



# International Medical Graduate (IMG)

## Supervised Practice Plan

The purpose of a Supervised Practice Plan is to ensure that:

- a. the IMGs performance is evaluated and monitored;
- b. the IMG develops skills that enable them to operate within the Australian health system;
- c. the IMG demonstrates that they can practise safely.

The Medical Board of the Northern Territory may ask the supervisor nominated in the plan, to provide information at any time to the Board of the registrant's practice or performance.

Within the Supervised Practice Plan the Principal Supervisor will provide the Board with the names of any Co-supervisors who will be involved in the supervision of the IMG. Any Co-supervisor must be senior to the IMG.

The Principal Supervisor will have primary responsibility for the IMG's supervision and assessment.

Please return signed completed form prior to or within six weeks of the IMG's commencement, to:

**Medical Board of the Northern Territory**

PO Box 4221

DARWIN NT 0801

Fax: (08) 8999 4196

Email: [healthprofession.ths@nt.gov.au](mailto:healthprofession.ths@nt.gov.au)

**IMG's Details**

Name:

Registration No:

Position:

Location:

Phone:  Fax:

Mobile:  Email:

**Principal Supervisor's Details**

Name:

Registration No:

Position:

Location:

Phone:  Fax:

Mobile:  Email:

Trained IMG supervisor: Yes  No

Does this person currently supervise other IMG's.

Yes  No:

If 'Yes', total number of IMG's currently supervising

**Co-Supervisor Details (1)**

Name:

Registration No:

Position:

Location:

Phone:  Fax:

Mobile:  Email:

Trained IMG supervisor: Yes  No

Does this person currently supervise other IMG's.

Yes  No:

If 'Yes', total number of IMG's currently supervising

**Co-supervisor Details (2)**

Name:

Registration No:

Position:

Location:

Phone:  Fax:

Mobile:  Email:

Trained IMG supervisor: Yes  No

Does this person currently supervise other IMG's.

Yes  No:

If 'Yes', total number of IMG's currently supervising

### **Guidelines**

*In developing the plan the Supervisor and registrant should consider the criteria detailed in the Supervision Report.*

### **Clinical Management**

- *Documents a comprehensive patient history, (including obtaining information from other sources when appropriate).*
- *Conducts and documents an appropriate patient examination.*
- *Defines clinical problems appropriately.*
- *Develops an appropriate care management plan and effectively coordinate patient care, including referral and follow-up.*
- *Requests, follows up and interprets appropriate investigations and revises management plan as necessary.*
- *Recognises and manages emergencies that occur in patient management.*
- *Plans for discharge of patient (where relevant) including documenting discharge summary.*
- *Demonstrates and improves procedural skills relevant and appropriate to rotation.*
- *Demonstrates and improves preventative skills relevant and appropriate to rotation.*

### **Communication**

- *Communicates effectively (respectfully and with the ability to listen) with patients and their families, including the use of interpreters where necessary.*
- *Communicates effectively with other members of the health care team.*
- *Communicates effectively (clearly and concisely) with professional colleagues including general practitioners; for handover, referral and transfer of patients.*
- *Clearly documents all patient care.*

### **Professionalism**

- *Shows compassion for patients and sensitivity to their culture, ethnicity and spiritual issues.*
- *Demonstrates punctuality, effective time management and ability to prioritise work.*
- *Able to recognise limitations in his/her practice and request assistance when necessary.*
- *Demonstrates respect for all colleagues.*
- *Follows reasonable directions of more senior colleagues.*
- *Able to manage own health appropriately.*
- *Demonstrates understanding of Australian Health Systems.*
- *Accepts responsibility to teach (where appropriate).*

### **Safe Practice**

- *Demonstrates knowledge of common therapeutic agents, uses, dosages, adverse effects and potential drug interactions and ability to prescribe safely.*
- *Demonstrates knowledge of infection control principles and complies with them in patient care.*
- *Recognises and correctly reports adverse incidents.*

*The plan must include, but is not limited to:*

- *How, when and where supervision is to be provided;*
- *A process to ensure the recording of supervision and progress;*
- *Avenues to identify and address skill and knowledge development needs;*
- *Capacity and commitment to meeting the Board's reporting requirements;*
- *A process for reviewing performance (including conducting chart audits) and supervision requirements; and*
- *The Plan must be consistent with the responsibilities outlined in the IMG's position description.*



## **VERIFICATION**

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***This form must be signed by both the IMG and the Principal Supervisor to be complete.***

### **Principal Supervisor's Declaration**

I agree to supervise the IMG named in this form.

I agree to notify the Board immediately of poor performance or incompetence and to provide supervision report(s) as required by the Medical Board of the Northern Territory including on change in supervisor.

I intend to undertake the supervision in the manner set out in the Supervised Practice Plan.

Signature:

Print Name:

Date:

### **IMG Signature**

Signature:

Print Name:

Date: