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 **International Medical Graduate**

 **Competence Assessment & Recommendations for**

**Additional Training and Support**

**CARATS**

**Guide**

This form should be completed for any doctor starting at Airedale who fulfils the following criteria:

* Primary Medical Degree obtained from non-UK medical school
* Less than 6 months full time postgraduate experience working for an acute NHS trust
* Employed at any grade below consultant either as part of a training scheme or as trust grade

It is intended to identify additional induction / training needs that should be made available to the doctor and to outline how the additional support will be delivered.

Responsibility for completing the form rests with the doctor’s Clinical Supervisor. Where practicable, this form should be completed prior to the doctor starting work, but where this is not possible it should be completed within 1 week of starting work.

**Background Information**

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| **Doctor Name** |  |
| **Placement at AGH** |  |
| **Rotation / Trust Grade** |  |
| **Clinical Supervisor Name** |  |
| **Educational Supervisor Name** |  |
| **Date Form completed** |  |
| **Supervisor Completing Form** |  |

**Section 1**

*Relevant Professional Background, Qualifications and Clinical Experience*

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| **Primary Medical Degree** |  |
| **Date** |  |
| **Awarding Body** |  |

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| **Additional Postgraduate Qualifications** |  |  |  |
| **Date** |  |  |  |
| **Awarding Body** |  |  |  |

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| **Postgraduate Clinical Experience (including shadowing / clinical attachments)** | **Dates** | **Outline key roles and responsibilities\*** |
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\*Note: The roles, expected responsibility and level of autonomy for any given grade may vary from country to country and may not necessarily be commensurate with an equivalent grade in the UK. It is important to explore actual levels of responsibility and decision making, particularly for doctors employed in more senior positions.

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| **Notes / Discussion** |  |

**Section 2**

*Clinical Skills relevant to post*

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| **Core Foundation Competenciesrelevant to post eg: cannulation, ABG, catheterisation (Please add any other relevant clinical skills)** | **Doctor self-assessment of skill (1-5)\*** | **Additional training need identified (Y/N)** | **How will training need be addressed (eg: workplace assessment, simulation training)** |
| **Venepuncture** |  |  |  |
| **Cannulation** |  |  |  |
| **Arterial Blood Gas** |  |  |  |
| **Urinary Catheter** |  |  |  |
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\*Note: Whilst it is expected that all doctors employed either via training schemes or as trust grades will have at least foundation equivalent clinical skills this cannot guaranteed. For example, in many regions some core foundation competencies may be primarily carried out by nurses.

**As a minimum, it is advised that all doctors new to the UK should be given the opportunity to observe each core procedure and then perform it under direct supervision to enable familiarisation with equipment.**

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| **Additional *Speciality Specific* Skills needed to safely perform role\*** | **Doctorself-assessment of skill (1-5)** | **Additional training need identified (Y/N)** | **How will training need be addressed (eg: workplace assessment, simulation training)** |
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\*This may include non-foundation clinical skills such as central line insertion, airway or surgical skills, paediatric specific technical skills etc or important “soft skills” such as leadership, supervising juniors, departmental management etc.

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| **Detail any procedures for which the doctor may be required to take consent** | **Doctor self-assessment of skill (1-5)** | **Additional training need identified (Y/N)** | **How will training need be addressed (eg: workplace assessment, simulation training)** |
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**Section 3**

*Speciality Specific Training and eLearning*

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| **Mandatory training / other****elearning that doctor should complete** | **Timeline for completion** | **Is completion necessary for doctor to achieve non-supernumerary status?** |
| **Consent** |  |  |
| **Mental Capacity Act** |  |  |
| **Confidentiality** |  |  |
| **Adult Safeguarding** |  |  |
| **Infection Prevention** |  |  |
| **BLS / ILS / ALS** |  |  |
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All new doctors should complete mandatory training e-learning packages. It is suggested that in the majority of instances international graduates are given sufficient time to allow them to complete mandatory training modules before joining the substantive rota.

**Section 4**

*Starting work in the UK*

The doctor and supervisor should use this opportunity to discuss other factors relating to the doctor beginning their medical career in the UK

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| **Discussion (include other discussion points as necessary)** | **Discussed Y/N** | **Comments / Outcome/ Actions** |
| **Doctor concerns about starting work in the UK****including any perceived problems / barriers** |  |  |
| **Understanding of duty roster including how to request annual leave and sickness reporting** |  |  |
| **Understanding of day to day responsibilities and expectations** |  |  |
| **Escalating concerns / how to contact****senior support and advice during day and****out of hours** |  |  |
| **Understanding of eportfolio and / or activities** **log, role of Educational Supervisor****and need for appraisal** |  |  |
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**Onboarding Phase I**

*Mandatory Supernumerary Period*

All international doctors starting their UK medical career should be Supernumerary for *at least* the first 2 weeks.

A supernumerary period is typically described as a short, intense period where the Doctor is considered as an *additional* member of staff.

During this time, it is expected that the Doctor will have no fixed work commitments, enabling them to complete a programme of focused learning, familiarisation with the work environment, IT systems and equipment, completion of mandatory training and any additional identified clinical skills training.

In order for a Doctor to progress from Supernumerary working their Supervisor needs to complete and sign Appendix I “Completion of Supernumerary Period”

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| **Supernumerary Period Required (Y/N)** |  |
| **Expected Review Date (See Appendix 1)** |  |

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| **Notes / Discussion** |  |

Where it has been decided that NO supernumerary period is required please outline rationale for decision. This ***must*** be discussed with either the Director of Medical Education or Deputy Director of Medical Education before the doctor can begin work.

**Onboarding Phase II**

*Recommended Enhanced Supervision*

Following their Mandatory Supernumerary Period, It is *recommended* that doctors beginning their UK medical career should have a period of Enhanced Supervision.

Enhanced supervision is described as a short, intensive period of enhanced support and supervision, focused learning activities targeted towards specific training needs and regular direct observation of clinical activities with the aim of enabling the Doctor to confidently transition towards safe UK practice.

It is expected that during this time trainees may not work the full roster. For example, it may not be appropriate for the Doctor to carry an on call bleep or work unsupervised overnight. The length of the enhanced supervised period, level of supervision required and activities within it will be bespoke to the trainee and their specific needs but could reasonably vary from 1-2 weeks to several months.

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| **Period of Enhanced Supervision****Required (Y/N)** |  |
| **Expected Review Date (See Appendix 1)** |  |

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| **Notes / Discussion**Please outline the specific details of the recommended Enhanced Supervision and whether this is anticipated to be for a fixed period of time or is commensurate on completion of specific training / skills acquisition etcWhere it has been decided that an Enhanced Supervision period **IS NOT** required please outline rationale for decision | . |

**Appendix I**

*Completion of Mandatory Supernumerary Period*

The Doctor should *ONLY* be made non-supernumerary once they have satisfactorily demonstrated the minimum knowledge, skills and attributes required to safely and effectively perform their expected duties, recognising that some Doctors will also require a period of enhanced supervision as detailed above.

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| **Requirement** | **Comments / Outcome/ Actions** |
| **Evidence that doctor can perform****core clinical skills to a satisfactory standard** |  |
| **Evidence that doctor can perform additional *speciality specific* clinical skills to a satisfactory standard** |  |
| **Essential mandatory training complete** |  |
| **Recommended additional learning complete** |  |
| **Doctor has sufficient understanding of the****key IT systems / processes** |  |
| **Opinion / Consensus of other senior****colleagues (recommended)** |  |
| **Opinion / Consensus of junior****medical colleagues / nursing staff** **(recommended)** |  |
| **Does the Doctor feel *confident* that****they are ready to join the main rota** |  |

**Clinical supervisor to sign when they are satisfied that doctor is ready to join main rota (with or without period of Enhanced Supervision)**

|  |  |
| --- | --- |
| **Signed** |  |
| **Print Name** |  |
| **Date** |  |

Completed form to be forwarded to supportt.yh@hee.nhs.uk and departmental rota co-ordinator to be informed of non-supernumerary status. Please keep a copy for your records too