

Quality Accreditation – The role of international organizations

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Quality Concerns

- **Systems – Resources**
- **Standards**
- **Teaching**
- **Scholarship**
- **Research**
- **Learning experiences**

Quality Improvement

- **Internal QA**
- **External QA**
 - **Accreditation**
 - **Practice Audit**
 - **Recertification**
 - **Licensing examination**

Quality Improvement

- **Relevance to practice**
- **Societal needs**
- **Contribution to knowledge**
- **Innovation**

WHO Contribution

- **Technical expertise**
- **Leadership**
- **Knowledge sharing**
- **Guidelines**
- **WFME collaboration**

Relevance and Quality of Medical Education

- **60's-70's Community Orientation**
– Rural doctors
- **1973 Establishment of RTTCs**
- **1977 Establishment of NTTCs**

Reorientation of Medical Education

- **1979** **ROME-I Rationale and needs**
- **1973** **ROME-II Teaching Learning Strategies**
- **1987** **ROME-III Targets and Indicators for Monitoring and Evaluation**
- **1977** **ROME-IV – Review of I to III and Innovations PBL**

Quality and Accreditation

- **1996** **Equivalence of Qualifications, Kathmandu, Nepal**
- **1998** **Silver Jubilee of RTTCs, Quality of Medical Education, Kandy, Sri Lanka**
- **1999** **Public Health in SEA, Cacusutta, India**
- **2002** **Accreditation – Public Health, Chennai, India**
- **2002-2007** **Public Health Education/ Networking**

Equivalence Committee

- 1. To facilitate the movement of medical professionals**
- 2. Graded evaluation, high school to intermediate, to bachelor, to post-graduate degree, diploma, and to doctorate**
- 3. Certificates, transcripts, professional body registration to be used as indicators for comparison**

Kathmandu 1996

Equivalence Committee – contd...

- 4. To advise the medical councils on:**
 - Admission criteria;**
 - Programme design or curriculum;**
 - Duration of course;**
 - Programme delivery;**
 - Pedagogical tools used;**
 - Assessment methods;**
 - Criteria to judge performance, and**
 - Profile of teaching faculty, etc.**

Kathmandu 1996

Task Force on Accreditation, August 1999

- **Country-specific current methods of quality of medical education and practice of medicine need strengthening**
- **Accreditation, certification and licensure of physicians need to be strengthened to ensure quality of institutes and graduates produced**
- **Existing accrediting bodies/medical councils need administrative reorganization, staff development and acquire new technologies**

Task Force Recommendations

- **Strengthening medical councils**
- **National Consultative meetings on accreditation**
- **Initiate self-study of medical schools**
- **Submit detailed outline for regional centers for conducting self-evaluation/accreditation**
- **Develop minimum set of standards and centers for accreditation based on the result of self-study**

Calcutta Declaration on Public Health

- **Strengthen and reform public health education and training and research, as supported by the network of institutions and use information technology for improving human resources development**

Accreditation – Public Health Education

- **Generics skills and competencies; eligibility criteria; curricular nature and design; facility; teaching/learning resources and methods, process, monitoring and assessment**
- **Adapted WFME recommendations on medical education as a frame for accreditation**
- **Currently updated by SEAPHEIN network**

Networking

- **SEAPHEIN**
- **SEARAME**
- **Medical councils - Network**

Priority of Medicine Councils (2008-2009)

- **Website**
- **Code of conduct**
- **Patient safety**
- **Accreditation guidelines**
- **Ethics Module**

