

**INTERNAL ONLY**  
**ISLHD PROCEDURE**  
**COVER SHEET**



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<b>FUNCTIONAL GROUP OR HUB</b>	Medical Workforce
<b>NSQHS STANDARD</b>	Clinical Governance
<b>SUMMARY</b>	This document articulates supervision responsibilities in respect of international medical graduates (IMG), without general registration, offered a position in any ISLHD facility.

**COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

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## 1. POLICY STATEMENT

This procedure provides the supervision responsibilities in respect of international medical graduates (IMG), without general registration, offered a position in any ISLHD facility.

This procedure has been developed to provide guidance for supervisors of International Medical Graduates (IMGs) to ensure compliance with the Medical Board of Australia's requirements.

This procedure is applicable to all sites within ISLHD.

## 2. BACKGROUND

ISLHD is reliant on International Medical Graduates within our medical workforce. There are a number of unique responsibilities in respect of IMGs which must be fulfilled.

### Definitions

**International Medical Graduate (IMG):** Doctors whose primary medical qualifications were obtained in a country other than Australia or New Zealand are known in Australia as international medical graduates (IMGs)

**Registration:** All IMGs who are granted limited registration or provisional registration must be supervised in accordance with their AHPRA registration. The supervision level defined by AHPRA remains a requirement of registration for the duration of the IMG's limited or provisional registration.

**Supervision:** All IMGs in hospital-based positions must have a principal supervisor and term co-supervisors as specified in the Guidelines.

**Principle Supervisor:** A Director of Medical Services (DMS) or Director of Clinical Training (DCT) (or equivalent) may be appointed as a principal supervisor.

**Term Co-Supervisors:** The DMS or DCT (or equivalent) may appoint term co-supervisors without Board approval. The term co-supervisors are delegated the day-to-day supervision of the IMG. Co-supervisors must:

- have specialist registration
- practise in the same field
- have three years' experience with general or specialist registration
- not have conditions on their registration

Term Supervisors are required to have completed AHPRA online courses.

**Australian Health Practitioner Regulation Agency (AHPRA):** organisation responsible for the implementation of the National Registration and Accreditation Scheme across Australia.

### 3. RESPONSIBILITIES

When an international medical graduate (IMG) without general registration is offered a position in any ISLHD facility, the following must be considered.

The determination of the supervision arrangements must be completed by the Medical Workforce Unit staff in conjunction with the Head of Department for all doctors excluding those applying to RMO positions, where the Principle Supervisor must be involved. It is assumed at this point that visa and limited or provisional registration status (with conditions for supervision) have been confirmed by AHPRA.

### 4. PROCEDURE

**4.1 Application to AHPRA** – the SPPA-30 *Supervised practice plan and supervisor's agreement for international medical graduates* must be completed:

[Medical-Board---Form---Supervised-practice-plan-for-international-medical-graduates---SPPA-30 \(2\).PDF](#)

**4.2 Selection I: *Principal Supervisor's agreement***. If the position fits into Level 1 to 4, select the appropriate level. Note: we must be able to provide this level of supervision as defined by AHPRA. If Level 1–4 is not appropriate move to Step 3. Please note, you do not complete Step 3 details if you have selected a level 1-4 above.

[Medical-Board---Guidelines---Supervised-practice-for-international-medical-graduates---4-January-2016 \(2\).PDF](#)

**Level 1 supervision – (equivalent of intern)** The supervisor takes direct and principal responsibility for each individual patient.

- a. The supervisor must be physically present at the workplace at all times when the IMG is providing clinical care.
- b. The IMG must consult their supervisor about the management of all patients at the time of the consultation and before the patient leaves the practice.
- c. Supervision via telephone contact or other telecommunications is not permitted.
- d. IMG cannot supervise other doctors.

**Level 2 supervision – (equivalent of RMO)** The supervisor shares with the IMG, responsibility for each individual patient. The supervisor must ensure that the level of responsibility that the IMG is allowed to take for patient management is based on the supervisor's assessment of the IMG's knowledge and competence.

- a. Supervision must be primarily in person – the supervisor must be physically present at the workplace a minimum of 80% of the time that the IMG is practising. Where the supervisor is not physically present, they must always be accessible by telephone or video link.

- b. The IMG must inform their supervisor on a daily basis about the management of individual patients.
  - c. IMG cannot supervise other doctors.
- Further information on Levels 1 and 2 is here.

[Medical-Board---Information-sheet---International-medical-graduate-supervision-in-hospital-based-positions \(2\).PDF](#)

**Level 3 supervision – (equivalent of Registrar)** The IMG takes primary responsibility for each individual patient.

- a. The supervisor must ensure that there are mechanisms in place for monitoring whether the IMG is practising safely.
- b. The IMG is permitted to work alone provided that the supervisor is contactable by telephone or video link.
- c. IMG can supervise more junior doctors, but not another IMG on limited or provisional registration.

**Level 4 supervision – (equivalent of fellow/consultant undergoing supervised practice)** The IMG takes full responsibility for each individual patient.

- a. The supervisor must oversee the IMG's practice.
- b. The supervisor must be available for consultation if the IMG requires assistance.
- c. The supervisor must periodically conduct a review of the IMG's practice.
- d. IMG can supervise more junior doctors, but not another IMG on limited or provisional registration.

**4.3 Selection I: Principal Supervisor’s agreement continued**, select the last option, see below and complete the supervision plan as described

**For IMGs in hospital-based positions**

The Medical Board of Australia has published an information sheet – *International medical graduate supervision in hospital-based positions* to provide guidance about supervision to hospitals who employ IMGs.

The hospital must select **ONE** of the following three options:

If the hospital can provide a defined level of supervision, the hospital can select one or more level(s) of supervision in the above boxes. The hospital must be able to provide supervision as described for each level.

If the above levels do not correspond to the proposed supervision arrangements, the hospital can:

propose 'intern supervision' for an IMG who will need Level 1 equivalent supervision, if the hospital employs interns in accredited intern positions. The IMG does not need to be in an accredited intern position. No further information is required. **OR**

describe the level of supervision and supervision structures in the table below.

Required information	Detail required/Examples	To be completed by hospital
<b>Hospital location</b>	Metro/regional/rural Satellite hospitals/ sites/campuses/clinics	
<b>Hospital type</b>	Public/private Tertiary Is there an ED onsite?	
<b>IMG’s proposed hours</b>	Average number of hours per fortnight Is there after-hours work?	
<b>Supervisors (required)</b>	Principal supervisor (position) Term co-supervisors (types of positions not names)	
<b>Other clinical supervision</b>	Other medical practitioners who can act in a supervisory capacity (roles not names, such as senior doctor in training, substantially comparable specialist IMG)	
<b>Other practitioners present (optional)</b>	Other medical practitioners present when IMG is practising (roles not names, such as accredited registrar, specialist, etc)	
<b>Mechanisms in place to ensure that everyone is aware of the supervision requirements</b>	Who is responsible for determining the supervision arrangements for the rotation? Who is responsible for determining the supervision arrangements for the shift? How are the supervisors, the IMG and other team members made aware of the supervision arrangements?	
<b>Types of supervision</b>	What proportion will be direct/indirect supervision and who will provide? (roles not names) What proportion will be by onsite/offsite supervisors?	
<b>Escalation protocols for seeking assistance</b>	Routine seek advice, e.g. supervisor, other practitioners Urgent emergency response e.g. MET call, Code Blue. Call criteria and details of response not required	
<b>Any other relevant information (optional)</b>		

**4.4** Once the application is submitted, AHPRA will determine the supervision level and approve the supervision plan.

**4.5** On receipt of approved AHPRA supervision, the MWU must contact the HoD or primary supervisor immediately, to confirm that the IMG can work in the nominated role at the supervision level specified. No changes can be made after this time unless submitted and approved by AHPRA.

**4.6** If the IMG supervision level is correct and confirmed with the HOD/Principal Supervisor a copy of the AHPRA “GUIDELINES: SUPERVISED PRACTICE FOR INTERNATIONAL MEDICAL GRADUATES” is to be sent to the HoD/Principal Supervisor. A copy can be accessed in section 7 References. Supervisors must review their responsibilities and ensure they are aware of the AHPRA reporting requirements for IMGs. Proposed supervisors should also complete any required training to undertake this role prior to commencement of the plan.

- 4.7** All IMGs must attend a formal district orientation before commencing on the wards. IMGs are also required to attend an IMG specific orientation which is coordinated by the ISLHD Manager Medical Education.
- 4.8** Any proposed or required change to the plan (such as the supervisor leaving and requiring an alternative) must be documented and advised to AHPRA.
- 4.9** The final arrangement should be advised to the relevant MWU who can log the plan and ensure follow up for reporting is managed appropriately.

## 5. DOCUMENTATION

[Medical-Board---Form---Supervised-practice-plan-for-international-medical-graduates---SPPA-30 \(2\).PDF](#)

[Medical-Board---Information-sheet---International-medical-graduate-supervision-in-hospital-based-positions \(2\).PDF](#)

[Medical-Board---Guidelines---Supervised-practice-for-international-medical-graduates---4-January-2016 \(2\).PDF](#)

## 6. REFERENCES

Link to AHPRA/Medical Board rules and guides:

<https://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Supervision.aspx>

## 7. REVISION & APPROVAL HISTORY

Date	Revision No.	Author and Approval / Date
May 2023	0	<b>Authors:</b> District Director Medical Workforce and Manager JMO Wellbeing & Medical Education, Non-Specialist Medical Locums
		<b>Approval/Date:</b> Corporate Policy Recommendation committee/ May 2023 <b>Approval/Date:</b> Acting Executive Director Medical Services and Clinical Governance / May 2023