

Portfolio:	Education	Ref. No.	REG-2010
Team:	Specialist International Medical Graduate Assessment		
Title:	Specialist Assessment of Specialist International Medical Graduates in Australia		

1. PURPOSE AND SCOPE

The purpose of this regulation is to define the assessment of Specialist International Medical Graduates (SIMGs) in Australia. An SIMG is any doctor who has gained their specialist qualification external to Australia and New Zealand.

Fellowship of RACS is the standard accepted by the Medical Board of Australia (MBA) for registration as an independent specialist surgeon in Australia. Any SIMG seeking Fellowship of RACS will be assessed in accordance with MBA Standards and RACS regulations.

This regulation defines the standards applied in assessing the comparability of SIMGs to holders of Fellowship of RACS, and hence their suitability for independent surgical practice in Australia.

2. KEYWORDS

Specialist; International; Medical; Graduate; Assessment; Fellowship; Australia

3. SIMG ASSESSMENT

3.1. Application for Assessment

- 3.1.1. SIMGs with formal postgraduate specialist qualifications in surgery may apply to RACS for assessment of their qualifications. Applications must be received in the format specified by RACS, as detailed in the SIMG section of RACS website.
- 3.1.2. Prior to applying to RACS an SIMG must apply to the Australian Medical Council (AMC) and the Educational Commission for Foreign Medical Graduates (ECFMG) for verification of their primary medical and specialist surgical qualifications.
- 3.1.3. SIMGs can apply for assessment of comparability but cannot restrict the level of assessment (e.g. request an assessment only for substantial comparability).
- 3.1.4. An SIMG may be assessed on the basis of a document-based assessment alone, or by a document-based assessment and assessment interview.

3.2. Assessment Standards

- 3.2.1. From documents submitted by an SIMG and their interview performance (where invited) RACS determines a pathway to Fellowship based on a comparison to the training, assessment, experience, recent practice and continuing professional development of an Australian and New Zealand trained surgical specialist commencing in the same field of practice. The factors considered are:
 - a. Recency of practice;
 - b. Specialist surgical training;
 - c. Postgraduate training and experience;
 - d. Quantity, depth and scope of practice since completion of training.
- 3.2.2. The SIMG is responsible for submitting documentation for assessment, detailing the required evidence, to demonstrate comparability. In the

Document Authoriser:	Executive General Manager, Training Partnerships	Original Issue:	October 2008
Document Owner	Team Leader, SIMG Assessment	Version:	19
		Approval Date:	August 2022
		Review Date:	August 2026

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absence of sufficient evidence, RACS is not compelled to assume comparability.

- 3.2.3. The standards for assessing an SIMG's comparability to an Australian and New Zealand trained surgical specialist are specified in the Assessing an SIMG's Comparability to an Australian and New Zealand Trained Surgical Specialist regulation.

3.3. Assessment Outcomes

- 3.3.1. An SIMG will be assessed not comparable if:
- There is insufficient evidence of recency of specialist surgical practice in the relevant specialty comparable to that of an Australian and New Zealand trained surgeon in the specialty; or
 - There is insufficient evidence of completion of a specialist training program comparable to RACS programs including the competencies, skills and attributes.
- 3.3.2. An SIMG will be assessed partially comparable if:
- There is evidence of recency of surgical practice in the relevant specialty; and
 - There is evidence of completion of a specialist training program comparable to RACS program including the competencies, skills and attributes; and
 - The applicant has not completed a comparable exit examination to RACS Fellowship Examination and/or the quantity, depth and scope of surgical practice in the specialty since the attainment of their surgical qualification is not of a sufficiently high standard or duration as to waive the need to sit the Fellowship Examination.
- 3.3.3. An SIMG will be assessed substantially comparable if:
- There is evidence of recency of surgical practice in the relevant specialty; and
 - There is evidence of completion of a specialist training program comparable to RACS programs including the competencies, skills and attributes; and
 - There is evidence of successful completion of an exit examination comparable to RACS Fellowship Examination and/or the quantity, depth and scope of surgical practice in the specialty is of a sufficiently high standard as to waive the need to sit the Fellowship Examination.
- 3.3.4. In exceptional circumstances an SIMG may be assessed as exceeding the standard of substantial comparability to an Australian and New Zealand trained surgeon within a defined scope of practice. Where the defined scope of surgical practice is considered valuable to the community and conforms to the goals of RACS and specialty discipline, the SIMG may be recommended to Fellowship within this defined scope of practice.

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3.4. Pathways to Fellowship

- 3.4.1. A non-comparable SIMG may only progress to Fellowship by completion of RACS Surgical Education and Training (SET) program. Entry to the SET program is by competitive selection.
- 3.4.2. A partially comparable SIMG may progress to Fellowship by Examination by the satisfactory completion of:
- Clinical assessment under Level 3 supervision unless otherwise specified, for a period of up to 24 months;
 - Specified skills courses and activities;
 - Continuing Professional Development activities; and
 - The Fellowship Examination of RACS.
- 3.4.3. A substantially comparable SIMG (including an SIMG substantially comparable within a defined scope of practice) may progress to Fellowship by Assessment by the satisfactory completion of:
- Clinical assessment for a period of up to 12 months. Clinical assessment will commence under Level 3 supervision, progressing to Level 4 supervision based on satisfactory performance;
 - Specified skills courses and activities; and
 - Continuing Professional Development activities.

3.5. Notification and Acceptance of Recommendation

- 3.5.1. Notification of the recommendation, including reasons for the outcome, will be sent to the SIMG and uploaded on the AMC Portal for the MBA's reference.
- 3.5.2. An SIMG is not on a pathway to Fellowship until he or she has accepted a recommendation of partial or substantial comparability in writing and signed an SIMG Agreement (refer Appendix 1). The agreement outlines the SIMG's responsibilities for the duration of their specialist pathway.
- 3.5.3. A recommendation cannot be accepted in part. All requirements of a recommendation are accepted by accepting the recommendation.
- 3.5.4. Once a recommendation has been accepted, an SIMG cannot reject the recommendation, but can withdraw from the pathway to Fellowship.
- 3.5.5. An SIMG assessed as partially or substantially comparable has 28 days from the date of notification to accept the recommendation, in writing.
- 3.5.6. Where an SIMG is notified of an assessment recommendation of partially or substantially comparable and RACS receives no response within 28 days the SIMG will be treated as having rejected the recommendation.
- 3.5.7. Where an SIMG is notified of an assessment recommendation of non-comparable and RACS receives no response with 28 days the SIMG will be treated as having accepted the recommendation.

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3.6. Assessment Timeframes

- 3.6.1. An SIMG who accepts a recommendation of partially or substantially comparable must commence clinical assessment 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.
- 3.6.2. An SIMG must complete RACS “Operating with Respect” eLearning module prior to commencing clinical assessment.
- 3.6.3. An SIMG must complete RACS “SIMG Orientation Program” eLearning module prior to commencing clinical assessment.
- 3.6.4. An SIMG must complete Course 1 of RACS “Aboriginal and Torres Strait Islander Health and Cultural Safety” eLearning program prior to commencing clinical assessment.
- 3.6.5. Clinical assessment cannot commence prior to acceptance of a recommendation of partially or substantially comparable, the signing of an SIMG Agreement, approval of a clinical assessment position, appointment of SIMG Supervisors, completion of mandatory eLearning courses and payment of the first clinical assessment fee.
- 3.6.6. SIMGs assessed Partially Comparable must complete all elements of the recommendation, including the Fellowship Examination within 4 years from the date that the first clinical assessment period commences otherwise the recommendation expires and the SIMG will no longer be on a pathway to Fellowship.
- 3.6.7. SIMGs assessed Substantially Comparable must complete all elements of the recommendation within 2 years from the date that the first clinical assessment period commences otherwise the recommendation expires and the SIMG will no longer be on a pathway to Fellowship.
- 3.6.8. An SIMG must attend the SIMG Induction Workshop within 6 months of commencing their clinical assessment.
- 3.6.9. An SIMG who ceases clinical assessment (e.g. by resignation of employment) without prior consent of RACS will thereby be treated as withdrawn from their pathway to Fellowship.
- 3.6.10. An SIMG may apply for family or medical leave at any time after the commencement of clinical assessment. This will extend the recommendation expiry date by the period of leave granted up to a maximum of 12 months.
- 3.6.11. On the recommendation of the relevant Specialty Training Board/Committee or equivalent, the recommendation expiry date may be extended by an additional 12 months.
- 3.6.12. With the exception of 3.6.9 and 3.6.10 no other extensions to the recommendation expiry date are available.

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3.7. Subsequent Assessments

- 3.7.1. An SIMG who has commenced the clinical assessment component of a recommended pathway to Fellowship by Examination or Assessment is not eligible for further specialist assessment within that specialty.
- 3.7.2. An SIMG who has previously been assessed by RACS as non-comparable may apply for permission to be reassessed if the following can be demonstrated:
- a. SIMGs assessed as not completing a comparable training program:
 - additional documentation relevant to completion of a comparable training program which was in existence at the time of the previous specialist assessment but was not produced for that assessment is now available; and/or
 - there is evidence that further training in a formal postgraduate specialist training program has been completed after the previous specialist assessment;
 - b. SIMGs assessed as not satisfying the recency of practice standard can apply for permission to be reassessed if it can be demonstrated that the standard has now been satisfied.
- 3.7.3. An SIMG who has rejected a recommendation of partially comparable may apply for permission to be reassessed if new/additional information can be provided regarding the exit examination completed, or on post-training experience as an independent practitioner (i.e. a new assessment cannot be undertaken solely on the basis of the same documentation supplied for the original assessment).

3.8. Fees

- 3.8.1. Fees are published on RACS website and are payable in advance for:
- a. Specialist assessment; and
 - b. Clinical assessment (which may also include a specialty specific fee).

3.9. Educational Support

- 3.9.1. An SIMG who has undergone a specialist assessment and who accepts a recommendation of partially comparable will have equal access to all educational opportunities that are currently offered to Australian and New Zealand Trainees preparing for the Fellowship Examination. Fees may be payable for these services.

4. ASSOCIATED DOCUMENTS

Regulations

Assessing an SIMG's comparability to an Australian and New Zealand Trained Surgical Specialist

SIMGs Assessed with a Defined Scope of Practice

Assessment of the Clinical Practice of SIMG's in Australia and New Zealand

SIMG Assessment Post Accreditation

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Reconsideration, Review and Appeal

Policies

Specialist International Medical Graduate Assessment Interview Panels Terms of Reference

Supervisors of Specialist International Medical Graduates in Australia and New Zealand

Standards

Medical Board of Australia (MBA): "*Specialist medical college assessment of specialist international medical graduates*" (www.medicalboard.gov.au)

Guidelines

Medical Board of Australia (MBA): Supervised practice for international medical graduates (www.medicalboard.gov.au)

Approver Education Committee

Authoriser Council

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Appendix 1

Specialist International Medical Graduate Agreement

As a Specialist International Medical Graduate (SIMG) I accept the specialist recommendation from the Royal Australasian College of Surgeons (RACS) which provides me with a pathway towards Fellowship of RACS upon attainment of specified requirements.

By signing this agreement I agree and acknowledge as follows:

- 1 I agree to be an active participant, optimising to my personal benefit the professional experiences and opportunities presented to me.
- 2 I undertake to observe all RACS regulations and policies relating to the specialist assessment and conduct of SIMGs and to comply with all reasonable directions of RACS.
- 3 I commit to complying with the RACS Code of Conduct, practising consistent with the values informing the RACS Operate with Respect campaign and undertaking all mandatory training required under the RACS Action Plan: Building respect, improving patient safety and stipulated in RACS regulation.
- 4 I acknowledge that RACS and health institutions will collect, hold and use information, including personal information in relation to my professional conduct, breach of the RACS Conduct of Conduct or allegations of discrimination, bullying or sexual harassment. I am therefore bound by the provisions of the RACS Privacy of Personal Information Policy and Privacy (Conduct Matters) Policy. Under these policies, I consent to RACS disclosing relevant information to health institutions and authorise health institutions to disclose relevant information to RACS in connection with surgical training, SIMG assessment, complaints handling and mandatory RACS course completion.
- 5 In the event a complaint is made about me to RACS I will cooperate fully in any investigation and assist RACS as requested. Further, should a complaint be made about me to my employer that in any way impacts on or involves this SIMG Agreement, I agree to notify RACS of such a complaint and the steps being taken by my employer to resolve such a complaint.
- 6 I agree that if I have concerns regarding my specialist assessment and supervision, it is my responsibility to initiate the process to have these concerns addressed. I acknowledge that I can approach and seek appropriate guidance from:
 - 6.1 My SIMG Supervisors
 - 6.2 The Clinical Director, SIMG Assessment and Support
 - 6.3 The Specialty Training Board/Committee or equivalent Chair, or nominated SIMG Representative
 - 6.4 The Executive Directors of Surgical Affairs
- 7 I agree and acknowledge that while I may seek advice and support, no individual Fellow of RACS or member of staff is authorised to vary the regulations, policies, rules and guidelines of RACS in relation to my specialist assessment. Any change or variation of these conditions, or any extension of time must be confirmed to me in writing after appropriate RACS approval has been received.
- 8 I agree to personally participate in RACS review processes in relation to my performance during RACS supervised practice. I acknowledge that RACS has a Reconsideration, Review

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and Appeal Regulation that sets out the circumstances in which I may appeal decisions regarding my specialist assessment.

- 9 I agree to seek feedback about my specialist assessment experience, as appropriate. If I have concerns, it is my responsibility to raise them.
- 10 I acknowledge that while RACS (and its agents) is the accredited assessor, RACS is not my employer, and I must abide by my employer's employment conditions. Where there is conflict between my employment obligations and specialist assessment requirements, I will advise my SIMG Supervisors accordingly. If I have concerns about my treatment in the workplace generally I should raise them with my employer in the first instance.
- 11 I release my SIMG Supervisors, the Specialty Training Board/Committee or equivalent and RACS (and its representatives) from all claims or liability arising from advice or assistance given in good faith.
- 12 I acknowledge that it is my responsibility to be fully informed and aware of all requirements of RACS, particularly regulations, policies, rules, guidelines and time limits in relation to my specialist assessment as an SIMG, including information available on RACS and Specialist Society websites.
- 13 I agree to make all applications and provide all information required by RACS within the time limits or deadlines stipulated by RACS.
- 14 I acknowledge that one of my requirements to achieve Fellowship of RACS is to undertake and provide evidence of Continuing Professional Development activities for the duration of my assessment validity period within the time limits or deadlines stipulated by RACS.
- 15 I authorise release of my contact details to the Specialist Society representing my specialty to enable it to contact me about educational opportunities and events.

Name:		RACS ID:	
Signed:		Date:	