Pre-employment Structured Clinical Interview (PESCI)

**Report to the Medical Board of Australia**

**IN CONFIDENCE**

This report contains detailed information about the content and outcome of the PESCI. To ensure the integrity of the interview content is not compromised this report must only be provided to the Medical Board of Australia (the Board) and the Australian Health Practitioner Regulation Agency (AHPRA). It must not be provided to the applicant, their employer, sponsor or other third party.

**Please note:** The recommendations of the PESCI panel are specific to the nominated position. An applicant who is not deemed suitable for this position may be suitable for another position. The Board may require a PESCI if the applicant applies to practise in another position.

**Details of the PESCI conducted**

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| Approved PESCI provider |  |  |
|  |  |  |
| Date of interview |  |  |
|  |  |  |
| Name of applicant |  |  |
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| Position sought |  |  |
|  |  |  |
| Employer organisation |  |  |
|  |  |  |
| Position address/location |  |  |
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**Registration type being sought**

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| Limited registration (Area of Need) |  |  |
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| Limited registration (Postgraduate training or supervised practice) |  |  |
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| Provisional registration |  |  |
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**PESCI Panel**

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| PESCI Panel Chair |  |  |
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| PESCI Panel members |  |  |
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**Declaration of any conflicts of interest**

Members of the panel discussed and confirmed that there were no conflicts of interest raised by any member conducting the PESCI.

**Background**

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| **Interview structure** |
| Provide a brief description of how the interview was conducted and the information that was provided to the applicant about the interview process and the process for reporting the outcome. |
| *Add in sample of information* |
| **Applicant’s qualifications and experience** |
| Provide an overview of the applicant’s qualifications and medical practice experience, with specific reference to their relevance to the position for which the PESCI is being undertaken. For example, GP practice experience for a GP position. The overview must also identify any gaps in clinical practice history and/or continuing professional development (CPD). Where gaps in recency of practice have been identified provide information on any recent CPD undertaken by the applicant, including dates and type of CPD. |
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| **Position description** |
| Provide a brief description of the position for which registration is sought. This should include sufficient information to define the level of risk. Include the location, scope and level of the position in sufficient detail to allow a common understanding of the responsibilities for the position by the Board. |
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| **Describe the level of supervision that will be available to the applicant.**  **Medical Board of Australia supervision levels are listed below:**  **Level 1:** The supervisor takes direct and principal responsibility for each individual patient.  **Level 2:** The supervisor shares with the international medical graduate responsibility for each individual patient.  **Level 3:** The international medical graduate takes primary responsibility for each individual patient.  **Level 4:** The international medical graduate takes full responsibility for each individual patient.  For further information on Medical Board of Australia supervision levels [click here](http://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Supervision.aspx). |
| Provide details about the supervision that will be provided to the applicant. Include the name/s of the principal supervisor and any secondary supervisors and the level of supervision that can be provided. |
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| **Orientation to the position** |
| Provide a brief description of the orientation that will be provided. |
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\*If the above information is available in the position description, include the position description in the report.

**Interview report**

The applicant is required to respond to a minimum of four detailed scenarios or a greater number of more simple scenarios (either posed or experiential). The content of the interview must be directly related to the content of the position description.

Provide a summary of each scenario and report the applicant’s response to the scenario.

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| **Scenario 1** |
| Summary of scenario and applicant’s strengths, weaknesses, critical failures, omissions, any general concerns. |
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| **Scenario 2** |
| Summary of scenario and applicant’s strengths, weaknesses, critical failures, omissions, any general concerns. |
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| **Scenario 3** |
| Summary of scenario and applicant’s strengths, weaknesses, critical failures, omissions, any general concerns. |
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| **Scenario 4** |
| Summary of scenario and applicant’s strengths, weaknesses, critical failures, omissions, any general concerns. |
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| **Scenario 5** |
| Summary of scenario and applicant’s strengths, weaknesses, critical failures, omissions, any general concerns. |
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| **Assessment summary** |
| Provide a summary of the assessments and the factors that will lead to the recommendations.  Note that the standard expected of the applicant is one of safe practice, taking into consideration the requirements of the specific position, orientation and supervision that will be available. |
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**Panel’s ratings**

The panel assigns a rating for the applicant’s performance against each domain below, taking into consideration the requirements of the specific position, orientation and supervision.

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| **Medical interviewing skills**  Facilitates patient’s telling of story; effectively listens and uses questions/directions to obtain accurate, adequate information needed; responds appropriately to affect non-verbal cues. | | |
| Tick one box | Rating | |
|  | **5** | Appears highly suitable for this position in this domain |
|  | **4** | Performance level between 5 and 3 |
|  | **3** | Appears suitable for this position in this domain |
|  | **2** | Performance level between 3 and 1 |
|  | **1** | Appears unsuitable for this position in this domain |

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| **Physical examination skills**  Follows efficient, logical sequence; balances screening/diagnostic steps for problem; informs patient; sensitive to patient’s comfort, modesty. | | |
| Tick one box | Rating | |
|  | **5** | Appears highly suitable for this position in this domain |
|  | **4** | Performance level between 5 and 3 |
|  | **3** | Appears suitable for this position in this domain |
|  | **2** | Performance level between 3 and 1 |
|  | **1** | Appears unsuitable for this position in this domain |
|  | **Not assessed** | **Assessment domain not relevant to the position or not able to be assessed** |

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| **Clinical judgment**  Selectively orders/performs appropriate diagnostic studies, considers risks and benefits, arrives at an accurate diagnosis or differential diagnosis and identifies effective management strategies. | | |
| Tick one box | Rating | |
|  | **5** | Appears highly suitable for this position in this domain |
|  | **4** | Performance level between 5 and 3 |
|  | **3** | Appears suitable for this position in this domain |
|  | **2** | Performance level between 3 and 1 |
|  | **1** | Appears unsuitable for this position in this domain |

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| **Treatment/Advice**  Explains rationale for test/treatment, plays attention to obtaining patient’s consent, and to education/counselling regarding management. | | |
| Tick one box | Rating | |
|  | **5** | Appears highly suitable for this position in this domain |
|  | **4** | Performance level between 5 and 3 |
|  | **3** | Appears suitable for this position in this domain |
|  | **2** | Performance level between 3 and 1 |
|  | **1** | Appears unsuitable for this position in this domain |

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| **Communication skills**  Demonstrates clear, sensitive and effective communication skills. | | |
| Tick one box | Rating | |
|  | **5** | Appears highly suitable for this position in this domain |
|  | **4** | Performance level between 5 and 3 |
|  | **3** | Appears suitable for this position in this domain |
|  | **2** | Performance level between 3 and 1 |
|  | **1** | Appears unsuitable for this position in this domain |

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| **Professionalism**  Demonstrates professional values and ethical behaviours consistent with *Good Medical Practice: A Code of Conduct for Doctors in Australia.* | | |
| Tick one box | Rating | |
|  | **5** | Appears highly suitable for this position in this domain |
|  | **4** | Performance level between 5 and 3 |
|  | **3** | Appears suitable for this position in this domain |
|  | **2** | Performance level between 3 and 1 |
|  | **1** | Appears unsuitable for this position in this domain |

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| **Procedural skills**  Demonstrates safely performing a range of procedural skills relevant to situations expected to be encountered in the position. | | |
| Tick one box | Rating | |
|  | **5** | Appears highly suitable for this position in this domain |
|  | **4** | Performance level between 5 and 3 |
|  | **3** | Appears suitable for this position in this domain |
|  | **2** | Performance level between 3 and 1 |
|  | **1** | Appears unsuitable for this position in this domain |
|  | **Not assessed** | **Assessment domain not relevant to the position or not able to be assessed** |

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| **Other domain relevant to the position**  For example, understanding of medical practice in rural areas or familiarity with social and cultural idioms.  **Describe:** | | |
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| Tick one box | Rating | |
|  | **5** | Appears highly suitable for this position in this domain |
|  | **4** | Performance level between 5 and 3 |
|  | **3** | Appears suitable for this position in this domain |
|  | **2** | Performance level between 3 and 1 |
|  | **1** | Appears unsuitable for this position in this domain |

**Panel’s recommendation/s**

The report of this PESCI outcome will form part of the information that the Board will take into account when considering whether to grant limited or provisional registration. The Board is ultimately responsible for granting medical registration in accordance with the provisions of the National Law and the relevant registration standard.

**Recommendation**

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| Provide a recommendation about the applicant’s suitability or unsuitability for the position, giving reasons.  Note that the standard expected of the applicant is one of safe practice, taking into consideration the requirements of the specific position, orientation and supervision that will be available. |
| **Suitable** (provide reasons) **Unsuitable** (provide reasons) |
| Where the applicant has been deemed unsuitable in one or more domain necessary for the position and is deemed suitable for the position, please explain why the panel still considers the applicant suitable for the position. |
| **Reasons** |
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| **If suitable, supervision recommendation/s**  The panel provides feedback about whether or not the proposed supervision arrangements are appropriate in the circumstances. If the panel considers that the proposed supervision arrangements are not appropriate, the panel should provide a recommendation to the Board on the appropriate level of supervision. The panel’s proposal should be made in accordance with the Board’s *Guidelines - Supervised practice for international medical graduates*. | |
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| **If suitable, recommendations relating to after hours/on call participation (if applicable)**  Where a position involves after hours or on call participation, the panel is asked to provide a recommendation as to whether the applicant is suitable to undertake these duties from the date registration is granted, or whether a period of supervised practice should occur, prior to the applicant commencing these duties – e.g. 3 or 6 months. The panel’s proposal should be made in accordance with the Board’s *Guidelines - Supervised practice for international medical graduates*. |
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| **If suitable, other recommendation/s**  The panel provides specific recommendations (if necessary) for orientation, pre-commencement courses, clinical placements or cultural training which is necessary for the applicant to practise safely and effectively in the position. When providing recommendations about further training, the panel should ***specify the name of the course, the details of the location, the duration and at which point in time the course must be undertaken by the applicant***. For example, before the start of employment or 3/6 months into the employment etc. |
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| **Signature of the PESCI Panel Chair** | | |
|  |  | **Date** |
|  | **/ /** |
| **Print name** | | |
|  | | |

[Insert Approved PESCI Provider Name]

Address:

Phone:

Contact Person: