

**Theme:** **Balancing Quality and Quantity: The Global Challenge for Tertiary Education**

**Sub-Theme:** **Quality Assurance Trends for the Future**

**Title:** **Medical Education in the Caribbean: Accreditation by the Caribbean Accreditation Authority for Education in Medicine and Other Health Professions (CAAM-HP) as one method of assuring quality.**

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### **Abstract**

In recent decades the sharp increase in demand for higher education, the emergence of new providers which are mainly 'for profit', and of information and communication technologies, internationalization and cross-border provisions, the lack of public funding and the trend towards treatment of education as a commodity/service to be internationally regulated by trade agreements and the importance of accreditation for quality assurance have been key factors contributing to major reforms in higher education systems worldwide.

Over the last thirty years the Caribbean region has witnessed significant change and growth in medical education. In addition to the traditional schools, there has been an influx of for profit off shore schools aimed primarily at international students. External quality assurance through accreditation of the programmes of these institutions has varied in effectiveness and scope throughout the region.

Accreditation is a peer review process designed to attest to the educational quality of new and established educational programmes. In today's ever-increasing borderless, fiercely competitive world, with continuous movement of professionals and technology and with rising quality standards, accreditation of medical education programmes is an imperative.

The Caribbean Accreditation Authority for Education in Medicine and Other Health Professions (CAAM-HP) was established by governments of the Caribbean Community (CARICOM) as a way to fulfil regional and local needs for a governmentally recognised quality assurance body.

The evaluation and monitoring of undergraduate medical education programmes in the Caribbean by a regional accrediting system such as the CAAM-HP ensures the quality of education delivered leading ultimately to improvement in the health of the populations served by graduates of these institutions.

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## **INTRODUCTION**

In recent decades the sharp increase in demand for higher education, the emergence of new providers which are mainly ‘for profit’, and of information and communication technologies, internationalization and cross-border provisions, the lack of public funding and the trend towards treatment of education as a commodity/service to be internationally regulated by trade agreements and the importance of accreditation for quality assurance and ranking have been key factors contributing to major reforms in higher education systems worldwide.

The new providers of higher education and the award and delivery of qualifications for example, pose challenges for national and international policies and regulatory frameworks, especially in terms of quality assurance. In cross-border education, recognition/registration is critical to ensuring the institution’s legitimacy and qualifications provided.

These developments have resulted in widespread concern about quality assurance of higher education leading to the expansion of accreditation as a system for quality assurance and recognition at the national, regional and international levels.

Medical education has not escaped the influence of these developments. Evidence of the globalisation process in medicine and medical education can be found in the movement of medical doctors and the growth of cross-border education which encompasses a wide range of modalities including movement of students, teachers, programmes and campuses overseas and distance learning using various technologies. This process is supported by common curricular and management trends which facilitate definition of global standards in medical education such as integration of basic sciences and clinical disciplines in teaching and assessment, emphasis on communication skills, broadening of clinical training settings including greater influence of curriculum committees, increasing student influence on programme development, clearer budgetary responsibility for education and strengthening of educational leadership.

## **MEDICAL EDUCATION AND ACCREDITATION IN THE CARIBBEAN**

Medical education in the Anglophone Caribbean began in 1948 at the foundation of the University College of the West Indies (UCWI), then a constituent part of the

University of London. From then onwards and after full university status (The University of the West Indies), was achieved in 1962 the medical education programme was accredited by the General Medical Council (GMC) of the United Kingdom. This gave national, regional and international recognition of the graduates of the University of the West Indies (UWI) who were able to register freely in the UK and other Commonwealth countries. This practice continued over the years as various changes took place in medical education at the UWI. However, in 2001 the GMC discontinued the practice of accrediting overseas institutions in keeping with the European Union (EU) regulations regarding academic and professional training programmes.

Over the last thirty years there has been significant change and growth in medical education in the Caribbean region with the establishment of a medical school at the University of Guyana in 1985 which was established in 1963 and the University of Suriname in 1968.

In 1989 the UWI as part of its Medical Sciences programme, established a school in Dentistry and Veterinary Science at Mount Hope in Trinidad, and since then other 'offshore' schools of Dental and Veterinary Medicine have been established in the region.

In addition to the traditional schools, there has been an influx of for profit off shore schools aimed primarily at international students. The first of these schools, St George's University School of Medicine was established on the island of Grenada in 1977 followed by Ross University School of Medicine on the island of Dominica in 1978. According to the International Medical Education Directory (IMED) there are over 30 such schools in the English speaking Caribbean today.

The region therefore has three different types of medical schools, the regional university (UWI) national universities (University of Guyana and the University of Suriname) and the off shore, for-profit schools.

As a result of the globalization of medicine coupled with the increasing number of students who go abroad for their medical education, Caribbean medical education issues of quality, scale, student populations and oversight mechanisms are of great interest in the Caribbean, the United States, as well as around the world.

Because of differences among the schools in the region- including differences in the length of time in operation, mission, resources, admission requirements, student population and clinical experience- there is significant variability in the structure of the educational programmes and the performance of the students.

The existence of quality-control oversight measures by an external body, a rigorous review process, transparency of the process and standards used also vary significantly throughout the Caribbean region. Achieving reliable accreditation in countries with only one or a few medical schools and without independent experts, is particularly difficult and is cause for concern particularly in the light of the rapid increase in the number of new medical schools.

In response to these developments and the regional thrust to ensure quality education and training in the context of the Caribbean Community's (CARICOM) Single Market and Economy (CSME), a regional accreditation system, The Caribbean Accreditation Authority for Education in Medicine and Other Health Professions (CAAM-HP) was established under the *aegis* of the Caribbean Community (CARICOM) in July 2004.

The purpose of this body is the accreditation of undergraduate programmes leading to qualifications in medicine, dentistry, veterinary medicine and the other health professions offered in member states of the Caribbean Community. By judging the compliance of medical education programmes with national and internationally accepted standards of educational quality, CAAM-HP serves the interests of the general public in the Caribbean Community (CARICOM) and the interest of the students enrolled in the programmes of the schools.

## **OBJECTIVES**

The objectives of the CAAM-HP are to achieve and maintain standards of excellence, to establish an efficient system of regulation in relation to the standards and quality, to secure international recognition and to maintain confidence in the quality of medical and other health professions training offered in the region.

## **WHAT IS ACCREDITATION**

For the CAAM-HP, accreditation is a peer review process of quality assurance based on standards for process and outcomes; it addresses functions, structure and performance and is designed to foster improvements in institutions and programmes. The process is applied to both new and established educational programmes.

## **ACCREDITATION PROCESS**

The accreditation process adopted by the Caribbean Accreditation Authority for Education in Medicine and Other Health Professions uses established criteria, standards and processes. The standards deal with the following areas:

- The Institutional Setting
- The Students
- Education Programmes
- The Faculty
- Educational Resources
- Internship
- Continuing Professional Education

Compilation of these standards took into account the circumstances within the region as well as the standards of the General Medical Council of Great Britain (GMC) and those of the Liaison Committee on Medical Education (LCME) of the United States and Canada. The following are the general aims of the accreditation process:

- To certify that a medical education programme meets the prescribed standards, of structure, function and performance

- To promote institutional self-evaluation and improvement
- To assure society and the medical profession that graduates of accredited schools meet the educational requirements for further training and the health care needs of the people of the Caribbean

The standards are therefore written to assure governments, students and the public that graduates of medical schools in CARICOM countries have attained educational standards that allow them to adapt to practice anywhere in the world. However, when seeking to practise in CARICOM countries graduate doctors must also meet the standards for independent practice in these countries. These are reflected in the standards for Internship and meeting the equivalent levels of knowledge and clinical competencies determined by the regional registration body, the Caribbean Association of Medical Councils (CAMC).

Essentially, accreditation asks the following questions:

- What are the objectives of the medical education programme?
- Has the institution organised its programme and resources to accomplish these objectives?
- What is the evidence that the school is accomplishing its objectives?

The CAAM-HP process is characterised by an Institutional Self Study (self analysis) by the school, an on-site review by a team of surveyors (external reviewers) and a review of the survey team's written report by the CAAM-HP which forms the basis of the determination of a programme's accreditation status.

### ***Institutional Self Study***

The Institutional Self-Study is central to the accreditation process and is built around standards for accreditation. In the Self-Study, a medical school brings together representatives of the administration, academic staff, student body, and other stakeholders to:

- ❖ collect and review data about the medical school and its educational programmes,
- ❖ identify institutional strengths and issues requiring action, and
- ❖ define strategies to ensure that the strengths are maintained and any problems addressed.

### ***Site Visit***

The CAAM-HP Secretariat recruits and trains an *ad hoc* team of four to six surveyors from the Caribbean, North America and Europe comprising basic science and clinical educators from its pool of experienced and knowledgeable medical educators. The team assesses how well the medical education programme at the assigned school complies with the accreditation standards. In order to accomplish its responsibility the team, headed by a Chair and served by a team secretary, makes on-site observations to corroborate and evaluate data provided by the institution.

During the visit the team meets with those persons or groups needed to obtain or verify necessary information, including faculty, students and administrators. Meetings with representatives of the student body take place at informal luncheon sessions to discuss student issues and perspectives.

At the end of the visit the team gives a confidential oral summation of its findings and conclusions to the dean and to the university's chief executive.

### ***Report development and review***

These findings and conclusions are incorporated into a written report which is sent to the CAAM-HP Secretariat which in turn sends it to the dean who is asked to correct any errors of fact and discuss any disagreement with the tone or conclusions of the report with the team secretary. The team secretary will bring the matter to the team chair. On receipt of the final report by the Secretariat it is sent to the CAAM-HP members for review prior to its next meeting.

### **CAAM-HP ACTION**

When the CAAM-HP meets it considers and discusses the content of the survey report and makes a decision about the accreditation status of the medical education programme. The school is notified by letter to which the final report is attached, from the Secretariat to the vice chancellor/president of the university with a copy to the dean of the medical school. Governments of the region are also advised via a letter from the Secretariat to the Secretary-General of the Caribbean Community.

The accreditation status determined by the CAAM-HP is considered public information; however, the survey report and its findings remain confidential but may be published by the school as it deems appropriate.

Full accreditation is awarded or renewed when a school's medical education programme is deemed to have met the CAAM-HP's standards.

To date, the CAAM-HP has carried out accreditation exercises at the University of the West Indies (medical and veterinary education programmes), the University of Guyana, St George's University and Ross University in addition to evaluation of proposals for the establishment of new, for-profit schools in the region.

### **IMPACT AND OUTCOMES**

The summary report resulting from the Self-Study process provides an evaluation of the quality of the medical education programme and the adequacy of resources that support it. The report identifies the school's strengths and weaknesses and issues which require attention either to ensure compliance with accreditation standards or to improve institutional/programme quality.

In addition, the Self-Study process includes an independent evaluation by the medical students. Accrediting teams pay special attention to the perceptions of students about their experiences in medical school. They provide a unique perspective on the environment for teaching and learning, the quality of the educational programme and the availability of support services. By participating in the accreditation process,

students contribute to validating or improving their school's educational programme and ensure that legacy for their successors.

The usefulness of the Self-Study as a guide for planning and change is enhanced when participation is broad and representative, and the resulting analysis and conclusions are widely disseminated. Because of the time and resources required to conduct a Self-Study, medical schools are advised to give careful thought to other purposes that may be served by the process such as serving as a vehicle to reaffirm the school's mission and goals or set new strategic directions.

Weaknesses/deficiencies identified by the schools themselves in the Institutional Self Study and later corroborated by the survey team are pointed out by the CAAM-HP in its communication to the schools as having been deemed to be either non-compliant or partially compliant with the standards.

Schools are required to submit reports to the CAAM-HP on the progress being made in addressing areas of weaknesses/deficiencies. In addition, schools are monitored on a regular basis through submission to the CAAM-HP of an *Annual Medical School Questionnaire (AMSQ)* which provides information on any significant changes to staffing, student numbers, student financing, examination results and progress of students, institution's financial resources, publications by staff and placement of interns.

### **International Recognition/Affiliations**

The CAAM-HP has the responsibility to establish affiliations and secure international recognition. Furthermore, the increasing international interest in assuring and recognising quality in medical education has called for a number of initiatives including establishment of international partnerships, collaboration in forums and conventions and publication of information on the accreditation status of medical schools aimed at fostering quality improvement of medical education as all schools strive for inclusion.

To this end, a partnership has been forged with the World Federation of Medical Education (WFME), the global organisation dedicated to enhancing the quality of education and training of medical doctors worldwide. The WFME's overall goal is to strive for the highest scientific and ethical standards in medical education, taking initiatives with respect to new methods and new tools and management of medical education. Specifically, the WFME is involved in performing an assessment of the accrediting organisation's standards and procedures. So far, the CAAM-HP has included a WFME advisor as an external reviewer on one of its site visit teams.

With assistance from the Educational Commission for Foreign Medical Graduates (ECFMG), CAAM-HP and the WFME successfully hosted an Invitational Conference on Accreditation of Medical Education Programmes in the Caribbean in Jamaica in 2007. The conference brought together 80 leading regional and international experts from more than 20 organisations, institutions and governments from the Caribbean, South America, North America and Europe. The purposes of the conference were to reflect on the process of accreditation as it is conducted regionally and worldwide and

to examine efficient and effective options for maintaining and improving established accreditation systems such as the CAAM-HP.

This forum presented a unique opportunity for participants from outside the Caribbean to enhance their understanding of the complexity of the issues in the region. It also stimulated an increased recognition of the value of accreditation for schools in the Caribbean as well as thought and discussion from delegates on how they could collaborate with or act as a resource to the CAAM-HP. It was also noted that CAAM-HP can serve as a model for other regional initiatives.

Through full membership with organisations such as the International Network for Quality Assurance Agencies in Higher Education (INQAAHE) and participation (by invitation) in meetings of the Federation of State Medical Boards and Administrators in Medicine and the Educational Commission for Foreign Medical Graduates (ECFMG), CAAM-HP has achieved international recognition and global dissemination.

Furthermore, in January 2008 the UK government gave formal recognition to the CAAM-HP as the authority responsible for the accreditation of new and developing medical schools for the British Overseas Territories located in the Caribbean. The UK government will only endorse a new school for listing in the WHO World Directory of Medical Schools and /or the International Medical Education Directory (IMED) when the CAAM-HP has issued provisional accreditation. Local legislation to give effect to this decision has been enacted in Anguilla and Montserrat.

More recently, The Mississippi State Board of Medical Licensure issued a Notice of Proposed Rule Adoption which will make it a requirement as of July 1, 2009, for those applicants for medical school licensure (in the State of Mississippi) who trained in a medical school in CARICOM member countries including the British Overseas Territories to have graduated from a CAAM-HP accredited programme.

### **Journal Publication**

A manuscript titled, *Accreditation of Undergraduate Medical Education in the Caribbean: Report on the Caribbean Accreditation Authority for Education in Medicine and Other Health Professions*, and co-authored by staff from the WFME, ECFMG and CAAM-HP was published in the June 2009 issue of *Academic Medicine*.

### **CONCLUSION**

The medical schools which have voluntarily undergone the accreditation process have reported that the task of compiling information and carrying out a critical and comparative analysis has been extremely useful. The highly structured nature of the required processes necessitated a very detailed review of all aspects of the functioning of the medical schools exceeding that which accompanies internal reviews. Faculty members have become more aware of how data should be stored, sorted and requested in the future to allow for retrieval of accurate information in a timely and efficient manner.

Generally speaking, the schools have also acknowledged the importance of regular accreditation for quality assurance and the maintenance of international standing. In both the short and long-term the accreditation exercise serves to improve the educational programme and the quality of the graduates of the respective programmes.

Overall, the cyclical process of institutional self-study and assessment, coupled with external validation by a team of professional peers provides a mechanism for on-going quality improvement. That quality assurance focus is closely linked to licensing requirements for medical practice and access to postgraduate education.

We feel that the development and implementation of an oversight body such as CAAM-HP is a step forward in increasing the quality of medical education especially in a region such as the Caribbean which has a large number of training programmes that vary substantially across numerous criteria, including admission standards, size of programme and facilities, available resources, medical science curriculum and clinical training opportunities. In the light of the challenges inherent in promoting and implementing an accreditation process we look forward to further development in this area as efforts are made to implement a system of encouraging excellence in medical education in the CARICOM region.