



# **Standards:** Specialist medical college assessment of specialist international medical graduates

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## 1. Introduction

Specialist medical colleges have an important role in assessing specialist international medical graduates (SIMGs). Assessment of individual SIMGs by colleges is a high stakes exercise as it informs the decision of the Medical Board of Australia (the Board) about whether to grant specialist registration.

These Standards have been developed to support colleges in conducting assessments of SIMGs. They explain what the Board expects of colleges when they are assessing SIMGs.

The Standards 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 consistent and fair approach to the assessment of SIMGs.

The Board recognises that assessing SIMGs can be complex. SIMGs have trained in a range of countries and health systems whose specialist education do not necessarily align with current Australian specialist training. When assessing SIMGs, colleges have to take into consideration a range of factors in addition to the SIMG's previous training and assessment. These additional factors include their experience, recent specialist practice and continuing professional development (CPD) activity since they obtained a specialist qualification. They also need to take into consideration the SIMG's intended scope of practice. Each assessment is therefore unique.

## 2. Background

The National Scheme was established to provide for public protection and an Australian health workforce that is responsive and flexible. The Health Practitioner Regulation National Law, as in force in each State and territory (the National Law) gives effect to the National Scheme.

The registration of SIMGs is a feature of 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 a specialty.

The Board has decided that the examination or assessment<sup>1</sup> of SIMGs will be conducted 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 conduct 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.

The specialist medical colleges are expected to conduct the assessment of SIMGs in a manner that is consistent with these Standards and the objectives and guiding principles of the National Scheme as defined in the National Law.

The roles of the Board, Ahpra, the National Specialist International Medical Graduate Committee (a committee of the Board), the AMC and the specialist medical colleges are summarised in [Appendix 1](#).

## 3. The objectives and guiding principles of the National Scheme

The objectives of the National Scheme 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
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
3. to facilitate the provision of high quality education and training of health practitioners
4. to facilitate the rigorous and responsive assessment of overseas-trained health practitioners
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.

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

The guiding principles of the National Scheme are:

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.

## 4. Principles of the assessment process

1. The assessment process will operate in a way which is fair, transparent, efficient, effective and accountable.
2. Fees charged will be reasonable, having regard to the efficient and effective operation of the assessment process.
3. SIMGs will be afforded procedural fairness.
4. SIMGs applying for specialist recognition will be assessed against the approved comparability definitions (Appendix 2).

## 5. Establishing a committee to be responsible for the assessment process

Colleges will:

1. establish a committee or a similar body to be responsible for the assessment process, within the college's overall governance arrangements. The committee will include:
  - a. members with the necessary attributes, knowledge and skills in the assessment of college trainees and who understand their college's training requirements and standards
  - b. at least one fellow who has completed their specialist training overseas and who has been through the college assessment process
  - c. at least one community member<sup>2</sup>, if possible.
2. implement a documented governance framework for the operation of the committee which 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 bodies within the college)
  - b. procedures for declaring and managing conflicts of interest. For example, individuals involved in the direct supervision / 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. guidelines and procedures for ensuring procedural fairness is afforded to SIMG applicants.

<sup>2</sup> Community member means 'health consumer' as defined in the Australian Medical Council's *Standards for Assessment and Accreditation of Specialist Medical Programs and Professional Development Programs* (as revised from time to time)

## 6. Publication of information and procedures of the assessment process

The specialist pathway process is complex and SIMGs must interact with a number of organisations as they work towards meeting all the requirements necessary to practise in Australia. SIMGs need accurate and relevant information to make decisions about working in Australia.

Colleges will publish information for SIMGs on their website that is public, easy to locate, presented in a user-friendly way, uses plain English and avoids using jargon.

The requirements and procedures for all phases of the assessment process (e.g. paper-based assessment, interview, supervision, examination, reviews, appeals, etc) must be documented and published. Colleges will:

1. establish a process for assessment in each of the following pathways:
  - a. specialist pathway – specialist recognition
  - b. specialist pathway – area of need
2. publish key college data about the specialist pathway and the distribution of the specialist workforce so that SIMGs have appropriate information and realistic expectations when they apply for assessment. Colleges can publish their own data or include links from the college website to the Board's specialist pathway data<sup>3</sup> and the Commonwealth's workforce fact sheets<sup>4</sup> (or do both).
3. publish the requirements for eligibility to apply for the specialist pathway – specialist recognition and area of need (see [Appendix 3](#) for details). This includes:
  - a. the requirement for SIMGs to apply to have their medical qualifications verified through the Educational Commission for Foreign Medical Graduates (ECFMG) Electronic Portfolio of International Credentials (EPIC), and
  - b. the requirement for the SIMG to include their EPIC ID number with their application for assessment
4. publish details of the documentary evidence that SIMGs are required to submit for an assessment under the specialist pathway (specialist recognition or area of need). This includes:
  - a. requesting only that documentary evidence which is required to make the assessment decision about the SIMG's comparability to an Australian trained specialist or suitability for an area of need position. For example, supervisor reports from a SIMG's training program may not be relevant if a SIMG has been a specialist for a long time
  - b. ensuring the format of documentary evidence is consistent with Board requirements for registration, wherever possible, to minimise unnecessary duplication for the SIMG. For example, the Board and Ahpra have requirements for certifying documents and have developed a format for curricula vitae
  - c. clearly stating whether the SIMG must provide evidence of English language proficiency before they can commence the assessment process. The standard required must be at the level expected by the Board's English language skills registration standard
5. publish the schedule of fees for assessment in one location on the college website, including fees for each element of the specialist recognition and area of need assessment processes and the likely total cost for completion of the specialist recognition or area of need pathways (see also section 7)
6. publish the criteria against which SIMGs will be assessed
7. establish a process to ensure SIMGs are notified in a timely manner that their application for assessment will not proceed without an EPIC number or if other relevant information has not been included in the application
8. establish a process to monitor applications for assessment to ensure they progress in a timely manner.

Colleges must follow their published procedures. If a college deviates from the published procedures, they must document the reasons for doing so and provide these to the SIMG.

There is separate guidance on the assessment process for Australian and New Zealand medical graduates with overseas specialist qualifications who are seeking specialist registration in Australia, available on the Board's website.<sup>5</sup>

<sup>3</sup> [www.medicalboard.gov.au/Registration/International-Medical-Graduates/Specialist-Pathway/Guides-and-reports](http://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Specialist-Pathway/Guides-and-reports)

<sup>4</sup> [www.hwd.health.gov.au/publications](http://www.hwd.health.gov.au/publications)

<sup>5</sup> [www.medicalboard.gov.au/Registration/International-Medical-Graduates/medical-graduate-with-overseas](http://www.medicalboard.gov.au/Registration/International-Medical-Graduates/medical-graduate-with-overseas)

## 7. 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 having regard to the effective and efficient operation of the assessment process.

Colleges can charge fees for:

1. the initial review of application documentation
2. the assessment interview
3. the additional requirements of the specialist pathway – specialist recognition (e.g. supervision, upskilling, formal assessments such as examinations and workplace-based assessments)
4. access to college resources including CPD programs
5. reconsideration, review and appeal of college decisions.

Each college will publish a schedule of fees in one location on their website that includes the cost of each element of the specialist recognition and area of need assessment processes and the likely total cost for completion of the specialist recognition or area of need pathways.

## 8. Specialist pathway – specialist recognition

### 8.1 Summary

This pathway is for SIMGs who wish to qualify for specialist registration in Australia.

SIMGs who have a primary qualification in medicine and surgery from a training institution recognised by both the AMC and the World Directory of Medical Schools (WDOMS) and have satisfied all the training and examination requirements to practise in their field of specialty in their country of training, can apply for assessment under the Specialist pathway – specialist recognition.

The requirements for registration and the classification of specialists vary across countries. Colleges may request evidence of a SIMG's registration history, however, the absence of current registration or registration in the SIMG's country of training in the same way as in Australia must not preclude SIMGs from assessment. Colleges will take into consideration the way specialists are classified in the SIMG's country of training and the reasons a SIMG may no longer hold current registration in their country of training. For example, the SIMG is living and working in a different country.

In this pathway, SIMGs are assessed by the relevant specialist medical college for comparability to an Australian trained specialist commencing practice (at the level of a newly qualified Fellow), taking into consideration the SIMG's intended scope of practice as well as their previous training and assessment, recent specialist practice, experience and CPD.

It is not unusual for specialists to change the scope of their practice over time. This applies to Australian specialists and SIMGs. It is therefore appropriate to assess SIMGs on the basis of their intended scope of practice, rather than the entire specialty.

The assessment of comparability is a three-step process:

#### Step one

An interim assessment of comparability (substantially comparable, partially comparable or not comparable).

#### Step two

Where a SIMG is assessed as substantially comparable or partially comparable, the SIMG completes any additional requirements required by the college. For example, supervised practice, workplace-based assessment(s), upskilling and/or examinations.

#### Step three

The college makes a final decision as to whether the SIMG is comparable to an Australian qualified specialist in the same field of practice and therefore whether they are eligible for recognition as a specialist.

See [Appendix 4](#) for an overview of the specialist pathway – specialist recognition process.

## 8.2 Comparability definitions

Colleges will assess SIMGs in accordance with the approved comparability definitions (see Appendix 2). The comparability definitions consist of three definitions that describe a SIMG's level of comparability to an Australian trained specialist in the same field of specialist practice:

1. substantially comparable
2. partially comparable
3. not comparable.

The description for the substantially comparable and partially comparable levels comprises two components:

1. the definition of comparability, and
2. the additional requirements defined by the college which must be met by the SIMG to become eligible for specialist recognition. For example, all SIMGs assessed as substantially comparable or partially comparable must complete a defined period of supervised practice in Australia.

The purpose of the additional requirements is to provide additional information so that the college can confirm or modify the interim assessment decision and make a final decision about whether to recommend to the Board that a SIMG be granted recognition as a specialist.

## 8.3 Overview of the interim assessment of comparability

The assessment of comparability is complex and includes consideration of the SIMG's:

1. qualifications
2. previous training and assessment
3. recent specialist practice
4. CPD activity, and
5. intended scope of practice.

The structures of training programs differ between healthcare systems and over time in any single program. The assessment of comparability is more than just an assessment for equivalence of a SIMG's training program against a specialist medical college's current Fellowship program.

Objective scoring systems, where assessors give SIMGs a numerical score against key criteria, can be used as part of the interim assessment process. If used, colleges will publish the broad criteria used in any objective scoring system.

When assessing comparability, colleges will:

1. assess SIMGs for comparability to an Australian trained specialist commencing practice (at the level of a newly qualified Fellow), taking into consideration the SIMG's intended scope of practice, as well as their previous training and assessment, recent specialist practice, experience and CPD
2. review the documentary evidence provided by the SIMG and provide the SIMG with a summary of the preliminary review (SPR) of their application before the interim assessment decision is made (see Section 8.4 for details). The SPR is the college's assessment of the SIMG's complete application against the college's assessment criteria. The SPR gives the SIMG an opportunity:
  - a. to ensure the college has taken into consideration and assessed all the information provided by the SIMG, and
  - b. to provide clarification or submit additional evidence if they believe there are errors of fact, perceived gaps or omissions in the information assessed
3. only consider evidence that is relevant and that has been provided for the purposes of assessment. Where a college receives other information about a SIMG that may inform the interim assessment decision (for example, publicly available information or information from a third party), the college must follow the rules of procedural fairness. This includes providing the SIMG with the information received and giving them a reasonable opportunity to make a submission about the information. This process must occur before the interim assessment decision is made
4. identify any gaps/deficiencies in the SIMG's capabilities required for their intended scope of practice
5. when deciding whether the SIMG should undertake formal examinations, take into consideration:
  - a. the rigour and impartiality of the assessment(s) the SIMG completed overseas
  - b. the SIMG's subsequent experience, and
  - c. the supervised practice and any associated assessments the SIMG will undertake in Australia.

Based on an assessment of this information, if the college is satisfied with the above, the SIMG does not need to undertake formal examination(s).

6. keep complete and accurate documentation of each stage of the assessment process
7. notify the Board of any information which has been received by the college for the purposes of the interim assessment decision which raises concerns about a SIMG's suitability for registration.

## 8.4 Preliminary review of the SIMG's application

The college will provide the SIMG with a summary of the preliminary review (SPR) of the SIMG's application before the interim assessment decision is made. The SPR addresses procedural fairness for SIMGs and aims to ensure that SIMGs have seen the information which colleges will use to make a decision. The SIMG will be given an opportunity to add to or correct the details of that information before the interim decision is made. The SPR will set out:

1. a summary of the information provided by the SIMG in their application mapped against the college's assessment criteria. That is, the assessment will identify gaps or findings of equivalence or alignment in the SIMG's training, assessments/examinations, experience, recency of practice and CPD against an Australian trained specialist in the same field of practice
2. the SIMG's registration status or eligibility to practise as a specialist in their field of specialty practice in their country of training, and
3. any other information obtained by the college about the SIMG which will be relied on to make an interim assessment decision.

The SPR gives the SIMG an opportunity to:

1. ensure the college has taken into consideration and assessed all the information provided by the SIMG
2. provide clarification or submit additional evidence if they believe there are errors of fact, perceived gaps or omissions in the information assessed.

The SPR will be provided to the SIMG by email<sup>6</sup>, no more than 21 calendar days after the college's assessment of the SIMG's complete application.

The college will give the SIMG at least 21 calendar days from the date of the SPR to provide clarification or submit additional evidence if they believe there are errors of fact, perceived gaps or omissions in the information assessed. The college will consider the SIMG's response in making its interim assessment decision.

If a response from the SIMG is not received within the defined timeframe or within an extended timeframe agreed between the college and the SIMG, the college will proceed to the next step which may be the interim assessment decision or an interview with the SIMG.

A guide to the information to be included in the SPR is at [Appendix 5](#). Each college will develop a SPR template that is suitable for its individual requirements.

## 8.5 The interview

Following the paper-based assessment and the SIMG's response to the SPR, the college may interview the SIMG. In some cases, the college may decide not to interview the SIMG because the documentary evidence clearly indicates that the SIMG's training and experience is substantially comparable, partially comparable or not comparable.

The purpose of the interview is to:

1. clarify and confirm details of the SIMG's qualifications, training, experience, recent practice in the specialty and CPD provided in the written documentation and set out in the SPR and if necessary, to seek any additional information
2. determine the SIMG's suitability to commence a period of supervised practice, or further training (under supervision) with associated assessment.

The interview must not be used to assess a SIMG's clinical competence or skills. Assessment of clinical competence or skills can be undertaken more appropriately during the subsequent period of supervised practice or, if required for SIMGs assessed as partially comparable, through formal examination/s.

During the interview process:

<sup>6</sup> An alternative method of communication may be used as agreed between the college and the SIMG.



1. colleges will appoint trained assessors (which may include a community member) to conduct the interview. The assessors will be familiar with these standards and understand the college's assessment criteria and procedures for assessing SIMGs
2. the assessors will review the documentation submitted by the SIMG in detail and the SIMG's response to the SPR (if provided) before the interview
3. the assessors will collaborate and plan the interview. The assessors will develop and use structured questions based on the information contained in the SIMG's application documentation and the SIMG's response to the SPR (if provided)
4. assessors will 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 understanding of the importance of culturally safe and respectful practice for the community, including Aboriginal and Torres Strait Islander Peoples
5. the SIMG will be assessed in accordance with the comparability definitions and the college's published assessment criteria
6. assessors will only ask questions that are relevant to the college assessment criteria
7. assessors will give the SIMG an opportunity to ask questions of the interviewers about the process to ensure they understand the process and the assessment criteria.

The interview can be conducted face-to-face or by video conference. To minimise travel and costs for SIMGs, it is recommended that colleges offer interviews by video conference. While the interview may be conducted by phone, colleges are advised to use caution because of the potential for integrity issues.

Interviews by video conference or telephone should only be conducted where the integrity of the interview can be assured and where use of the mode does not compromise the assessment process. For example:

1. the identity of the SIMG can be verified by a method acceptable to the college
2. the college can ensure the SIMG is not being coached during the interview.

## 8.6 Interim assessment of comparability decision

At the conclusion of the interim assessment process, the college will decide whether the SIMG is substantially comparable, partially comparable or not comparable.

Colleges will:

1. record the interim assessment decision using a reporting template developed by the Board for this purpose (as revised from time to time). The templates are currently titled 'Report 1' (specialist recognition assessment) and 'Combined report' (combined specialist recognition and area of need assessment)
2. provide *Report 1* or the *Combined report* to the SIMG
3. upload *Report 1* or the *Combined report* to the AMC secure portal for use by Ahpra for the purposes of registration. *Report 1* or the *Combined report* includes:
  - a. the college's interim assessment decision about the SIMG's comparability i.e. substantially comparable, partially comparable or not comparable
  - b. the additional requirements to be met by the SIMG if they have been assessed as substantially comparable or partially comparable.

When communicating the college's additional requirements, the college will also inform the SIMG whether the college requires prospective approval of supervisors or positions and detail requirements of any such approval process. The college may also inform the SIMG that the college does not have a role in finding the SIMG a suitable post.

## 8.7 Additional requirements

The additional requirements include a period of supervised practice as defined in the [comparability definitions](#). In addition to providing information to inform the college about whether to confirm or modify the interim assessment decision, the period of supervised practice also:

1. supports the SIMG to transition to the Australian healthcare system
2. helps the SIMG to access CPD programs, and
3. is in line with the Board's requirement that all applicants granted limited or provisional registration must practice under supervision to ensure safe practice.

The college decides the length of the supervised practice (up to the maximum and no less than the minimum) and the nature of assessments on a case-by-case basis. Most SIMGs will require the maximum period of supervised practice to complete the additional requirements and to ensure there is an adequate period of assessment. Based on the performance of the individual SIMG during supervised practice, a college may subsequently reduce the length of the supervised period, but not to less than the minimum specified period.

Any practice completed by a SIMG in Australia before the assessment of comparability cannot be counted towards meeting the additional requirements. However, the college must take into consideration any previous training and assessment, experience, CPD and recent specialist practice when assessing a SIMG for comparability.

### 8.7.1 SIMGs assessed as substantially comparable

Substantially comparable SIMGs have been assessed as suitable to undertake their intended scope of practice, taking full responsibility for individual patients with only oversight of their practice by a supervisor approved by the college. To be considered substantially comparable, a SIMG must have satisfied the college that they are at the standard of an Australian trained specialist *commencing* practice (at the level of a newly qualified Fellow), taking into consideration the SIMG's intended scope of practice as well as their previous training and assessment, recent specialist practice, experience and CPD.

Substantially comparable SIMGs will be required to undertake up to a maximum of 12 months (with a minimum of three months) full time equivalent (FTE) supervised practice, with a supervisor approved by the college. This may involve the satisfactory completion of workplace-based assessment/s. The college may reduce the period of supervised practice to no less than three months based on the performance of the individual SIMG.

If the college determines that a SIMG requires more than 12 months (FTE) supervised practice to demonstrate the required standard, then the SIMG cannot be assessed as substantially comparable and will be assessed as partially comparable or not comparable.

### 8.7.2 SIMGs assessed as partially comparable

Partially comparable SIMGs have been assessed as suitable to undertake their intended scope of practice under the supervision of a college approved supervisor. To be considered partially comparable, a SIMG must satisfy the college that they will be able to reach the standard of an Australian trained specialist within a maximum period of 24 months FTE supervised practice, including completing any further training with associated assessment/s. The standard expected is that of an Australian trained specialist *commencing* practice (at the level of a newly qualified Fellow), taking into consideration the SIMG's intended scope of practice as well as their previous training and assessment, recent specialist practice, experience and CPD.

Partially comparable SIMGs have been assessed as having a gap in either knowledge, or skills, or both domains, and require further training and any associated assessment(s). They will be required to undertake up to a maximum of 24 months FTE supervised practice, with a minimum of six months (including any further training and associated assessment). They may also be required to undertake formal examinations.

It is unlikely that SIMGs assessed as partially comparable will complete the college's additional requirements in the minimum period of supervised practice. However, the college may reduce the period of supervised practice to no less than six months based on the performance of the individual SIMG.

If a college determines a SIMG requires more than 24 months (FTE) of supervised practice and further training to reach the required standard, then the SIMG will be assessed as not comparable.

### 8.7.3 SIMGs assessed as not comparable

SIMGs who do not satisfy the college that they are at the standard of an Australian trained specialist *commencing* practice (at the level of a newly qualified Fellow), having taken into consideration their intended scope of practice as well as their previous training and assessment, recent specialist practice, experience and CPD, or who are assessed as unable to reach comparability within 24 months FTE practice, will be assessed as not comparable.

See Appendix 2 for the full [comparability definitions](#).

### 8.7.4 Completing additional requirements

Substantially comparable and partially comparable SIMGs, can complete additional requirements concurrently. Any orientation, supervised practice or further training does not have to be completed separately, as long as the SIMG is practising with the appropriate level of supervision as defined in the Board's *Guidelines – Supervised practice for international medical graduates*.

Colleges will:

1. have a documented process for monitoring SIMGs during the period of supervised practice
2. document the mechanisms the college will use to determine whether a SIMG is satisfactorily fulfilling college requirements (e.g. through satisfactory supervisor reports)
3. ensure that any specific clinical experience and assessment required of SIMGs is no more than that required of Australian trainees completing their training. Reasons for requiring specific areas of experience should be clearly documented.

## 8.8 Definition of full-time equivalent practice

For the purposes of the additional requirements, FTE practice is 38 hours per week within a SIMG's scope of practice. Practice includes all aspects of the SIMG's scope of the specialty and may include clinical and non-clinical practice. The maximum number of hours that can be counted per week is 38 hours.

SIMGs who work part-time must complete the same minimum number of hours of practice – this can be completed part time.

Twelve months of practice means a minimum of 47 weeks FTE practice. Annual leave is not included in the 47 weeks.

## 8.9 Maximum timeframes for completing additional requirements

The additional requirements must be completed within the maximum timeframes. The maximum timeframes are:

1. for substantially comparable SIMGs – a total of two years to complete up to 12 FTE months of supervised practice
2. for partially comparable SIMGs – a total of four years to complete up to 24 FTE months of supervised practice and upskilling with associated assessment including formal examinations where required.

These maximum timeframes should not be confused with the comparability definitions. That is, a SIMG who has been assessed as substantially comparable and who has satisfactorily completed 12 months FTE supervised practice (which may include workplace based assessment/s), must not be required to do more than 12 months FTE of practice or new assessment/s that were not defined by the college in *Report 1* or the *Combined report*.

The maximum timeframes allow for the additional requirements to be completed part-time. 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.

The starting point for the maximum timeframe is 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 will:

1. publish the policy including any requirements for a new assessment of comparability, and
2. notify the Board when an interim assessment decision has expired by uploading an updated *Report 1* or a *Combined report* to the AMC secure portal indicating the validity period has expired.

If a partially comparable SIMG has successfully completed the additional requirements *except for* formal examination/s and wishes to continue to practise within the maximum timeframe, they may do so provided they:

1. continue to be on the specialist pathway
2. continue to be supported by the college
3. meet the requirements of their limited or provisional registration. These types of registration require SIMGs to practise with Board approved supervision, and
4. comply with any college policies (e.g. number of examination attempts permitted).

Colleges will ensure they have procedures for monitoring the progress of the SIMG to ensure they complete the additional requirements within the maximum timeframes.

### 8.10 Final decision of comparability (eligibility for specialist recognition)

The Board's *Registration standard for specialist registration* defines the ways in which applicants can qualify for specialist registration. A SIMG is qualified for specialist registration if they:

1. have been awarded an approved qualification (Fellowship of an accredited specialist medical college), or
2. hold a qualification relevant to the specialty (overseas specialist qualification) and have successfully completed any examination and/or other assessment required by an accredited specialist medical college for the purposes of registration in a specialty. That is, the Board will accept for registration purposes that the SIMG has completed, the college requirements for the award of an approved qualification (i.e. the SIMG is eligible for Fellowship) or the college requirements for recognition as a specialist in the full scope or part scope of a specialty.

When making a final decision regarding comparability, colleges will:

1. document the final decision about a SIMG's comparability and eligibility for specialist recognition using a reporting template developed by the Board for this purpose (as revised from time to time). The current template is titled 'Report 2'
2. upload *Report 2* to the AMC secure portal for use by Ahpra for the purposes of registration
3. inform the SIMG of the final assessment decision.

*Report 2* will confirm one of the following:

1. the SIMG has successfully completed the college's requirements and the college recommends that the SIMG be granted recognition as a specialist
2. the SIMG has completed the college's requirements for comparability in a limited scope of practice and the college recommends that the SIMG be granted recognition as a specialist in a limited scope of practice including any recommendations for conditions on registration
3. the college is not recommending the SIMG for specialist recognition, and reasons for this decision
4. the SIMG has chosen not to complete the additional requirements specified in *Report 1* or the *Combined report* and has withdrawn from the pathway
5. the SIMG has not met the college requirements within the maximum timeframes (including any additional time granted for exceptional circumstances) and the reasons. For example, the SIMG was unable to get a suitable job, did not undertake required CPD or did not satisfactorily complete college assessments or examinations.

A SIMG who has been initially assessed as substantially comparable but who is reassessed as partially comparable, will continue on the pathway and *Report 2* will not be required until one of the above outcomes has occurred.

### 8.11 Assessing SIMGs for comparability in a limited scope of practice

As outlined in section 8.10, the Board's *Registration standard for specialist registration* describes the ways in which applicants may qualify for specialist registration. This includes by being awarded Fellowship of a specialist medical college or by being recommended for specialist recognition by a college after meeting its requirements for recognition, in the full scope of a specialty or field of specialty practice or part scope of a specialty or field of specialty practice.

The assessment of comparability requires colleges to assess SIMGs for comparability taking into consideration their intended scope of practice. A SIMG does not have to be comparable across the full scope of practice of an Australian trained specialist as long as the SIMG has the knowledge, skills, professional attributes and experience to practise competently and safely in a scope of practice that falls within the broader scope of a recognised specialty or field of specialist practice and the practice is viable in Australia.

SIMGs may be working in a limited scope of practice because:

1. they may have satisfied the training requirements in the full scope of a specialty, but they now choose to practise in a limited scope only
2. the training pathways available to the SIMG did not/do not match those currently available to Australian trainees

3. their specialist training program is not completely identical to the Australian training program or the SIMG may have trained in a specialty which has a different scope of practice from the most similar Australian program.

#### Examples

Australian recognised field of specialty practice	Limited scope of practice within the recognised field of specialty practice
Neurology	Stroke medicine
Respiratory and sleep medicine	Sleep medicine
Orthopaedic surgery	Spinal orthopaedic surgery
Otolaryngology – head and neck surgery	Otology

When assessing SIMGs for comparability in a limited scope, colleges will:

1. have a documented and published approach to assessing SIMGs with a limited scope of practice
2. assess SIMGs for comparability taking into consideration their intended scope of practice and any limited scope of practice that:
  - a. currently occurs or could occur within the specialty or field of specialty practice in Australia, and
  - b. is possible for a specialist to practise in, in Australia.
3. apply the same principles and procedures for assessing a SIMG in the full scope of a specialty or field of specialty practice
4. provide reasons to the SIMG if it is not appropriate for the SIMG to practise in the limited scope of practice.

Where it is not viable for SIMGs to practise within a limited scope of a recognised specialty or field of specialty practice (for example, specialist general practice), the college must publish its rationale.

If a college recommends a SIMG for specialist recognition in a limited scope of practice or awards Fellowship in a limited scope of practice, the college will clearly define the SIMG's scope of practice in *Report 2*.

When the Board grants a SIMG specialist registration in a limited scope of practice, it will impose conditions on the SIMG's specialist registration reflecting the SIMG's limited scope of practice. The Board will take into consideration any advice from the college on the restricted scope of practice. The conditions will appear in the specialist practitioner's listing on the public Register of Medical Practitioners.<sup>7</sup>

## 8.12 New assessment of comparability

Colleges will document and publish the policy and process by which SIMGs may apply for a new assessment of comparability and the circumstances under which the college will consider applications for a new assessment.

A SIMG may request a new 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 a new 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.

Applications for a new assessment are different from an appeal of a college decision on comparability where a SIMG disputes an interim assessment decision.

<sup>7</sup> Ahpra, on behalf of the Board, monitors health practitioners for compliance with conditions imposed on their registration.

## 9. Specialist pathway – area of need

### 9.1 Summary

The National Law provides for IMGs who are not qualified for general or specialist registration to be granted limited registration for an area of need. The Board's *Registration standard for granting limited registration for area of need*, approved by the Australian Health Workforce Ministerial Council, reflects the requirements of the National Law.

This pathway is for SIMGs who wish to work in a specialist level position in Australia in a declared area of need. This pathway does not lead to specialist registration. SIMGs who are also seeking specialist registration may apply to the college for a concurrent area of need and specialist recognition assessment.

SIMGs who have a primary qualification in medicine and surgery from a training institution recognised by both the AMC and the WDOMS and have satisfied all the training and examination requirements to practise in their field of specialty in their country of training, can apply for assessment under the Specialist pathway – area of need. See [Appendix 6](#) for an overview of the specialist pathway – area of need process.

### 9.2 Assessment for area of need

The purpose of the area of need assessment is to assess a SIMG's qualifications and experience for suitability against the requirements of a specific position in a declared area of need. The assessment is specific to the position description and cannot be used for other positions. If the SIMG wishes to practise in another position, they are required to have a new assessment.

The area of need assessment does not assess a SIMG's comparability to an Australian trained specialist but rather their suitability for a specific position. In some cases, due to the nature of specialist practice, the college will need to conduct a combined assessment for specialist recognition and area of need to determine the SIMG's suitability for the specific position.

Although an area of need assessment does not lead to specialist registration, the Board requires SIMGs with limited registration for area of need who intend to renew registration three times (up to four years registration) or more, to demonstrate satisfactory progress towards meeting the requirements for general or specialist registration at each renewal of registration.

It is therefore appropriate for a college to conduct an 'area of need assessment' only, where:

1. the SIMG intends to work in Australia for a short term (no more than four years), and
2. the SIMG confirms that they do not wish to progress to specialist registration, and
3. there is appropriate supervision and support available to support practice in the position.

The college may interview the SIMG, if required.

### 9.3 Outcome of area of need assessment

The college will document the outcome of the area of need assessment using a reporting template developed by the Board for this purpose (as revised from time to time). The current templates are titled '*Area of need report*' and '*Combined report*'.

The college will upload the report to the AMC secure portal for use by Ahpra for the purposes of registration and will also inform the SIMG of the outcome.

The report will confirm whether:

1. the SIMG is *suitable* for the position and any recommendations including proposed restrictions on scope of practice, or
2. the SIMG is not suitable for the position and the reasons.

## 10. Recency of practice

The Board has an approved *Registration standard for recency of practice*. The registration standard requires medical practitioners to practise a minimum number of hours in their scope of practice to meet the standard. There are also requirements for returning to practice after an absence and requirements for changing scope of practice.

Colleges will publish a policy on their requirements for recency of practice for the purposes of assessing a SIMG's comparability or assessing a 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.

## 11. Supervision of SIMGs

Colleges will develop and publish guidelines on the supervision of SIMGs undertaking additional requirements in the specialist pathway – specialist recognition. The college's requirements for the supervision of SIMGs are expected to align with the Board's *Guidelines – Supervised practice for international medical graduates*<sup>8</sup>.

The college's guidelines will include:

1. the requirements for the training and induction of college SIMG supervisors
2. the roles and responsibilities of college SIMG supervisors and SIMGs
3. processes for addressing issues arising during the supervision period, including
  - a. procedures for the SIMG to raise concerns about training, assessment or supervision in a safe and confidential way
  - b. procedures to inform employers, and where appropriate, the Board, where public safety concerns arise in assessment
4. the appropriate level of supervision for a SIMG's level of training and experience
5. if the college has approved remote supervision (where the supervisor and SIMG are not located at the same facility), the requirements for that supervision. For example, the requirements for oversight, review and reporting of the SIMG's performance and how the SIMG will be supported if they require assistance.

The Board decides the appropriate level of supervision for a SIMG for the purposes of registration to ensure safe practice. The Board takes into consideration the college's assessment and any recommendations when deciding the level of supervision.

## 12. Reconsideration, review and appeals

The college will have a documented and published process for reconsideration, review or appeal that specifically references SIMGs and which is consistent with the AMC's accreditation standards for *Standards for Assessment and Accreditation of Specialist Medical Programs and Professional Development Programs by the Australian Medical Council 2015* (as revised from time to time)<sup>9</sup>.

Colleges will:

1. publish their processes for the reconsideration, review and appeal of decisions. These processes are to provide an impartial review of decisions related to its training and education functions including the assessment of SIMGs
2. ensure committees considering appeals include some members who are external to the college, as well as impartial internal members
3. ensure that appeals processes provide grounds for appeal against decisions that are similar to the grounds for appealing administrative decisions in Australia (See standard 1.3 of the AMC accreditation standards)
4. ensure processes are procedurally fair, timely and transparent, including provision of written reasons for decisions.

<sup>8</sup> [www.medicalboard.gov.au/Codes-Guidelines-Policies/Supervised-practice-guidelines](http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Supervised-practice-guidelines)

<sup>9</sup> [www.medicalboard.gov.au/Accreditation/Specialist-medical-colleges](http://www.medicalboard.gov.au/Accreditation/Specialist-medical-colleges)

## 13. Options for SIMGs who are not eligible for or who do not complete the requirements of the specialist pathway

The college should advise SIMGs who are not eligible for the specialist pathway (specialist recognition or area of need) or who are not comparable or who do not complete the requirements of the specialist pathway – specialist recognition to contact Ahpra for further guidance on their options for practising in Australia as a medical practitioner.

## 14. Review

**Date of effect:** 1 January 2021

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

These Standards replace the *Good practice guidelines for the specialist international medical graduate assessment process* dated 2 November 2015.



## Appendix 1: The roles of organisations involved in the specialist international medical graduate assessment process

### 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 role of the Australian Health Practitioner Regulation Agency

The Australian Health Practitioner Regulation Agency (Ahpra):

1. provides administrative and policy support to the Board in its primary role of protecting the public
2. employs staff and enters into contracts on behalf of the Board
3. manages the registration and renewal processes for health practitioners and students around Australia
4. on behalf of the Board, manages investigations into the professional conduct, performance or health of medical practitioners (arrangements differ in New South Wales and Queensland)
5. has offices in each state and territory.

### The role of the National Specialist International Medical Graduate Committee

The National Specialist International Medical Graduate Committee (NSIMGC) 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 (specialist recognition and area of need) 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 (specialist recognition and area of need)
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 (specialist recognition and area of need)
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 issues regarding the operation of the SIMG assessment process with the Board. The Board may refer the matter to the NSIMGC.

## The role of the Australian Medical Council

The Australian Medical Council (AMC):

1. is the appointed accreditation authority for the medical profession
2. develops accreditation standards for education providers and their programs of study
3. accredits programs of study that provide a qualification for the purposes of registration
4. assesses the programs of the specialist medical colleges against the accreditation standards for specialist medical programs including ensuring the colleges meet the standards for assessing SIMGs
5. facilitates access to the results of the primary source verification of a SIMG's medical qualifications
6. manages the AMC secure portal which is accessed by the AMC, the specialist medical colleges and Ahpra. The secure portal is a repository of information that includes certified copies of a SIMG's qualifications, confirmation of primary source verification, the outcome of the SIMG's college assessments and college letters (as required) confirming continued support for the SIMG in the pathway. Ahpra (on behalf of the Board) accesses the secure portal to source information for the purposes of registration.

## The role of the specialist medical colleges

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.

## Appendix 2: Comparability definitions

### Substantially Comparable

Substantially comparable applicants will not be eligible to apply for specialist registration until the college confirms they have satisfied the requirements for specialist recognition.

#### Definition

Substantially comparable applicants have been assessed as suitable to undertake their intended scope of practice, taking full responsibility for individual patients with only oversight of their practice by a supervisor approved by the college. To be considered substantially comparable an applicant must have satisfied the college that they are at the standard of an Australian trained specialist commencing practice (at the level of a newly qualified Fellow), taking into consideration the applicant's intended scope of practice as well as their previous training and assessment, recent specialist practice, experience and continuing professional development (CPD).

#### Additional requirements to be met before being recommended for specialist recognition

Applicants assessed as substantially comparable will be required to undertake up to a maximum of 12 months full time equivalent (FTE) practice, with a minimum of three months, with a supervisor approved by the college. This period of supervised practice may include the satisfactory completion of a workplace-based assessment(s) (WBA).

These requirements are imposed to:

- ensure that the applicant's level of performance is at the standard of an Australian trained specialist commencing practice
- assist the applicant with their transition to the Australian health system
- provide the applicant with professional support, and
- help the applicant to access CPD.

The college will decide the length of supervised practice (between the minimum period and up to the maximum period) and the nature of assessment on a case-by-case basis, but the supervised practice period must not exceed 12 months FTE of practice.

Following satisfactory completion of this process, the college will recommend the applicant should be recognised as a specialist or will award the applicant Fellowship without formal examination, and the applicant may apply for registration as a specialist.

### Partially Comparable

Partially comparable applicants will not be eligible to apply for specialist registration until the college confirms they have satisfied the requirements for specialist recognition.

#### Definition

Partially comparable applicants have been assessed as suitable to undertake their intended scope of practice under the supervision of a college approved supervisor. To be considered partially comparable an applicant must satisfy the college that they will be able to reach the standard of an Australian trained specialist within a maximum period of 24 months FTE practice. The standard expected is that of an Australian trained specialist commencing practice (at the level of a newly qualified Fellow), taking into consideration the SIMG's intended scope of practice as well as their previous training and assessment, recent specialist practice, experience and CPD.

#### Additional requirements to be met before being recommended for specialist recognition

Applicants assessed as partially comparable will be required to undertake up to a maximum of 24 months FTE supervised practice, with a minimum of six months, and further training with any associated assessment/s with a supervisor approved by the college. They may be required to undertake formal examination/s or other assessment.

These requirements are imposed to:

- ensure that the applicant's level of performance reaches the standard of an Australian trained specialist
- assist the applicant with the transition to the Australian health system

- provide the applicant with professional support, and
- help the applicant to access CPD.

The college will decide the length of supervised practice (between the minimum period and up to the maximum period) and the nature of assessment/s on a case-by-case basis, but the supervised practice period must not exceed 24 months FTE practice. Following satisfactory completion of this process, the college will recommend the applicant should be recognised as a specialist or will award the applicant Fellowship, and the applicant may apply for registration as a specialist.

### Not comparable

Applicants who do not satisfy the college that they are at the standard of an Australian trained specialist *commencing* practice (at the level of a newly qualified Fellow), having taken into consideration their intended scope of practice as well as their previous training and assessment, recent specialist practice, experience and CPD or who are assessed as unable to reach comparability within 24 months FTE practice will be assessed as not comparable.

**Note:** Applicants assessed as not comparable may be eligible for limited or provisional registration through another pathway that will enable them to gain general registration and subsequently apply for entry into a formal college specialist training program. Applicants should contact Ahpra for further guidance of their options for practising in Australia as a medical practitioner.

## Appendix 3: List of requirements to apply for assessment under the specialist pathway

SIMGs who have a primary qualification in medicine and surgery from a training institution recognised by both the Australian Medical Council and the World Directory of Medical Schools and who have satisfied all the training and examination requirements to practise in their field of specialty in their country of training, can apply for assessment under the Specialist pathway (specialist recognition or area of need).

To assist SIMGs to determine whether they are eligible to apply for assessment, the colleges will publish a list of requirements for assessment (specialist recognition or area of need). Meeting the requirements is not an indicator that a SIMG is comparable in a recognised specialty or suitable for an area of need position, or that they will be successful in completing college requirements for specialist recognition.

### Specialist recognition assessment

In addition to the requirements for primary and specialist medical qualifications as described above, the colleges must define their requirements for assessment including:

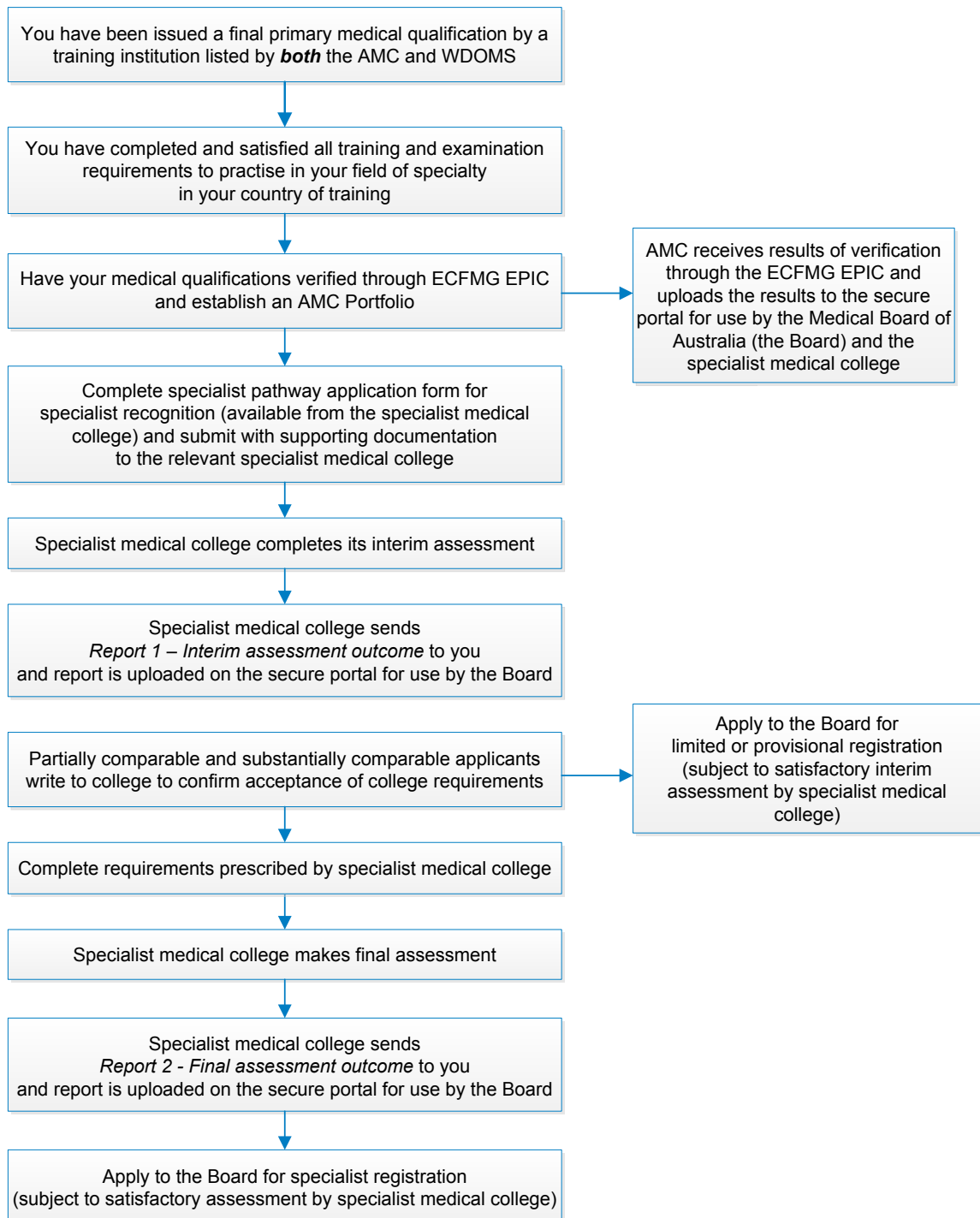
1. primary source verification of medical qualifications (See section 6 of these Standards)
2. a medical internship or comparable
3. whether the overseas specialist training program must include specific elements/components, for example, the domains/areas that must have been assessed
4. specific clinical experience and any other experience relevant to the specialty
5. English language proficiency. The requirement for English language skills must be at the level expected by the Medical Board of Australia's registration standard for English language skills
6. participation in continuing professional development
7. recency of practice.

### Area of need assessment

In addition to the requirements for primary and specialist medical qualifications as described above, the colleges must define, their requirements for assessment including:

1. primary source verification of medical qualifications (See section 6 of these Standards)
2. a medical internship or comparable
3. the position description including the type of information required and if applicable the format
4. the evidence required to confirm the position is in a declared area of need
5. the requirements for a specialist recognition assessment, if a combined assessment is required
6. English language proficiency. The requirement for English language skills must be at the level expected by the Medical Board of Australia's *Registration standard for English language skills*
7. participation in continuing professional development
8. recency of practice.

## Appendix 4: Flow chart: Specialist pathway – specialist recognition process



The Medical Board of Australia has established performance benchmarks for the specialist pathway – specialist recognition process. The benchmarks define the maximum length of key steps in the process. The colleges report against the benchmarks annually.

The benchmarks are accessible on the Medical Board of Australia's website at: [www.medicalboard.gov.au/Registration/International-Medical-Graduates/Specialist-Pathway/Guides-and-reports](http://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Specialist-Pathway/Guides-and-reports)

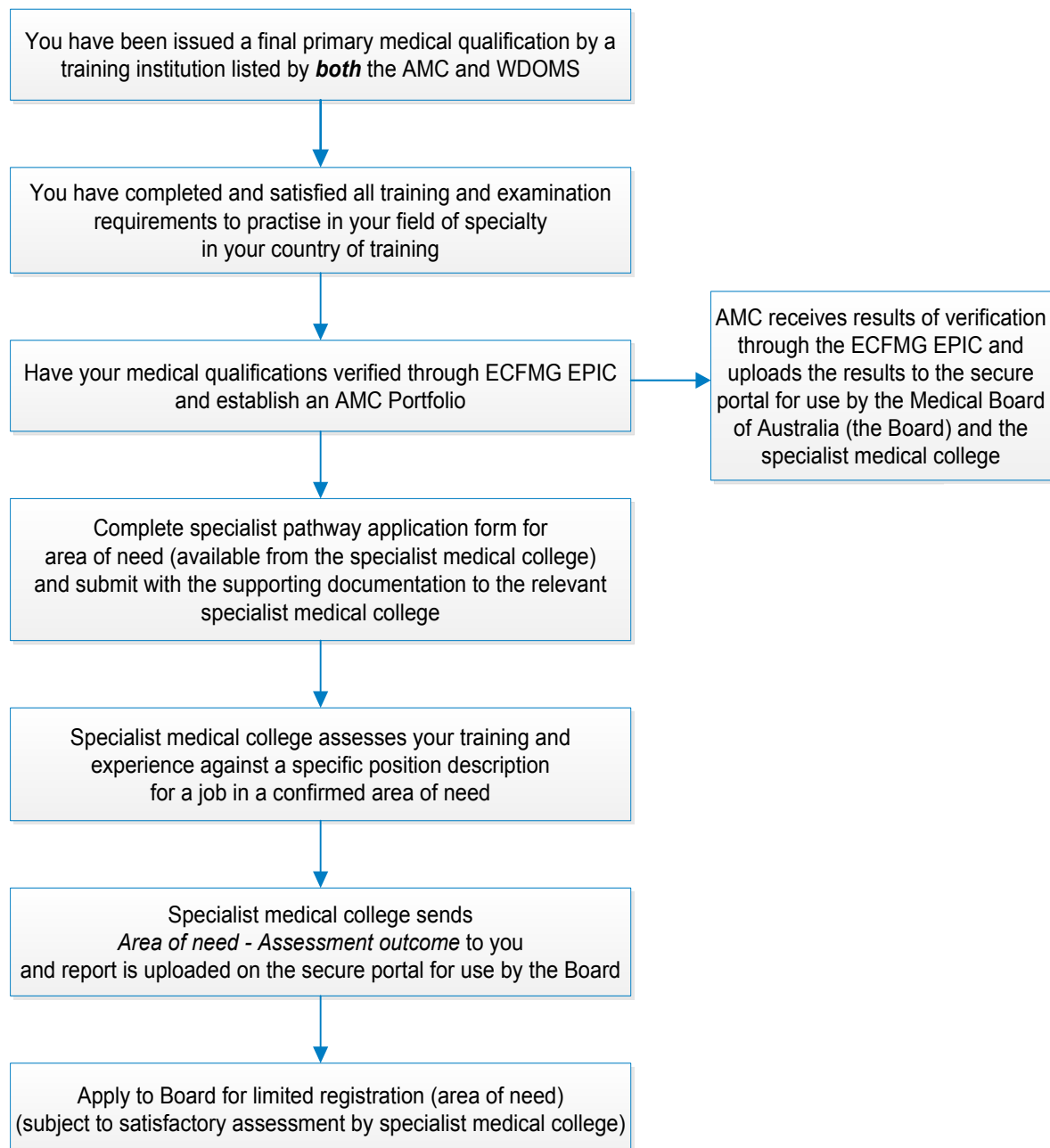
## Appendix 5: Guide to the information to be included in a Summary of the preliminary review

This is a guide only. Each college must develop a Summary of the preliminary review (SPR) template that is suitable for its individual requirements. The SPR will set out a summary of the information provided by the SIMG in their application mapped against the college's assessment criteria. That is, the assessment will identify gaps or findings of equivalence or alignment in the SIMG's training, assessments/examinations, experience, recency of practice and CPD against an Australian trained specialist in the same field of practice.

Where a SIMG provides additional information in response to the SPR, the SPR does not need to be updated, however the college must consider the additional information in making its interim assessment decision.

Applicant name	
Date of assessment	
Applicant identity verified	Yes/No
<b>Domain/area assessed (if applicable)</b>	<b>College assessment of the SIMG's application</b>
Primary source verification	AMC portal confirms/does not confirm qualification/s have been submitted to ECFMG EPIC for verification
Primary medical qualification [Name, institution, start and end dates, year qualification awarded, country]	Verified or not verified or AMC portal confirms qualification has been submitted to ECFMG EPIC for verification
Medical internship or comparable [Country/countries, institution, rotations completed, any other relevant information]	Describe how the applicant's internship/experience aligns with or differs from Australian internship
Relevant specialist qualification [Name, institution, year qualification awarded, country, duration of training, start and end dates of training, institution/s, accreditation, rotations/experiences, assessments/examinations undertaken]	Verified or not verified or AMC portal confirms qualification has been submitted to ECFMG EPIC for verification  Describe how the applicant's specialist training aligns with or differs from college's training program
Recognition as a specialist in country of training [Name, institution, date recognition first awarded, country]	Documentation confirms/does not confirm recognition as a specialist in country of training
Specialist experience [Describe the relevant experience and start and end date of each relevant experience, country/countries of practice, institution/s]	Describe the relevant experiences and confirm if supporting documentation verifies these experiences  Describe how the specialist experience aligns with or differs from that of an Australian trained specialist  Identify any recency of practice issues
Participation in continuing professional development [Summarise information received about participation in continuing professional development]	Identify any gaps in CPD and currency of CPD

## Appendix 6: Flow chart: Specialist pathway – area of need process



The Medical Board of Australia has established performance benchmarks for the specialist pathway – area of need assessment process. The benchmarks define the maximum length of key steps in the process. The colleges report against the benchmarks annually.

The benchmarks are accessible on the Medical Board of Australia's website at: [www.medicalboard.gov.au/Registration/International-Medical-Graduates/Specialist-Pathway/Guides-and-reports](http://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Specialist-Pathway/Guides-and-reports).