# **OMAN MEDICAL SPECIALTY BOARD**



# **ASSESSMENT AND COUNSELLING SECTION**

Policy Title	Assessment and Counselling				
Policy Number	OMSB-CG-P-1				
Functional Field	Trainee Education				
Related Policies	Interruption from training in Residency/Fellowship     Program				
	Remediation for Poor Academic Performance     Academic Performance Improvement Plan				
	Supplementary Year of Training				
	Termination				
	Trainee Performance Assessment				
	<ul> <li>Transfer between Residency Programs and from Residency to General Foundation Program</li> </ul>				
	Violations and Penalties				
	<ul> <li>Withdrawal of Residents and Fellows</li> </ul>				
Responsibility of	Trainee Affairs Department				
Status	✓ Approved	In-revision	Proposed		
		Draft #	Draft #		
Approved By	Board of Trustees				
Effective Date	14 November 2021				

Revision History			
Number	Date	Ву	Main Changes
Revision # 1			
Revision # 2			

Contact Office	Trainee Affairs Department		
E-mail Address	counselling@omsb.org		
Phone Number	2418 1072		

## 1. POLICY TITLE

Assessment and Counselling

## 2. DEFINITIONS AND ABBREVIATIONS

- 2.1 Physician: A doctor who is registered in OMSB general foundation program, specialty program, fellowship program, on a scholarship program abroad, or an OMSB faculty member.
- 2.2 Assessment: Analysis of referred physician's information and diagnosis.
- 2.3 Counselling: The provision of professional support and guidance in resolving personal, psychological or academic issues.
- 2.4 Training Program: General foundation, residency or fellowship program.
- 2.5 Section: Counselling and Guidance Section in the Trainee Affairs Department

# 3. POLICY STATEMENT

This policy is aimed at providing information and guidance related to the assessment and guidance for referred trainee (during their training period within OMSB or the period of scholarship abroad), and for OMSB faculty members.

## 4. PURPOSE/ REASONS FOR POLICY

# 4. 1 Reasons of the Policy:

It is made as a regulatory part to implement OMSB Training Bylaws and to cope with the ACGME-I institutional requirements.

# 4. 2 Purpose of the Policy:

It is aimed to illustrate the assessment and counselling mechanism.

#### 5. Scope of Application

This policy applies to OMSB trainees registered in OMSB general foundation program, specialty training program, fellowship program, on scholarship abroad, or OMSB faculty members.

## 6. THE UNIT RESPONSIBLE OF THE POLICY:

The OMSB Trainees Affairs Department, and it is responsible for developing, reviewing, updating and overseeing it. The authority concerned must be notified before any updates or changes to this policy.

#### 7. APPROVAL BODY

**Board of Trustees** 

# 8. Procedures

- 8.1 The physician may submit a self-referral request to the Section using the "Self-Referral Form (Policy Appendices 14.1)".
- 8.2 OMSB Trainees may be referred from their training programs for reasons related to being put in probation or remediation, transfer from one training program to another, interruption, withdrawal, termination from training or any other reasons. This referral is submitted to the Section by the Education

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- Committee using a "Program Referral Form Policy Appendices 14.2" and a "Trainee Performance Evaluation Form Policy Appendices 14.3".
- 8.3 Upon receiving the required forms, the section staff review the forms and arrange an assessment session for the referred physician within two weeks.
- 8.4 On the day of the session, the referred physician is required to sign "Confidentiality Form (1) Policy Appendices 14.4". If the physician refuses to sign the form, the referral is cancelled and a notification is sent to the program in case of program referral.
- 8.5 Initial assessment session is conducted on a one-to-one basis in a secure closed environment or virtually to maintain the full therapeutic relationship confidentiality.
- 8.6 The Section prepares an assessment report together with the recommendations and sends it to the Education Committee in the Case of program referral. There will be no report for self-referral cases.
- 8.7 Follow up reports may be sent to the educational committee, if required.
- 8.8 The referred physician may be referred externally as part of the management plan when he/she is diagnosed with a mental/health issue or any other issue. This procedure is done by signing the "External Referral Form Policy Appendices 14.6" by a staff of the Section and a "Confidentiality Form (2) Policy Appendices 14.7" by the referred physician.
- 8.9 In the event that a physician requires medication, this will not be provided by OMSB, and he/she shall be referred to a medical institution as per the OMSB Treatment Provision Guidelines (Policy Appendices 14.8).
- 8.10 In the event that a physician referred by the training program refuses to complete the above-mentioned procedures despite being informed, OMSB has the right to take necessary action in accordance with OMSB Training Bylaws 13/2019.
- 8.11 The assessment and counselling plan for a referred physician is closed and the physician is discharged from the Section if he/she fulfils the criteria mentioned in the Discharge Guidelines (Policy Appendices 14.9).
- 8.12 All information of clinical encounters (either physical or virtual) are archived as electronic database maintained in a separate confidential filing system in the Section.
- 8.13 For all of the above, the Confidentiality Guidelines (Policy Appendices 14.10) approved by the Board of Trustees shall be implemented.

# 9. RELATED POLICIES

- 9.1 Interruption from training in Residency/Fellowship Program
- 9.2 Remediation for Poor Academic Performance Academic Performance Improvement Plan
- 9.3 Supplementary Year of Training
- 9.4 Termination
- 9.5 Trainee Performance Assessment
- 9.6 Transfer between Residency Programs and from Residency to General Foundation Program
- 9.7 Violations and Penalties
- 9.8 Withdrawal of Residents and Fellows

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## 10. RESPONSIBILITY FOR IMPLEMENTATION

**Program Education Committee** 

Faculty

**Trainee Affairs Department** 

#### 11. Issuing Office

**Executive President** 

#### 12. REVIEW

The Executive Academic Committee reviews this policy periodically, and suggests making the necessary amendments to it as needed within a period not exceeding (3) years since the date of the last version of this policy.

# 13. DIFFICULTIES/CHALLENGES

- 13.1 Inadequate awareness of trainees and faculty members about assessment and counselling services
- 13.2 Refusal of trainees and faculty members to utilize assessment and counselling services
- 13.3 Breaching of confidentiality by one of the parties concerned.

#### 14. POLICY APPENDICES

- 14.1 Self-referral Form
- 14.2 Program Referral Form
- 14.3 Trainee Performance Evaluation Form
- 14.4 Confidentiality Form (1)
- 14.5 Assessment Form
- 14.6 Confidentiality Form (2)
- 14.7 External Referral Form
- 14.8 Treatment Provision Guidelines
- 14.9 Discharge Guidelines
- 14.10 Confidentiality Guidelines in the Counselling and Guidance Section

#### 15. POLICY INDEXING

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# 16. References:

- 16.1 Royal Decree 31/2006 of establishing Oman Medical Speciality Board.
- 16.2 OMSB Training Bylaws 13/2019.
- 16.3 ACGME International Institutional Requirements.

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