GUIDELINES FOR THE SUPERVISION AND MANAGEMENT OF SPECIALIST INTERNATIONAL MEDICAL GRADUATES IN AUSTRALIA

1. INTRODUCTION

These Guidelines apply to the supervision of Specialist International Medical Graduates (SIMGs) assessed by the Australasian College for Emergency Medicine (ACEM; the College) for the purposes of attaining specialist registration in the field of emergency medicine with the Medical Board of Australia (MBA) / Australian Health Practitioner Regulation Agency (AHPRA) as either:

- ‘Substantially Comparable to an Australian-trained Specialist in Emergency Medicine’ and required to undertake a period of specialist practice under peer review (‘oversight’); or
- ‘Partially Comparable to an Australian-trained Specialist in Emergency Medicine’ and required to undertake a period of supervised clinical training (‘upskilling’) as applicable.

These Guidelines should be read in conjunction with the ACEM regulations; to the extent that there is any inconsistency, the regulations shall prevail. Reference should also be made to the MBA’s Guidelines: Supervised Practice for International Medical Graduates.

2. SIMGS UNDERTAKING A PERIOD OF SPECIALIST PRACTICE UNDER PEER REVIEW

SIMGs assessed by the College as Substantially Comparable to an Australian-trained specialist in emergency medicine may be required, pursuant to Regulation C1.5.1.1, to undertake a period of up to 12 FTE months of specialist practice under peer review in the field of emergency medicine. The duration of the required period of specialist practice under peer review is determined by the SIMG Assessment Committee following assessment at interview, and communicated to the applicant at the time of notification of the assessment decision.

2.1 SIMG Performance Assessment Reports

Where specialist practice under peer review in the field of emergency medicine is required in order for the SIMG to become eligible for election to Fellowship, and thus to attain specialist registration with the MBA, the SIMG must complete three-monthly SIMG Performance Assessment Reports throughout that period. The College has sought to ensure that its SIMG Performance Assessment Report meets the requirements of the MBA in relation to work performance reports, as well as for the purposes of the SIMG becoming eligible for election to Fellowship.

Any period of supervised practice undertaken by an SIMG assessed as Substantially Comparable to an Australian-trained specialist in emergency medicine for the purposes of becoming eligible to apply for election to Fellowship, must be prospectively approved (Regulation C1.5.4.3). One aspect of that approval is agreement by an ACEM Fellow to supervise the SIMG in question, with consideration also given to whether the position in which the SIMG intends to undertake a period of specialist practice under peer review for the purposes of meeting the College’s requirements is suitable for this purpose and for the needs of the individual SIMG.

1 Available at: www.medicalboard.gov.au/documents/default.aspx?record=WD15%2f18554&dbid=AP&chksum=uJpY1pAwW65xTqj%2bgRgUw%3d%3d
The ACEM Fellow approved by the College in the SIMG’s application for prospective approval of a period of specialist practice under peer review should ensure they comply with the responsibilities of a ‘principal supervisor’ as prescribed in the MBA Guidelines: Supervised Practice for International Medical Graduates.

Satisfactory SIMG Performance Assessment Reports are reviewed by the Chair of the SIMG Assessment Committee. SIMG Performance Assessment Reports that are other than satisfactory are reviewed by the SIMG Assessment Committee having regard to the individual SIMG’s performance to-date and the comments provided by the supervisor on the SIMG Performance Assessment Report. Pursuant to Regulation C1.5.4.7, the SIMG Assessment Committee will determine:

- whether the SIMG Performance Assessment Report is assessed as ‘satisfactory’ or ‘not satisfactory’
- if the SIMG Performance Assessment Report is assessed as ‘satisfactory’, whether there are any areas of concern in relation to performance to be communicated to the SIMG
- if the SIMG Performance Assessment Report is assessed as ‘not satisfactory’, whether an additional period of three (3) FTE months of specialist practice under peer review in the field of emergency medicine is required
- if the SIMG Performance Assessment Report is assessed as ‘not satisfactory’, whether the SIMG is to be advised that if any future SIMG Performance Assessment Report submitted for the purposes of becoming eligible for election to Fellowship is assessed as ‘not satisfactory’ they will be considered for removal from their pathway to Fellowship

Except in circumstances where an SIMG assessed as Substantially Comparable to an Australian-trained specialist in emergency medicine is reclassified and in the absence of circumstances that the SIMG Assessment Committee accepts as exceptional, the SIMG shall be considered for removal from their pathway to Fellowship if two (2) Work Performance Reports are assessed as ‘not satisfactory’.

2.2 Structured References

A set of structured references is required for SIMGs assessed by the College as Substantially Comparable to an Australian-trained specialist in emergency medicine and required to undertake a period of up to 12 FTE months of specialist practice under peer review in the field of emergency medicine in order to be eligible for election to Fellowship and attain specialist registration with the MBA. The structured references are provided by three (3) Fellows (FACEM) in the department in which the specialist practice under per review was undertaken. Referees must be at least three (3) years post award of FACEM and each referee must have directly supervised the SIMG that is the subject of the reference for a minimum of 50 hours in the three (3) FTE month period preceding the date on which the reference is completed.

The set of structured references will be reviewed by SIMG Assessment Committee, which will determine whether the requirement has been satisfactorily completed (Regulation C1.5.5.2).

Where the SIMG Assessment Committee determines that a set of structured references is not satisfactory, the Committee may determine that the deficiencies identified in the set of structured references is such that the SIMG will need to undertake a further additional period of specialist practice under peer review in the field of emergency medicine.

2.3 Multi-Source Feedback (MSF) Report

Assessment in the form of a Multi-Source Feedback (MSF) is required for SIMGs assessed by the College as Substantially Comparable to an Australasian-trained specialist in emergency medicine and required to be undertaken prior to the SIMG’s final assessment from a larger number and wider range of personnel. Respondents will include DEMT, DEM, FACEMs (non-supervising), non-FACEM consultants, trainees, senior nursing staff, clinical and non-clinical staff. Proposed respondents will be nominated by the SIMG and a list provided to the supervising FACEMs for additions and removals. Collated responses will be reviewed by the SIMG Assessment Committee, which will determine whether the SIMG is eligible for election to Fellowship with the College.
Where the SIMG Assessment Committee determines that a set of MSF responses is not satisfactory, the Committee may determine that the deficiencies identified in the set of MSF responses is such that the SIMG will need to undertake a further additional period of specialist practice under peer review in the field of emergency medicine.

3. SIMGS UNDERTAKING UPSKILLING

SIMGs assessed by the College as Partially Comparable to an Australian-trained specialist in emergency medicine may be required, pursuant to Regulation C1.6.1.1, to complete a period of up to 24 FTE months of prospectively approved supervised clinical training (‘upskilling’) to become eligible for election to Fellowship, and thus to attain specialist registration with the MBA. The need for a period of upskilling is determined by the SIMG Assessment Committee following assessment at interview, and communicated to the applicant at the time of notification of the assessment decision. The SIMG trainee must occupy a position under supervision prospectively approved by the College until such time as all requirements specified by the SIMG Assessment Committee in order for the SIMG trainee to become eligible to apply for election to Fellowship are completed (Regulation C1.6.4).

3.1 SIMG Trainee Work Performance Reports

An SIMG trainee undertaking upskilling must complete formal three-monthly SIMG Trainee In-Training Assessment Reports for so long as the SIMG trainee occupies a position under supervision prospectively approved by the College for the purposes of the SIMG trainee becoming eligible to apply for election to Fellowship. The College has sought to ensure that its SIMG Trainee In-Training Assessment Report meets the requirements of the MBA in relation to work performance reports\(^2\), as well as for the purposes of the SIMG trainee becoming eligible for election to Fellowship.

The ACEM Fellow approved by the College in the SIMG trainee’s application for prospective approval of a position under supervision should ensure they comply with the responsibilities of a ‘principal supervisor’ as prescribed in the MBA Guidelines: Supervised Practice for International Medical Graduates.

Satisfactory SIMG Trainee In-Training Assessment Reports are reviewed by the Chair of the SIMG Assessment Committee. SIMG Trainee In-Training Assessment Reports that are other than satisfactory are reviewed by the SIMG Assessment Committee having regard to the performance of the SIMG trainee to-date, the comments provided by the supervisor on the SIMG In-Training Assessment Report and the SIMG trainee’s progress in meeting the requirements they need to complete in order for them to become eligible for FACEM.

Pursuant to Regulation C1.6.5.8, the SIMG Assessment Committee will determine:

- whether the SIMG Trainee In-Training Assessment Report is assessed as ‘satisfactory’ or ‘not satisfactory’
- if the SIMG Trainee In-Training Assessment Report is assessed as ‘satisfactory’, whether there are any areas of concern in relation to performance to be communicated to the SIMG trainee
- if the SIMG Trainee In-Training Assessment Report is assessed ‘not satisfactory’, whether the SIMG is to be advised that if any future SIMG In-Training Assessment Report submitted for the purposes of becoming eligible for election to Fellowship is assessed as ‘not satisfactory’ they will be considered for removal from their pathway to Fellowship

Except in circumstances where the SIMG trainee is reclassified and in the absence of circumstances that the SIMG Assessment Committee accepts as exceptional, an SIMG trainee who has two (2) SIMG Trainee In-Training Assessment Reports assessed as ‘not satisfactory’ shall be considered for removal from their pathway to Fellowship.

\(^2\) Available at: [www.medicalboard.gov.au/documents/default.aspx?record=WD15%2f18554&dbid=AP&chksum=uJpY1pAwW65xTqj%2bgRgUw%3d%3d]
3.2 Structured References

SIMGs assessed as Partially Comparable to an Australian-trained specialist in emergency medicine are also required to complete a set of structured references (Regulation C1.6.10). The structured references are provided by three (3) Fellows (FACEM). Referees must be at least three (3) years post award of FACEM and each referee must have directly supervised the SIMG trainee for a minimum of 50 hours in the three (3) FTE month period preceding the date on which the reference is completed.

The set of structured references will be reviewed by SIMG Assessment Committee, which will determine whether the requirement has been satisfactorily completed (Regulation C1.6.10.2).

If the set of structured references is not satisfactory, the SIMG trainee will need to remain in a prospectively approved supervised clinical training position and a new set of structured references completed following another three (3) months of supervised clinical training undertaken for the purposes of becoming eligible for election to Fellowship.

3.3 Multi-Source Feedback (MSF) Report

Assessment in the form of a Multi-Source Feedback (MSF) is required for SIMGs assessed by the College as Partially Comparable to an Australasian-trained specialist in emergency medicine and required to be undertaken prior to the SIMG’s final assessment from a larger number and wider range of personnel. Respondents will include DEMT, DEM, FACEMs (non-supervising), non-FACEM consultants, trainees, senior nursing staff, clinical and non-clinical staff. Proposed respondents will be nominated by the SIMG and a list provided to the supervising FACEMs for additions and removals. Collated responses will be reviewed by the SIMG Assessment Committee, which will determine whether the SIMG is eligible for election to Fellowship with the College.

Where the SIMG Assessment Committee determines that a set of MSF responses is not satisfactory, the Committee may determine that the deficiencies identified in the set of MSF responses is such that the SIMG will need to undertake a further additional period of supervised clinical training in the field of emergency medicine.

4. MANAGEMENT OF AN UNDERPERFORMING SIMG

On occasion, SIMGs undertaking a period of specialist practice under peer review, as well as those undertaking upskilling will not perform at the level expected (i.e. underperform). In such circumstances, it is important that the College is notified. While the reports associated with the different SIMG pathways to Fellowship provide a regular opportunity for notifying the College of any concerns relating to the underperformance of an SIMG, any concerns relating to underperformance may also be communicated in writing to the Chair of the SIMG Assessment Committee via the College at any time.

4.1 Work Performance Reports

The SIMG Performance Assessment Report (for substantially comparable) and the SIMG Trainee In-Training Assessment Report (for partially comparable) include space for recording any identified areas in which improvement in performance are required or expected, as well as specific actions and tasks that are proposed to address those issues identified and the date on which these are to be reviewed. As such, the applicable work performance report can be used outside those occasions on which it is formally required by the College to document discussions of performance and plans for improvement. While not mandatory, submission of work performance reports completed in such circumstances (i.e. additional to those required) to the College is encouraged.

4.2 Structured References

In completing a structured reference, referees are asked to specify any areas in which they consider the SIMG that is the subject of the report requires further upskilling or assessment. Individual domain scores of one (1) (‘poor’) or two (2) (‘below expected level’) may be cause for concern despite the overall assessment. As such, domain scores of one (1) or two (2) will be carefully considered by the SIMG Assessment Committee as part of
its review of a set of structured references. For this reason, it is important that referees provide comments as to why they have given such scores. Acknowledging that referees will draw upon different interactions and observations of the SIMG, the comments provided are also important in circumstances where the scores given by the referees differ for any individual domain(s).

5. **RECLASSIFICATION OF AN SIMG**

Where any assessment(s) indicate that an SIMG is unable to work at the appropriate level of their pathway to Fellowship the SIMG Assessment Committee has the discretion to reclassify that individual. That is:

- Where any assessment(s) indicate that an SIMG assessed as Substantially Comparable to an Australian-trained specialist in emergency medicine is unable to work at specialist level in Australia without further training, they may be reclassified by the SIMG Assessment Committee as either ‘Partially Comparable to an Australian-trained specialist in emergency medicine’ or, on occasion, as ‘neither partially nor substantially comparable to an Australian-trained specialist in emergency medicine’ (i.e. ‘Not Comparable’)
- Similarly, where any assessment(s) indicate that an SIMG trainee is unable to function at a level that will enable them to complete the requirements of their pathway to Fellowship within the timeframe permitted, they may be reclassified by the SIMG Assessment Committee as neither partially nor substantially comparable to an Australian-trained specialist in emergency medicine (i.e. ‘Not Comparable’)

In all such cases, the MBA notified of any resulting change in the status of the SIMG.

6. **REMOVAL FROM AN SIMG PATHWAY TO FELLOWSHIP**

In addition to the provision for an SIMG to be reclassified, there is a range of circumstances in which the SIMG Assessment Committee may determine or recommend as applicable that an SIMG is removed from their pathway to Fellowship. SIMGs assessed as Substantially Comparable, as well as SIMGs assessed as Partially Comparable, to an Australian-trained specialist in emergency medicine who commence the requirements specified by the College in order to become eligible for election to Fellowship will be considered for removal from their pathway to Fellowship in any of the following circumstances (Regulations C1.5.9 and C1.6.14 respectively):

- the requirements for eligibility for election to Fellowship are not completed within the specified timeframe;
- they engage in conduct contrary or derogatory to or inconsistent with the principles, ethics, dignity, standards or purposes of the College;
- two (2) work performance reports submitted for the purposes of becoming eligible for election to Fellowship are assessed by the SIMG Assessment Committee as ‘not satisfactory’.

In such circumstances and pursuant to the applicable Regulations, the SIMG will be advised of the ground(s) on which they are to be considered for removal from their pathway to Fellowship and afforded the opportunity to provide a written submission for consideration by the Committee. The Committee will make one of the following recommendations to the Council of Education (COE):

- That, on the basis of the materials presented to it, the SIMG be permitted to remain on their pathway to Fellowship and the revised timeframe in which they are required to complete the requirements of this pathway.
- That, on the basis of the materials presented to it, the SIMG be removed from their pathway to Fellowship.

Where the SIMG is removed from their pathway to Fellowship, this decision will be reported by the College to the MBA as a ‘final assessment’.
7. DOCUMENT REVIEW

Timeframe for review: every two (2) years, or earlier if required.

7.1 Responsibilities

Document authorisation: Council of Education
Document implementation: Director, Education / relevant Unit Manager
Document maintenance: Manager, Standards

7.2 Revision History

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