

OMAN MEDICAL SPECIALTY BOARD



ASSESSMENT AND COUNSELLING SECTION

Policy Title	Assessment and Counselling			
Policy Number	11			
Functional Field	Trainee Education			
Related Policies	<ul style="list-style-type: none"> • OMSB Probation Policy (Under Revision) • Academic Performance Improvement Plan (Under Revision) • Transfer between Residency Programs and from Residency to General Foundation Program (Policy No. 2) • Interruption from training in Residency/Fellowship Program (Policy No. 3) • Withdrawal of Residents and Fellows (Policy No. 4) • Violations and Offences (Under Revision) • Termination (Policy No. 6) • Reporting and Management of Professional Misconduct (Under Revision) • Supplementary Year of Training (Under Revision) 			
Responsibility of	Trainee Affairs Department			
Status	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> In-revision Draft #	<input type="checkbox"/> Proposed Draft #	
Approved By	Board of Trustees			
Effective Date	14 November 2021			

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

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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 Indexing 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 Committee using a "Program Referral Form - Policy Indexing 14.2" and a "Trainee Performance Evaluation Form - Policy Indexing 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 Indexing 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 Indexing 14.6" by a staff of the Section and a "Confidentiality Form (2) - Policy Indexing 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 Indexing 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 Indexing 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 Indexing 14.10) approved by the Board of Trustees shall be implemented.

9. RELATED POLICIES

- 9.1 OMSB Probation Policy
- 9.2 Academic Performance Improvement Plan
- 9.3 Transfer between Residency Programs and from Residency to GFP Program
- 9.4 Interruption from Residency/Fellowship Training
- 9.5 Withdrawal from Residency/Fellowship
- 9.6 Violations, Offences and Termination
- 9.7 Reporting and Management of Professional Misconduct
- 9.8 Supplementary Year of Training

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 INDEXING

- 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 APPENDICES

Policy No. 11

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.

Assessment and Counselling (Policy No. 11)

