Portfolio:	Education	Ref. No.	ETA-IMG-015
Team:	International Medical Graduates		
Title:	IMG Misconduct		

### 1. PURPOSE AND SCOPE

Fellows of RACS abide by a Code of Conduct. Trainees and International Medical Graduates (IMGs) on a pathway to Fellowship are also expected to conduct themselves with honesty and integrity and in accordance with the Code of Conduct. This policy defines the circumstances that may be regarded as misconduct by an IMG, and how allegations of misconduct are managed.

#### 2. KEYWORDS

International Medical Graduates (IMGs), Clinical Assessment, IMG Supervisors, Conduct, Misconduct, Serious Misconduct, Penalties, Code of Conduct.

## 3. BODY OF POLICY

#### 3.1. Misconduct

Misconduct is any unacceptable or improper behaviour in a professional environment. Misconduct includes, but is not limited to, the following:

3.1.1.	theft
3.1.2.	assault
3.1.3.	fraud
3.1.4.	cheating
3.1.5.	intoxication and/or substance abuse at an IMG assessment program event (including surgical rotations)
3.1.6.	a breach of RACS Code of Conduct, Policies or the IMG's agreement with RACS
3.1.7.	refusal to comply with a lawful and reasonable instruction given by a RACS representative
3.1.8.	repeated acts of misconduct for which the IMG has previously been counselled
3.1.9.	abusive or threatening behaviour
3.1.10.	discrimination, bullying and/or sexual harassment
3.1.11.	abandonment of assessment post
3.1.12.	falsification of references, assessment records, patient documentation, or patient treatment
3.1.13.	malicious damage to hospital, RACS or Society property or reputation

# 3.2. Reporting of an Allegation of Misconduct

3.1.14.

3.2.1. Allegations of misconduct are commonly reported to RACS via the Clinical Director, IMG Assessments and Support.

dismissal or suspension from employment for any reason.

- 3.2.2. The Clinical Director, IMG Assessments and Support may receive allegations of misconduct in one of two ways:
  - a. Directly; or

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- b. Via the RACS Complaints Office.
- 3.2.3. RACS will undertake an initial review of the allegation/s to determine if a formal investigation is required.
- 3.2.4. If the initial review determines that the allegation does not warrant a formal investigation the person raising the allegation will be informed and the complaint will be closed.
- 3.2.5. If the initial review determines that an allegation of misconduct is of sufficient substance to warrant further investigation, the Clinical Director, IMG Assessments and Support will consult with the following in order to initiate the investigation process:
  - a. Specialty Training Board Chair and/or IMG Representative of the relevant specialty training Board; and
  - b. RACS General Counsel.
- 3.2.6. The Manager, Complaints may also be consulted.
- 3.2.7. As soon as practicable following a decision to investigate, an IMG will be advised of the nature of the investigation and the allegation/s made.

  Where appropriate the IMG will be provided with a copy of the allegation/s (otherwise sufficient detail will be provided to the IMG to enable them to properly respond to the allegation/s) and will be invited to:
  - a. Provide a written submission addressing the allegation/s to the Clinical Director, IMG Assessments and Support; and
  - Attend a meeting of a subcommittee of the Board of Surgical Education and Training (SET) convened to hear the matter (refer 3.4.1 below).
- 3.2.8. The IMG may be accompanied at any meeting by a person (who is not a practicing lawyer) who will provide support to the IMG. A support person is not entitled to advocate on behalf of an IMG at any meeting.

#### 3.3. Natural Justice and Procedural Fairness

- 3.3.1. At all times during the operation and implementation of this regulation, IMGs will be afforded procedural fairness and the principles of natural justice will be applied to all decisions.
- 3.3.2. An IMG will be advised of an allegation of misconduct that is made against them, whether or not RACS decides to investigate it.
- 3.3.3. Investigations will be conducted in accordance with the RACS' Natural Justice and Procedural Fairness Guidelines for Committees and Decision Makers.

## 3.4. Composition, Role and Powers of the Subcommittee

## 3.4.1. Composition

The Subcommittee convened to hear the allegation/s will consist of:

- a. Deputy Chair, Board of SET;
- b. Chair of the relevant Specialty Training Board (or nominee); and

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## REGULATION

### **ROYAL AUSTRALASIAN COLLEGE OF SURGEONS**

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 A Fellow of RACS in the Specialty of the IMG who has not been a member of the Specialty Training Board or its subcommittees in the preceding 5 years.

#### 3.4.2. Role and Powers of Subcommittee

The Subcommittee's role is to determine if the allegation/s of misconduct have been substantiated and, if so, to recommend a course of action to the Board of SET in relation to the IMG. Recommendations available to the Subcommittee may include, but are not limited to:

- Remediation activities
- Suspension of pathway to Fellowship
- Termination of pathway to Fellowship

# 3.5. Reporting to Medical Registration Authorities

Where there is a finding of misconduct the RACS CEO will be informed to determine whether a mandatory notification is required to medical registration authorities.

#### 4. ASSOCIATED DOCUMENTS

## Regulations

Complaints Handling

Reconsideration, Review and Appeal

### **Publications**

Position Paper: Natural Justice and Procedural Fairness - Guidelines for Committees and

**Decision Makers** 

Guidelines: RACS Code of Conduct

### Other

Medical Registration Authority policies on notifiable conduct.

AHPRA Public Interest Disclosure (Whistleblower) Policy

**Approver** Education Board

Authoriser Council