

Guidelines

2 November 2015

Good practice guidelines for the specialist international medical graduate assessment process

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1. Introduction

The Medical Board of Australia (the Board) has developed these guidelines to support specialist medical colleges in their role of assessing specialist international medical graduates (SIMGs) for comparability to an Australian-trained specialist in the same field of specialty practice. The Board relies on the college assessment to make decisions about whether to grant registration to a SIMG.

The guidelines have been developed in accordance with the objectives and guiding principles of the National Registration and Accreditation Scheme (the National Scheme) and aim to ensure a uniform approach to the assessment process for SIMGs.

The Board has developed separate guidance for Australian and New Zealand medical graduates with overseas specialist qualifications who seek specialist registration in Australia. The guidance is available on the Board's [website](#).

2. Background

The registration of SIMGs is a feature of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The National Law provides for the registration of SIMGs who have successfully completed any examination or assessment required by an approved registration standard to assess a SIMG's ability to competently and safely practise in the specialty.

The Board has decided that the examination or assessment¹ of SIMGs will be undertaken by the specialist medical colleges that are accredited by the Australian Medical Council (AMC). At the request of the Board, the Australian Health Practitioner Regulation Agency (AHPRA) has appointed each AMC-accredited specialist medical college to undertake the assessment of SIMGs. This appointment provides for colleges and their employees and assessors to be indemnified under the National Law for exercising this function in good faith.

3. The objectives and guiding principles of the National Registration and Accreditation Scheme (the National Scheme)

The **objectives** of the National Scheme are defined in the National Law and are:

1. to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered; and
2. to facilitate workforce mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction; and
3. to facilitate the provision of high quality education and training of health practitioners; and
4. to facilitate the rigorous and responsive assessment of overseas-trained health practitioners; and
5. to facilitate access to services provided by health practitioners in accordance with the public interest; and
6. to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.

The **guiding principles** of the National Scheme are as follows:

1. the scheme is to operate in a **transparent, accountable, efficient, effective** and **fair** way;
2. fees required to be paid under the scheme are to be reasonable having regard to the efficient and effective operation of the scheme;
3. restrictions on the practice of a health profession are to be imposed under the scheme only if it is necessary to ensure health services are provided safely and are of an appropriate quality.

¹ Section 59, Health Practitioner Regulation National Law, as in force in each state and territory.

4. The role of the Medical Board of Australia

The Board is responsible for regulating registered medical practitioners in the public interest. The key functions of the Board are to:

1. register medical practitioners who are suitably trained and qualified to practise in a competent and ethical manner
2. investigate concerns about a medical practitioner's conduct, performance or health and take any necessary action to protect the public
3. approve accreditation standards for education providers and their programs of study
4. approve accredited programs of study that provide a qualification for the purposes of registration
5. develop standards, codes and guidelines for the medical profession.

The assessment of SIMGs is an important function for ensuring that applicants for registration are suitably trained and qualified to practise competently and safely in their specialty and at a level comparable with an Australian trained specialist in the same field of practice. The Board relies on the advice of the specialist medical college when considering whether to grant registration to a SIMG.

5. The role of the specialist medical colleges under the National Registration and Accreditation Scheme

Specialist medical colleges are a part of the National Scheme. They:

1. are accredited under the National Law by the AMC
2. provide accredited programs of study approved by the Board as providing a qualification for the purposes of specialist registration
3. are education providers, and as such, have specific status and responsibilities under the National Law
4. have a defined role in the Board's approved registration standard for specialist registration
5. are appointed by AHPRA on behalf of the Board to conduct SIMG assessments.

Being part of the National Scheme means that:

1. the role of the specialist medical colleges is formally recognised in the National Law
2. the National Scheme provides opportunities for collaboration and mutual support
3. the appointment of the specialist medical colleges to assess SIMGs gives the colleges, including their employees, assessors and supervisors, protection from personal liability for exercising this assessment function, providing they act in good faith.

6. The role of the Australian Medical Council (the AMC)

The AMC facilitates:

1. primary source verification of an IMG's medical qualifications
2. the exchange of relevant information between the AMC, the specialist medical colleges and AHPRA through the AMC secure portal. The secure portal is a repository for certified copies of an IMG's qualifications, their primary source verification documents and the outcome of their specialist medical college assessment. AHPRA (on behalf of the Board) accesses the secure portal to source information for the purposes of registration.

7. The role of the National Specialist IMG Committee

The National Specialist IMG Committee is established as a committee of the Board. The terms of reference for the committee are to:

1. review the operation of the assessment of SIMGs (both area of need and specialist recognition assessment) and make recommendations to the Medical Board of Australia
2. consider, consult with stakeholders and in particular specialist colleges, and make recommendations to the Medical Board of Australia about policy issues that arise in relation to the assessment of SIMGs (both area of need and specialist recognition assessment)
3. communicate policy decisions about the assessment of SIMGs to relevant stakeholders
4. enhance communication and dialogue between all major stakeholders
5. explore options for sharing resources in the assessment of SIMGs (both area of need and specialist recognition assessment)
6. monitor and report to the Board on the assessment of SIMGs, including reporting on activity and issues arising
7. coordinate the publication of guidelines for applicants and colleges for the assessment of SIMGs

Specialist medical colleges can raise any issues regarding the operation of the SIMG assessment process with the Board. The Board may refer the matter to the National Specialist IMG Committee.

8. Principles of the assessment process

The assessment of SIMGs must be carried out in a manner that is consistent with the guiding principles defined in the National Law. This includes that the assessment process operates in a way which is:

1. Fair
2. Transparent
3. Efficient
4. Effective, and
5. Accountable.

Further, fees required to be paid are to be reasonable having regard to the efficient and effective operation of the National scheme.

The assessment of SIMGs must be:

1. undertaken in good faith
2. undertaken in accordance with the principles of procedural fairness
3. in accordance with the comparability definitions (Appendix 3), applied consistently by all specialist medical colleges as set out below:

The assessment of comparability is based on the professional attributes, knowledge and clinical skills expected of an Australian trained specialist in the same field of specialist practice.

When assessing a SIMG for comparability, the specialist medical college must consider any training, assessment, experience, recent practice and continuing professional development (CPD) completed by a SIMG to determine whether all these components together will enable the SIMG to practice at a level comparable to the standard expected of an Australian trained specialist commencing in the same field of practice. For example, if a SIMG's specialist training program is of lesser duration to the college program, the college must consider the training and any experience completed after training to determine comparability.

9. Establishing a committee to be responsible for the assessment process

Good practice in the assessment of SIMGs includes specialist medical colleges:

1. establishing a committee or a similar body to be responsible for the assessment process, within the college's overall governance arrangements
2. ensuring that members of the committee have the necessary attributes, knowledge and skills in the assessment of college trainees and understand their college's training requirements and standards
3. ensuring that the committee includes at least one fellow who has completed their specialist training overseas and who has been through the college assessment process and if possible at least one community member
4. implementing a documented governance framework for the operation of the committee. This will include:
 - a. the terms of reference for the committee (including defining its role, responsibilities, structure, standard operating procedures and key relationships i.e. interaction with other college groups)
 - b. procedures for declaring and managing conflicts of interest. For example, individuals involved in the direct supervision / peer review / workplace assessment / employment of a SIMG must not be involved in the decision on whether to recommend the SIMG be granted recognition as a specialist
 - c. the guidelines and procedures for ensuring procedural fairness are afforded to SIMG applicants.

10. The procedures for assessment

Good practice in the assessment process for SIMGs includes documenting clearly and publishing the requirements and procedures for all phases of the assessment process (e.g. paper-based assessment, interview, supervision, examination, appeals etc). The procedures for assessment will be consistent with the Board approved procedures as outlined in the [Guide to the Specialist Pathway](#). The college procedures should include:

1. the requirement for an applicant to apply to have their medical qualifications verified by the AMC through the Educational Commission for Foreign Medical Graduates (ECFMG) Electronic Portfolio of International Credentials (EPIC) or International Credentials Services (EICS) and provide an EPIC or EICS number with their application for assessment
2. a process to ensure the applicant is notified in a timely manner that their application for assessment will not proceed without an EPIC or EICS number
3. a process for monitoring an application to ensure it progresses in a timely manner
4. a process for assessment in each of the following pathways:
 - a. specialist pathway – specialist recognition
 - b. specialist pathway – area of need
5. a statement of the documentary evidence that the applicant is required to submit for assessment under each of the pathways
 - a. the format of documentary evidence required by the college that is also required by the Board should be consistent with Board requirements wherever possible (e.g. requirements for certifying documents, format of curriculum vitae)
 - b. colleges may require proof of English language proficiency to be supplied by applicants before they will commence the assessment process. This requirement should be clearly stated in advice to applicants provided by the college. The standard required will be no higher than that required by the Board's English language skills registration standard
6. documentation of the fees for assessment

7. a clear statement of the assessment standards and criteria against which applicants will be assessed.

Colleges must follow their published procedures. If a college deviates from the published procedures, they must document the reasons as part of their justification for the deviation.

11. Fees

Each college is responsible for setting its own fees. Fees must be consistent with the guiding principles in the National Law. Fees are expected to be reasonable in the context of the effective and efficient operation of the assessment process. The college can charge fees for:

1. the initial review of application documentation
2. the assessment interview
3. formal assessments (e.g. examinations, workplace based assessments)
4. further requirements (e.g. peer review, supervision, upskilling, access to college resources including CPD programs)
5. reconsideration, review and appeal of the outcome.

The college will publish a schedule of fees on its website that includes the cost of each element of the assessment process.

12. Specialist pathway – specialist recognition

This pathway is for IMGs with overseas specialist qualifications who wish to qualify for specialist registration in Australia. The assessment determines whether a SIMG is comparable to an Australian trained specialist in the same field of practice. See Appendix 1 for an overview of the SIMG process.

Assessment of comparability

Good practice in the assessment process involves:

1. assessing SIMGs in accordance with the approved definitions for assessment of comparability to determine whether a SIMG is not comparable, partially comparable or substantially comparable to an Australian trained specialist in the same field of practice. See Appendix 3 for full definitions
2. keeping full and accurate documentation of each stage of the assessment process
3. publishing the information and evidence that the college requires from the SIMG (see section 10 above)
4. only considering evidence that is relevant and been provided for the purposes of assessment. Where a college receives publically available information about a SIMG that may inform the interim assessment decision, such as disciplinary history or conditions recorded on a public register, the college must follow the rules of procedural fairness. This includes providing the SIMG with the information received and giving them an opportunity to make a submission about the information. This process must occur prior to any interview or assessment being undertaken
5. notifying the Board of any information received by the college for the purposes of the interim assessment decision that raises concerns about a SIMG's suitability for registration.

Substantially comparable

SIMGs assessed as substantially comparable may be required to undertake a period of up to 12 months full time equivalent (FTE) practice under peer review by a reviewer/s approved by the college. This may involve the satisfactory completion of workplace-based assessment (WBA).

If the college determines that a SIMG requires more than 12 months (FTE) of peer review to ensure that their level of performance is similar to that of an Australian trained specialist, then the SIMG may not be assessed as substantially comparable and will be assessed as partially comparable or not comparable.

Partially comparable

SIMGs assessed as partially comparable will be required to undertake upskilling with associated assessment under a supervisor(s) and may be required to undertake formal examinations.

If the college determines that a SIMG requires more than 24 months (FTE) of upskilling with associated assessment to reach the level of performance of an Australian trained specialist, then the IMG will be assessed as not comparable.

Not comparable

SIMGs assessed as not comparable require more than 24 months upskilling with associated assessment to reach the level of performance of an Australian trained specialist. SIMGs who are assessed as not comparable can be advised that they may be eligible to apply for medical registration via the Standard Pathway or the Competent Authority Pathway and to contact AHPRA for further assistance.

Interim assessment

Good practice in the assessment of SIMGs involves the specialist medical college conducting an interim assessment of a SIMG to determine comparability² to an Australian trained specialist in the same field of practice.

The interim assessment:

1. includes a review of documentary evidence provided by the SIMG
2. identifies any gaps/deficiencies compared with Australian specialist training
3. takes into consideration a SIMG's scope of practice
4. may or may not include an interview with the SIMG.

In some cases the college may decide not to interview the SIMG because the documentary evidence indicates that the SIMG's training and experience is not comparable to an Australian trained specialist in the same field of practice.

The interview

Following the paper-based assessment the college may interview the SIMG.

The aim of the interview is to:

1. confirm details of the SIMG's qualifications, training, experience, recent practice in the specialty and CPD provided in the written documentation and if necessary, to seek additional detail
2. assess a SIMG's suitability to commence a period of peer review, supervised practice, upskilling, assessment or formal examination.

The interview is undertaken by trained assessors who have been appointed by the college to undertake this element of the assessment. It is good practice to also include a community member on the interview panel.

Process for the interview

Good practice in the interview process requires that:

1. the assessors have reviewed the documentation submitted by the SIMG in detail prior to the interview
2. the assessors collaborate and plan the interview. The assessors will develop and use structured questions based on the information contained in the SIMG's documentation

² Refer to section 8 of this guideline on "Principles of the assessment process" on applying the comparability definitions.

3. the interview is used to explore in greater detail the SIMG's qualifications, training, experience, recency of practice in the specialty, CPD and non-technical professional attributes including the SIMG's knowledge of, respect for, and sensitivity towards, the cultural needs of the community, including Aboriginal and Torres Strait Islander people
4. the SIMG is assessed in accordance with the college's published assessment criteria
5. questions that are not relevant to the college assessment criteria are avoided
6. the SIMG is given an opportunity to ask questions of the interviewers about the process, to ensure that the process is fully understood by the SIMG
7. clinical testing is not undertaken. Clinical testing is the purpose of the period of peer review, supervised practice, upskilling, assessment and/or examination.

Outcome of interim assessment

At the conclusion of the interim assessment process a decision will be made by the college as to whether the SIMG is not comparable, partially comparable or substantially comparable.

If the applicant is assessed as partially or substantially comparable, the college will define the further requirements that need to be met before recommending to the Board that the SIMG be granted recognition as a specialist. The college will inform the SIMG of the interim assessment outcome and additional requirements and will upload its decision using a reporting template developed for this purpose (Report 1 or combined report. See Appendix 4 and 5) to the secure portal for AHPRA to use as part of the registration process.

When communicating the college's further requirements, the college should also inform the SIMG whether the college requires prospective approval of supervisors or positions and what the approval process entails. The college may also inform the SIMG that the college does not have a role in finding the SIMG a suitable post.

Any specified clinical experience and assessment required of SIMGs as part of the college's further requirements should be no more than that required of Australian trainees completing their training. The college should not require a SIMG to complete supervised clinical practice or specific clinical experience that is not required of Australian trainees. Reasons for requiring specific areas of experience should be clearly documented.

Completing additional requirements

Good practice in the assessment process for SIMGs includes:

1. a documented process for monitoring SIMGs during the period of peer review, supervised practice, assessment or formal examination
2. documentation of the mechanisms that will be used to determine whether a SIMG is satisfactorily fulfilling college requirements (e.g. through satisfactory supervisor reports etc).

This period will enable the college to either confirm or modify its interim assessment of comparability and make a final decision on whether to recommend the SIMG be granted recognition as a specialist.

Decision regarding eligibility for specialist recognition

After an SIMG has completed the additional requirements specified by the college in Report 1 or combined report (if applicable) the college will document its recommendation. The college will inform the SIMG of the outcome and will upload its decision using a reporting template developed for this purpose (Report 2 – See Appendix 6) to the secure portal for use by AHPRA for the purposes of registration.

Report 2 will confirm:

1. the college's recommendation on whether the SIMG should be granted recognition as a specialist, or
2. whether the SIMG should be granted recognition as a specialist in a limited scope of practice and any recommendations for conditions on registration (see below), or
3. whether the SIMG is considered not comparable and the reasons, or
4. whether the SIMG has withdrawn from completing the additional requirements specified in Report 1 or the combined report.

A SIMG who has been initially assessed as substantially comparable but who is unable to satisfactorily complete the requirements of the college will as a result be determined to be partially comparable or not comparable.

Options for SIMGs who do not meet college requirements

The college should provide advice to SIMGs who do not meet college requirements to contact AHPRA for further guidance on what their options are for practising in Australia as a medical practitioner.

Recommending a SIMG for specialist recognition in a limited scope of practice

The Board's approved registration standard for specialist registration provides for granting specialist registration in a limited scope of practice within a specialty or field of specialty practice.

Good practice in the assessment of SIMGs includes colleges having a documented policy and process for assessing SIMGs who are practising to a similar standard as an Australian trained specialist practising in a limited scope of practice within a specialty or field of specialty practice. Where a college recommends a SIMG for specialist registration in a limited scope of practice, the Board will impose conditions on the SIMG's specialist registration reflecting the SIMG's limited scope of practice taking into consideration any advice from the college on restricted scope of practice. The conditions will be published on the public Register of Medical Practitioners.

Under section 58(c) of the National Law SIMGs may qualify for specialist registration after successfully completing any examination or other assessment required by the Board. The Board's registration standard for specialist registration provides for granting specialist registration to SIMGs who are assessed by a specialist medical college as competent and safe to practise in the full scope of a specialty or in a limited scope within a specialty or field of specialty practice.

Where a college assesses a SIMG to be practising to a similar standard as an Australian trained specialist in a limited scope of practice, the college may:

1. recommend that a SIMG be granted recognition as a specialist in a limited scope of practice within a specialty or field of specialty practice without awarding fellowship, or
2. consider awarding fellowship in a limited scope of practice within a specialty or field of specialty practice.

Maximum timeframe for completing college requirements

Good practice in the assessment of SIMGs includes defining the maximum timeframe for completing college requirements. The maximum timeframes are:

1. for partially comparable SIMGs - a total of four years to complete up to 24 (FTE) calendar months of supervised practice / upskilling with associated assessment including formal examinations where required
2. for substantially comparable SIMGs - a total of two years to complete up to 12 (FTE) calendar months of peer review / oversight.

The starting point for the maximum timeframes is from the date a SIMG starts practice in a position approved for completion of any college requirements, noting that some colleges may have policies about the length of time permitted to lapse between the interim assessment decision and the start of practice.

Where a college has a policy on the validity period of an interim assessment decision, the college must publish the policy including any requirements for re-assessment of comparability.

The maximum timeframes allow for part-time practice. Any examinations or assessments scheduled after the period of supervised practice / upskilling for partially comparable SIMGs are to be completed within the maximum timeframes. Leave granted for 'exceptional circumstances' is not counted as part of the maximum timeframe.

The college will publish policies for granting extensions for 'interrupted time' or 'exceptional circumstances' consistent with policies for Australian trainees.

Re-assessment of comparability

Good practice in the assessment process for SIMGs includes documenting the policy and process for SIMGs to apply for re-assessment of comparability and the circumstances under which the college will consider applications for re-assessment. Applications for re-assessment should not be confused with an appeal of a college decision on comparability where a SIMG disputes an interim assessment or where the college initiates a re-assessment.

A SIMG may request a re-assessment because there has been a material change to their training and experience since they were initially assessed by the college. A SIMG may apply for re-assessment of comparability only where they can provide evidence of a further significant period of training or experience that is verifiable and acceptable to the college.

13. Specialist pathway – area of need

This pathway is for SIMGs who wish to work in Australia in a designated area of need. The college assesses the SIMG's qualifications and relevant experience against the specified requirements of a position in a confirmed area of need. See Appendix 2 for an overview of the SIMG process.

SIMGs in the specialist pathway – area of need may also apply for specialist recognition assessment. Some colleges may choose to assess SIMGs for both pathways at the same time.

14. Recency of practice

The Board has an approved registration standard for recency of practice. The registration standard requires medical practitioners to have recent practice in the areas in which they intend to work during the period of registration for which they are applying. The specific requirements for recency of practice depend on the field of practice, the level of experience of the practitioner and the length of any absence from the field.

Good practice in the assessment process for specialist SIMGs includes publishing a policy on the college's requirements for recency of practice for the purposes of assessing a SIMG's comparability or assessing an SIMG's suitability for an area of need position.

The college policy should take into consideration the Board's registration standard for recency of practice. A college can develop its own specific requirements for recency of practice on the basis of the specialty involved and the intended scope of practice.

15. Supervision/Peer Review

Good practice in the assessment process for SIMGs includes having guidelines on the supervision or peer review of SIMGs. The guidelines should define:

1. the roles and responsibilities of supervisors, peer reviewers and SIMGs
2. processes for addressing issues arising during the supervision / peer review period
3. the appropriate level of supervision for a SIMG's level of training and experience
4. the requirements for remote supervision (where the supervisor and the SIMG are not located at the same facility).

16. Appeals

The colleges must have a documented and published appeals process that is consistent with the AMC's accreditation standards for the accreditation of specialist medical education providers and their training programs.

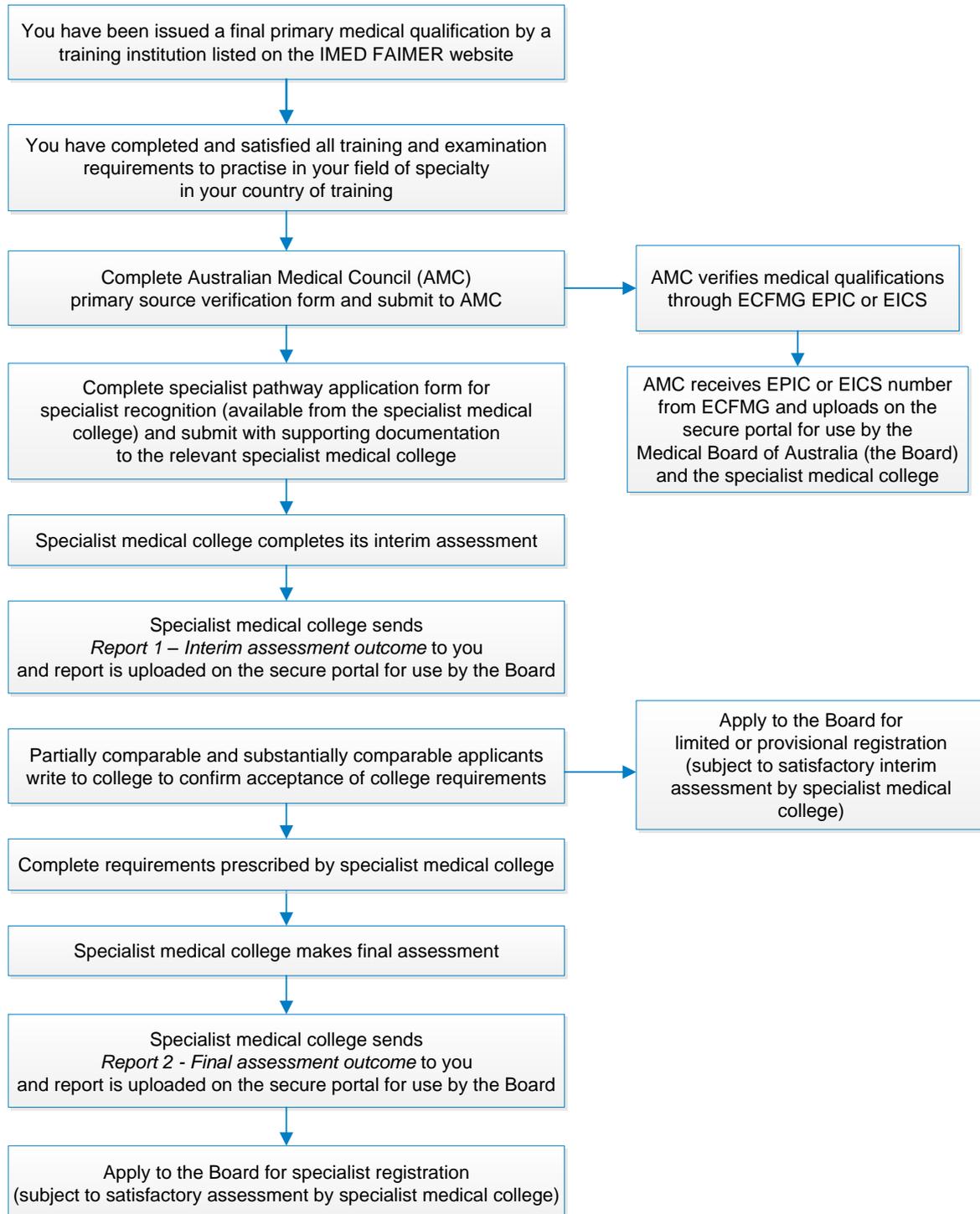
Review

Date of effect: 2 November 2015

Date of review: This guideline will be reviewed from time to time as required. This will generally be at least every five years.

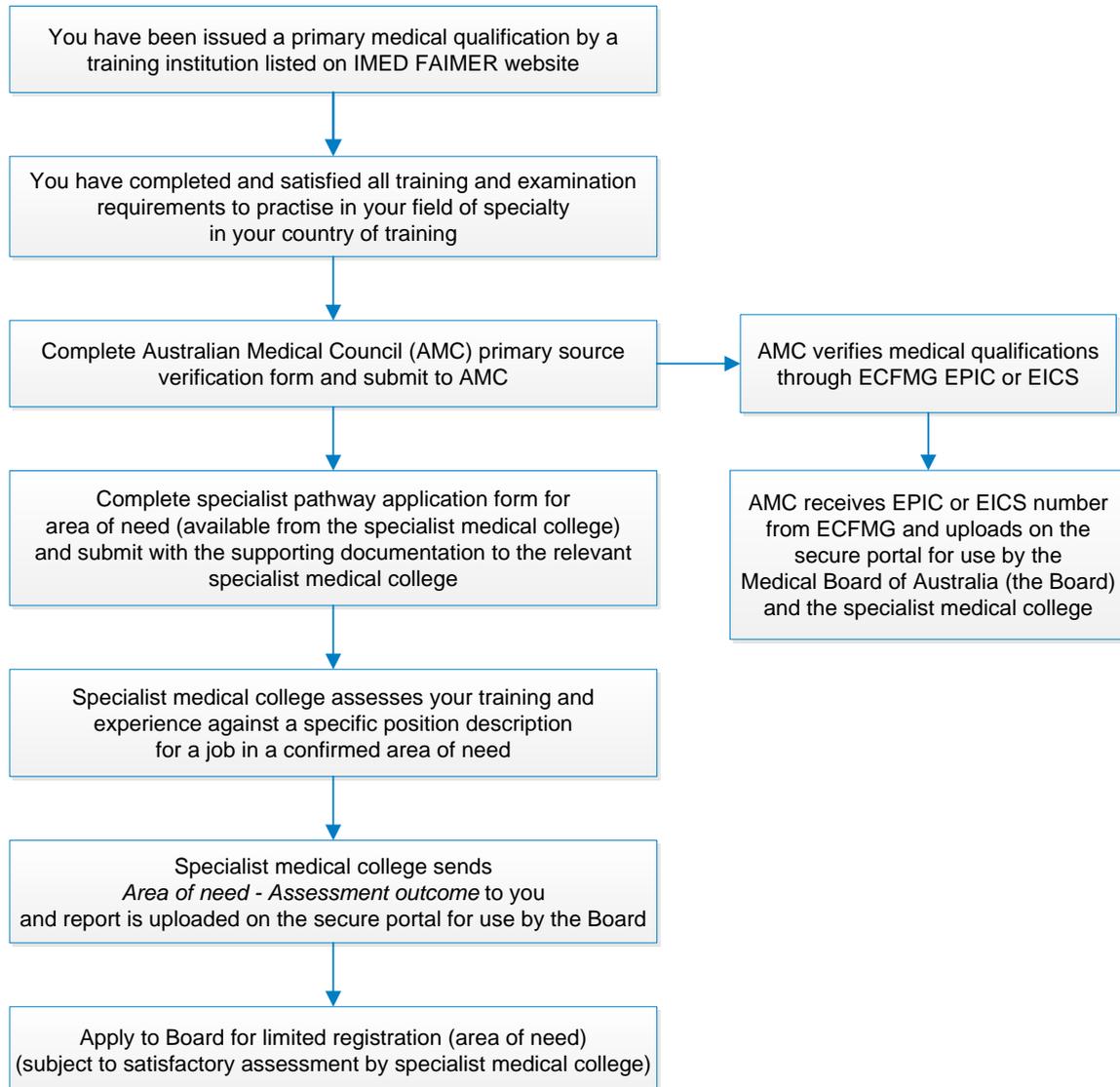
Appendix 1 Specialist Pathway - specialist recognition process for SIMGs

Specialist Pathway - specialist recognition process



Appendix 2 Specialist Pathway - area of need process for SIMGs

Specialist Pathway - area of need process



Appendix 3

Comparability definitions

Substantially Comparable

Substantially comparable applicants have been assessed as suitable to undertake the intended scope of practice, taking full responsibility for individual patients with only oversight of their practice by a supervisor. In order to be considered substantially comparable an applicant must have satisfied the college requirements in relation to previous training, assessment, recent specialist practice and continuing professional development (CPD). The applicant may be required to undertake a period of up to 12 months full time equivalent of practice under peer review by a reviewer approved by the college, which may involve the satisfactory completion of a workplace-based assessment (WBA). This is to ensure that the level of performance is similar to that of an Australian trained specialist, and to assist with their transition to the Australian health system, provide professional support and help them to access CPD. The length of peer review and nature of assessment is up to the individual college to determine on a case-by-case basis, but the peer review period must not exceed 12 months. Following satisfactory completion of this process, the applicant will be eligible for Fellowship of the relevant specialist college without formal examination, and may apply for registration as a specialist.

Substantially comparable applicants will not be eligible to apply for specialist registration during the period of peer review.

Partially Comparable

Partially comparable applicants have been assessed as suitable to undertake a defined scope of practice in a supervised capacity. In order to be considered partially comparable an applicant must have satisfied the college requirements in relation to previous training, assessment, recent specialist practice and continuing professional development (CPD) that will enable them to reach the standard of an Australian trained specialist within a maximum period of 24 months full time equivalent of practice. During this period, the applicant will undertake upskilling with associated assessment under a supervisor(s) approved by the college and may be required to undertake formal examination(s). This is to ensure that the level of performance reaches that of an Australian trained specialist. This period of supervised practice will assist the applicant with the transition to the Australian health system, will provide them with professional support and assist with access to CPD. The length of supervised practice and nature of assessment is up to the individual college to determine on a case-by-case basis, but the supervised practice period must not exceed 24 months full time equivalent of practice. Following satisfactory completion of this process, the applicant will be eligible for Fellowship of the relevant specialist college and may apply for registration as a specialist.

Partially comparable applicants will not be eligible to apply for specialist registration during the period of supervised practice.

Not comparable

Applicants who do not meet the requirements of the relevant specialist college in regard to previous training, assessment, recent specialist practice and continuing professional development (CPD) or who are assessed as unable to reach comparability within 24 months full time equivalent of practice will be assessed as not comparable. They may be eligible to seek registration to practise via another pathway that will enable them to gain general registration, and subsequently seek formal college training and assessment.

Appendix 4

Report 1

Family name
Report date



Report 1

Assessment of international medical graduates Specialist pathway (specialist recognition) Profession: **Medical**

This form should be used for each applicant after interim assessment by an Australian specialist medical college for specialist recognition (comparability assessment).

The college sends a copy of this report to the applicant and uploads a copy on the secure portal.

Applicant details

Date of report	<input type="text"/>
First report or amended report (note version)	<input type="text"/>
AMC candidate number	<input type="text"/>
EICS number	<input type="text"/>
EPIC number	<input type="text"/>
Family name	<input type="text"/>
Given name(s)	<input type="text"/>
Date of birth	<input type="text"/>
Specialty	<input type="text"/>
Field(s) of speciality practice	<input type="text"/>
Name of college undertaking assessment	<input type="text"/>
College division or faculty	<input type="text"/>
Date of completion of interim assessment	<input type="text"/>
Assessment valid until (optional)	<input type="text"/>

Outcome of specialist recognition assessment

On the basis of the review of documentation submitted by the applicant with the college and interview with the applicant (if required):

1. **Is the applicant comparable to that of an Australian trained specialist?**
- No, not comparable - **Provide details below, then no further questions**
 - Yes, substantially comparable - full scope of practice - **Go to question 2**
 - Yes, substantially comparable - limited scope of practice - **Provide details below and go to question 2**
 - Yes, partially comparable - **Go to question 6**

Letter attached

Substantially comparable

2. Is the applicant required to undertake a period of oversight?
- No - *Go to question 3*
- Yes - **What period of oversight is required?** Note: If the applicant requires more than 12 months oversight, the applicant is *partially comparable*
- months (maximum 12 months) - *Go to question 3*
3. Are there any other requirements?
- Yes - *Provide details, then no further questions*
-
- No - *Go to question 4*
4. Does the college recommend that the applicant be granted recognition as a specialist?
- Speciality
- Yes, full scope of practice - *No further questions*
- Yes, limited scope of practice - *Provide details below and go to question 5*
-
- No - *No further questions*
5. Does the college recommend any conditions/limitations on specialist registration, if granted?
- For example, the applicant should be restricted to practise in (name the limited scope of practice and/or any other limitations relevant to the scope of practice)
- Note: The Medical Board of Australia will take the recommendations into consideration when deciding whether to grant specialist registration
- Yes - *Provide details, then no further questions*
-
- No - *No further questions*

Partially comparable

6. Is a period of approved, supervised clinical practice required?
- No - *Go to question 8*
- Yes - **What period of supervised clinical practice is required?**
- Note: If the applicant requires more than 24 months supervised clinical practice, the applicant is *not comparable*
- Note: When determining supervision arrangements, colleges should refer to the Medical Board of Australia's *Guidelines for supervised practice*
- months (maximum 24 months) - *Go to question 7*

7. Is specified clinical experience required during this period?

- No - *Go to question 8*
- Yes - *Specify what is required then go to question 8*

8. Is an examination required?

- No - *Go to question 9*
- Yes - *Provide details below, then go to question 9*

When will it be held (if known)? What will be its timing in relation to any required supervised clinical practice?

What is the format of the examination?
Describe format or provide link to information on website

- To be decided
A decision will be made after reports are received from the supervisors of the clinical practice.
A decision must be made and notified to the applicant before the completion of the supervised clinical training and where this is required to extend beyond 18 months, before 18 months is completed.

9. Are there any other requirements?

- Yes - *Provide details below*

- No

Additional information

Report 1 explanatory notes

Where practicable, this report should be completed within three months of receipt by the college of the complete application for assessment.

Question 1

The college is asked to assess on the basis of the written application and supporting documentation and interview of the applicant by the college (if required), whether the applicant is comparable to an Australian trained specialist (in a full or limited scope of practice).

The college assessment takes into consideration the applicant's intended scope of practice. The college determines whether the scope of practice is appropriate.

An applicant who would require significant additional training or retraining (more than 24 months) should be assessed as not comparable. The applicant should be advised that he or she could apply for one of the other pathways to registration in Australia. Thereafter, the applicant could apply for entry into a college training program and seek recognition of prior learning/training carried out overseas.

Questions 2 and 3

For applicants who are substantially comparable the college specifies a period of oversight

Questions 4 and 5

If no oversight is required, a college must confirm that they recommend that the applicant be granted recognition as a specialist, and any recommendations on scope of practice.

Questions 6 and 7

If an applicant is partially comparable, the college should recommend a period of supervised clinical practice and/or an examination as part of additional assessments.

The college must specify its duration and detail any specific clinical experience required. The applicant's progress, once they are registered, should be monitored on a regular basis by the college through the submission of progress reports. A decision on the requirement for specific clinical experience should be based on evidence from the documentation or interview that the applicant requires upskilling to reach the standard of an Australian trained specialist. In the documentation provided to the applicant by the college, processes for approval of the supervised training and supervisor must be described. The position and the supervision arrangements must also be approved by the Medical Board of Australia as part of the registration application.

Question 8

The college must indicate if an examination will be required or whether this decision will be made towards the end of the period of supervised clinical practice and before 18 months of supervised practice when the total recommended period is 24 months.

The format of the examination must be described.

Definitions

Comparability definitions

Substantially comparable applicants have been assessed as suitable to undertake the intended scope of practice, taking full responsibility for individual patients with only oversight of their practice by a supervisor. In order to be considered substantially comparable an applicant must have satisfied the college requirements in relation to previous training, assessment, recent specialist practice and continuing professional development (CPD). The applicant may be required to undertake a period of up to 12 months full time equivalent of practice under peer review by a reviewer approved by the college, which may involve the satisfactory completion of a workplace-based assessment (WBA). This is to ensure that the level of performance is similar to that of an Australian trained specialist, and to assist with their transition to the Australian health system, provide professional support and help them to access CPD. The length of peer review and nature of assessment is up to the individual college to determine on a case-by-case basis, but the peer review period must not exceed 12 months. Following satisfactory completion of this process, the applicant will be eligible for Fellowship of the relevant specialist college without formal examination, and may apply for registration as a specialist.

Substantially comparable applicants will not be eligible to apply for specialist registration during the period of peer review.

Partially comparable applicants have been assessed as suitable to undertake a defined scope of practice in a supervised capacity. In order to be considered partially comparable an applicant must have satisfied the college requirements in relation to previous training, assessment, recent specialist practice and continuing professional development (CPD) that will enable them to reach the standard of an Australian trained specialist within a maximum period of 24 months full time equivalent of practice. During this period, the applicant will undertake upskilling with associated assessment under a supervisor(s) approved by the college and may be required to undertake formal examination(s). This is to ensure that the level of performance reaches that of an Australian trained specialist. This period of supervised practice will assist the applicant with the transition to the Australian health system, will provide them with professional support and assist with access to CPD. The length of supervised practice and nature of assessment is up to the individual college to determine on a case-by-case basis, but the supervised practice period must not exceed 24 months full time equivalent of practice. Following satisfactory completion of this process, the applicant will be eligible for Fellowship of the relevant specialist college and may apply for registration as a specialist.

Partially comparable applicants will not be eligible to apply for specialist registration during the period of supervised practice.

Not comparable - applicants who do not meet the requirements of the relevant specialist college in regard to previous training, assessment, recent specialist practice and continuing professional development (CPD) or who are assessed as unable to reach comparability within 24 months full time equivalent of practice will be assessed as not comparable. They may be eligible to seek registration to practise via another pathway that will enable them to gain general registration, and subsequently seek formal college training and assessment.

Overseas trained specialist refers to a medical practitioner who has completed specialist training overseas and who is seeking specialist registration in Australia.

Oversight - practice under peer review by reviewer appointed by the college.

Supervised clinical practice is practice in a supervised capacity which, on the basis of the college's interim assessment, is required by an applicant who is considered as 'partially comparable' to an Australian trained specialist. The supervised practice is designed to enable the applicant - within a reasonably short period of time (24 months or less) - to upskill to enable him or her to be further assessed on the basis of his or her equivalence to an Australian trained specialist.

The supervisor provides reports to the college on the applicant's performance in the position. The reports are part of the college's overall assessment processes.

It is important to note that supervised clinical practice is NOT intended to address deficiencies in training and experience in an applicant who is assessed as partially comparable currently entering the Australian workforce - that is, an applicant who would require more than 24 months additional training and experience in order to reach a standard of an Australian trained specialist.

Outcome of specialist recognition assessment

On the basis of the review of documentation submitted by the applicant with the college and interview with the applicant (if required):

2. Is the applicant comparable to that of an Australian trained specialist?

- No, not comparable - *Provide details below, then no further questions*
- Yes, substantially comparable - full scope of practice - *Go to question 3*
- Yes, substantially comparable - limited scope of practice - *Provide details below and go to question 3*
- Yes, partially comparable - *Go to question 7*

Substantially comparable

3. Is the applicant required to undertake a period of oversight?

- No - *Go to question 4*
- Yes - **What period of oversight is required?** Note: If the applicant requires more than 12 months oversight, the applicant is *partially comparable*
- months (maximum 12 months) - *Go to question 4*

4. Are there any other requirements?

- Yes - *Provide details, then no further questions*

- No - *Go to question 5*

5. Does the college recommend that the applicant be granted recognition as a specialist?

Speciality

- Yes, full scope of practice - *No further questions*
- Yes, limited scope of practice - *Provide details below and go to question 6*

6. Does the college recommend any conditions/limitations on specialist registration, if granted?

For example, the applicant should be restricted to practise in (name the limited scope of practice and/or any other limitations relevant to the scope of practice)

Note: The Medical Board of Australia will take the recommendations into consideration when deciding whether to grant specialist registration

- Yes - *Provide details, then no further questions*

- No - *No further questions*

Partially comparable

7. Is a period of approved, supervised clinical practice required?

No - *Go to question 9*

Yes - **What period of supervised clinical practice is required?**

Note: If the applicant requires more than 24 months supervised clinical practice, the applicant is *not comparable*

Note: When determining supervision arrangements, colleges should refer to the Medical Board of Australia's *Guidelines for supervised practice*

months (maximum 24 months) - *Go to question 8*

8. Is specified clinical experience required during this period?

No - *Go to question 9*

Yes - *Specify what is required then go to question 9*

9. Is an examination required?

No - *Go to question 10*

Yes - *Provide details below, then go to question 10*

When will it be held (if known)? What will be its timing in relation to any required supervised clinical practice?

What is the format of the examination? Describe format or provide link to information on website

To be decided

A decision will be made after reports are received from the supervisors of the clinical practice.

A decision must be made and notified to the applicant before the completion of the supervised clinical training and where this is required to extend beyond 18 months, before 18 months is completed.

10. Are there any other requirements?

Yes - *Provide details below*

No

Additional information

Definitions

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Substantially comparable applicants will not be eligible to apply for specialist registration during the period of peer review.

Partially comparable applicants have been assessed as suitable to undertake a defined scope of practice in a supervised capacity. In order to be considered partially comparable an applicant must have satisfied the college requirements in relation to previous training, assessment, recent specialist practice and continuing professional development (CPD) that will enable them to reach the standard of an Australian trained specialist within a maximum period of 24 months full time equivalent of practice. During this period, the applicant will undertake upskilling with associated assessment under a supervisor(s) approved by the college and may be required to undertake formal examination(s). This is to ensure that the level of performance reaches that of an Australian trained specialist. This period of supervised practice will assist the applicant with the transition to the Australian health system, will provide them with professional support and assist with access to CPD. The length of supervised practice and nature of assessment is up to the individual college to determine on a case-by-case basis, but the supervised practice period must not exceed 24 months full time equivalent of practice. Following satisfactory completion of this process, the applicant will be eligible for Fellowship of the relevant specialist college and may apply for registration as a specialist.

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2. Were the other requirements satisfactorily completed?

- Yes - *Go to question 8*
 No - *Go to question 8*
 Not applicable - *Go to question 8*

Additional comments

Applicant's interim assessment outcome was *partially comparable* (report 1)**3. Was a period of supervised clinical practice required?**

- Yes - *Go to question 4*
 No - *Go to question 5*

4. Were the supervised clinical practice and supervisor reports satisfactory?

- Yes - *Go to question 5*
 No - *Go to question 5*

Additional comments

5. Was an examination required?

- Yes - *Go to question 6*
 No - *Go to question 7*

6. Were the examination requirements satisfactorily completed?

- Yes - *Go to question 7*
 No - *Go to question 7*

Additional comments

7. Were the other requirements satisfactorily completed?

- Yes - *Go to question 8*
 No - *Go to question 8*
 Not applicable - *Go to question 8*

Additional comments

All applicants**8. Does the college recommend that the applicant be granted recognition as a specialist?**

Speciality

 Yes, full scope of practice - **No further questions** Yes, limited scope of practice - **Provide details and go to question 9** No**9. Does the college recommend any conditions/limitations on specialist registration, if granted?**

For example, the applicant should be restricted to practise in (name the limited scope of practice and/or any other limitations relevant to the scope of practice)

Note: The Medical Board of Australia will take the recommendations into consideration when deciding whether to grant specialist registration.

 Yes - **Provide details** No**Report 2 explanatory notes**

All the questions in Report 2 simply require a yes or no factual answer. Colleges need to ensure they have documentation that will justify the decisions that are the basis to the answers to these questions.