be considered in exceptional circumstances.

6. Approval of supervised practice arrangements

- 6.1. It is the responsibility of the SIMG to obtain a suitable position for supervision purposes. A SIMG post description form must be forwarded to RACS. A minimum of two SIMG Supervisors are required for supervision purposes.
- 6.2. A SIMG may nominate Supervisors when submitting the SIMG post description.
- 6.3. The STC/B will confirm the suitability and appointment of SIMG Supervisors. Nominated SIMG Supervisors must agree they are prepared to provide supervision before the SIMG post description is submitted for approval
- 6.4. RACS will have the final decision in determining whether the post and nominated supervisors are suitable.
- 6.5. All SIMGs undergoing supervision are subject to standardised three-monthly reporting periods which are fixed at:
 - a. 1 February to 30 April;
 - b. 1 May to 31 July;
 - c. 1 August to 31 October; and
 - d. 1 November to 31 January.
- 6.6. Fixed dates cannot be altered. SIMGs are required to commence their designated period of supervised practice in accordance with these dates.
- 6.7. Accredited Supervised practice can only commence upon completion of the following:
 - a. Formal acceptance of a recommendation of partially or substantially comparable.
 - b. Submission of a signed SIMG Agreement
 - c. Submission of a SIMG post description form.
 - d. Confirmation from the relevant STC/B the nominated hospital post and SIMG Supervisors are approved as suitable for the SIMG's designated period of supervised practice
 - e. Receipt of written correspondence from the employing hospital confirming employment start and end dates.
 - f. Completion of the SIMG Orientation Program eLearning module.
 - g. Completion of the Introduction to Operating with Respect eLearning module
 - h. Cultural Safety Training
 - i. For Australian SIMGs: Completion of the Aboriginal and Torres Strait Islander Health and Cultural Safety eLearning course (course 1 only) or evidence of equivalent cultural safety training approved by RACS
 - ii. For Aotearoa New Zealand SIMGs the mandatory jurisdiction requirements are fulfilled.
 - i. Payment of fees

7. Assessment of supervised practice

- 7.1. At the end of each three-monthly reporting period, the SIMG must submit:
 - a. SIMG Supervisor Progress Reports
 - b. Mini-CEX or specialty specific equivalent
 - c. DOPS or specialty specific equivalent
 - d. Other specialty specific requirements

- e. Logbook (in the format specified by the relevant STC/B)
- 7.2. For each twelve-month period of supervised practice the SIMG must undergo a multi-source feedback (MSF), to be coordinated either by the SIMG Assessments Team or an external source.
- 7.3. For each three-monthly assessment, the SIMG and SIMG Supervisors must conduct a performance assessment meeting to complete the assessment reports and review the operative logbook summary. Assessment documents must clearly reflect the discussions held during the performance assessment meeting.
- 7.4. The SIMG is responsible for forwarding completed assessment documents to the SIMG Assessment Team no more than two weeks after the conclusion of each three-monthly assessment period. If assessment documents have not been received in accordance with this requirement the assessment period may not be recognised.
- 7.5. SIMGs may be required to undertake a work based assessment as part of their requirements for External Validation of their Professional Performance (EVOPP).
- 7.6. To achieve Fellowship of RACS, all SIMGs are required to comply with the RACS Continuing Professional Development (CPD) program.
- 7.7. The STC/B will review the assessment documents submitted at the conclusion of each three-monthly assessment period to ensure the SIMG's performance meets the required standards.

8. Management of unsatisfactory or inadequate performance

- 8.1. Should an assessment review of an SIMG's three-monthly period identify unsatisfactory performance, a meeting with the STC/B representative, the SIMG and all SIMG Supervisors will be conducted.
- 8.2. Following the meeting written notification of the outcomes will be provided and may include:
 - a. Identification of the areas of unsatisfactory performance.
 - b. Confirmation of the remedial action plan.
 - c. Identification of the required standard of performance to be achieved.
 - d. Review of the approved post.
 - e. Possible implications if the required standard of performance is not subsequently achieved.
- 8.3. Unsatisfactory terms will not count towards the required period of supervision as outlined in the SIMG's interim assessment and will not routinely extend the validity period.

9. Management of subsequent unsatisfactory or inadequate performance

- 9.1. Should a subsequent assessment identify unsatisfactory performance, RACS will undertake a reassessment of the Interim Assessment Decision
- 9.2. The reassessment will be undertaken by a panel comprising the STC/B Chair or Nominee the chair of the SIMG Committee or nominee and a Community Representative.
- 9.3. Following the reassessment written notification of the outcome will be provided to the SIMG and may include:
 - a. Extension to the period of supervised practice.

- b. Additional requirements, including a requirement to satisfactorily complete work based assessments and/or the Fellowship Examination.
- c. Review of the suitability of the post for SIMG supervision.
- d. Termination of the pathway to Fellowship.

9.4. The recommendation of the panel will be considered by RACS.

9.5. RACS will notify the Medical Board of Australia or the Medical Council of New Zealand if they have concerns about patient welfare.

10. Management of exceptional performance

10.1. SIMG supervisors may submit to RACS an application for exceptional performance which must include clear evidence that the SIMG has met or exceeded the required standard.

10.2. RACS will review the SIMG supervisor's request and make a determination.

11. Presenting for the Fellowship Examination

11.1. SIMGs undergoing supervised practice of 12 months or less may apply to present for the FEX at any time after commencement of supervised practice.

11.2. SIMGs undergoing supervised practice greater than 12 months may apply to present for the FEX, when they have satisfactorily completed a minimum of six months of supervised practice.

11.3. SIMGs must be within the time limit of their specialist assessment recommendation (assessment validity period) at the time of sitting the written component of the FEX.

12. Completion of assessment of supervised practice

12.1. SIMG may apply for admission to Fellowship of RACS upon successful completion all requirements of the specialist assessment recommendation. Applications must be in accordance with RACS regulation: Admission to Fellowship.

13. Fees

13.1. A supervision fee is payable by all SIMGs whilst under supervised practice.

13.2. An SIMG administration fee is payable by SIMGs who have completed supervised practice but have not completed all requirements of their specialist assessment recommendation (i.e. while on a pathway to Fellowship).

13.3. STC/Bs may also charge an administration fee which is invoiced concurrently with the supervision fee.

14. Associated Documents

14.1. Regulations:

- a. Assessing an SIMG's Comparability to an Australian and New Zealand Trained Surgical Specialist Aotearoa New Zealand Vocationally Registered Doctors Applying for Fellowship
- b. SIMG Assessment Post Accreditation
- c. Fellowship Examination
- d. Admission to Fellowship

14.2. **Policies:**

- a. Supervisors of Specialist International Medical Graduates in Australia and New Zealand

14.3. **Forms:**

- a. SIMG Post Description Form

14.4. **Medical Board of Australia (www.medicalboard.gov.au):**

- a. Specialist medical college assessment of specialist international medical graduates
- b. Supervised practice for international medical graduates

15. **Information**

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