



Return to practice report for specialist international medical graduate (SIMG)

Personal details

SIMG name					
College ID					
Hospital					
FTE	1.0 FTE	0.75 FTE	0.5 FTE	Other	
Supervisor's name					
Period of assessment	From [.]		To.		

Criteria

Medical Expert	Score
Knowledge – basic science	
Knowledge – clinical medicine	
Knowledge – clinical anaesthesia	
Patient care – pre-assessment and consent	
Patient care – intraoperative management	
Patient care – postoperative management	
Vigilance	
Crisis management	
Problem solving/decision –making	
Infection control	
Documentation	



Communicator	
Interaction with patients	
Collaborator	
Team interaction and co-operation	
Manager	
Organisation /efficiency	
Professional	
Professionalism	
Integrity	
Insight	
Ethical behaviour	
Advocate	
Advocate	
Scholar	
Scholar	
Suitability for that particular position	

Confirmation of completion of orientation (application to first three month CPA report only)

Limitation of practice

Comments



Supervision

At the time of observation of Dr______'s practice he/she was assessed as suitable to practice (tick of the below)

With 1:1 supervision.

With on-site supervision.

With remote supervision.

Independently (even though remote supervision may be available).

Supervisor's name	SIMG name
Signed	Signed
Date	Date

INSTRUCTIONS FOR COMPLETING THE RTP FORM

SIMG name

This field must contain the first and surname of the specialist international medical graduate. If your name has changed since registration by marriage or deed poll, and you have not yet notified the College, you must include a copy of your marriage certificate or change of name notice.

Hospital

This field must contain the name of the hospital (not the area health service) that has been approved for this return to practice (RTP) period. The hospital name must be written in full and must not be written as an acronym.

If the RTP period has been undertaken in more than one location, please list all locations in this field.

Assessors' name

This field must contain the first and surname of the assessor conducting this assessment. This assessor must be the international medical graduate specialist's nominated supervisor as listed on their position description. If the person completing this report is not the international medical graduate specialist's nominated supervisor justification for this must be attached to the report. Please note that if someone other than the nominated supervisor completes this report, the period may not be counted towards the required clinical practice assessment period.

Period of assessment

Must be written as day/month/year. RTP reports must be submitted monthly throughout the RTP period unless otherwise specified by the College.

Explanation of criteria

- Knowledge basic science
- Knowledge clinical medicine
- Knowledge clinical anaesthesia

• Patient care - pre-assessment and consent

Performs a complete and appropriate assessment of the patients and presents well-documented findings, explains procedure to patient and obtains adequate informed consent.

- Patient care intraoperative management
- Patient care postoperative management

Arranges and documents plans for postoperative care, prescribes and documents appropriate postoperative pain management.

Vigilance

Demonstrates situational awareness through constant monitoring of the patient, procedure and other personnel avoiding distraction.

Crisis management

Manages crises appropriately, practises to reduce medical error, complies with College and hospital protocols and guidelines.

• Problem solving/decision-making

Demonstrates sound judgment and sound clinical decisionmaking.

Infection control

Demonstrates aseptic/clean techniques and standard (universal) precautions.

Documentation

Comprehensively, concisely and legibly documents relevant matters.

• Interaction with patients

Develops trust and rapport, accurately elicits, synthetises and conveys relevant information, develops a common understanding of issues, problems and plans.

• Team interaction and co-operation

Participates effectively and appropriately in an interprofessional healthcare team, consults, negotiates and enlists other team members' co-operation.

• Organisation/efficiency

Creates a well-organised workspace, works efficiently and effectively, prioritises cases effectively.

Professionalism

Shows respect for confidentiality and privacy of patients and colleagues, is punctual, works in a calm and considered manner, responds promptly to requests for assistance.

Integrity

Honest and reliable verbal and written communication. Maintains contact so readily available when needed.

Insight

Recognises the limits of their experience and expertise, knows when to seek assistance.

Ethical behaviour

Responds appropriately to ethical issues encountered in practice, demonstrates cultural sensitivity, adheres to the regulatory framework of their practice.

Advocate

Advocates for treatment and care that is in the best interests of the patient, respects patient's privacy and dignity, actively promotes safety and risk reduction, uses opportunities in their practice to promote health and prevent disease.

Scholar

Commitment to reflective learning, participation in teaching (as available).

Scoring

Please enter a score of 0-5 for each of the criteria listed on the clinical practice assessment report. Below is an explanation of the scoring system.

5 = excellent This means that the specialist international medical graduate is performing better than most fellows of ANZCA of comparable age and/or experience.

4 = **above average** This means that the specialist international medical graduate is performing better than some fellows of ANZCA of comparable age and/or experience.

experience. **3** = average This means that the specialist international medical graduate is performing at a comparable level to an ANZCA-trained anaesthetist in a similar position (trainee or Fellow of ANZCA).

Examples:

• If the specialist international medical graduate is employed at an advanced trainee equivalent level they are performing at a similar level to that which is expected of an ANZCA provisional fellow (fifth year of anaesthetic training).

• If the specialist international medical graduate is employed in a specialist or Area of Need specialist position they are performing at a similar level that which is expected of a Fellows of ANZCA.

2 = below average This means that the specialist international medical graduate is performing at a level lower than is expected for the position for which they are employed (see examples above).

1 = *poor* This indicates that there are major concerns regarding quality of practice.

0 = not assessed This indicates that during the assessment period you have not been able to sufficiently observe the specialist international medical graduate fulfilling the requirements of the particular criterion. This is most likely in the assessment of crisis management.

If you give a score of 1, 2 or 5 for any criteria you must include a justification in the comments section of this report.

Orientation

- in Australia to AHPRA MBA Form: ORIG-30 orientation report for specialist international medical graduates with limited or provisional registration.
- In New Zealand this will be part of the job description required by MCNZ for approval of the initial position.

ANZCA request only that confirmation of completion of orientation activities is indicated by marking the tick box on the first CPA report at 3 months.

Limitations to practice

You should include any limitations to practice in this section. These may include:

• Subspecialty anaesthesia where there is minimal recent experience.

• Contemporary technical procedures that are expected of a Fellows of ANZCA.

Comments

Please include any comments that support this assessment in the comments section. Please attach additional pages if required.

Supervision

In assessing the level of independence, you must select only one option from those listed.

Signatures

This assessment must be discussed between the assessor and the specialist international medical graduate and must be signed by both parties following the discussion. RTP reports that are not signed by both parties may not be accepted towards the clinical practice assessment period.