



Submission

Medical Board of Australia: draft revised Good practice guidelines for the specialist international medical graduate assessment process

Thank you for the opportunity for the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) to provide feedback in relation to the Medical Board of Australia document, draft revised *Good practice guidelines for the specialist international medical graduate assessment process*

RANZCOG is the lead standards body in women's health in Australia and New Zealand, with responsibility for postgraduate education, accreditation, recertification and the continuing professional development of practitioners in women's health, including both specialist obstetricians and gynaecologists, and GP obstetricians.

1. Are the proposed Standards, clearer and easier to read? In particular, are there any areas of the proposed Standards that could be clearer about the precise requirements of the assessment processes?

RANZCOG supports the term "standards" to replace the "guidelines" that is currently used. The new wording helps clarify what is required of the Colleges.

2. Does the rewording and restructure of the comparability definitions make the distinction between substantially comparable, partially comparable and not comparable SIMGs clearer or are they open to interpretation? If they are not clear, how should the definitions be reworded or what additional explanation should be included in the proposed Standards?

The wording provides better understanding as to what is required of RANZCOG during the (specialist international medical graduate) SIMG assessments. The updated definitions provide a better understanding of what is expected of a Substantially and Partially Comparable SIMG. It also clarifies what minimum level of practice is expected for those categories.

The outcome definitions do not address any element of non-technical skills, professional standards and culturally safe and respectful practice. Listed under the interview section point 4, the Colleges are required to assess "non-technical professional attributes including the SIMG's understanding of the importance of culturally safe and respectful practice for the community, including Aboriginal and Torres Strait Islander Peoples". If it is a required area of assessment, then it should be included in the outcome definition.

3. For the definition of substantially comparable, do you support replacing the term 'peer review' with the term 'supervised practice'? If not, please give reasons.

Yes, RANZCOG supports the replacing the term "peer review" with "supervised practice".

4. Do you support a mandatory minimum period of supervised practice for all SIMGs assessed as substantially and partially comparable? If not, please give reasons. If yes, are the minimum periods proposed appropriate? It is fair and reasonable to provide a lesser period of supervision to those applicants who already have experience working in the Australian healthcare environment. RANZCOG agrees with the minimum three-month period as it allows for an appropriate orientation period and allows Colleges the ability to validate that SIMGs are working at the level as expected from the assessment.

For SIMGs found to be substantially comparable RANZCOG usually applies a standard of 12 months unless the applicant has had significant local experience. In that situation the applicant would likely be required to complete a lesser period of supervised practice of six months.

5. Do you support the proposal for a Summary of preliminary findings as part of the comparability assessment process? If not, please give reasons.

RANZCOG does not support the introduction of the Summary of Preliminary Findings document. The summary of findings is a replica of information that is found in the application process and Australian Medical Council (AMC) portal and is an unnecessary administrative task.

Colleges should be transparent with assessment criteria and have application forms that clearly allow applicants to document their training and experience. The summary of preliminary findings puts the burden of proof of eligibility on the Colleges instead of on the applicant, who should be required to submit evidence of eligibility with their applications.

The reconsideration pathway is another option an applicant can use for further communication with RANZCOG to review and discuss areas missed in the original assessment.

When Colleges run programs like SIMG they rely heavily on the input of volunteer Fellows who assist through the assessment process. The College would not endorse additional processes that make the assessment process unnecessarily complicated or arduous as introducing Summary of Findings would be.

This is a significant additional administration task and providing additional information opens Colleges to additional avenues of reconsideration, review and appeal. As this is an additional service Colleges would be required to provide there should be a fee included in the Fee Section or included in the description of the existing fees associated with the preliminary assessments.

6. Is the timeframe for providing a SIMG with a Summary of preliminary findings and the timeframe for receiving feedback from the SIMG appropriate? If not, what should the timeframes be?

If the summary of findings is a requirement as part of the interim assessments, then 14 business days would be an appropriate timeframe.

7. Is the level of information to be included in the Summary of preliminary findings appropriate? Is there any additional information that should be included?

The level of information on the Summary of preliminary findings is appropriate and no further questions are needed. The information provided as part of the summary of findings is a replica of information that has been submitted by the applicant, as well as part of the Report 1 questions and listed on the AMC portal.

8. Is the proposal for when it is appropriate to conduct an area of need assessment only, helpful and appropriate? If not, please give reasons.

RANZCOG supports the Area of Need (AoN) assessment only. As part of the definition of AoN, it would be good to clarify the preferable way to assess applications: interview or paper-based assessment. When assessing AoN the College needs to assess suitability of their position against their training and experience. The College also needs to consider non-technical skills like communication and understanding of the community/cultural

environment in which they will be employed. Assessing the competency for non-technical skills can be challenging when only using a paper-based assessment.

9. Is the proposal for colleges to publish a minimum list of requirements for eligibility to apply for assessment (specialist recognition and area of need) appropriate? Are there any other minimum requirements that should be included?

The SIMG assessment process should be a transparent process that SIMGs understand when applying for assessment. RANZCOG would not be opposed to having eligibility criteria published if it can preface with conditions regarding how we use these criteria.

Regarding skills that are not easily measured and where qualitative answers are required, usually relating to non-technical skills, a broad definition of those areas should be allowed in lieu of a structured criterion.

10. Is the revised guidance on assessing SIMGs for a limited scope of practice clearer? If not, which aspects are unclear and what additional information should be included?

RANZCOG would support the additional information regarding limited scope of practice. The only request for amendment is changing the term “Fellowship” to something more generic e.g. applicable College Qualification. The justification for this change is that not all qualifications awarded by Colleges are Fellowships and the wording implies that if a College is awarding a qualification it must be Fellowship. By only using the word Fellowship will cause conflict with RANZCOG SIMG pathways that assess for limited scope.

11. Is there anything missing that needs to be added to the proposed Standards?

In our experience RANZCOG finds the input and feedback from a Community Member an invaluable part of the SIMG assessment. When undertaking an assessment, the non- technical aspects are considered as part of the comparability assessment and weighted accordingly. Could the proposed standards emphasise the importance of the role the community member plays in the assessment?

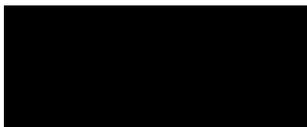
More guidance could be provided for when the Colleges need to reassess or re-categorise a SIMG who is not performing at the expected level.

12. Do you have any other comments on the proposed Standards?

RANZCOG supports most of the changes except for the concerns listed in the above questions. The updates to the wording and expanding on definitions will help RANZCOG perform assessments as intended by Australian Medical Board.

If RANZCOG can assist with any further advice in relation to the Draft revised *Good practice guidelines for the specialist international medical graduate assessment process*, please do not hesitate to contact me.

Yours sincerely,



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President