



**MEDIA RELEASE**  
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## Tasmania's medical course

The national standards body for medical education, the Australian Medical Council (AMC), has extended accreditation of the medical course at the University of Tasmania to 31 December 2002.

The course's existing accreditation expires at the end of 2001.

The AMC decision follows a review of the University's School of Medicine by a six-member AMC team that spent a week at the University and its clinical teaching sites in August 2001.

The team met with students, academic staff, clinicians, general practitioners, hospital managers and community members, and visited teaching sites in Hobart, Launceston and Burnie.

Following the visit, the AMC presented the University with a detailed report pointing to strengths of the medical course and areas for improvement. The report found that the School presently produces broadly educated medical graduates with an appropriate foundation for further training in any branch of medicine who are competent to practise safely and effectively under supervision as interns. The report identifies the need for changes to the medical course, in response to changes in health needs and practices, community expectations, and educational and scientific developments.

During 2002, the School will present to the AMC a plan for responding to the issues raised in the Accreditation Report.

These include recruitment of senior academic staff and strategies to attract and retain academic staff, review of the undergraduate medical curriculum towards a more integrated program, and strategies to ensure that medical students have well supervised, broad learning opportunities in the three clinical schools in Hobart, Launceston and Burnie.

Chair of the AMC's Medical School Accreditation Committee Professor Ian Simpson said the School of Medicine's small size was both a strength and a potential weakness.

'A small school can harness the professional and wider community as a resource,' Professor Simpson said. 'It can also offer students a highly individualised experience. It has particular challenges in meeting the resource requirements of a modern medical school. Reforming the medical course has human, fiscal and physical resource implications.'

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Professor Simpson said the University had developed opportunities for students to experience a range of practice environments including medicine in rural and remote communities.

‘The University has been awarded one of the Commonwealth-funded rural clinical schools which has potential to strengthen further rural and remote medical education in Tasmania,’ Professor Simpson said.

The report of the AMC Team’s visit pointed to the difficulty faced by the School in recruiting senior academic staff.

‘This is a problem for many medical schools’ Professor Simpson said. ‘But its impact is greater in a small school.’

The School of Medicine is currently revising its six-year undergraduate curriculum to provide a more integrated, problem-based learning experience for students. Some areas including student assessment and course monitoring and evaluation are still to be developed in detail.

Head of the School of Medicine, Professor Allan Carmichael, said he had valued the AMC’s visit and report.

‘The School is working on a revised, integrated curriculum and recruitment of senior staff. We look forward to reporting during 2002 on further progress,’ Professor Carmichael said.

Following the School’s report in 2002, the AMC will make a decision on re-accreditation of the medical course.

Further information:

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