

AMCOA PROTOCOL ON UNDERGRADUATE MEDICAL EDUCATION & TRAINING

29 AUGUST 2013



AMCOA UNDERGRADUATE MEDICAL EDUCATION & TRAINING PROTOCOL

WHEREAS the Association of Medical Councils of Africa (AMCOA) members have varying standards of under-graduate medical education and training;

RECOGNISING the need to standardize education and training across the continent in order to enhance quality;

NOW THEREFORE BE IT AGREED BY THE MEMBER COUNTRIES OF AMCOA AS FOLLOWS:-

1. Overall Education and Training Purpose

The aim of AMCOA members in embarking in educational and training processes for undergraduate medical students is to produce a caring, ethical, competent, knowledgeable, lifelong learner with appropriate skills and attitudes to meet the health challenges of the continent within a given cultural context.

2. Process

The process through which the overall purpose and objective of medical education and training will be achieved will involve the following considerations:-

- 2.1 **Methods** student centred, integrated, community based and problem based training method
- 2.2 **Student Numbers** ensure an appropriate ratio balance between the tutor, students and physical infrastructure.
- 2.3 **Course Content** to include modular describers and a credit weighting system, which is comparable and specific
- 2.4 **Quality Assurance Processes** that includes accreditation criteria and quality improvement processes

3. Entry Requirements & Duration

- 3.1 The minimum entry requirements for medical education and training programs will be determined by each member country and should include the following subjects:-
 - Biology
 - Chemistry
 - Physics and/or Mathematics



3.2 The duration of the medical education and training program should not be less than five (5) years.

4. Outcomes

A medical education and training program should focus on the following outcomes:-

- 4.1 **Knowledge**: basic sciences, clinical sciences, cultural context, legal and regulatory framework, applied sciences, medical ethics, research and local problems & challenges.
- 4.2 **Attitude**: caring, compassion, empathy, patient centered
- 4.3 **Skills and Competencies**: communication, clinical skills (history taking, physical examination, investigations and diagnosis), skills for emergency and life threatening conditions etc.

5. Core Competencies

Upon qualification, a learner should be able to:-

- Take a proper history, conduct physical examination, request appropriate investigations, make a correct diagnosis and provide appropriate treatment.
- 5.2 Have knowledge, skills and competencies on the following areas:
 - Basic Sciences
 - Clinical Sciences
 - Legal/Regulatory Framework
 - Medical Ethics & Human Rights
 - Public Health
 - Foundation Courses

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6. Enabling Framework

All member countries that are signatories to this protocol agree to formulate and measure their own curricula for compliance with the set standards by Boards/Councils and to set standards, which the institutions should comply with and to do anything necessary to facilitate the implementation of the principles enshrined in this protocol.

THUS DONE AND SIGNED AT HOTEL DES MILLE COLLINES, KIGALI RWANDA, ON THIS DAY, THURSDAY, 29^{TH} AUGUST 2013

Country	Name & Designation	Signature
1. Ghana	De GLI ATIKHUI	Allumy?
2. Kenya	Krof. a. Magoha	Jw Dm Cunp
3. Lesotho	1001	
4. Malawi	ABEL H. C. KAWONZ	A
5. Mauritius	DNB.TSERVAWSINOUT	
6. Namibia	AR KANIDA	(tally
7. Nigeria		
8. Rwanda	Dr-E. Rudaicemir	(103)
9. Sierra Leo	ne	
10. South Afric	ca Tholene Sodo	
11. Seychelles		
12. Swaziland	Cannel Unoi Magagure	A11-
13. Tanzania		
14. Uganda	Olhuna GOEn	040
15. Zambia	Dr Pangarani D Njobry	BLIBUL.
16. Zimbabwe	DR. A. MACHETCA	Dena che Ka