

5 February 2015

Executive Officer, Medical AHPRA GPO Box 9958 Melbourne VIC 3001

By email: medboardconsultation@ahpra.gov.au

Dear Dr Katsoris,

Public consultation - Draft Guidelines Supervised practice for IMGs

Please see below some comments from the Royal Australasian College of Physicians on the draft guidelines on supervised practice for IMGs.

Thank you for the opportunity to comment on this document.

Should you wish to follow-up on these comments, please contact Ms Janice Charlton, Senior Executive Officer, Overseas Trained Physicians Unit (<u>janice.charlton@racp.edu.au</u>, 02 8247 6287) who would be pleased to answer any enquiries.

Regards,

Linda Smith

Chief Executive Officer, RACP

L. Smith



RACP response - MBA consultation on the draft revised 'Guidelines – Supervised practice for international medical graduates

Questions		Responses	
1.	Are the proposed restrictions on the number of IMGs a supervisor can supervise reasonable?	 The proposed restrictions on the number of IMGs that can be allocated to a supervisor set an appropriate upper limit to allow suitable capacity for effective supervision. The flexibility for supervisors to propose arrangements outside the guidelines is helpful in being able to consider exception circumstances that may arise. 	
3.	It is proposed that the guidelines specify when an IMG on level one or two supervision must consult their supervisor about the management of patients – for level one at the time of the consultation before the patient leaves, and for level two on a daily basis. Is this reasonable, if not, when should they consult their supervisor? Is it reasonable to require that if the position is in a general practice, the practice (not the position) must be	 The proposals for when IMGs under level one and level two supervision must consult supervisors on the management of patients appear to be a reasonable approach in terms of ensuring patient safety and quality of care, but could raise feasibility issues in busy services. No comment (not a matter for RACP). 	
	accredited to the RACGP Standards for General Practice (4 th edition)?		
Ad	ditional points		
Applicability of the proposed guidelines and templates to IMGs on the specialist pathway		Section 7.4 refers to 'Format of reports' and states that IMGs on the specialist pathway should 'follow the supervision and feedback requirements defined by the specialist college'. Section 7.4 is the only place where there is specific mention of specialist IMGs, and this may produce some ambiguity in the workplace about which procedures they should be following and which forms they should be using.	
		For example, Sections 3.3 and 3.4 refer to 'Principal supervisor' and 'Co-supervisor' and approval by the Board. Clarity is needed on how these requirements apply as part of specialist college requirements of SIMGs under peer review. Does the College's selection of peer reviewers need to be approved by the Board, or	

	is the appointment of supervisors considered a separate matter? It would be helpful to have a separate section in the guidelines that specifically addressed the circumstances of SIMGs on the specialist pathway, clarifying such matters as: o how the guidelines and templates apply to SIMGs o whether/when specialist college procedures and forms can be used o the role of the Colleges in setting supervisory (peer review) standards for SIMGs on the specialist pathway.
MBA Online education and assessment module (page 8)	Will peer reviewers of SIMGs be required to do the MBA online module for supervisors? Would training provided by specialist colleges be considered an acceptable alternative, if MBA requirements were met?
Audit of supervision arrangements (page 13)	If peer reviewers overseeing IMGs are subject to audit requirements, the RACP would like to have more information about the process and documentation required so that we can inform our peer reviewers.
Comments on Orientation report for IMGs (pages 21-22)	 Page 21 – Some of the tick boxes do not relate to all IMGs and may need to have 'N/A' as an option. For example a Public Health Physician would not require a doctor's bag. Page 22 – The tick box for child protection should be placed under Legislation and Professional Practice rather than under Cultural Diversity where it currently appears.