

**THE SCHOOL OF MEDICINE
FACULTY OF HEALTH SCIENCE**

THE UNIVERSITY OF TASMANIA

EXECUTIVE SUMMARY 2007

In accordance with the Australian Medical Council's (AMC) decision on the accreditation of the new five-year medical course at the University of Tasmania School of Medicine, a four member Team, plus the Secretariat, visited the School from 3 to 5 October 2007 to review the implementation of Years 1 and 2 and the detailed plans for later years of the of the new five-year MBBS course.

At the time of the Team's visit, the first cohort of students into the new five-year course had just started Semester 4. The small number of students who met with the Team were supportive of the program overall. They valued their experience and in particular the capacity of staff to respond to their concerns.

The 'teach out' phase of the six-year course now involves only the third and fourth years of that course, as the third year is being presented for the last time this year, and the fifth and sixth years of the course have become the last two years of the new five-year course.

The Team identified the following areas of strength and areas that would benefit from further consideration and development.

Areas of strength include:

1. The high level of commitment and expertise of staff involved in the new MBBS curriculum and the new programs within the School of Medicine.
2. The broadening area of educational expertise in the Rural Clinical School.
3. The successful implementation of Years 1 and 2 of the new five-year program.
4. The progress that has been made with the further development of the Year 3 curriculum, and the inclusion of a new primary care curriculum that provides exposure to multiple primary care settings.
5. The high degree of integration of basic medical sciences with other theme content including communication skills, history and examination, social and population perspectives and evidence based practice.
6. The inclusion of a module in interprofessional education on the theme of ageing.
7. The successful steps taken to recruit and prepare general practices as community based settings for student learning at both the Rural Clinical School and the Launceston Clinical School.
8. The delivery of communication and clinical examination skills as exemplified by the progressive exposure of students to communication and clinical examination skills over Years 1 and 2.

9. The training sessions for clinical teachers and the 'teaching on the run' program.
10. The wide range of assessment formats that are appropriately aligned to the components of the medical course.
11. The clear and transparent statements and mechanisms for informing students of assessment and progression requirements.
12. The evaluation of Years 1 and 2 of the new curriculum and Years 5 and 6 of the old curriculum, and the channelling of the evaluation findings into the further development of the new curriculum are commended.

Areas which would benefit from further consideration and development include the following issues:

1. A single document providing an overview and map of the curriculum as a whole.
2. More detailed documentation for Units CAM 301 and CAM 302.
3. The adequacy of the clinical teaching space as student numbers increase.
4. The adoption of a standardised approach to recruit and prepare general practices for all clinical schools, to ensure suitability of a practice for student teaching.
5. The further expansion of facilities is needed at Launceston Clinical School to cope with any increase in student numbers.
6. Monitoring to ensure consistency of clinical experiences for students with the delivery of Years 4 and 5 over three geographical sites.
7. Provision of appropriate numbers of administrative staff in order to maintain high levels of administrative support.
8. Review and standardisation of the OSCE assessment in Year 3 in order to ensure minimum standards are achieved in all rotations.
9. Appropriate attention to the evaluation of Years 3 and 4 of the old curriculum.
10. Review of the evaluation plan for the new curriculum.
11. Improving computing and IT support and access for students by increasing the provision of appropriate hardware resources, and a larger and better equipped computing laboratory.