Intern training – Assessing and certifying completion

Introduction

This document details requirements for assessing interns participating in accredited intern training programs, and for certifying completion of internship. It should be read in conjunction with:

- Registration standard – Australian and New Zealand graduates
- Intern training – National standards for programs
- Intern training – Intern outcome statements
- Intern training – Term assessment form
- Intern training – Guidelines for terms.

Assessing interns

Notes on terminology

Interns can complete supervised terms and training in various health care settings, including hospitals, general practices and community-based medical services. In this document, the key roles in the intern assessment process are those commonly used in hospitals:

- **Director of Medical Services**, for the senior medical administrator who leads the medical workforce at a facility
- **Director of Clinical Training**, for the individual with responsibility for implementing the intern training program
- **Term Supervisor**, for the senior clinician responsible for intern orientation and assessment during a particular term.

These roles, albeit with different titles, will apply in non-hospital settings and the requirements in this document apply accordingly.

These national standards use the terms specified in the glossary at the end of the document.

Assessment approach

The basis for this assessment approach is contained in Intern training – National standards for programs. Standard 5.1.1 requires assessment that is consistent with the Registration standard – Australian and New Zealand graduates. Assessment must be based on interns achieving outcomes stated in Intern training – Intern outcome statements (5.1.2) and it must be understood by supervisors and interns (5.1.3).
Therefore, assessing interns has three distinct imperatives:

- First, the process must be clear and transparent for all involved.
- Second, assessment must capture the essential information that intern training providers must provide to the Medical Board of Australia for determining whether interns have met the registration standard. See page 4 for more information.
- Third, the assessment process must be based on outcomes consistent with the national standards. To achieve this, interns must be assessed against the **Intern training – Intern outcome statements**.

**Assessment forms**

Assessment of intern training is work-based and term supervisor reports have a key function. In this national registration system a consistent approach to assessment is supported with a nationally available tool, the **Intern training – Term assessment form**. The form’s development was informed by the work of the Confederation of Postgraduate Medical Education Councils (CPMEC) during 2008 and 2009, literature on assessment, and stakeholder feedback on draft forms and draft guidance during 2012 and 2013.

**Scoring**

The **Intern training – Term assessment form** requires intern performance to be rated against the intern outcome statements on a five point scale (1–5). The form provides behavioural anchors for each outcome statement for scale points 1, 3 and 5. Supervisors should refer to these anchors to assist them in allocating ratings and providing appropriate feedback.

The form also requires a global score to assist in determining overall satisfactory performance, as required in the **Registration standard – Australian and New Zealand graduates**. In assigning global scores, term supervisors should consider both the individual 1–5 ratings on the assessment form, and the global abilities of interns to:

- practise safely
- work with increased levels of responsibility
- apply existing knowledge and skills
- learn new knowledge and skills as required.

Global scores should be based on a clear understanding of the intern’s role as a supervised, beginning practitioner who is not yet fully independent, and the accumulated knowledge and judgement of term supervisors from their experience in intern training and assessment. Global scores should be assigned at three levels:

- Satisfactory – the intern has met performance expectations in the term.
- Borderline – further information, assessment and remediation may be required before the intern can demonstrate they meet performance expectations in the term.
- Unsatisfactory – the intern has not met performance expectations in the term.

**Local forms**

Intern training providers may substitute locally developed forms for the national form. In such cases, the providers must demonstrate the locally developed forms meet national standards 5.1.1, 5.1.2 and 5.1.3.

**Assessor training**

Under national standard 5.3, intern training providers must have processes for ensuring those assessing interns have the relevant capabilities and understanding of the processes involved.
Intern training providers should therefore incorporate specific training in using assessment forms, whether nationally or locally developed, in their supervisor support and development programs, in addition to general training in assessment and feedback skills. Training may also include supervisor 'frames of reference' and calibration of ratings to improve reliability and validity of the assessment processes.

**Feedback and performance review**

National standards 5.2.1–5.2.6 address feedback and performance review. Intern training providers must:

- provide regular feedback to interns on their performance (5.2.1)
- document assessment performance (5.2.2)
- ensure feedback from supervisors is received each term (5.2.3)
- encourage interns to take responsibility for their own performance and to seek feedback (5.2.4)
- have clear procedures to immediately address patient safety concerns (5.2.5)
- identify interns who are not performing to the expected level and organise early appropriate remediation (5.2.6).

To meet these standards, term supervisors should assess interns at the end of each term. For terms longer than five weeks, term supervisors should also assess interns at the term’s mid-point. Interns should also complete self-assessments of their performance, and discuss these with the term supervisor at the mid-term (if relevant) and end-of-term assessment meetings. Feedback should be provided to interns at these meetings.

The Director of Clinical Training (or equivalent) should review term supervisor assessments with assistance, where possible, from medical education officers. Interns with satisfactory global scores continue in their internship.

**Remediation**

Where the term supervisor identifies a performance issue, early remediation is essential. The Director of Clinical Training (or equivalent) should discuss the circumstances with the term supervisor and the intern, and implement a tailored plan to improve performance. The plan should document the specific actions and deadlines jointly agreed to improve the intern’s performance, and enable progress to be tracked. A plan such as the Improving Performance Action Plan (IPAP) available on the AMC website.

Additional remediation is required where there is continuing concern about an intern’s performance. Normally, the Director of Clinical Training would make this decision, initiate the remediation, and communicate the requirements directly to term supervisors and the Director of Medical Services. Additional remediation is indicated when intern performance:

- does not meet the requirements of one of the terms, and/or
- does not satisfy the requirements of a previous remediation plan, and/or
- raises sufficiently complex issues during the scheduled term supervisor assessment to require more detailed consideration and action.

Additional remediation may include undertaking a period of very close supervision and/or additional work in emergency medical care, medicine and surgery in lieu of other terms or experiences.

There may be circumstances where the intern training provider considers it not appropriate to offer the intern additional remediation within that employment period, or that remediation is unlikely to be successful. The intern training provider should report this to the Medical Board of Australia, using the same process of certifying completion of internship described below.
All decisions regarding additional remediation or non-completion of a term must be clearly documented and communicated directly to the Director of Medical Services. This will ensure that the employer is informed about these aspects of intern performance.

**Notifiable conduct**

The requirement under national standard 5.2.5 to immediately address concerns about patient safety will require action beyond remediation, including possible withdrawal of an intern from the clinical context. Intern training providers and employers must also be aware of sections 141 and 142 of the *National Law*. This requires registered health practitioners and employers to make notifications about registered medical practitioners who have engaged in ‘notifiable conduct’ as defined in section 140 of the *National Law*. Notifiable conduct by interns must be reported to the Medical Board of Australia immediately.

**Assessment review and quality**

Under national standard 5.2.7, intern training providers must establish review groups to assist with more complex decisions on remediation. A senior clinician with experience in educating and training interns should chair the group. Given the close nexus between training and employment concerns in internship, the review group should include employer representatives and relevant educators. Assessment review groups should have clear and transparent procedures for deciding on any course of action and for resolving disputes and appeals.

National standard 5.1.4 requires intern training providers to use intern assessment data in improving intern training programs. This should include centralised tracking and collating of assessment forms, and analysing assessment outcomes. The data should be reported to the health service and should inform intern supervisor training and support processes. Assessment review groups, or the committee with oversight of intern education and training, may undertake these functions.

**Certifying completion of intern training**

Intern training providers are required to certify completion of internship. On the basis of the information provided, the Medical Board of Australia makes the decision on granting general registration to the intern. The form for use in certifying internship completion, *Certificate of completion of an accredited internship*, is available on the Medical Board of Australia’s website.

The Medical Board of Australia requires only the completion of the *Certificate of completion of an accredited internship* form. Term assessment reports and supporting documentation, including outcomes of remediation, should be stored by the training provider in the case that additional information is sought by the Board.

The Medical Board of Australia’s requirements for certification, as per the *Registration standard – Australian and New Zealand graduates*, are summarised below:

- Evidence the intern has satisfactory completed at least 47 weeks equivalent full-time experience in supervised clinical practice.
- Evidence the intern has performed satisfactorily under supervision in terms that provide 8 weeks’ experience in emergency medical care, 10 weeks in medicine and 10 weeks in surgery.
- Written confirmation that the intern has met the above requirements, including satisfactory Term Supervisor reports, and an overall satisfactory rating awarded by the Director of Clinical Training, the Director of Medical Services or other authorised person.
The Medical Board of Australia has further clarified these requirements as:

Term supervisors are expected to indicate whether interns have satisfactorily ‘passed’ each term, but the Medical Board will consider the totality of advice in deciding whether to grant general registration. An intern who has performed marginally or unsatisfactorily in a specified term but who has demonstrated ‘significant’ progress with evidence of remediation may be deemed to have met the standard expected for general registration by the end of the year.

This additional clarification allows for a longitudinal approach to assessment during internship. Intern training providers may indicate that a particular term has not been completed satisfactorily. However, if remediation has been successful the provider may tick the box at the end of the Medical Board of Australia’s Certificate of completion of an accredited internship indicating that the intern has met the standards expected for general registration at the end of the year.

Supporting documents

The following references are mentioned specifically within this document:

- Registration standard – Australian and New Zealand
- Intern training – National standards for programs
- Intern training – Intern outcome statements
- Intern training – Term assessment form
- Intern training – Guidelines for terms
- National Law

Full information for all documents relevant to the intern training suite is available below.
## Intern training reference documents

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**Next review of this document**

By December 2017.

**Approval**

Australian Medical Council – 16 September 2014
Medical Board of Australia – 24 September 2014
### Glossary

<table>
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<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td><strong>Assessment</strong></td>
<td>The systematic process for measuring and providing feedback on the intern’s progress or level of achievement. This assessment occurs in each term against defined criteria.</td>
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<tr>
<td><strong>Global rating</strong></td>
<td>A rating based on the overall performance of the intern against the requirements for general registration. It is based on the assessor's accumulated experience in supervising and assessing interns.</td>
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<tr>
<td><strong>Descriptions</strong></td>
<td>Phrases used to describe the behaviour/s that will have been observed by the supervisor and/or others to indicate the intern is performing at the specific level.</td>
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<tr>
<td><strong>Certification</strong></td>
<td>The final sign-off to the Medical Board of Australia that the intern has completed the statutory requirements for general registration.</td>
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<td><strong>Clinical supervisor</strong></td>
<td>A medical practitioner who supervises the intern while they are assessing and managing patients. The AMC defines a suitable immediate clinical supervisor as someone with general registration and at least three years' postgraduate experience. The Primary Clinical Supervisor should be a consultant or senior medical practitioner.</td>
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<tr>
<td><strong>Director of Clinical Training</strong></td>
<td>A senior clinician with delegated responsibility for implementing the intern training program, including planning, delivery and evaluation at the facility. The Director of Clinical Training also plays an important role in supporting interns with special needs and liaising with term supervisors on remediation. Also known as the Director of Prevocational Education and Training (DPET) in some states. Other terms may be used in community or general practices.</td>
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<tr>
<td><strong>Director of Medical Services</strong></td>
<td>A senior medical administrator who leads the medical workforce at a facility and certifies an intern has satisfactorily completed an accredited internship. Also known as the Executive Director of Medical Services (EDMS). Other terms may be used in community or general practices.</td>
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<tr>
<td><strong>Formal education program</strong></td>
<td>An education program the intern training facility provides and delivers as part of the intern training program curriculum. Sessions are usually weekly and involve a mixture of interactive and skills-based face-to-face or online training.</td>
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<tr>
<td><strong>Intern</strong></td>
<td>A doctor in their first postgraduate year and who holds provisional registration with the Medical Board of Australia.</td>
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<tr>
<td><strong>Intern training program</strong></td>
<td>A period of 47 weeks of mandatory, supervised, work-based clinical training that includes medicine, surgery and emergency medical care terms to meet regulatory requirements. The program also includes orientation, formal and informal education sessions and assessment with feedback, and it may be provided by one or more intern training providers. Also called PGY1.</td>
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<tr>
<td><strong>Intern training provider</strong></td>
<td>The organisation that provides supervised clinical practice, education and training, and that is responsible for the standard of the intern training program. Providers may be a hospital, community, general practice setting, or a combination of these.</td>
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<tr>
<td><strong>PGY</strong></td>
<td>Postgraduate year, usually used with a number to indicate the number of years after graduation from medical school. For example, PGY1 is the first postgraduate year, also known as internship.</td>
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<tr>
<td><strong>Term</strong></td>
<td>A component of the intern training program, usually a nominated number of weeks in a particular area of practice. Also called clinical rotation, post, or placement.</td>
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<tr>
<td><strong>Term Supervisor</strong></td>
<td>The person responsible for intern orientation and assessment during a particular term. They may also provide clinical supervision of the intern along with other medical colleagues.</td>
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