

## Quality Control in Medical Education: Global and Bangladesh Perspectives

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Quality is one of the most important issues faced by the medical institutes, nationally and internationally to day<sup>1</sup>. Quality is the totality of features and characteristics of a product or service that bears on its ability to satisfy stated or implied need<sup>2</sup>. Quality control is a process employed to ensure a certain level of quality of a product or service. It fulfills the requirements of a product by the comparison against the original specifications<sup>3-6</sup>. Quality assurance or guarantee is the set of procedures and activities done before the product or service is manufactured or delivered to assure of good quality to the customers<sup>3-7</sup>. Assurance of quality is preventive activities that ensures a product or service is manufactured or implemented, created, or produced in the right way (before work is complete); while quality control is a detection activity, which is focused on detecting the defects once the product is manufactured (after the work). Despite the differences quality assurance and quality control are often used interchangeably<sup>3-8</sup>.

The improved health of all people is the main goal of medical education<sup>1</sup>. Several recent reports have described the necessity for radical changes and innovations in the structure and process of medical education at all levels<sup>9-13</sup>. Such reconstruction is essential to prepare doctors for the needs and expectation of society; cope with the explosion in medical scientific knowledge and technology; inculcate physicians' ability for lifelong learning; ensure training in the new information technologies and adjust medical education to changing conditions in the health care delivery system. WHO has also advocated the need for change in medical education<sup>14-16</sup>. It has proposed a series of

activities intended to meet the current and future requirements of society, especially underlining the importance of understanding the doctors' function in the society, and the need for continuing education and for inter-professional collaboration.

Standards for medical education have been used for many years in national systems of evaluation and accreditation of medical education in many countries. The methods used for these differ from country to country. The World Federation of Medical Education (WFME) presented Global Standards in this trilogy covering all three phases of medical education: basic medical education; postgraduate medical education; and continuing professional development. The three documents provided the essential background material of the World Conference in Medical Education: Global Standards in Medical Education for Better Health Care, Copenhagen<sup>15-19</sup> March 2003<sup>1</sup>. WFME, since 1984, has conducted an "International Collaborative Programme for the Reorientation of Medical Education". Cornerstones in this process were the Edinburgh Declaration, 1988<sup>17</sup>, which was adopted by the World Health Assembly, WHA Resolution 42.38, 1989<sup>18</sup>, and the Recommendations of the World Summit on Medical Education, 1993<sup>19</sup>, reflected in WHA Resolution 48.8, Reorientation of Medical Education and Medical Practice for Health for All, 1995<sup>20</sup>. To further promote change and innovation in medical education, WFME decided to extend implementation of its educational policy to the institutional level as described in a WFME Position Paper (1998)<sup>21</sup>.

The WFME project on International Standards in Medical Education<sup>21</sup>, approved by the World

Health Organisation (WHO) and the World Medical Association (WMA), has three main intentions: to stimulate medical schools to formulate their own plans for change and for quality improvement in accordance with international recommendations; to establish a system of national and/or international evaluation and accreditation of medical schools; to assure minimum quality standards for medical school programmes; to safeguard practice in medicine and medical manpower utilisation, and its increasing internationalisation, by well-defined international standards of medical education.

The General Medical Council (GMC) sets and monitors standards in medical education in United Kingdom. In order to ensure that UK Medical Schools maintain these standards GMC run a quality assurance programme, which involves regular monitoring and visits to schools and their partner institutions. This programme is called Quality Assurance of Basic Medical Education (QABME). The GMC has a statutory duty (Medical Act 1983) to set and maintain the standards for undergraduate medical education. The standards are set out by GMC known as Tomorrow's Doctors. The Council has the power to visit universities to make sure that undergraduate teaching is consistent with Tomorrow's Doctors and to inspect examinations to make sure that the standards expected at qualifying examinations are maintained and improved. The GMC holds a list of universities that can award a UK medical degree and has the power to add and remove universities from that list<sup>22</sup>.

Bangladesh Medical and Dental Council (BMDC) is a accrediting authority for all medical graduates and post graduates of the country. Five universities are conducting undergraduate and postgraduate examinations and giving certificates to them which is now under BSMMU following one umbrella concept. To qualify in admission in graduate course in the medical colleges all national and international students have to pass a qualifying criteria designed by the

Directorate General of Health Service (DGHS) of Bangladesh. In Bangladesh practice of Quality Assurance Scheme (QAS) has been practicing since 1998 & quality control came in to jobs of medical colleges of Bangladesh under the heading 'Quality Assessment and Audit Review (QAAR) in 1998 under the project 'Further Improvement of Medical Colleges (FIMC)<sup>23</sup>. Different govt & non government medical colleges are practicing QAS. At present Centre for Medical Education (CME) is acting as secretariat of QAS in collaboration with Director of Medical Education of DGHS, BMDC, Ministry of Health and Family Welfare (MHFWF), Universities, WHO, Association for Medical Education of Bangladesh are working together to develop and maintain quality medical education in the country.

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