

AMCOA

ASSOCIATION OF MEDICAL COUNCILS OF AFRICA



RESPONSIVE REGULATION
FOR SAFER COMMUNITIES
TOWARDS UNIVERSAL HEALTH COVERAGE

28TH
ANNUAL
CONFERENCE

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DEDICATED TO PROTECTING THE PUBLIC AND ADVANCING PROFESSIONAL STANDARDS IN AFRICA

Building the Science of Regulation

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Strengthening Health Practitioner Regulatory Systems in Africa

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Overview

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The discipline: The case for reimagining practitioner regulation

Human capital: Training, mentorship and leadership for regulatory boards

Continental context: Regional harmonization and right-touch regulation

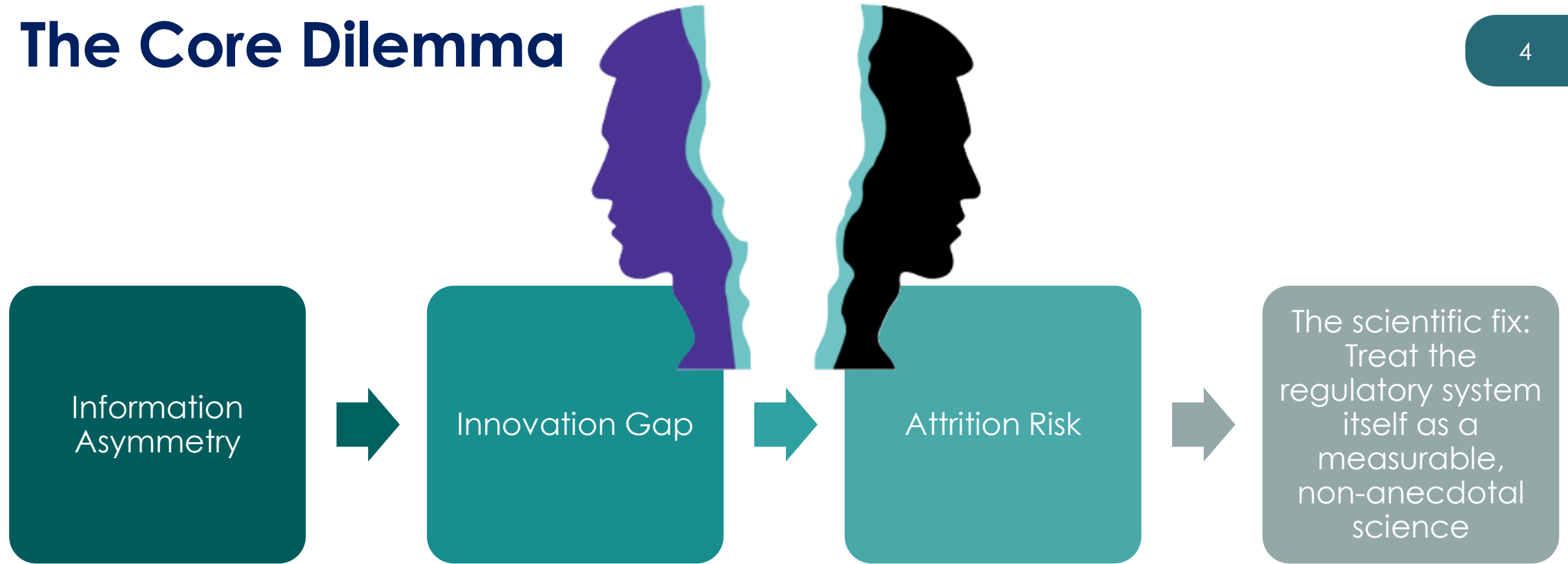
Modern delivery: Scalable e-learning frameworks for regulators and practitioners

Strategic roadmap: Action plan for regulators



The Core Dilemma

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Defining Regulatory Science for Practitioners

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Moving beyond historical tradition

- **Definition:** The operational application of empirical research, data analytics, and systemic frameworks to optimize health practitioner oversight
- **Objective:** Shifting regulatory board decisions from rigid administration to data-driven, evidence-based policy
- **Impact:** Fairer pathways for practitioners and safer care for patients

Regulatory science as a distinct discipline

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PILLARS OF WORKFORCE OVERSIGHT

[professional education] + [data science/psychometrics] + [health law & ethics] = Professional Regulatory Science

- **Psychometrics:** Utilising data to ensure licensing exams are fair, valid and free of bias
- **Risk-based oversight:** Identifying early markers of clinical environment risks before errors happen
- **Context-driven:** Tailoring regulatory standards to unique resource-constrained settings and local disease burdens
- **Dynamic scopes:** Updating practice rules to safely integrate new tools like telemedicine and AI diagnostics

Global and Regional Trends

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- **Right-touch regulation:** Applying the minimum regulatory force needed to mitigate actual clinical risk
- **Continental harmonization:** Aligning regional practitioner councils to facilitate safe workforce mobility
- **Continuous competence:** Transitioning from passive, paper-based CPD tracking to meaningful practice reviews
- **Wellness-focused regulation:** Providing rehabilitative, non-punitive paths for practitioners facing substance or mental health issues

Lessons from Established Authorities

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- **Data-driven risk profiles:** Tracking systemic vulnerability factors
- **Separation of functions:** Isolation of investigators from adjudicators to ensure fairness
- **Public representation:** Actively involving patient advocates and lay persons in board rule-making and disciplinary committees
- **Remediation over punishment:** Investing in retraining and clinical supervision rather than immediate, permanent deregistration
- **Proactive monitoring and Regulatory Intelligence:** Early detection of workforce trends and clinical risks; decreased reliance on complaints

GMC/FSMB/AHPRA

Leadership in Regulatory Systems

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Driving institutional integrity and independence

- **Visionary governance:** Balancing severe workforce shortages with the strict mandate of public safety
- **Independence:** Safeguarding board decisions against political interference or professional association pressures
- **Proactive management:** Creating local solutions for international professional graduate validation and migration
- **Transparency:** Publishing clear, accessible disciplinary outcomes to maintain public trust

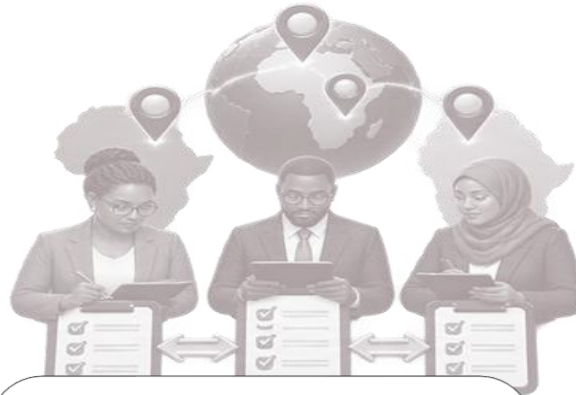


Role of Training and Mentorship

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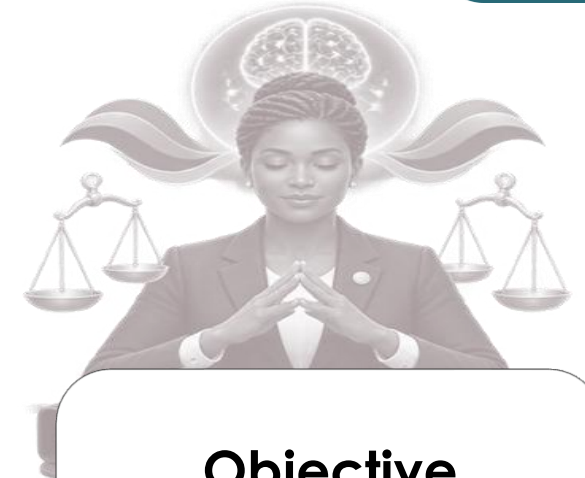
Regulatory literacy: Training board members to separate personal opinions from administrative law



Assessor calibration: Ensuring consistency of outcomes of fitness-to-practice reviews across regions and jurisdictions



Mentorship pipelines: Pairing seasoned regulators with newly appointed board members



Objective judgement: Minimising cognitive biases during disciplinary hearings and performance assessments

Key policy considerations

- **Design principles:** Serves public interest; proportionality
- **Governance:** Relevance; accountability
- **Core functions:** Education and training; recognition of qualifications; scope of practice; maintenance of competence
- **Health system impact:** Data for HRH planning; practitioner mobility; practice management

Health practitioner regulation

Design, reform and implementation guidance

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 World Health Organization

Implementation framework

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Evaluative

Pillar

Focus Area

Real-World Application

Structures

Contextual
Environment

Legislative acts, technical infrastructure, and regional demographic needs.

Processes

Operational
Activities

Evaluating fitness-to-practise, maintaining registers, and auditing Continuous Professional Development (CPD).

Outcomes

Systemic Impact

Measuring reduction in public harm, process turnaround times, and workforce retention rates.

E-Learning Platforms

- **Assessor alignment:** Deploying standardized, digital training on administrative fairness
- **Universal access:** Delivers standardized training across geographically dispersed regulatory workforces
- **Rapid CPD scaling:** Utilising mobile friendly, low-bandwidth modules to update especially rural practitioners on new guidelines
- **Cost and time-efficiency:** Drastically reducing the financial burden of travel and physical attendance for training
- **Verifiable metrics:** Tracking system engagement for legally defensible regulatory decisions



Key features of regulatory e-learning

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High-utility digital design

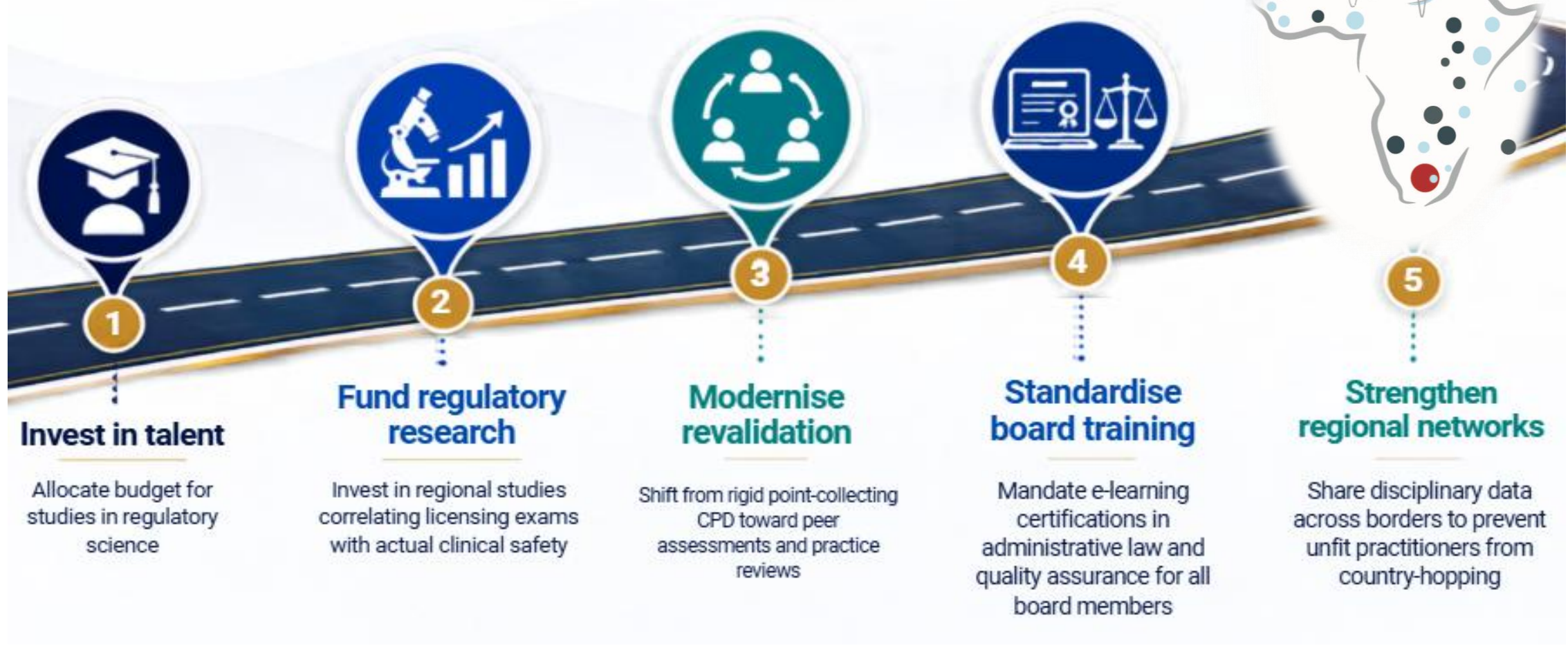
- **Case-based simulations:** Interactive, text-based mock tutorials using real, anonymized clinical cases
- **Micro-learning frameworks:** 5-minute audio or video briefings on high-risk topics like informed consent
- **Automated licensing portals:** Streamlining the logging, tracking and compliance auditing of annual practitioner renewals
- **Offline functionality:** Designing downloadable course materials for areas with unstable internet connectivity

The technological frontier: RIMS, NLP and Simulation

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- **Regulatory information management:** Migrating from paper-heavy workflows to unified, cloud-hosted master databases for live credential tracking
- **Natural language processing:** Deploys AI to automatically ingest, categorise and triage hundreds of public complaints based on critical clinical keywords
- **Immersive assessment:** Replacing rigid MCQ-type exams with virtual reality simulation testing to measure real-time diagnostic performance and ethical decision-making under stress

Call to Action – Roadmap to the Future



Thank You Medaase

