## Policy Statement

## Primary medical programs provided offshore by Australian and/or New Zealand education providers

***1 Role of the Australian Medical Council***

1.1 The Australian Medical Council is a national standards, assessment and accreditation body for medicine. Its purpose is to ensure that standards of education, training and assessment of the medical profession promote and protect the health of the Australian community. Its accreditation roles include:

1. assessing programs of study based predominantly in Australia and New Zealand, leading to general or specialist registration of the graduates of those programs to practise medicine in Australia, to determine whether the programs meet approved accreditation standards, and to make recommendations for improvement of those programs;
2. assessing education providers based predominantly in Australia and New Zealand that provide programs of study leading to general or specialist registration of the graduates of those programs to practice medicine in Australia, and to determine whether the providers meet approved accreditation standards**.[[1]](#footnote-1)**

1.2 The AMC is the accreditation authority for medicine under the *Health Practitioner Regulation National Law* in forcein each state and territory (the National Law).

1.3 Accreditation functions for regulated health professions are defined under the National Law. As the accreditation authority for medicine, the AMC develops accreditation standards for medical programs and their education providers[[2]](#footnote-2). It uses accreditation standards to assess programs and their providers for the purposes of accreditation. The AMC also uses the accreditation standards for monitoring accredited programs and providers to ensure that they continue to meet the standards.

1.4 The purpose of AMC accreditation is the recognition of medical programs that produce graduates competent to practise safely and effectively under supervision as interns in Australia and New Zealand, and with an appropriate foundation for lifelong learning and for further training in any branch of medicine. Under the National Law, only programs of study accredited by the AMC can be approved by the Medical Board of Australia as providing a qualification for the purposes of registration in medicine.

***2 Higher education in Australia and New Zealand***

2.1 Primary medical education in Australia and New Zealand is provided by medical education providers (generically known as medical schools) based in registered higher education providers (presently universities).

2.2 Both Australia and New Zealand have national quality assurance processes for higher education. These systems provide assurance that higher education providers have demonstrated they meet nationally agreed standards. In Australia, the Tertiary Education Quality Standards Agency (TEQSA)[[3]](#footnote-3), an independent statutory authority, assesses compliance with the Higher Education Standards Framework and registers higher education providers against the Higher Education Standards Framework. Two bodies oversee the quality assurance of universities in New Zealand. Universities New Zealand – Te Pōkai Tara’s Committee on University Academic Programmes is charged with setting up and applying qualification and regulation approval, accreditation and program moderation procedures across universities. The Academic Quality Agency for New Zealand Universities supports universities in their achievement of standards of excellence in research and teaching through regular institutional audit and the promotion of quality enhancement practices across the sector[[4]](#footnote-4).

2.3 In Australia and New Zealand, higher education providers may offer places to fee paying students from overseas. In line with this policy, Australian and New Zealand medical schools enrol international students. These students occupy places offered over and above the number of places available for domestic students.

2.4 A number of Australian higher education providers provide courses in other countries and TEQSA regulates the offshore provision of Australian higher education.[[5]](#footnote-5)

2.5 Offshore provision arrangements include the establishment of campuses, companies, joint ventures or contracts with other organisations in the delivery of programs. The organisation delivering programs may be operating under the name of the delivery agency or the higher education provider offering the award.

***3 Implications of an offshore provision of a medical program accreditable by the AMC***

3.1 Australian and New Zealand higher education providers planning to establish a new medical program and provide the program substantially or partly offshore will require AMC accreditation. The quality of offshore education involving Australian and New Zealand medical schools is critical to the reputation of Australian and New Zealand medical education.

3.2 Major changes to a medical program or provider may affect the accreditation status[[6]](#footnote-6). The AMC institutes a series of procedures to assess such changes in accredited programs, including a two-stage assessment process, described in greater detail in *Assessment and Accreditation of Primary Medical Programs by the Australian Medical Council: Standards and Procedures.*

3.3 Plans to offer an AMC-accredited medical program in a new setting are likely to fit the AMC’s definition of a major program change. Accredited medical education providers must prospectively inform the AMC of such developments through the regular monitoring reports required of accredited education providers.

If the new setting is in another country or countries, the AMC will regard the plan as a major program change that will require separate accreditation. Whilst curriculum content and structure may be identical to that of the local program, differences are likely in areas such as staffing and resources, governance and administration, student admission, and student services generally. There may be important differences in the clinical training and experience. The development also may have a significant effect on the resources available to the local (Australian or New Zealand based) program:

* by diverting staff time and/or resources from the existing medical program
* by making additional resources available
* by the effect on the education provider’s governance.

3.5 The AMC will consider changes to the offshore provision of a medical program against the accreditation standards through its usual accreditation procedures. It will also consider whether the proposed change continues to satisfy the requirements of section 4 of this policy.

3.6 The AMC will regard the dis-establishment of an offshore program as a major change to the AMC-accredited medical program, since it would constitute a major change in the institutional setting and may affect available resources.

***4 Proposals that will be considered for assessment by the AMC***

4.1 The AMC recognises that there are many possible options for offering Australian/New Zealand higher education courses overseas (see 2.5). It will assess only proposals for medical programs:[[7]](#footnote-7)

4.1.1 That fit with the purpose of AMC accreditation, namely producing graduates competent to practise safely and effectively under supervision as interns in Australia and New Zealand, and with an appropriate foundation for lifelong learning and for further training in any branch of medicine, and

4.1.2 That are located in an Australian or New Zealand higher education provider, where the Australian or New Zealand provider has developed the program and has a responsibility for the academic standards, and

4.1.3 That result in the award of a recognised higher education qualification of the Australian or New Zealand higher education provider **which may lead to registration to practise medicine in Australia and New Zealand**, and

4.1.4 That are essentially the same as the program accredited by the AMC for delivery in Australia or New Zealand, in terms of **learning outcomes,** ~~educational objectives~~, curriculum ~~framework~~, educational process, and assessment outcomes, and

4.1.5 That include adequate experience **in a variety of clinical settings** within the Australian or New Zealand health care system **so that graduates meet the AMC’s Graduate Outcome Statements as outlined in the *Standards for Assessment and Accreditation of Primary Medical Programs by the Australian Medical Council.***

***5 Applying the AMC accreditation process to the assessment of a proposal to offer an Australian or New Zealand medical program in another or other countries***

5.1 General requirements

5.1.1 The AMC will follow the *Procedures for Assessment and Accreditation of Primary Medical Programs by the Australian Medical Council* (Section 3 The administration of the assessment process) in assessing the offshore proposal. This section of the offshore provision policy provides guidance on the additional requirements that apply to the assessment of an offshore program proposal with reference to the relevant areas of the AMC procedures.

5.1.2 The Medical School Accreditation Committee sets a forward program for assessments eighteen months in advance. Education providers proposing offshore provision of their medical program need to provide adequate notice of their intentions. This would normally require the AMC to receive a notice of intention at least 24 months in advance of intended offering of the program offshore.

5.1.3 Accreditation assessments of offshore programs will entail site visits by an AMC team.

5.1.4 The AMC’s assessment of a proposal for offshore provision of a medical program will incur more time and cost, in view of the additional procedural requirements and travel. The education provider whose program is being assessed will be charged the costs of the AMC assessment in line with AMC policy on fees and charges (see AMC Procedures Section 2.11 Fees and Charges).

5.1.5 Where the AMC needs to establish an order for assessments, it will give priority to the assessment of programs offered in Australia or New Zealand over the assessment of a proposal that involves an offshore provision.

5.1.6 The AMC has prepared separate guides to the submissions required of education providers seeking assessment of a proposal for offshore provision of a medical program, covering both the Stage 1 submission and the Stage 2 submission[[8]](#footnote-8).

5.2 AMC consideration of Stage 1 submission: additional requirements

5.2.1 The higher education provider provides a Stage 1 submission to the Medical School Accreditation Committee outlining its plans at least twenty months before the program is to be offered. In addition to the usual requirements of a Stage 1 submission, the submission for offshore provision of a medical program must list any partner organisations or financial supporters, describe the relationships and provide evidence of support from them. Relationships with relevant government authorities in the overseas country, including any requirements for accreditation in the overseas country, should also be described.

5.2.2 The Medical School Accreditation Committee will consider the submission against the approved accreditation standards and advise the AMC Directors on whether the AMC should assess the proposed development for accreditation purposes, taking account of:

1. The range of proposals that the AMC will assess, as stated in 4; and
2. The stage of development of the education provider’s plans.

5.2.3 Where all details have not yet been developed, the education provider’s submission should indicate how and when further development will be undertaken.

5.2.4 Guidance on additional matters the AMC will consider is provided in ATTACHMENT 1.

5.2.5 The outcome of the Stage 1 assessment of a proposal for offshore provision of a medical program will be one of the following decisions by the AMC:

1. That the AMC will assess the proposal for accreditation purposes. In this case, the AMC invites a Stage 2 accreditation submission.
2. That on the basis of the Stage 1 submission, the proposal does not satisfy the approved accreditation standards and/or fit within the range of proposals the AMC has determined to assess (see 4.1) and the AMC will not assess the proposed development for accreditation purposes.

5.2.6 In the event that the education provider already has an AMC-accredited medical program, if the provider proceeds with plans to offer a separate program offshore[[9]](#footnote-9), the AMC will take account of the effect of the offshore development on the accreditation of the Australian/New Zealand program (see also 1.4, 3.3 and 5.4.2).

5.3AMC assessment of Stage 2 submission – additional requirements

5.3.1 The Stage 2 accreditation submission should be submitted sufficiently in advance of student selection and program commencement **(a minimum of ten months)** to allow time for proper consideration by the AMC, and the education provider to respond to any further requirements of the AMC. The education provider is required to present details of the full program, of the financial, physical and staff resources available to design and implement all years of the program and to support the program when fully established, and the measures in place to ensure that quality and standards are at least equivalent to those provided locally (in Australia/New Zealand).

5.3.2 Given the magnitude of the changes and challenges entailed in providing a medical program offshore, the AMC team will visit the offshore campus or campuses as well as hold meetings with senior staff of the parent education provider. The AMC may assess the proposal in one or more visits. Guidance on the conduct of the visit or visits is provided in **ATTACHMENT 2**.

5.3.3 The preparation of graduates to practise as medical practitioners in Australia and New Zealand and the adequacy of the arrangements to provide medical students completing an offshore program with clinical experience in, and an understanding of Australian and New Zealand medicine and practice will be significant issues in the AMC’s assessment of any offshore proposal.

Variances in clinical training and experience may reflect differences in health status, disease patterns, patient case mix, health care systems, care models and the role of the medical practitioner as well as differences in community, society and culture.

5.3.4 Accreditation standards[[10]](#footnote-10) that are particularly relevant to the AMC’s assessment of the adequacy of clinical training and experience are listed below, with proposed changes to those standards:

*2.2.2 The medical program outcomes are consistent with the AMC’s goal for medical education to develop junior doctors who are competent to practise safely and effectively under supervision as interns in Australia or New Zealand, and who have an appropriate foundation for lifelong learning and for further training in any branch of medicine.*

*2.2.3 The medical program achieves comparable outcomes through comparable educational experiences and equivalent methods of assessment across all instructional sites within a given discipline.*

*4.6 Learning and teaching methods in the clinical environment promote the concepts of patient centred care and collaborative engagement.*

*4.7 The medical program ensures that students work with, and learn from and about other health professionals, including experience working and learning in interprofessional teams.*

*6.2.1 The medical education provider analyses the performance of cohorts of students and graduates in relation to the outcomes of the medical program.*

*8.3.1 The medical education provider ensures that the clinical learning environment offers students appropriate clinical experience including patient contact that is in line with achieving the outcomes of the medical program and to prepare students for clinical practice in Australia and New Zealand.*

*8.3.2 The medical education provider has sufficient clinical teaching facilities to provide clinical experiences in a range of models of care and across metropolitan and rural health settings.*

*8.3.3 The medical education provider ensures the clinical learning environment provides students with experience in the provision of culturally competent health care to Aboriginal and Torres Strait Islander peoples and/or Maori.*

5.3.5 In addressing Accreditation Standard 8.3.1, the medical education provider should demonstrate that the offshore program’s preparation for students for clinical practice in Australia and New Zealand is consistent with the preparation provided by the Australian or New Zealand program.

5.3.6 In addressing Accreditation Standard 7.2, the medical education provider should have public information available on the medical program and any difference between the program for local students and students in the offshore program offering, medical registration and the availability of internships in Australia and New Zealand.

5.4 Decisions on accreditation

5.4.1 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 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 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 for registration purposes.

5.4.2 The options open to the AMC in accrediting major program changes and new medical programs are described in the *Procedures for Assessment and Accreditation of Primary Medical Programs by the Australian Medical Council* (AMC Procedures sections 5.2 and 5.3). In summary, these are:

1. Accreditation of the new program or major change to the program until one year after the full program has been implemented, subject to AMC monitoring including satisfactory annual progress reports. Monitoring may require accreditation conditions to be addressed within a specified period and/or to follow-up reviews by the AMC.
2. Accreditation of the new program is not granted.

5.4.3 The AMC accreditation decision relates to a particular medical education provider and a specific program or programs leading to a named award. Weaknesses in the medical program at a particular location or locations may result in accreditation conditions on the provider and program as a whole.

5.4.4 If the education provider intends to grant the same award title to an offshore program as it grants to the program conducted in Australia or New Zealand and accredited by the AMC, then the AMC accreditation decision will relate to the program as a single entity.

5.4.5 If the offshore program does not satisfy the approved accreditation standards, then the entire AMC-accredited program does not satisfy the accreditation standards. A decision to remove the accreditation of a medical program offered in Australia or New Zealand would be taken only if discussion between the AMC and the education provider did not lead to resolution of the AMC’s concerns. This might, for example, entail changing the offshore program and granting it a different award to that of the local AMC-accredited program.

Australian Medical Council

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**ATTACHMENT 1**

**Additional matters considered by the Australian Medical Council in its initial assessment of a proposal to provide a medical program offshore**

The Contract

* What is the nature of the contract or agreement between the home and offshore university/campus/medical school? For example:
* Are all aspects of the contract clearly stated and responsibilities defined? Are financial responsibilities stated?
* What consultations took place in the preparation of the contract?
* How are the governance structures and functions of the accredited education provider defined, and how does the local campus/education provider governance interact with the home university, and with other campuses and clinical schools?
* Does the contract identify responsibilities for curriculum and assessment, and identify the Australian/New Zealand higher education provider as responsible for academic quality assurance?
* Is the contract subject to review?
* Is there good communication between local and offshore campuses and senior managers?

Significance of the offshore operation

* How significant is the offshore operation in terms of finance and student numbers?
* Is it a growing operation and strategically significant?
* How important is the program to both host and parent institution?
* What award title is proposed? Specifically, is there an identical award title to that offered to graduates of the local (Australian or New Zealand) medical program proposed?
* If a major change to an already AMC-accredited Australian or New Zealand program is made, are the learning outcomes, curriculum, and educational process essentially the same as those applying to the accredited program?
* What arrangements are there to provide offshore students with experience and understanding of Australian and New Zealand medicine and practice in these countries?

Risk

* What are the challenges to implementing a curriculum designed for Australia and New Zealand in a different health system with different disease profiles and a different culture and society?
* What are the external sensitivities and what are the risk management systems in place and planned? (For example, would the operation be especially sensitive to changes in the overseas government, government policy, or to changes in the situation of any financial backers)
* Will there be an appropriate infrastructure and learning support on the offshore campus for students to complete their program?
* What is the higher education provider’s stated responsibilities to enrolled students if the offshore operation winds up?

Host Country Accreditation

* What external quality control mechanisms operate in the host country?
* Could the AMC assessment of the program proposal build on these processes?
* Could the AMC rely on the cooperation of the host country agency, both in the assessment and in the monitoring of the course, following accreditation?

Quality Assurance

* Does the parent university have a comprehensive quality assurance plan for teaching and learning in an offshore situation?
* How is performance against the plan assessed?
* Has the parent university’s offshore operations been audited by TEQSA or a similar New Zealand body?
* How is the quality of clinical teaching, supervision and assessment assured in the offshore clinical training facilities?

**ATTACHMENT 2**

**The structure and content of an AMC visit to assess a proposal to provide a medical program offshore**

There are a number of procedural matters that would flow from a decision by the AMC to assess a proposal to provide a medical program offshore.

1. **Protocol issues associated with an AMC team conducting an assessment overseas**

These might include: informing the local health department of the visit, arranging to meet the medical school accreditation authority or medical registration board in the offshore country where necessary, informing the chief executives of any hospitals to be visited of the purpose of the visit, and seeking support for the team to visit local hospitals.

The AMC expects the education provider being assessed to arrange all the required meetings. The AMC writes to local authorities to advise the purpose and nature of the team’s visit, through the Australian Government Department of Health.

1. **Timing of the assessment**

Medical school accreditation visits are usually conducted in a one-week block. The team spends the first day meeting major curriculum and management groups. This day provides an overview of the program and the provider. The team then breaks into sub-teams, reviewing particular components of the program in detail. Teams spend one or two days during the week visiting clinical teaching sites.

The assessment of an offshore campus / clinical school normally takes place in conjunction with an AMC assessment of the medical program and education provider.

1. **The visiting team**

AMC teams comprise a mix of assessors from various Australian States and territories and New Zealand, a number of education providers, the basic and the clinical disciplines, hospital and community-based teachers and experienced academic managers. Teams may also include medical students, community/health consumer members, hospital managers, or members of regulatory bodies.

The AMC anticipates that a team assessing an offshore course offering would be similarly structured. Teams would normally include the following:

* + - * If the program is already accredited by the AMC for offering in Australia or New Zealand, one or more members of the AMC team that had assessed the Australian or New Zealand based education provider and medical program.
      * One or more team members with the understanding of particular strengths and weaknesses of medical education and training in the country where the program is to be offered. The AMC consults the local medical school accreditation authority, and registration authority, if any, when it makes its selection.

1. Constitution of the Australian Medical Council Limited [↑](#footnote-ref-1)
2. ***Accreditation standard,*** for a health profession, means a standard used to assess whether a program of study, and the education provider that provides the program of study, provide persons who complete the program with the knowledge, skills and professional attributes necessary to practise the profession in Australia (Section 5 of the National Law). The approved accreditation standards relevant for this policy are Standards for the Assessment and Accreditation of Primary Medical Programs by the Australian Medical Council. [↑](#footnote-ref-2)
3. <http://www.teqsa.gov.au/about> [↑](#footnote-ref-3)
4. <http://www.aqa.ac.nz/sites/all/files/AQA%20UNZ%20QA%20Brochure%202013.pdf> [↑](#footnote-ref-4)
5. Information Paper: TEQSA’s approach to regulating the offshore provision of regulated HE awards September 2013 [↑](#footnote-ref-5)
6. A major change in a medical program is a change in the length or format of the program, including the introduction of new distinct streams; a significant change in objectives; a substantial change in educational philosophy, emphasis or institutional setting; and/or a substantial change in student numbers relative to resources. Significant changes forced by a major reduction in resources leading to an inability to achieve the objectives of the existing program are also major changes.” [↑](#footnote-ref-6)
7. In this section proposed changes to the criteria are marked as follows: proposed additions are shown in red, and proposed deletions are shown in ~~strikethrough~~ [↑](#footnote-ref-7)
8. Australian Medical Council, *Preparing a Submission for Assessment of an Offshore Offering of an AMC Accredited Medical Course: A Guide for Medical Schools,*  [↑](#footnote-ref-8)
9. The provider might distinguish a program offered completely offshore from the AMC-accredited Australian/New Zealand offered program, for example, by offering a different award. [↑](#footnote-ref-9)
10. Standards for the Assessment and Accreditation of Primary Medical Programs by the Australian Medical Council [↑](#footnote-ref-10)