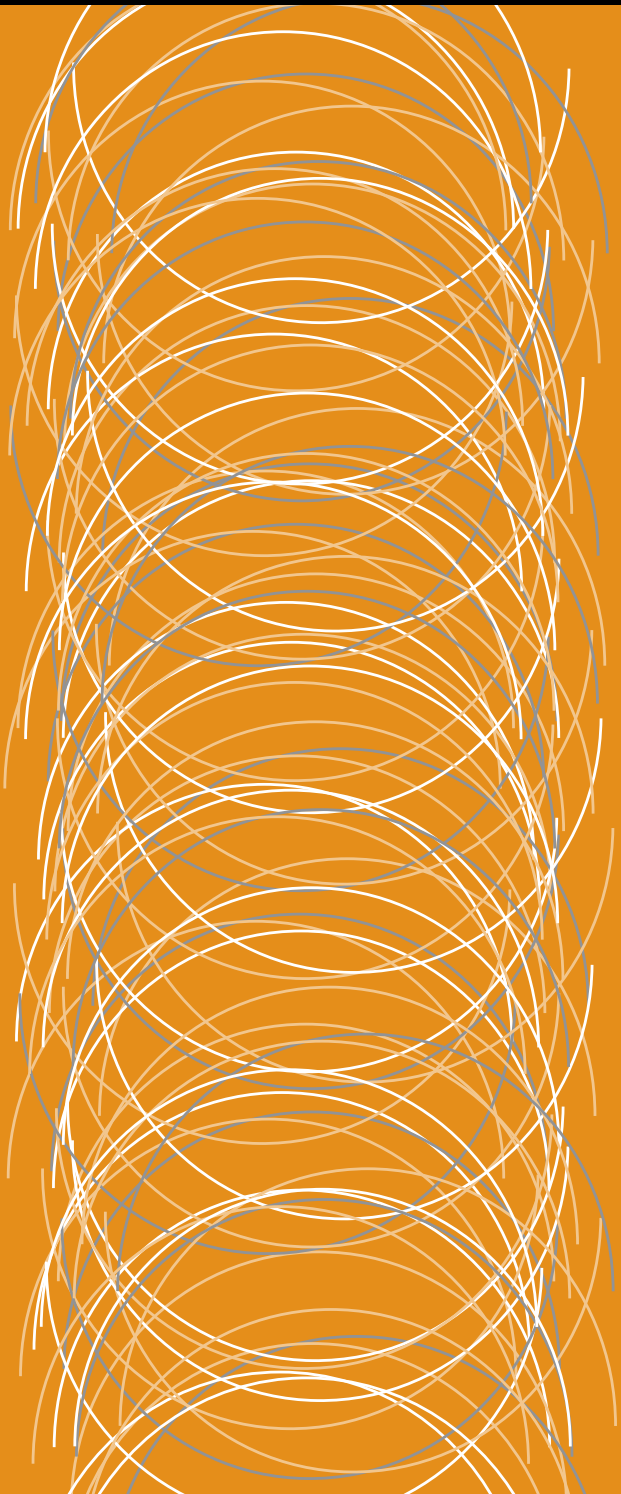


Australian Medical Council Limited

Accreditation of Bond University
Faculty of Health Sciences and Medicine

AMC



Medical School Accreditation Committee
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Acknowledgement of Country

The Australian Medical Council (AMC) acknowledges the Aboriginal and Torres Strait Islander Peoples as the original Australians, and the Māori People as the original Peoples of New Zealand.

We acknowledge and pay our respects to the Traditional Custodians of all the lands on which we live, and their ongoing connection to the land, water and sky.

We recognise the Elders of all these Nations both past, present and emerging, and honour them as the traditional custodians of knowledge for these lands.

1. Introduction

1.1 The process for comprehensive report for extension of accreditation

The Australian Medical Council (AMC) document, *Procedures for Assessment and Accreditation of Medical Schools by the Australian Medical Council 2019*, describes AMC requirements for accrediting primary medical programs and their education providers.

In the last year of an accreditation period based on an assessment visit, the AMC can consider a request for an extension of accreditation via a comprehensive report. In submitting a comprehensive report, the education provider is expected to provide evidence it continues to meet the accreditation standards, and has maintained its standard of education and of resources.

Comprehensive reports require self-reflection, analysis of performance against the accreditation standards, and an outline of the challenges facing the school over the period of the possible extension of the accreditation. Without this assessment, the AMC does not have the evidence to determine if the school will meet the standards for the next period.

The AMC considers the submissions from the medical students' societies along with education provider's comprehensive reports.

If, on the basis of the report, the Medical School Accreditation Committee decides the education provider and the program of study continue to satisfy the accreditation standards it may recommend to the AMC Directors to extend the accreditation of the education provider and its program.

The extension of accreditation is usually for a period of three or four years, taking education providers to the full period of accreditation of ten years granted by the AMC between reaccreditation assessments. Following this extension, the provider and its programs undergo a reaccreditation assessment.

The AMC and the Medical Council of New Zealand work collaboratively to streamline the assessment of education providers which provide primary medical programs in Australia and New Zealand, and both have endorsed the accreditation standards. The two Councils have agreed to a range of measures to align the accreditation processes, resulting in joint accreditation assessments, joint progress and comprehensive reporting, and aligned accreditation periods. The AMC will continue to lead the accreditation process.

1.2 Decision on accreditation

Under the Health Practitioner Regulation National Law, the AMC can accredit a program of study if it is reasonably satisfied that:

- (a) the program of study, and the education provider that provides the program of study, meet the accreditation standard; or
- (b) the program of study, and the education provider that provides the program of study, substantially meet the accreditation standard and the imposition of conditions 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.

On the basis of the comprehensive report, the MedSAC Committee at their 8 December 2021 meeting recommended to AMC Directors that the comprehensive report indicates that the Bond University, Faculty of Health Sciences and Medicine and its medical program continues to substantially meet the accreditation standards.

The Committee noted that while were no concerns raised as a result of the comprehensive report, the medical program continues to remain substantially met until conditions from the 2021 material change assessment can be addressed in future reporting.

Next reporting: 2022 monitoring report (with report on progress on conditions).

2. Bond University, Faculty of Health Sciences and Medicine

2.1 Accreditation history

The Bond University, Faculty of Health Sciences and Medicine was first accredited by the AMC in 2004. An overview of the School's accreditation and monitoring history is provided below:

Accreditation history

Year	Assessment Type	Findings	Outcome
2004	Accreditation	-	Granted accreditation to 31 December 2011 (MBBS).
2006	Follow-up assessment	-	Confirmed the 2004 accreditation decision (MBBS).
2007	Follow-up assessment	-	Confirmed the 2004 accreditation decision (MBBS).
2008	Follow-up assessment	-	The AMC reduced the period of accreditation to 31 December 2009, subject to conditions and a follow up assessment in 2009 (MBBS).
2009	Follow up assessment	-	The AMC reinstated the Faculty's accreditation to 31 December 2011 (MBBS).
2011	Comprehensive report for extension of accreditation	-	Extension of accreditation granted for four years to 31 December 2015 (MBBS).
2015	Determination of material change – Transition to MD	MET	The AMC determined that the planned transition from the MBBS to MD did not constitute a material change, but would be assessed in conjunction with the 2015 reaccreditation assessment.
2015	Re-accreditation	MET	Granted accreditation for six years to 31 March 2022 (BMedSt/MD & MBBS).
2016	Report on conditions	MET	Accepted.
2017	Report on conditions	MET	Accepted.
2018	Progress report	MET	Accepted.
2018	MBBS Concluded	MET	MBBS program concluded.
2019	Progress report	MET	Accepted (moved to biennial reporting).
2020	COVID-19 Notification of Change Form	MET	Accepted (a second cohort of 60 students in September comprising students unable to start in May and approximately 40 new students as a 'one off' arrangement).
2021	Determination of material change – second cohort	SUBSTANTIALLY MET	Accepted subject to meeting additional conditions. Accreditation confirmed until 31 March 2022.

A copy of the School's 2015 accreditation report can be found [here](#) and a copy of the report on the 2021 material change can be found [here](#).

2.2 Bond University, Faculty of Health Sciences and Medicine comprehensive report

In its 2021 comprehensive report the School was asked to provide a report against the standards and its remaining accreditation condition.

The following was to be addressed for each standard:

- 1. Analysis of strengths and challenges, and significant developments undertaken or planned. This includes any activity against accreditation recommendations for improvement.**
 - identification and assessment of factors that could influence the achievement of the school's goals over the next five years
 - a short summary of major developments since the last accreditation assessment
 - description of the school's development plans for the next five years, and significant milestones for their implementation
 - any matters that may affect the accreditation status of the programs, such as a change to capacity to meet the accreditation standards, or any change that may meet the definition of a major change to the program.
- 2. Activity against AMC conditions (as required)**
- 3. Statistics and annual updates (Standards 1 and 7)**

3. AMC Findings

3.1 Summary of findings against the standards

The findings against the eight accreditation standards are summarised in the table below.

Standard	Finding in 2015 MET (including any requirements substantially met or not met)	Finding in 2021 SUBSTANTIALLY MET (including any requirements substantially met or not met)
1 Context of the Medical Program	Met (Standard 1.1 is substantially met)	Substantially Met (Standard 1.6 substantially met)
2 Outcomes of the Medical Program	Met (Standard 2.2.1 is substantially met)	Substantially Met (Standard 2.2 substantially met)
3 The Medical Curriculum	Met (Standard 3.2 & 4.3 are substantially met)	Substantially Met (Standard 3.3 substantially met)
4 Learning and Teaching	Met	Met
5 Assessment of Student Learning	Met (Standard 5.1 is substantially met)	Met
6 Monitoring and Evaluation	Substantially Met (Standard 6.1, 6.2 & 6.3 are substantially met)	Met
7 Students	Met (Standard 7.2 substantially met)	Substantially Met (Standard 7.5 substantially met)
8 The Learning Environment	Met	Substantially Met (Standards 8.1, 8.3 & 8.4 substantially met)

3.2 Detailed findings against the standards

Providers must satisfy conditions on accreditation in order to meet the relevant accreditation standard. The AMC provides feedback on the conditions using the following:

<i>Unsatisfactory</i>	<i>The education provider may not meet the related accreditation standard and AMC should investigate further.</i>
<i>Not Progressing</i>	<i>No progress or overly slow progress.</i>
<i>Progressing</i>	<i>Indicates satisfactory progress against the recommendation, with further reporting necessary.</i>
<i>Satisfied and Closed</i>	<i>The education provider has satisfied all requirements and can cease reporting against the Condition. Condition is marked as closed.</i>

Standard 1: The Context of the Medical Program

Standards cover: governance, leadership and autonomy, medical program management, educational expertise, educational budget and resource allocation, interaction with health sector and society, research and scholarship, staff resources and staff appointment, promotion and development

Summary of accreditation status	2015 Met	2021 Substantially Met
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Developments against Standard 1

Significant developments relevant to this standard
<p>The Faculty has a clear governance structure in place that has adapted to the changing needs and growth of the program. It has set out a defined list of the various leadership positions for each of the committees. The governance arrangements are considered to meet the needs of the medical program.</p> <p>The growth of the program has seen the establishment of two key groups:</p> <ol style="list-style-type: none">1 The Medical Admissions Committee was established in 2021 to oversee the admissions processes.2 Medicine Program Expansion Group to operationalise the mid-year entry program. <p>The creation of a Student Services Hub has provided students with easy access to support when required. Monthly updates are provided to the students by the Dean.</p> <p>The Faculty outlined formal arrangements and partnerships with various community organisations and health services, which were in line with those considered in the material change assessment earlier in the year.</p> <p>Development of the Medical Program has resulted in academics prioritising teaching roles over the last year and the Faculty acknowledged that it needed to renew attention to research which has been acknowledged as something to ensure it is implemented.</p>

Statistics and annual updates

Annual information request
<p>The Bond University medical program has continued to evidence that it is well supported by the Faculty as student numbers have increased.</p> <p>The Medical Program is seeing some increase of academic and professional staff resourcing to accommodate the growing student numbers.</p>

Activity against Conditions from 2015 accreditation report

Condition:	Due:	Status:
1 To ensure separation of curriculum development and implementation, student assessment and program evaluation, undertake a review of the program's committee structure, and the relationship between the medical program, the Faculty Operations Group and other Faculty level committees (Standard 1.1.2)	2016	Satisfied 2018

2 Establish a mechanism to ensure that relevant groups, including Indigenous groups, community organisations and health service consumers, are consulted on key issues relating to the curriculum, graduate outcomes and governance. (Standard 1.1.3)	2016	Satisfied 2018
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Summary of education provider’s performance against the standard

This set of standards continues to be Substantially Met (on the basis of the accreditation conditions set as part of the 2021 material change assessment).

- Condition 11 - Establish the full complement of staff necessary to support the expanded program (at the time of proposal this included four additional academic and two additional professional posts). (Standard 1.8.3)

Standard 2: The Outcomes of the Medical Program

Standards cover: purpose and medical program outcomes

Summary of accreditation status	2015 Met	2021 Substantially Met
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Developments against Standard 2

Significant developments relevant to this standard
<p>The Faculty in 2019 updated the 'Bond Graduate Attributes' to ensure that they were firmly grounded in the medical program. The Medical Program's outlined purpose has not changed.</p> <p>The Medical Program in 2019 mapped session and year-based outcomes to graduate attributes, ensuring they are in line with AMC Graduate Outcome Statements.</p> <p>The Faculty has reviewed and separated the previous Health and Professional (HAP) theme to Health and Society and Professional and Leadership frameworks. This change was implemented to ensure appropriate alignment of learning outcomes.</p> <p>In response to the COVID-19 pandemic the Faculty created a 'Red Team' which met frequently to assess changes to clinical arrangements and to resolve issues that arise as a result of ongoing uncertainties.</p>

Activity against Conditions from 2015 accreditation report

Condition:	Due:	Status:
3 Provide evidence that the program's graduate outcomes review is finalised and the graduate outcomes are consistent with the AMC graduate outcome statements. (Standard 2.2.1)	2016	Satisfied 2017

Summary of education provider's performance against the standard

<p>This set of standards continues to be Substantially Met (on the basis of the accreditation conditions set as part of the 2021 material change assessment).</p> <ul style="list-style-type: none"> • Condition 12 - Demonstrate comparable experiences through reporting analysis of May and September cohorts' evaluation feedback, and any actions planned or taken to investigate and address any identified disparities. (Standards 2.2.3 and 6.1) • Condition 13 - Demonstrate comparable outcomes through reporting analysis of May and September cohorts' performance in assessment to demonstrate comparable outcomes and any actions planned or taken to investigate and address any identified disparities. (Standards 2.2.3 and 6.2)

Standard 3: The Medical Curriculum

Standards cover: duration of the medical program, the content of the curriculum, curriculum design, curriculum description, Indigenous health and opportunities for choice to promote breadth and diversity

Summary of accreditation status	2015 Met	2021 Substantially Met
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Developments against Standard 3

Significant developments relevant to this standard
<p>The MD component of the program was successfully implemented on time across 2016 – 2017.</p> <p>The First Nations Health program underwent a substantial curriculum review in 2020. The outcomes of this highlighted the need for greater emphasis on cultural immersion and resourcing. Due to the ongoing effects of the COVID-19 pandemic the Faculty has had to limit the student numbers attending cultural immersion activities temporarily.</p> <p>The Faculty reports that they have introduced learning outcomes and objectives for each student in relation to the different stages of the Medical program. These changes are widely communicated to all participating within the program using a 'Learning Management System' and are reviewed at appropriate stages during the semesters.</p>

Activity against Conditions from 2015 accreditation report

Condition:	Due:	Status:
4 Provide evidence that the curriculum content is defined and objectives are set for the MD Project. (Standard 3.2)	2016	Satisfied 2016
5 Develop and communicate learning outcomes for each stage of the MD program. (Standard 3.4)	2016	Satisfied 2017

Summary of education provider's performance against the standard

<p>This set of standards continues to be Substantially Met (on the basis of the accreditation conditions set as part of the 2021 material change assessment).</p> <ul style="list-style-type: none">• Condition 14 - Work with health services and intern training accreditation authorities to confirm the number and the detail of arrangements for appropriately supported mid-cycle intern training places available for the September 2020 cohort who are due to graduate in April 2025 and subsequent cohorts. (Standard 3.3)• Condition 15 - Work with health services and intern training accreditation authorities to put arrangements in place to ensure that graduates are competent to practise safely and effectively under supervision as interns in Australia or New Zealand if mid-cycle internship places are insufficient to accommodate the number of students who are expected to graduate mid-cycle and progress to internship in Australia and New Zealand. (Standards 2.2.2 and 3.3)
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Standard 4: Teaching and learning methods

Standards cover: teaching and learning approach and methods

Summary of accreditation status	2015 Met	2021 Met
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Developments against Standard 4

Significant developments relevant to this standard
<p>The Faculty reports teaching methods and materials have been adjusted since the last visit. These include:</p> <ul style="list-style-type: none"> • Terminology changes to match AMC domains and clarifications. • Replacing the previous 'Problem Based Learning' approach with a 'Small Group Learning.' • Implementation of the MD Portfolio Program in Phase 2. <p>The Faculty has commenced a program of curriculum review via co-design with students and academics.</p> <p>The OSLER ePortfolio was introduced to assist students and staff with managing early interventions for student support. In 2020 a 'Learning coach' program was also introduced as a result of the uncertainties COVID-19 on placements for students.</p> <p>Introduction of the Interprofessional Education workshop schemes has created a focus on communication in healthcare settings between patient and health professionals.</p>

Activity against Conditions from 2015 accreditation report

Condition:	Due:	Status
Nil		

Summary of education provider's performance against the standard

This set of standards continues to be Met.
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Standard 5: The Curriculum – Assessment of Student Learning

Standards cover: assessment approach, assessment methods, assessment feedback and assessment quality

Summary of accreditation status	2015 Met	2021 Met
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Developments against Standard 5

Significant developments relevant to this standard
<p>There has been significant investment in assessment technologies such as OSLER and EXAMsoft.</p> <p>The co-design of assessments with students has been a particular highlight.</p> <p>The Faculty reports the successful introduction of web based programs to assist with exams and assessments, replacing the paper based system.</p> <p>The mapping of medical program learning outcomes has been implemented. This covers all examinations that students undertake whilst on the program and it is continually reviewed.</p> <p>A steady increase of requirements for Workplace based assessments has been implemented in recent years to evaluate students' workload and to gauge student feedback through ePortfolio reporting.</p> <p>As a result of the COVID-19 pandemic the Faculty reports that they have introduced Open Book exams which have they retained for 2021.</p>

Activity against Conditions from 2015 accreditation report

Condition:	Due:	Status:
6 Develop and implement an assessment approach for tracking student progress of required portfolio elements. (Standard 5.1)	2016	Satisfied 2017

Summary of education provider's performance against the standard

This set of standards continues to be Met.
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Standard 6: The Curriculum - Monitoring

Standards cover: monitoring, outcome evaluation and feedback and reporting

Summary of accreditation status	2015 Substantially Met	2021 Met
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Developments against Standard 6

Significant developments relevant to this standard
<p>The medical program established the Student Evaluation Working Group as a response to the decline in student participation rates with the eTEVAL process.</p> <p>Introduction of the CIPP framework in 2019 by the Medicine Evaluation Committee, enabled the program to report on upcoming tasks and issues that can be flagged to the AMC in advance.</p> <p>The faculty evaluation and monitoring plans for the next five years include:</p> <ul style="list-style-type: none">• Continuing to monitor the effects of COVID-19 pandemic on the medical program• Focus areas of the program to be placed in a schedule• Analysis of eTEVALS• Prioritisation of evaluation and monitoring with working groups. <p>In line with the evaluation feedback, the program has reported that curriculum leaders manage feedback for the students and focus on closing feedback loops for concerns reported.</p>

Activity against Conditions from 2015 accreditation report

Condition:	Due:	Status:
7 Develop and implement a comprehensive evaluation and monitoring framework which addresses key elements of program delivery and provide evidence of a reporting schedule which prioritises key areas to be evaluated. (Standard 6.1)	2016	Satisfied 2021
8 Formally evaluate program outcomes to refine the program in relation to selection, curriculum, assessment and student support, and in sharing results with key stakeholders. (Standard 6.2)	2016	Satisfied 2019
9 Demonstrate a consistent reporting schedule to stakeholders, staff and students. (Standard 6.3)	2016	Satisfied 2016

Summary of education provider's performance against the standard

This set of standards continues to be Met.
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Standard 7: Implementing the Curriculum - Students

Standards cover: student intake, admission policy and selection, student support, professionalism and fitness to practise, student representation and student indemnification and insurance

Summary of accreditation status	2015 Met	2021 Substantially Met
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Developments against Standard 7

Significant developments relevant to this standard
<p>In 2020 the Faculty introduced second cohort of 60 students (in addition to the 130 students starting in May) in response to the COVID-19 pandemic, which reduced the number of international doctors participating in the health service. An AMC a team undertook a material change assessment and consequently AMC Directors' determined that the program and provider continued to substantially meet the accreditation standards, in making this change. The Faculty reported that steady state would be a May intake of 120 student and September intake of 60 students.</p> <p>The recent appointment of an Associate Professor as the September Cohort Coordinator aims to provide specific guidance and support to the students who started within this cohort. Another appointment that the Faculty has reported on is a Director of Student Success and Wellbeing. This aims to improve and develop on the program and the student's access to relevant information/resources. The Faculty as a result has reported on their consistent high ratings in regards to student experience across all years of the program.</p> <p>The Faculty has invested in a software program 'Symplicity' which aims to assist the program with teachings of professionalism.</p> <p>An Indigenous Medical scholarship has been established as a result of funding. The scholarship covers 50% of the fees for the medical program.</p> <p>From 2022, the Faculty advises that the application requirements will no longer include the need for additional specified subjects. The Faculty implemented 'Emotional Intelligence' testing in the selection process. The results from this have shown that this application has been beneficial in regards to patient communication skills being increasingly better.</p> <p>From 2021 student representatives are invited to the monthly Medical Program updates.</p>

Activity against Conditions from 2015 accreditation report

Condition:	Due:	Status:
10 Demonstrate that the mechanism for appeals regarding selection is publicly available. (Standard 7.2.4)	2016	Satisfied 2016

Statistics and annual updates

Annual information request
Enrolments have steadily increased in recent years and substantially in 2020, as a result of the additional student intake in September.

Summary of education provider's performance against the standard

This set of standards continues to be Substantially Met (on the basis of the accreditation conditions set as part of the 2021 material change assessment).

- Condition 16 - Demonstrate that there are clear selection policies that can be implemented and sustained in practice and that are consistently applied through reporting on the implementation of and learning from the selection and allocation processes. Analysis should include how many applicants preferred the May and September intakes, the number of applicants offered a non-preferred intake and the percentage of those applicants who took up places in their preferred and non-preferred intake. (Standard 7.2.1)
- Condition 17 - Demonstrate engagement with students across May and September cohorts in the governance of the program, including in the oversight and decision-making related to the implementation of the September intake. (Standard 7.5.1)

Standard 8: Implementing the Curriculum – Learning Environment

Standards cover: physical facilities, information resources and library services, clinical learning environment and clinical supervision

Summary of accreditation status	2015 Met	2021 Substantially Met
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Developments against Standard 8

Significant developments relevant to this standard
<p>Since 2015, various investments have been made to the physical facilities:</p> <ul style="list-style-type: none">• Extension of Faculty buildings for the facilitation of creating collaborative learning spaces that have been designed in cooperation with students.• Extensive upgrades to the Anatomy Laboratory teaching facilities and equipment.• Plans have been developed to build and establish a new building that will be equipped with advanced training facilities for medical students.• Development of partnerships with Tweed Valley Hospital for training, education and research.• Plans for further development of the existing simulation training facilities at Robina hospital.• Establishment of the Institute for Evidence Based Practice (EBP) in partnership with Gold Coast Health to provide training in EBP to clinical staff. Since 2017 over 500 staff have attended courses. <p>Investment has been made in learning platforms. OSLER learning platform and ExamSoft programs have been utilised to assist with the running of clinical examinations and practices. As a result it has been noted that student satisfaction has greatly improved.</p> <p>The implementation of the new curriculum in 2015 has given students opportunities to be involved within the clinical environments from as early as Year 2. It is also noted that there are plans to further adjust the program by 2023 to align semesters to enable clinical practice to expand over six semesters.</p> <p>Clinical supervision within the program is shown to be well supported with clear commitment to the expansion of clinical placements with partner clinical facilities in the Tweed Valley hospital development.</p> <p>Since the COVID-19 pandemic the Clinicians Advisory Board has been meeting online to discuss clinical arrangements and as a result there has been a significant increase in attendees.</p> <p>From 2021, the Faculty commenced working with allied health professionals to assess the relevant skills of medical students during their clinical learning.</p>

Activity against Conditions from 2015 accreditation report

Condition:	Due:	Status:
Nil		

Summary of education provider's performance against the standard

This set of standards continues to be Substantially Met (on the basis of the accreditation conditions set as part of the 2021 material change assessment).

- Condition 18 – Demonstrate that adequate facilities are being secured for all-cohort teaching sessions and the increasing numbers of small-group sessions as each year of the September 2020 cohort is implemented. (Standard 8.1)
 - Condition 19 – Provide an annual progress report on developments in securing new placement sites, with evidence of completed Deeds or other Agreements, demonstrating that the number of placements and range of placements ensure that all students in the expanding student body have clinical experiences in a range of models of care across metropolitan and rural health care settings. (Standard 8.3.2)
 - Condition 20 – Demonstrate that all students in the expanding student body have experience in the provision of culturally competent health care to Aboriginal and Torres Strait Islander peoples. (Standard 8.3.3)
 - Condition 21 – Demonstrate recruitment and training of adequate additional clinical supervisors with allocated time and specified responsibilities to support the expanded student numbers in clinical placements from Phase 2 of the program. (Standard 8.4)
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