EUROPEAN SPECIFICATIONS FOR GLOBAL STANDARDS IN MEDICAL EDUCATION

The expansion of the globalisation process in medicine, as manifested by growing exchange of medical students, migration of medical doctors and cross-border education has accentuated the need for international standards in medical education. Standards are also important in addressing national problems and challenges. The impact of the global standards programme of the World Federation for Medical Education (WFME) (1) is in accordance with these developments.

The WFME global standards for medical education, published in 2003 for all three phases of medical education (2-4), were developed as a foundation or template for national/Regional and institutional standards to be used as a benchmarking tool for institutional reform processes and for recognition/accreditation of educational institutions and programmes.

It was therefore natural, that MEDINE, the Thematic Network on Medical Education in Europe (5), which is sponsored by the Commission of the European Union, decided to include in its objectives activities that address quality assurance and standard setting in medical education in the European Region.

The objectives of the MEDINE Task Force on Quality Assurance Standards, led jointly by WFME and the Association of Medical Schools in Europe (AMSE), were to enhance overall standards of medical education in Europe, to analyse the value of the WFME standards in the European context, and to produce a set of quality assurance standards for medical education in Europe, building on and adapting existing work such as the WFME Global Standards framework.

The Task Force decided to work with Europe in a broad sense, and found that the Region relevant for European medical education would be comparable to the geographical area covered by the Council of Europe. At the same time, the Task Force was aware of the increasing relationship between the European Region as defined in this way and some neighbouring countries and that further expansion of the European Region in terms of relevance for medical education and mobility of medical doctors might be expected in the future. Furthermore, the Task Force emphasised that standard setting for Europe should not create a situation of isolation from other parts of the world., as standards in medical education should be used as an instrument to safeguard the quality of the medical profession, and not work as an unnecessary barrier preventing adequately trained medical doctors moving between Europe and other parts of the world.

The Task Force also considered factors such as the diversity of medical education within the Region and the needs for standard setting, including the special European needs required by e.g. the European Directive on recognition of professional qualifications (6) and the consequences of the European Higher Education Area as expressed in the Bologna Declaration and Process (7).

Balancing all these matters, the Task Force came to the conclusion that there is no rationale for an intermediary level between global and national standards in the European Region. Consequently, it rejected formulation of separate standards for Europe and concluded that it would be sufficient to state European specifications for the WFME Global Standards.

In formulating such specifications, the Task Force first of all found it reasonable to change the division lines between the level of basic standards or minimum requirements and the level of standards for quality development used in the WFME Global Standards. In moving some issues from the standards for quality development to a basic requirement account is taken to the general social and economic conditions in the Region compared to other parts of the world and also to recent improvements and endeavours in quality assurance and development of medical education in Europe, which allow higher standards to be set. In additions, some, but surprisingly few new standards or other supplements had to be added. It is interesting that this examination with European spectacles by the Task force ~~of the WFME Standards~~ in general demonstrated that the WFME Standards do not need major revisions at the moment.

The result of the MEDINE Task Force work was published in May 2007 (8).

The proposed recommendations regarding standard setting in medical education could be used by the European Commission, national education and health care authorities, institutions and organisations with responsibility for medical education in their endeavours to achieve quality assurance and improvement in medical education throughout its continuum in the European Region.

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