

29 AUGUST 2013

AMCOA PROTOCOL ON DISCIPLINARY MEASURES AND PROCEDURES



ASSOCIATION OF MEDICAL COUNCILS OF AFRICA

AMCOA PROTOCOL ON DISCIPLINARY PROCEDURES AND MEASURES

WHEREAS disciplinary procedures and measures in the member countries of the Association of Medical Councils of Africa (AMCOA) take various forms both in structure and content;

RECOGNISING that a well-structured disciplinary process is a strategic pillar for ethical and safe practice of medicine; and

FURTHER RECOGNISING the need to harmonize the disciplinary procedures in the AMCOA region for the enhancement of quality of healthcare;

NOW THEREFORE THE PARTIES TO THIS PROTOCOL DO HEREBY ADOPT THE PRINCIPLES ENSHRINED HEREIN AS A FRAMEWORK FOR MANAGEMENT OF DISCIPLINE IN THE REGION:-

1.

Complaints Receipt and Processing

1.1 It is agreed that all complaints shall be lodged in writing, provided that a complaint may be submitted on behalf of a person who for the time being is unable to put the complaint into writing.

1.2 It shall be competent for a Council or a Board to consider anonymous complaints through the Office of the Registrar who will facilitate the investigative processes and act where required as a complainant.

1.3 The Registrar shall acknowledge receipt of a complaint within 7 days of such complaint being received.

1.4 The complainant should not be made to pay for lodging a complaint.

2.

Preliminary Inquiry

2.1 There shall be an established procedure to determine whether a prima facie case of unprofessional conduct exists or not.

2.2 The preliminary inquiry may, subject to confirmation by the Council/Board or an appropriate structure, as may be determined by each member country make certain determinations in reported transgressions and recommend certain sentences in regard thereto.

2.3 There shall be lay representation in the preliminary inquiry in order to create a balance between the profession and a perspective from the community.



3. Professional Conduct Committee

- 3.1 If Inquiry is decided upon, a Professional Conduct Committee shall be set up to consider the more serious complaints and make conclusive determinations thereon
- 3.2 The committees shall include a Legal Person, peers drawn from the profession under review and a layperson.
- 3.3 In those member states where the process of preliminary inquiry is fully functional, the professional conduct committee does not need to be established.

4.

Procedure

- 4.1 The procedure for handling disciplinary matters shall be determined by each member country taking into account the relevant national legislation, constitution, fundamental rights and rules of natural justice as may be applicable from time to time.
- 4.2 No member country shall, in prosecuting practitioners or seeking to make a determination on professional conduct, violate rules of administrative and natural justice including the right to be heard, the right to representation, the right to a fair hearing etc.

5.

Sentencing

- 5.1 One or more of the following penalties may be imposed on an accused practitioner after a finding of guilt and upon receipt of mitigating and aggravating factors :-
 - Reprimand the Practitioner
 - A fine
 - Conditional suspension, e.g. under supervision, re-training
 - Suspend the Practitioner from the register
 - Erase the Practitioner's name from the register
- 5.2 Sanctions such as suspension or de-registration imposed by Council shall become effective immediately.
- 5.3 The Councils/Boards shall have powers to levy costs of the inquiry where appropriate.

6.

Appeals

- 6.1 Each member country shall design an appeals procedure.





Enabling Framework

All member countries that are signatories to this protocol agree to pursue processes of aligning or developing legislative and other policy frameworks to facilitate the implementation of the principles enshrined in this protocol.

THUS DONE AND SIGNED AT HOTEL DES MILLE COLINES, KIGALI RWANDA, ON THIS DAY, THURSDAY, 29TH AUGUST 2013

Country	Name & Designation	Signature
1. Ghana	Dr. Eli Agyey	
2. Kenya	Prof. A. Magoka	
3. Lesotho	Abel HC, KAWANDA	
4. Malawi	DR. B. T. S. EDWARDS	
5. Mauritius		
6. Namibia		
7. Nigeria	Dr E. Ibadarewa	
8. Rwanda	Thelene Soeli	
9. Sierra Leone		
10. South Africa		
11. Seychelles		
12. Swaziland		
13. Tanzania		
14. Uganda	Okumu Soth	
15. Zambia	Dr. Pangani, D. Nyobun	
16. Zimbabwe	Dr. A. A. MACHETSA	