



## Supervising the International Medical Graduate (IMG) GP Registrar

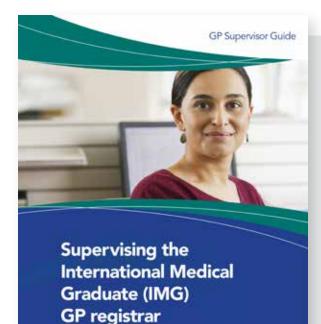
International Medical Graduates (IMGs) comprise about one third of the Australian medical workforce, with about 65% of IMGs working in locations outside capital cities.

The proportion of IMGs in GP training has increased over recent years, and now represents over one quarter of all registrars in training.

In order to provide effective supervision of our IMG GP registrars, a new GPSA guide has been created to help identify, acknowledge and address a range of potential challenges they may face during their GP training in Australia.

### What are the resources?

A new GPSA Guide outlines all aspects of the process of supervising the International Medical Graduate (IMG) GP registrar. It covers principles of supervision, issues, case studies and provides references. Download it <u>here</u>



### Guide includes:

- Principles of supervision of IMG registrars
- Issues for IMG registrars
- Cultural issues
- Communication issues
- Clinical issues
- Consultation issues
- Clinical reasoning
- Professional, ethical and medicolegal issues
- Teaching and learning issues
- Personal issues





### What Principles of Supervision are relevant to IMGs?

Six key principles usefully guide the supervision of IMG registrars. For each of these, there is a description of the IMG context.





### What are five top tips?

### **1. USE A TOOL TO IDENTIFY NEEDS**

An IMG self-assessment and a supervisor assessment tool, each dedicated to exploring the teaching and learning needs of IMG GP registrars, is a useful resource for benchmarking and planning IMG training. It can be found on page 28 of the GPSA Supervising the International Medical Graduate (IMG) GP Registrar Guide. This can be used regularly during an IMG registrar's training term to reduce the chance that something is missed within the learning experience. It covers understanding of the Australian health system and Australian culture, communication, clinical and consultation skills, professional conduct, teaching and learning and matters of a personal nature.

### 2. 'ASK' THEN 'DISCUSS' - PROFESSIONALISM, FEEDBACK, CLINICAL SKILLS

Within the assessment tool of the GPSA IMG Guide is a section on reflection. Reflection in medical education is critical to develop an understanding of both the self and the situation so that future encounters with the situation are informed. However, genuine reflective practice may be a new concept to many IMGs. They may need encouragement to stop and reflect on their practice and performance in the past. This means asking the registrar about their previous education and training and how feedback was given. It also means explicitly discussing the nature and process for feedback within the practice. IMGs could be shown the 'call for help' list and asked to inform supervisors how comfortable they are with calling for help when needed (these issues are covered in the assessment tool)

Other resources can also assist with prompting open communication around a patient centred model. The IMG Guide (page 19) includes some example phrases for building the doctor-patient relationship, opening the discussion and gathering information among other things.

The doctors speak up website offers great resources to support IMG communication and language skills.

	ients where relevant. Discu	uss with your supervisor once completed.
Cultural aspects	Rating Comments	Resources
Understanding of the Australian health care system, Medicare, PBS and the Australian 'medical culture'		Toolkit – Eart sheet 1.4 Eart sheet 1.7 MIS education for health, erofessionals PIS education for health, professionals
Understanding of Australian culture		
Cultural capability, including Aboriginal and Torres Strait Islander people		GPSA guide Aboriginal and Torres Strait klander Health in General Practice
Other		
Communication skills		
Spoken English		Doctors Speak Up Star pronunciation
Non-verbal communication		
Written English		
Understanding Australian slang		Toolkit – Factsheets <u>4.17, 4.18,</u> <u>4.19</u>   Ifeel crook, Docl
Communication in challenging scenarios e.g. breaking bad news, saying no to patients		Toolkit
Other		
Clinical skills		Resources
Clinical knowledge of common Australian general practice presentations		BEACH
History taking, including sensitive areas like sexual history taking		STI Guidelines how to take a sexual history
Physical examination, including sensitive areas like pelvic examination		
Rational use of investigations		Choosing Wisely Australia
Rational prescribing		Choosing Wisely Australia
Formulating a 'patient-centred' management plan		
Other		

Cultural	Example questions	Comments and actions	Resources
Australian health care system and medical culture	Tail me about the nature of the health system in your home country. Tail me about your previous medical practice. How did you interact with patients? Did you write as part of a team? How did you interact with specialist and other care providers?		Toolkit – Enstsheet 1.6, Factsheet 1.2
Australian culture	Vertai was the medical calcular in your home country? Are there any aspects of the Australian culture which are particularly challenging for you in your interaction with patients e.g. sexually? Have you ever been subjected to racian and how did you deal with it?		
Cultural capability	What is your approach to managing patients from other cultures? What is your understanding of the specific issues in managing Aboriginal and Torres Strait Islander people?		GPSA guide Aboriginal and Torres Strait Islander Health General Practice
Communication			
English language skills	What communication skills training have you done in the past?		
Challenging scenarios	Do you feel confident managing challenging general practice scenarios a.g. breaking bad news? Have you ever had a difficult experience related to communication barriers with a patient?		



### 3. DEMONSTRATE 'BEST PRACTICE'

Patient centred care is a model of care that is defined by understanding the whole person, respecting patient preferences and engaging patients fully in the process of care. However, it has been found that many IMGs are unfamiliar with this model due to their training and the hierarchical model of healthcare in many countries. The GPSA IMG Guide includes a range of patient-centred care tips that help IMGs to:

- Use a range of teaching methods like role plays
- Discuss hidden agendas when working with teenagers, middle-aged men and the elderly
- Discuss the use of "ICE" ideas, concerns, and expectations
- Discuss approaches to managing uncertainty see GPSA guide Managing Uncertainty
- The Scenario App resource provides material to support the discussion of ethical dilemma scenarios.



### 4. DISCLOSE YOUR OWN VULNERABILITIES

Talk with them about cultural differences in the nature of teaching and learning across different contexts and the approach used in different medical schools:

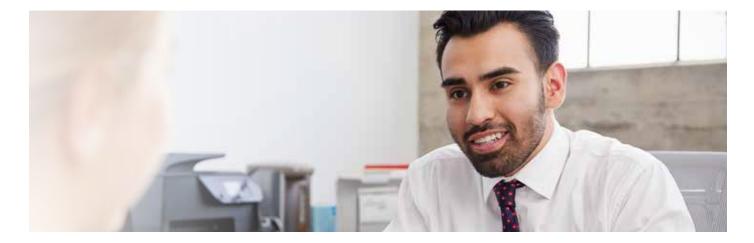
- Hierarchy teacher an expert, rather than a facilitator of knowledge
- Less emphasis on identification of individual learning needs and self directed learning
- Explore your registrar's previous experiences in education and training
- Model 'two-way' learning

### 5. LET THEM KNOW YOU'VE 'GOT THEIR BACK'

One of the key issues that impacts the IMG GP registrar's learning experience is the perceived power dynamic between teacher and learner. Overcoming this early in the relationship is crucial to the success of their GP training.

In addition, for many IMGs, personal stressors are magnified by the absence of family and community supports.

- Get to know the story behind your registrar, ask them about their background and life
- Encourage participation in community events
- Encourage your registrar to find their own GP for any health concerns they may have





### How do I prepare my IMG for exams?

IMGs are known to have lower pass rates in GP training. Factors underpinning the lack of exam success include:

- cultural issues
- communication and English language skills
- clinical skills
- study techniques

IMGs may be more familiar with a style of interrogation and identification of knowledge gaps, rather than demonstrating what they know. In many countries, oral examinations are traditionally examiner-led, rather than candidate-led.

IMGs may need to change their approach from passivity and be encouraged to speak confidently about what they know.

<u>A paper from the UK</u> describes six main themes for increased exam success:

- 1. Insight into challenges cultural, communication etc.
- 2. Proactive approach planning learning, early preparation, study skills
- 3. Refining consultation skills consultations structure, consultation skills
- 4. Learning with local graduates communication skill development
- 5. Valuing feedback seeking feedback from multiple sources
- 6. Supportive relationships practice, community

### Resources

MBS education for health professionals

How to speak Australian : Abbreviate Everything

<u>GPSA guide Aboriginal and Torres Strait Islander Health in</u> <u>General Practice</u>

www.doctorsspeakup.com

Ideas, Concerns & Expectations (ICE)

**GPSA guide Managing Uncertainty** 

Article: International medical graduates: A qualitative exploration of factors associated with success in the clinical skills assessment



Does this resource need to be updated? Contact GPSA: P: 03 9607 8590, E: <u>admin@gpsa.org.au</u>, W: <u>gpsa.org.au</u> GPSA is supported by funding from the Australian Government under the Australian General Practice Training Program 06/06/21