

1 this position, my taxes are up to date and  
2 paid in full.

3 DR. DOCKERY: Did you use Turbo  
4 Tax?

5 MR. MADZELAN: As a matter of  
6 fact, I do, but I am an uncomplicated  
7 financial man.

8 DR. DOCKERY: Are there other  
9 questions from the Committee? Well again,  
10 thank you so much for coming and being with  
11 us, and keep your eyes on us now.

12 MR. MADZELAN: I will.

13 DR. DOCKERY: Okay. Next we will  
14 go to the country of Saba, and we'll ask Mr.  
15 Sneed to come forward.

16 MR. SNEED: Well good morning, Dr.  
17 Dockery, Committee, Committee Members, and  
18 guests. I am presenting the staff analysis  
19 for a report submitted by the ACCM,  
20 Accrediting Commission on Colleges of Medicine  
21 on behalf of the Government of Saba.

22 Saba University School of Medicine

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SABA

1 is the country's only medical school. You  
2 will find the materials related to this report  
3 under Tab K.

4 The NCFMEA initially determined  
5 that the standards used by the commission to  
6 evaluate Saba University School of Medicine  
7 were comparable to those used to evaluate  
8 medical schools in the United States at its  
9 March 2003 meeting.

10 At that meeting, the ACCM was  
11 directed to submit a full report for review at  
12 this Committee's September 2004 meeting.  
13 Based on the testimony and information, the  
14 Committee accepted the report and requested a  
15 follow-up report of its accrediting activities  
16 for review at the September 2006 meeting.

17 There were no NCFMEA meetings for  
18 the years 2005 and 2006. The previously  
19 requested report was submitted, reviewed, and  
20 accepted at the June 2007 NCFMEA Committee  
21 meeting.

22 During that meeting, the Agency

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1 mentioned that Saba University School of  
2 Medicine would be going through a change of  
3 ownership. As a result of that change of  
4 ownership notification, this Committee  
5 requested that ACCM provide a report  
6 concerning the change of ownership of the Saba  
7 University School of Medicine for  
8 consideration at this meeting, and in response  
9 to that change of ownership report request,  
10 the ACCM conducted an on-site visit evaluation  
11 of Saba University School of Medicine in the  
12 fall of 2008.

13 After receiving the staff's self-  
14 study, the ACCM proceeded in accordance with  
15 its policies, and within six months  
16 notification of the change of ownership and  
17 provided a report to its council.

18 The purpose of the site visit was  
19 to establish whether the new owners could  
20 ensure continuing compliance with the present  
21 accrediting standards. During the onsite  
22 inspection, the team met with a representative

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1 of the new owners of the school. It was  
2 reported that the new owners were generally  
3 happy with the organizational framework of the  
4 school but planned to arrange for a  
5 substantial investment in consulting experts  
6 to advise them on various matters such as  
7 updating the school's informational technology  
8 system and other matters.

9 The inspection team reported that  
10 the school was undergoing a multi-phase  
11 building program. The facilities under  
12 construction created new facilities for  
13 faculty, the new labs, new student lounges,  
14 new state-of-the-art classrooms with the  
15 latest technology for teaching aids, a new  
16 testing center, a new cafeteria for student  
17 union. All but the new testing center were  
18 completed by September 2008.

19 There were no significant findings  
20 reported by the inspection team in their  
21 accrediting report of Saba University School  
22 of Medicine.

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1           Based on a review of the report  
2 submitted by the Accreditation Commission on  
3 Colleges of Medicine on behalf of the  
4 Government of Saba, the Department staff  
5 concludes that the ACCM provided all of the  
6 information previously requested by this  
7 Committee.

8           The Agency is due for a full  
9 redetermination by this Committee at the  
10 September 2009 NCFMEA meeting.

11           There have not been any known  
12 Title IV funds disbursed to this country to  
13 date. There are representatives here today to  
14 receive your questions. I will be happy to  
15 answer any questions that you may have at this  
16 time. Thank you. This concludes my report.

17           DR. DOCKERY: Thank you, Mr.  
18 Sneed. Are there questions from members of  
19 the Committee before we ask representatives  
20 from Saba to approach the table. Dr. Peacock.  
21 Dr. Peacock, good morning.

22           DR. PEACOCK: Good morning.

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1 DR. DOCKERY: Professor  
2 Fitzgerald, good morning. Any comments that  
3 you'd like to make before -

4 DR. PEACOCK: Absolutely, sure.  
5 Well first of all I would like on behalf of  
6 the ACCM to thank Mr. Sneed once again for his  
7 extremely comprehensive analysis of the  
8 information submitted. As you know, this is a  
9 very narrow term of reference that the ACCM  
10 was instructed to provide back at the  
11 September 2007 meeting, and that was to -- the  
12 ACCM was directed then purely to present a  
13 report on the change of ownership.

14 Now one may argue that, you know,  
15 within -- as a result of protocol of course  
16 that the ACCM must follow, an inspection team  
17 must visit the basic science campus within six  
18 months of a change of ownership taking place,  
19 and one may argue well, six months, does that  
20 give people sufficient time and so forth, and  
21 to the answer to that I suppose, well, you  
22 know, that's neither here nor there.

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1           The point about it really is that  
2           that's what's written in the protocol, and  
3           that's what the ACCM team abided by, but the  
4           within that -- after that six-month change of  
5           ownership, we certainly were very favorably  
6           impressed by the new regime.

7           I think this was predominantly due  
8           to the fact that the new owners took over a  
9           school that was in pretty good shape already.

10          I mean the ACCM has been accrediting this  
11          school since 2002, and I think that there  
12          would be some very favorable aspects to this  
13          particular school, and Number One, I think  
14          it's predominantly because of its relatively  
15          small size, and there's a very good, healthy  
16          student-faculty ratio and so forth.

17          So we also added in an  
18          institutional self-study which was completed  
19          towards the end of 2008 which I think would  
20          reflect further on the change of status within  
21          the school now as a result of the change of  
22          ownership.

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1           But our general impression based  
2 on the 2007 and indeed I might add just for  
3 the record that as part of the redetermination  
4 of comparability, an inspection team went out  
5 to the university in February of this year so  
6 that gave us a very good impression as to how  
7 things had proceeded over that period of time,  
8 so we nearly had a sort of a two-year window  
9 to see as to how the school was performing.

10           Our general impression really was,  
11 Number One, that personnel has been increased.

12           That includes an increase in basic science  
13 faculty, clinical faculty, and also in  
14 administration staff. Small class size is  
15 still being maintained. There has just been  
16 small, modest increase in class size by about  
17 five to ten per semester take, and that brings  
18 the average take to about 75 students per  
19 semester.

20           There have been markedly expanded  
21 physical facilities to incorporate all the  
22 various aspects that Mr. Sneed has mentioned.

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1       There is an enhancement of information  
2       technology. They are going to bring in the  
3       new ANGEL online platform educational platform  
4       which will tend to standardize the curriculum  
5       and make reporting of results and so forth  
6       much easier and is an extremely good education  
7       tool.

8               We have seen it in operation in  
9       other schools we accredit, and this has  
10       certainly made a very positive difference on  
11       the student experience.

12              There is also being I suppose --  
13       this university has maintained relatively  
14       affordable tuition compared to other schools.

15       There's been a very high morale of faculty is  
16       still being maintained with a relatively low  
17       turnover.

18              There is also great access to  
19       faculty by students, which students very  
20       openly report. They'll certainly report  
21       anything as we all know if anything -- if  
22       things are going wrong, but they were

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1 certainly not behind the door in reporting the  
2 fact that they are very happy with their  
3 access to their teachers.

4 Also we would feel that admission  
5 standards have been maintained, and the USMLE  
6 Step 1 pass rate is also still within the  
7 guidelines and recommendations of ACCM.

8 The attrition rate of the school  
9 is comparable to the United States schools,  
10 and there is an ACGME residency site -- all  
11 students should I say can only go to ACGME  
12 residency approved sites for their clinical  
13 training.

14 So, therefore, the -- based on  
15 that particular visit the ACCM essentially  
16 felt that there was no negative impact on the  
17 school, an actual fact that the whole  
18 situation had become that bit more positive by  
19 the fact of the increased investment in what  
20 I've already said. Thank you.

21 DR. DOCKERY: Are there questions  
22 from members of the Committee before we go

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1 into Executive Session?

2 Professor Fitzgerald, any comments  
3 before we go into Executive Session?

4 PROF. FITZGERALD: No, sir, I  
5 think Dr. Peacock has put it very well, very  
6 succinctly.

7 DR. DOCKERY: Then we'll ask our  
8 guests to depart, and we'll go into Executive  
9 Session please.

10 EXECUTIVE SESSION

11 DR. DOCKERY: Have all the guests  
12 departed or in the process? While we're  
13 departing, how many schools do you have a  
14 contract for accreditation? What is your  
15 volume?

16 DR. PEACOCK: At present we  
17 represent the island territory of Saba, the  
18 island of St. Maarten, and also the Grand  
19 Cayman, Grand Cayman, yes.

20 We're still in the process of  
21 assessing the Medical University of the  
22 Americas on the island territory of Nevis, but

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1 as yet there has been no formal decision made  
2 regarding that particular university. We're  
3 still awaiting further information that we've  
4 requested.

5 DR. DOCKERY: I think all of our  
6 guests have departed. Mr. La Porte.

7 MR. La PORTE: Yes, so the ACCM  
8 report following the change in ownership  
9 clearly shows that there's no adverse impact.

10 My question is driven from looking  
11 at the auditing reports and all that. The  
12 question is why was there a change in  
13 ownership?

14 DR. PEACOCK: The situation was  
15 that I think the previous owners had just  
16 decided that they just wanted to move on and  
17 do something else. I mean there was nothing  
18 suspicious or any problems whatsoever with the  
19 school. It was being very efficiently run, as  
20 I said, by the two previous owners, and it was  
21 just a situation of they wanted to go do  
22 something else.

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1 DR. DOCKERY: Mr. La Porte, okay.  
2 Dr. Maldonado.

3 DR. MALDONADO: Thank you, no I  
4 have questions. I was thoroughly impressed by  
5 the report from the school. I just wondered  
6 why there are no students that have applied  
7 for loans yet.

8 DR. PEACOCK: Well, Dr. Maldonado,  
9 that's actually in process, and I understand  
10 that there should be some very favorable news  
11 coming through by the end of this year. It's  
12 certainly been not for lack of efforts by the  
13 new owner. He has certainly made it his -- an  
14 ambition to ensure that the school will be  
15 granted Federal from the educational --

16 DR. DOCKERY: Just a couple more  
17 questions. The discussion on the simulation,  
18 there's going to be a tremendous investment.  
19 What is the configuration of the simulation?  
20 Is it going to be technology or is it going to  
21 be live patient simulation? What is the  
22 direction of the simulation?

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1 DR. PEACOCK: Predominantly  
2 technology, some of which is actually in place  
3 at present, but it will be fully in place once  
4 the final building program is finished.  
5 That's hopefully towards the end of the summer  
6 2009.

7 DR. DOCKERY: And the status of  
8 counseling services for students, counseling  
9 services?

10 DR. PEACOCK: Yes, there are  
11 formal counseling services both for non-  
12 academic and academic counseling provided by  
13 the school.

14 DR. DOCKERY: Is there a motion?

15 DR. MUNOZ: I have a question.

16 DR. DOCKERY: Dr. Munoz.

17 DR. MUNOZ: I just had a question  
18 of the degree of overlap of the clinical sites  
19 between the three universities that you  
20 accredit. How much overlap is there between  
21 clinical sites?

22 DR. PEACOCK: It is -- I suppose

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1 it's significant. If we take a for instance,  
2 there would be about 17 hospitals that are  
3 affiliated to Saba University. We may see  
4 about maybe four or five that would overlap  
5 with other schools, but what's interesting is  
6 that the owner of Saba University is actually  
7 the owner of St. Matthew's University as well,  
8 so there tends to be more common sites between  
9 those two universities than for instance with  
10 AUC.

11 DR. DOCKERY: Dr. CRANE.

12 DR. CRANE: I have a question. It  
13 was one I had from our last discussion with  
14 respect to Cayman. It has to do with the  
15 student-faculty ratio. I'm confused about  
16 this. If there are several different  
17 universities using the same clinical site,  
18 then for instance with Cayman you gave a  
19 student-faculty ratio. Well that might be the  
20 denominator might be only the -- you see where  
21 I'm going? The denominator might be only the  
22 students at Cayman, but when we add those of

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1 Saba and another university, we have a lot  
2 more.

3 Can you tell me is that the case  
4 or do you do it individually by university?

5 DR. PEACOCK: No, we do it  
6 individually by university, and the faculty-  
7 student ratio is calculated for Saba  
8 University based on the number of students in  
9 the basic science faculty divided by the  
10 number of basic science faculties. That just  
11 applies. We don't take in clinical faculty at  
12 all.

13 DR. CRANE: Thank you very much.

14 DR. DOCKERY: Before receiving a  
15 motion, you'll be up for redetermination at  
16 the September 2009 meeting, and that's why Dr.  
17 Temperley has retired?

18 DR. PEACOCK: Dr. Temperley -- I  
19 thought Dr. Temperley had his time. This is  
20 my show. No, there would be a meeting of the  
21 ACCM in May of which the cudgels, should I  
22 say, or the poison chalice, or whatever way

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1 you like to look will be -- look at it -- will  
2 be handed over to Professor Fitzgerald, so  
3 from May, probably about 5:15 on the afternoon  
4 of Friday, the 22<sup>nd</sup> of May, Professor  
5 Fitzgerald will become the new Chairman of the  
6 ACCM, but Dr. Temperley will still be there  
7 advising us as ever.

8 DR. DOCKERY: But the bells will  
9 still chime?

10 DR. PEACOCK: The bells will still  
11 chime.

12 DR. DOCKERY: Is there a motion?

13 MR. La PORTE: Yes, so I move that  
14 the NCFMEA accept the report submitted by Saba  
15 and request that it submit a request for  
16 redetermination for review at the September  
17 2009 meeting of the NCFMEA.

18 DR. MALDONADO: I second.

19 DR. DOCKERY: All in favor, please  
20 say aye.

21 (Chorus of ayes)

22 DR. DOCKERY: Those opposed.

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1 (None) Are there abstentions? (None) Thank  
2 you again, Dr. Peacock and Dr. Fitzgerald, and  
3 we will look forward to seeing you in  
4 September.

5 DR. DOCKERY: While the guests are  
6 returning, I would like for us to consider  
7 finishing Taiwan, and then we'll take a short  
8 break and then reconvene and if we could be --  
9 manage our time well so that we can stay on  
10 schedule.

11 DR. DOCKERY: Dr. Hong-Silwany,  
12 good morning.

13 DR. HONG-SILWANY: Good morning.

14 DR. DOCKERY: I think we can  
15 begin. Thank you.

16 DR. HONG-SILWANY: Thank you, good  
17 morning, Mr. Chair and Committee Members. I  
18 will now summarize the analysis for the Taiwan  
19 Medical Accreditation Council submitted on  
20 behalf of the Government of Taiwan. The  
21 materials are behind Tab M. I will refer to  
22 the accrediting council as the Council.

TAIWAN

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