Accreditation of the
University of Queensland,
School of Medicine

Executive Summary
2014
Executive summary 2014

In 2014, the AMC conducted a follow-up assessment of the University of Queensland, School of Medicine’s medical program. This follow-up assessment was a condition on the School’s accreditation following the AMC’s 2010 major change assessment of the program. The AMC’s Procedures for assessment and accreditation of medical schools by the Australian Medical Council 2011 describe the procedures regarding assessment of major change in an accredited program. This accreditation report includes both the 2010 and the 2014 assessment findings.

2010 major change assessment

In 2008/9 the School sought approval to make changes to its program that included a proposal to admit up to 120 fee-paying students per year from the United States (US citizens or permanent residents) who would complete the first two years of the program at the University’s Brisbane campuses, and then undertake the majority of their Years 3 and 4 clinical training through the School’s Ochsner Clinical School, established through the Ochsner Health System, in New Orleans. This represented a fifty per cent increase in student intake since the last AMC program assessment in 2005. The School also planned to deliver the first two years of the program at the University’s Ipswich campus.

The AMC’s Assessment and Accreditation of Medical Schools: Standards and Procedures required the Medical School Accreditation Committee to decide whether the major change could be approved within the current accreditation or were of comprehensive impact and required reaccreditation of the whole program.

The AMC policy statement Medical Courses Conducted Offshore by Australian and/or New Zealand Universities sets out additional criteria that apply when the AMC considers a proposal to deliver an accredited program offshore. The program should be offered by an AMC accredited medical school, where the Australian/New Zealand university has developed the program and has responsibility for overseeing the academic standards. The resulting award should be a recognised higher education qualification of the university; the program should be essentially the same in terms of educational objectives, curriculum framework, educational process and assessment outcomes; and it should include adequate experience within the Australian/New Zealand health care system.

The AMC Directors accepted the School’s submission as a proposal for a major change to the University of Queensland’s accredited medical program, and invited the School to proceed to full assessment of the plans by an AMC team. In 2010, the AMC conducted a major change assessment, visiting three campuses and all ten clinical schools, including Ochsner (Louisiana), Brunei, and the Rural Clinical School.

In November 2010 the AMC Directors decided that the Bachelor of Medicine / Bachelor of Surgery (MBBS) program of the School of Medicine, University of Queensland met the approved accreditation standards and approved the major changes. The AMC granted the School accreditation until 31 December 2016 subject to the submission of satisfactory progress reports, reports on a range of conditions at Standards 1, 3, 5, 7 and 8, and a follow-up assessment in 2014 to review the School’s progress in implementation of the major changes, and any changes that may follow from the School’s internal 2009 MBBS review.

In 2011, 2012 and 2013 the School submitted progress reports which the AMC considered to be satisfactory.

Introduction of the Doctor of Medicine

In 2012, the School notified the AMC of its proposal to introduce a Doctor of Medicine (MD) in place of its MBBS from 2015. Having considered the proposal and received additional information from the School the AMC decided this did not represent a major change to the accredited program though considered that assessment of the MD implementation plans should be part of the 2014 AMC follow-up assessment of the program.
In this report, the term medical program, or program, refers to the School’s two programs unless noted otherwise: the School’s four-year direct graduate entry MBBS program and the four-year Doctor of Medicine (MD) program. The School will introduce the MD program in 2015 with a parallel teach-out phase of the MBBS program. Existing MBBS students will not be permitted to transfer to the MD program.

The AMC applies one set of accreditation standards for programs of study that lead to professional registration. It recognises there are additional academic expectations of programs at masters degree level, and the University has structured its program to take account of these expectations. The AMC notes that separate processes exist to audit and assess whether the University's academic programs are in line with national qualification framework guidelines.

2014 follow-up assessment

The 2010 AMC accreditation decision required the 2014 assessment to include a review of the School’s progress in implementation of the major changes and the School's 2009 internal review. Since the 2010 major change assessment, AMC monitoring has observed incremental changes in the program, and found that a number of accreditation conditions at Standard 5 Assessment have not yet been met. In 2013, the Medical School Accreditation Committee agreed the scope should also include review of governance (including restructures and the change in head of school); and the curriculum change to the MD program and assessment of implementation plans.

The 2014 team reviewed the School’s follow-up accreditation submission and the medical student society’s submission, and visited the School and associated clinical teaching sites in the weeks of 4 – 6 June 2014 (Ochsner Clinical School, Louisiana) and 15 – 20 June 2014 (Queensland). This report presents the team’s findings against the Standards for Assessment and Accreditation of Primary Medical Programs by the Australian Medical Council 2012.

Decision on accreditation: 2014

Under the Health Practitioner Regulation National Law, the AMC may grant accreditation if it is reasonably satisfied that a program of study and the education provider that provides it meet an approved accreditation standard. It may also grant accreditation if it is reasonably satisfied that the provider and the program of study substantially meet an approved accreditation standard, and the imposition of conditions on the approval will ensure the program meets the standard within a reasonable time.

Having made a decision, the AMC reports its accreditation decision to the Medical Board of Australia to enable the Board to make a decision on the approval of the program of study for registration purposes.

The accreditation decision that can be made by the AMC as a result of this assessment is:

i. confirm the accreditation decision made in 2010, being the maximum six-year period of accreditation to 31 March 2017\(^1\), subject to satisfactory progress reports;

ii. if the approved accreditation standards are substantially met, set conditions to ensure the standards are met in a reasonable timeframe.

iii. revoke the accreditation if the approved accreditation standards are not met.

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\(^1\) The 2010 accreditation granted the program accreditation until 31 December 2016, however from 2014 at the time of an accreditation decision, AMC accreditation end dates will change from 31 December to 31 March (the following year).
The AMC is reasonably satisfied that the medical programs of the University of Queensland, School of Medicine meet the approved accreditation standards.

The 20 October 2014 meeting of the AMC Directors agreed:

i. That accreditation of the following medical programs of the University of Queensland, School of Medicine be confirmed to 31 March 2017, being the maximum six-year period of accreditation, subject to satisfactory progress reports:
   - Bachelor of Medicine/Bachelor of Surgery - four-year degree (final cohort enrolled 2014)
   - Doctor of Medicine - four-year degree (for cohorts commencing from 2015)

ii. That accreditation is subject to the following conditions:

2014 condition

By 28 November 2014, evidence that the School has addressed the following condition from the accreditation report:

- Finalise the MD Year 1 content by November 2014 (Standard 3.2).

2015 conditions

In the 2015 progress report, evidence that the School has addressed the following conditions from the accreditation report:

- Ensure adequate medical education expertise to support the program in the areas of educational design, e-learning, assessment and evaluation (Standard 1.4).
- Demonstrate the School has the ongoing financial resources and capacity to sustain the program (Standard 1.5).
- Finalise the MD Year 2 content (Standard 3.2).
- Complete the MD course structure, including the mapping of Phase 2 to the Graduate Outcome Statements, for the full MD program (Standard 3.2).
- Develop a curriculum strategy for interprofessional learning activities across all sites, to ensure all students have the opportunity to work with, and learn from and about, other health professionals (Standard 4.7).
- Produce a formal blueprint for each year or phase of the program to systematically guide assessment (Standard 5.2).
- Implement processes to ensure separation of student support from assessment and progression decision making (Standard 7.3.4).
- Develop a School of Medicine Fitness to Practise policy specifically for medical students; and ensure adequate communication of this policy to clinical teachers and staff, to ensure effective identification and support of students who may be impaired (Standard 7.4).
- Demonstrate the School has the capacity to manage the full 2016 Year 1 cohort on main campus / Brisbane sites, including details regarding lecture, problem-based learning, lab, clinical skills and clinical coaching delivery, and availability of academic and clinical teaching staff (Standard 8.1).
- Given the transfer of the Ipswich campus from UQ to the University of Southern Queensland, confirm arrangements for student and staff access to physical facilities, including teaching space allocation, from 2015 until the end of 2016 (Standard 8.1).
• Given the withdrawal from Sunshine Coast Clinical School in 2015, confirm plans to accommodate these students at other clinical schools (Standard 8.3).

2016 conditions
In the 2016 progress report, evidence that the School has addressed the following conditions from the accreditation report:

• Given the School’s projected budget deficit to 2016, demonstrate the School has the ongoing financial resources and capacity to sustain the program (Standard 1.5).
• Demonstrate the 2016 Year 1 students have adequate access to teaching and learning sites to achieve the outcomes of the program, including details regarding lecture, problem-based learning, lab, clinical skills and clinical coaching delivery, and availability of academic and clinical teaching staff (Standard 8.1).
Key findings of the AMC’s 2014 accreditation of the University of Queensland, School of Medicine

1. The context of the medical program | SUBSTANTIALLY MET

Standard 1.4 and 1.5 are substantially met.

2015 conditions
Ensure adequate medical education expertise to support the program in the areas of educational design, e-learning, assessment and evaluation (Standard 1.4).

Demonstrate the School has the ongoing financial resources and capacity to sustain the program (Standard 1.5).

2016 condition
Given the School’s projected budget deficit to 2016, demonstrate the School has the ongoing financial resources and capacity to sustain the program (Standard 1.5).

2015 recommendation for improvement
Develop a succession management plan for key academic staff including curriculum leads, discipline and clinical school heads, and medical education experts (Standard 1.8).

2. The outcomes of the medical program | MET

Commendations
The thorough and inclusive process by which the School has developed its new vision, purpose and core values (Standard 2.1).

The regular communication between the Ochsner staff and the School, that has contributed to comparable outcomes despite the geographic distance and differences in health-systems (Standard 2.2).

3. The medical curriculum | SUBSTANTIALLY MET

Standard 3.2 is substantially met.

2014 condition
Finalise the MD Year 1 content by November 2014 (Standard 3.2).

2015 condition
Finalise the MD Year 2 content (Standard 3.2).

Complete the MD course structure, including the mapping of Phase 2 to the Graduate Outcome Statements, for the full MD program (Standard 3.2).

2015 recommendations for improvement
Develop a resourced plan to produce and implement the Adult Online Interactive Education (AOLIE) modules, to further integrate Phase 1 topics into Phase 2 (Standard 3.3).
Implement a mechanism to track students’ competence in the required procedural and clinical skills (Standards 3.3 and 5.2).

Strengthen and further integrate the Indigenous health curriculum in the program (Standard 3.5).

### 4. Teaching and learning | MET

Standard 4.7 is substantially met.

**2015 condition**

Develop a curriculum strategy for interprofessional learning activities across all sites, to ensure all students have the opportunity to work with, and learn from and about, other health professionals (Standard 4.7).

**Commendations**

The transformed anatomy program has a focus on foundation knowledge, clinical context and safe practice, and is achieving high student satisfaction levels (Standard 4.1).

The development of a unified on-line curriculum for paediatrics, known as the Paediatric Online Learning Interactive Environment (POLIE) (Standard 4.1).

The high-quality student experience at Ochsner, which includes mentoring, one-on-one supervision, and students’ increasing responsibility as a member of the healthcare team (Standard 4.4).

The Urban Longitudinal Integrated Community Care Project, an example of patient centred care and collaborative engagement (Standard 4.6).

### 5. The curriculum – assessment of student learning | MET

Standard 5.2 is substantially met.

**2015 condition**

Produce a formal blueprint for each year or phase of the program to systematically guide assessment (Standard 5.2).

**Commendations**

The substantial progress in the area of assessment, the adoption of many recommendations of the Prideaux report, and the progress made in standardising assessment across the School’s many clinical sites (Standards 5.1 and 5.2).

The assessment feedback method to students provided in Phase 1, where whole-of-class groups review recently completed exams, providing opportunity for students to consider their performance proximate to undertaking the assessment (Standard 5.3).

**2015 recommendations for improvement**

Monitor standard setting for multiple choice questions in Phase 2 to ensure the method is routinely and appropriately applied (Standard 5.2).

Minimise inter-rater variation in assessment outcomes through ongoing staff development and training (Standard 5.2).
Further develop methods for individualised student feedback from assessment (Standard 5.3).

### 6. The curriculum – monitoring

**Commendations**

The School’s demonstrated willingness to seek and act upon student feedback (Standard 6.1).

The School’s statistical analyses of the large cohort, and its close attention to Ochsner cohort outcomes (Standard 6.2).

**2015 recommendation for improvement**

Consider extending the more formal clinical teacher feedback process piloted in paediatrics and child health to other disciplines (Standard 6.1).

**2016 reporting item**

In 2016, report on evaluation of the 2015 MD cohort performance in Phase 1, including evaluation of any effect from curriculum change in the basic sciences (Standard 6.1).

### 7. Implementing the curriculum – students

Standard 7.3 and 7.4 are substantially met.

**2015 conditions**

Implement processes to ensure separation of student support from assessment and progression decision making (Standard 7.3.4).

Develop a School of Medicine Fitness to Practise policy specifically for medical students; and ensure adequate communication of this policy to clinical teachers and staff, to ensure effective identification and support of students who may be impaired (Standard 7.4).

**Commendation**

The efforts of the School in demonstrating its capacity to deliver a consistent teaching program to a significantly increased number of students (Standard 7.1).

### 8. Implementing the curriculum – learning environment

Standard 8.1 and 8.3 are substantially met.

**2015 conditions**

Demonstrate the School has the capacity to manage the full 2016 Year 1 cohort on main campus / Brisbane sites, including details regarding lecture, problem-based learning, lab, clinical skills and clinical coaching delivery, and availability of academic and clinical teaching staff (Standard 8.1).

Given the transfer of the Ipswich campus from UQ to the University of Southern Queensland, confirm arrangements for student and staff access to physical facilities, including teaching space allocation, from 2015 until the end of 2016 (Standard 8.1).
Given the withdrawal from Sunshine Coast Clinical School in 2015, confirm plans to accommodate these students at other clinical schools (Standard 8.3).

**2016 conditions**

Demonstrate the 2016 Year 1 students have adequate access to teaching and learning sites to achieve the outcomes of the program, including details regarding lecture, problem-based learning, lab, clinical skills and clinical coaching delivery, and availability of academic and clinical teaching staff (Standard 8.1).

**Commendations**

The physical facilities for students across all sites, in particular at the Ipswich campus, the Health Sciences building at Herston, teaching spaces at Greenslopes and Ochsner Clinical Schools and the Translational Research Institute (Standard 8.1).

The impressive clinical learning facilities at Ochsner Clinical School and Ochsner Health (Standard 8.3).

**2015 reporting item**

In addition to the 2015 conditions, demonstrate capacity to accommodate students in Phases 1 and 2 by reporting on current and projected student placement data for each course or rotation and every location (campus or clinical school) (Standards 8.1 and 8.3).