NCFMEA Mtg. 9/15/08

TAIWAN

CHAIRPERSON DOCKERY: While the guests are returning, we can invite Mr. James and Mary Gersema and Dr. Jones to approach the table, please.

MS. GERSEMA: Thank you, Mr. Chairman. Good morning, members of the Committee.

I will be presenting the report submitted by the country of Taiwan. Taiwan Medical Accreditation Council, or TMAC, was renewed for comparability at your March 2002 meeting. During that meeting, you determined that the standards of accreditation used by TMAC to accredit medical schools were comparable to those applied to the M.D. programs in the United States.

At the September 2007 meeting, your Committee requested the country provide specific information for review at this meeting. That information included: the current status of the country's medical schools; an overview of key accreditation activities; a description of any changes in laws and regulations that affect the accreditation of its schools; any changes in the country's accreditation standards or changes in the processes and procedures used to evaluate and accredit its medical schools.

In addition, Taiwan was requested to submit its redetermination for comparability for this meeting. However, that information was not submitted and the country's redetermination has been postponed until your spring of 2009 meeting.

So this presentation then addresses the report and not a redetermination. The findings of this report are based on information received from TMAC as of August 13, 2008.

Currently, TMAC accredits 11 medical schools in Taiwan. Seven schools are fully accredited, three schools are conditionally accredited, and one school is on probation.

Taiwan's Ministry of Education is currently implementing a Six-Year Medical Reform Program. At the TMAC committee meeting in October 2007, the TMAC council met with representatives of the 11 medical schools and reviewed each school's self-assessment.

TMAC evaluated each school's progress in meeting the medium-range goals of the Ministry's Six-Year Medical Reform Program, an initiative begun in 2003 by the Ministry to improve the overall quality of medical schools in the country.

The initiative consists of specific short,

medium and long-range goals, and we've talked about that at previous meetings.

This year TMAC implemented a two-phase monitoring review process. The first phase consisted of the self-assessment and evaluation, which occurred at the October 2007 meeting, and the second phase of this review process entailed a follow-up visit.

Those schools that clearly established they were meeting the medium-range goals of the Six-Year Medical Reform Program were exempt from undergoing follow-up visits.

As a result of the October 2007 meeting, nine medical schools received a second-phase review which entailed a one or two-day follow-up visit from TMAC.

Two schools, the National Taiwan University College of Medicine and the National Yang Ming University College of Medicine, did not receive on-site visits, follow-up visits.

There have been no changes in Taiwan's laws or regulations that affect the accreditation of medical schools since the last report.

However, TMAC changed its affiliation from the National Health Research Institute to the Higher Education Evaluation and Accreditation Council of

Taiwan, which I'll refer to as the Council, in June of 2006.

The accreditation authority of all higher education fields now lies with the Council. As a result, TMAC will report directly to the Council rather than the Ministry and TMAC will revise its bylaws to reflect this change.

In addition, TMAC will meet with the Council and the Ministry to discuss what the Ministry will do with unaccredited medical schools in the country as well as those medical schools that have remained on probation with TMAC for an extended period of time, as current Ministry regulations do not address these situations.

In 2009, TMAC will begin evaluating its medical schools to determine whether they have met the long-range goals of the Ministry's Six-Year Medical Reform Program.

TMAC plans to conduct a training workshop for on-site evaluators in order to enhance the quality and consistency of its on-site reviews. No date for this training is specified.

TMAC would also like to have its members observe an LCME site visit in order to enhance its own

accreditation processes, but as of this report, no concrete plans for a site visit observation have been established.

Based on a review of the report and correspondence submitted by TMAC, Department staff conclude that TMAC has provided all of the information requested by your Committee. Its actions during the past year appear consistent with your guidelines.

This concludes my remarks on behalf of the team. Representatives from TMAC are here today to answer any questions you may have, and we are as well. Thank you.

CHAIRPERSON DOCKERY: Thank you, Ms. Gersema.

Are there additional comments by Dr. Jones and Mr. James?

MS. JONES: No. No, sir. Thank you.

CHAIRPERSON DOCKERY: Okay. Are there any comments from the members of the Committee before we go into executive session?

May we ask that our guests depart again and we'll go into executive session.

[Executive session begins:]

CHAIRPERSON DOCKERY: Please introduce yourselves.

DR. LAI: My name is Chi-Wan Lai. I'm the CEO of Taiwan Medical Accreditation Council, TMAC.

DR. SOONG: I'm Wei-Tsuen Soong. I'm a child psychiatrist. I am now working in St. Joseph's Hospital, but I'm also a member of TMAC.

CHAIRPERSON DOCKERY: Thank you.

Are there any comments that you would like to make on the report by the staff?

DR. LAI: First of all, I'd like to apologize for not sending the paperwork for redetermination because when we received the notice, that part of it was in the last, and I was looking at all the questions to answer. So that's why we were delayed in doing that. But we definitely will submit it by the end of November as requested.

CHAIRPERSON DOCKERY: Thank you, sir.

Any additional comments? All right. Dr. Caron.

DR. CARON: Yes. Good morning, gentlemen. I wanted to applaud you--I'm Dr. Raymond Caron from Orlando, Florida. I wanted to applaud you on your process that you've been going through. I've been here since the beginning, and I've seen you develop over the years, and when Dr. Deal did his on-site visit and came

back and gave us his report, we were very impressed.

I'm sure I can speak for everybody here today. We're very impressed with basically coming from nowhere to where you're at today.

I did have just for--is it Dr. Lai?

DR. LAI: Yes.

DR. CARON: Dr. Lai. The reaccreditation of Taiwan comes up in spring '09. And I was looking at your three phases that you've implemented and the schools that are in different processes. Some have continued to be accredited; some not.

There were two universities that I noticed that had not achieved that, and I was just wondering where are they in the process? Are they on probation? I didn't quite understand, and I had looked for that and I didn't see it.

DR. LAI: Thank you very much. We have a total 11 medical schools, and as of now, we still have one on probation and three on conditional approval, and the rest of them are fully accredited, and so for this probation, this is the second time after our full cycle review, and we had lots of discussion about this.

Can I just spend a little time explaining?
Because we moved our TMAC from the NHRI, National

Health and Research Institute, to the newly formed what we call Higher Education Evaluation and Accreditation Council, HEEACT. That's what we call it.

So TMAC moved under this HEEACT, and HEEACT does do all the accreditation besides medical, all the higher education, and in HEEACT, they do have a bylaw that if the university has two consecutive rounds of being on probation, then this will be either reduced in their recruitment or asked to be closed.

So we are going to have a session, joint session with HEEACT and Education Ministry, since this is a major decision. So this is in process.

DR. CARON: That was my next question: how long can a school stay on probation. So HEEACT will actually direct, TMAC will accept the directives of HEEACT; is that what it is?

DR. LAI: That's what we have not decided yet.

DR. CARON: You haven't decided. Okay.

DR. LAI: Because in the eyes of Ministry of Education, TMAC was established way before HEEACT so they give us some sort of recognition so we can run pretty independently, but since HEEACT already has this rule set in, we also had to phrase this kind of condition if the institution continued to be on

probation, we've got to take some sort of bylaw to follow. So that's why we're going to have a joint session.

DR. CARON: I just had written a note after I had read the report. There were two schools that were, I didn't clarify here on my notes. There were two schools that were not visited this cycle? Was that it?

DR. LAI: Okay. Those two schools are exempt from the site visit was that, you know, when we start accreditation, if we get fully accredited, it's seven years.

DR. CARON: Yes.

DR. LAI: Okay. But then since this is the very first time from nowhere it becomes having this established, we worry about if a school that we have let them kind of off the hook for seven years, we make kind of get loose. So at the same time, in the year 2003, the founder of TMAC, Dr. Huang, and I, we wrote a white paper on medical education in Taiwan.

In that, we had proposed three stages of medical education reform, and we had a near range, actual range, medium range, and long-range goal. So the Education Ministry actually urged us to help TMAC to monitor the progress by these three goals every two

years. So we incorporated that into our monitoring system.

So the one you're talking about, that's actually for the medium-range monitoring session rather than a TMAC formal site visit. But in that, we have asked every school, because there's some range of differences with the 11 medical schools. We want to make sure they are more comparable than that. We use the medium-range session for an individual institution had a good extensive self-examination in writing first, and then we assigned one member with it.

TMAC has 11 members so each one adopted one medical institution to review all the written statements in extensively, and then have a session when the dean of the medical school came to present their report of their school. Then, the Council decided to determine whether this school has already clearly achieved the goals so we don't have to go there.

Two schools, National Taiwan University and National Yang Ming School, are national universities.

In Taiwan, public universities usually are much better than the private ones, and these two are clearly the leaders of the medical education in Taiwan.

In fact, there's another national university.

The reason why we chose to visit them for a half day is because they just changed to a new dean. It was a change of a new president of university, and we wanted to see how they were going. So those are two schools being completely exempted.

DR. CARON: I remember in your process, we had discussed at previous meetings the evolution of your examination of medical school graduates. Where are you with that now?

DR. LAI: The National Board?

DR. CARON: Yes.

DR. LAI: You have a terrific memory.

DR. CARON: Yeah.

DR. LAI: Yes, I'm glad to report, it has been improving. In the past, this Council had asked us a question about whether we take the achievement of the National Board Exam as a criteria to decide whether the performance of medical school is up to par. At that time, we reported our performance kind of fluctuated quite a bit year by year.

But in the last two or three years, things have been stabilized. In fact, in the last two years, it has been quite consistent with about 89 to 95 percent passing rate, which is high.

Actually, I don't think I can use the higher scores to mean that it's better. In the past, the scores were fluctuating with one year so low, one year so high. Now we are stabilizing, and we also change to Part I, Part II, but right now the problem we run into is that in the last few years, we have been asking basic science and clinical science to be more integrated. Yet, our Part I is at the end of fourth year. Our medical school is seven years. Seventh year is internship.

At the end of fourth year basic science stops there. So our Phase I is for the basic science oriented questions, and then, it's graduation, and clinical Phase II. However, because of integration of the teaching of clinical and basic together, the Phase I questions need to be changed, and in the last few years, we've been working on that quite hard.

The passing rate, everything has been more homogeneous and more stable. Yes. I think we are now looking at the passing rate of individual schools, and we can reflect that, in fact, in our site visit results.

DR. CARON: Thank you very much. That's all the questions I have, and I applaud you again.

CHAIRPERSON DOCKERY: Dr. Wentz.

DR. WENTZ: Thank you, Mr. Chairman.

I'm Dr. Dennis Wentz and thank you both for coming a very long distance to be with us. We thank you, and I also agree with Dr. Caron that I was very impressed with the report you submitted. It's very thorough and you demonstrate very impressive feedback I think to each school.

So I really have very few questions. Do you still have a cap of students? 1,300? Is that the number?

DR. LAI: Yes. The national quota is 1,300 in total.

DR. WENTZ: In total.

DR. LAI: Yes.

DR. WENTZ: And it looks to me like in terms of student loan funds distributed, there are none at the moment going to Taiwan.

The probation issue has been with us for a long time, since our last meeting, and I think you indicated that steps are being taken to solve that problem, and I'll ask you to comment on that, but before that, currently if they're on probation, are the students in any danger of not receiving a valid diploma

or being impaired to go on to further training while they're on, the school is on probation?

DR. LAI: Below on probation, there is one that is not accredited. So, so far we have no school in that rank.

DR. WENTZ: Right.

DR. LAI: That one has to be closed so it cannot recruit students. While on probation, the school can still take students in.

DR. WENTZ: But the students are not endangered?

DR. LAI: That's right.

DR. WENTZ: Right.

DR. LAI: But the results of this accreditation are publicized. It's in the Web site of TMAC so everyone knows that. Newspapers also disclose that. Consequently, that affects the recruitment of medical students. In fact, a school which was ranked as on probation two times in a row was complaining that their students, now the recruitment of students has significantly dropped, and they actually take the--in Taiwan, it's a kind of joint college examination, and then it depends on your score, then you fit in which school.

Now, they are taking the bottom of the students, and it used to be they were second or third from the bottom. However, being on probation two consecutive times really affected their student recruitment.

Concerning the question of how come we take so long to decide how to deal with these schools on probation twice in a row, I think the main reason is HEEACT, they are having a board reformed. They are changing their board of directors, changing their CEO, and so they want us to wait until they are stabilized.

And, in fact, just a week ago, they called and said now they have the new board of director, they have new CEO. So it's about time we can sit down and talk about this. We are hoping that we can solve this problem within the next month.

DR. WENTZ: Thank you very much. I have no further questions.

CHAIRPERSON DOCKERY: Any other questions by members of the Committee? I have one, and it brings up an interesting question in terms of your use of the National Board, and I wonder if you feel that the National Board Examination is sufficient basis to capture the cultural, geographic, and disease diversity

between the examination with a medical curriculum?

Do you think that it's transportable and adaptable to the universe of medical education?

DR. LAI: Can we both independently express our opinion because it's a very interesting question, and I would like to be very honest and frank?

I think for Taiwan right now, we are advocating that we have to have our own epidemiology, not according to Western medical textbooks. So in the content of the exam nowadays, there are lots of clinical questions, and those are from the local areas, from our own. So epidemiology, like hepatitis B, is very different from here, and we all have our own data incorporated into that.

There are quite a few textbooks now written in Chinese and published by Taiwanese scholars based on our own data as well. So that is one point.

The second point concerns the performance of the medical students and every school out of these 11 have their OSCE at the end of their clinical years or after the first clinical year and second clinical year have OSCE to follow this.

In fact, in our long-range goal, we are going to look at that next year. One of the things we want

to look at is how they involve the OSCE, whether they not only look at the knowledge and skills, but if they also look at the attitude and professionalism. So that's what we are working on.

But I think Professor Soong probably has some different ideas.

CHAIRPERSON DOCKERY: Dr. Soong.

DR. SOONG: Yes. Thank you. Actually, I share the same idea Professor Lai just reported to you. As I'm a child psychiatrist, I'm very sensitive to the cultural issues and to the ethnic issues.

Taiwan now has many young foreign students, imported from China, from Vietnam, or from other Southeast Asian areas. So in our medical school educational programs, we try to ask institutions, during our on-site review, to see whether they include these type of ethnic issues, cultural issues into their regular curriculums. That's the issue.

Also some years ago, when I participated in the National Board Examination meetings, I asked we should include a few questions related to these ethnic and cultural issues. So I think they are trying to represent this part of the national needs in the National Board Examinations.

Thank you.

CHAIRPERSON DOCKERY: So you're planning to use a hybrid then that would be adjusted for local environment? Yes.

DR. LAI: We are now very much emphasizing cultural competence. Yes.

CHAIRPERSON DOCKERY: Is there a motion?

DR. CARON: Yes. I move that the NCFMEA accept the report submitted by Taiwan and request that it submit an application for reaccreditation for review at the spring '09 meeting of the NCFMEA.

CHAIRPERSON DOCKERY: And that motion says to be reviewed at the--okay--is there a second to the motion?

DR. WENTZ: Second the motion.

[Motion made and seconded.]

CHAIRPERSON DOCKERY: Any questions or comments from the Committee? All those in favor, please say aye.

[Chorus of ayes.]

CHAIRPERSON DOCKERY: Those opposed?

[No response.]

CHAIRPERSON DOCKERY: Any abstentions?

[No response.]

CHAIRPERSON DOCKERY: Thank you very much for coming and being with us, and we congratulate your progress.

DR. LAI: Thank you.

[Executive session concludes.]