

# Assessing International Medical Graduate (IMG) Proficiency in Procedural Skills During a 12-Week Clinical Field Assessment

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## INTRODUCTION

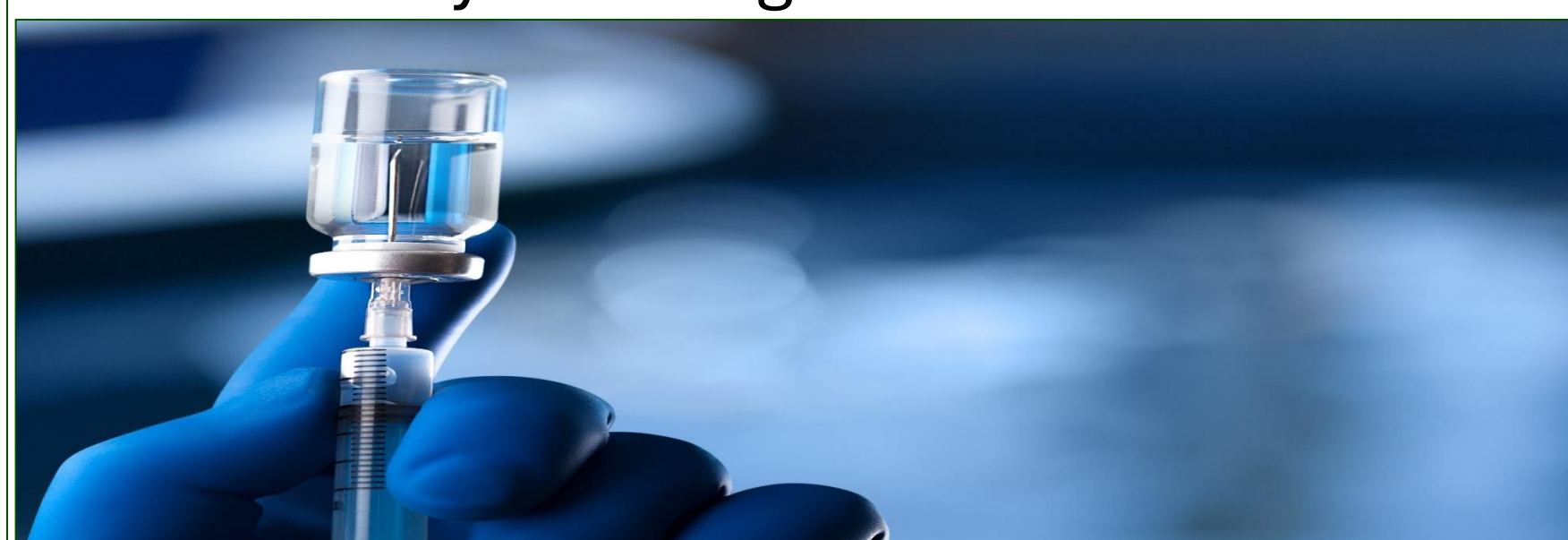
International Medical Graduates (IMGs) play a crucial role in addressing healthcare workforce shortages, particularly in rural regions (1). Therefore, ensuring that IMGs possess the necessary procedural skills to provide high-quality patient care is essential. The 12-week Clinical Field Assessment (CFA) is a critical component of the Saskatchewan International Physician Practice Assessment (SIPPA) program designed to evaluate and enhance the procedural competencies of IMGs.

## OBJECTIVES

The objective of this study was to explore and quantify exposure and competency of various procedural skills for IMG trainees during a 12-week clinical field assessment conducted through the SIPPA program at the University of Saskatchewan.

## METHODS

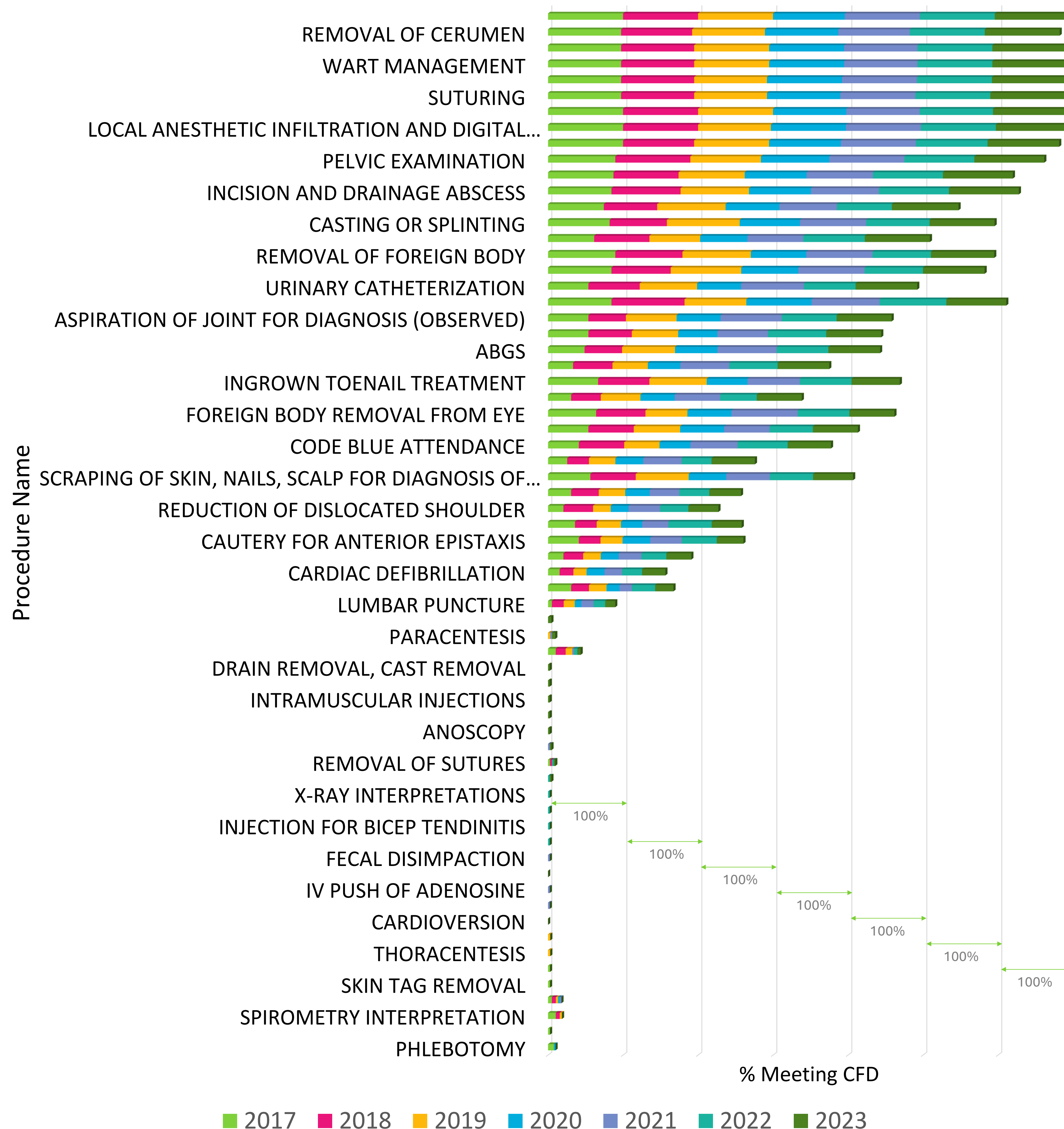
- This study was approved by the University of Saskatchewan Behavioral Research Ethics Board (Beh-#4684).
- Data was extracted from skill evaluation forms completed by preceptors for IMG trainees enrolled in a 12-week clinical field assessment (CFA) from 2017 to 2023.
- SIPPA IMG trainees were deemed competent in procedures to which they were exposed if they demonstrated full proficiency in their assessments.
- Descriptive statistics were calculated for the frequency and percentages of procedures to which IMGs were exposed during the 12-week CFA, and procedural skill competency across 66 procedures was analyzed using SPSS.



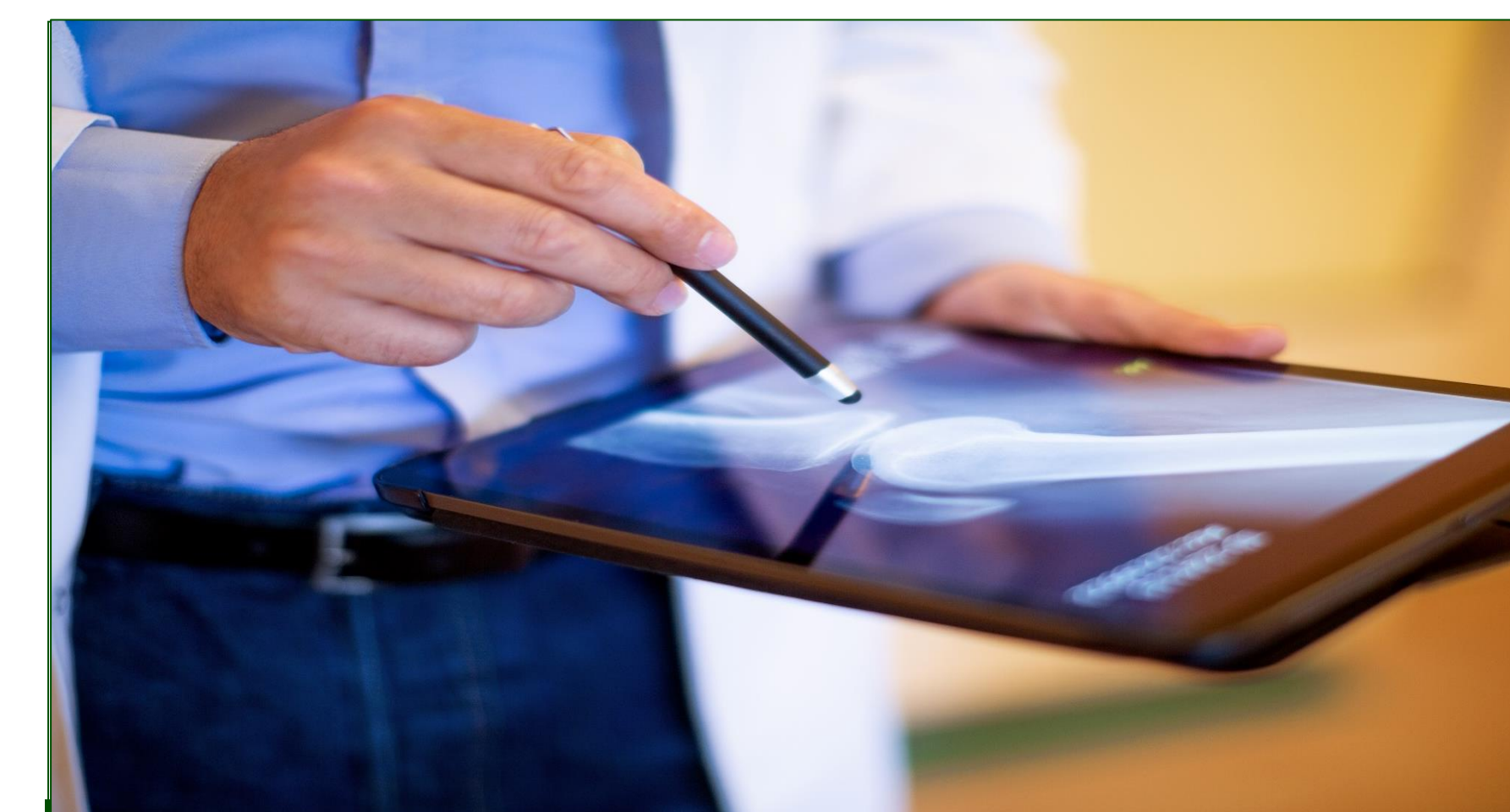
## RESULTS

- Data for 66 procedures was extracted from the evaluation of 299 SIPPA trainees between 2017 to 2023.
- Across the years (2017 to 2023), SIPPA trainees demonstrated full competency in commonly utilized procedures including injections, EKG interpretation, cerumen removal, ear syringing, laceration repair up to incision and drainage with exposure ranging between 80-95%. These were considered as high exposure and competency procedures.
- Moderate exposure and full competency procedures included lumbar puncture, central line insertions, slit lamp examination, joint injection, and paracentesis (with exposure ratings between 40-70%.)
- Low exposure and full competency procedures included thoracentesis, intraosseous needle insertion down to skin tag removal demonstrated low proficiency ratings between 20-40%.

Percentage of Participants Meeting CFD By Year



Key: ABGS:Arterial Blood Gas Sampling; CFD: competency fully demonstrated; IV: Intravenous



## DISCUSSION

- We considered high exposure and competency procedures as commonly utilized procedural skills done in rural primary care settings which explains why IMGs received more training/full competency in these areas during their CFA.
- Moderate to low exposure and full competency procedures which showed variability across the years could have been influenced by the infrequency of these procedures in typical clinical settings or the specific case mix encountered by trainees during their short CFA period.

## CONCLUSIONS AND IMPLICATIONS

Our study highlights procedures where IMG trainees may be more exposed and competent (e.g., basic procedural skills) and areas where additional focus may be needed (e.g., specialized procedures with low exposure). The variability in procedural exposure suggests a need for standardized training to ensure comprehensive skill development for all trainees, irrespective of the cases they encounter during their CFA.

## REFERENCE

- Islam N. The dilemma of physician shortage and international recruitment in Canada. Int J Health Policy Manag [Internet]. 2014 May 29 [cited 2024 Sep 9];3(1):29-32. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4075100/>

## ACKNOWLEDGEMENTS

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