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The Gazette of the Democratic Socialist Republic of Sri Lanka

EXTRAORDINARY

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PART 1: SECTION (1) - GENERAL

Government Notifications

L. D. B. 123/48 (iii)

THE MEDICAL ORDINANCE (CHAPTER 105)

REGULATIONS made by the Minister of Health, Nutrition and Indigenous Medicine, in consultation with the Sri Lanka Medical Council and upon the consideration of the comments of each university or institution which grants or confers any qualification which entitles a person to obtain registration under the Medical Ordinance, under section 72 read with section 19(e) of the Medical Ordinance (Chapter 105).

RAJITHA SENARATHNE,
Minister of Health, Nutrition and Indigenous Medicine.

Colombo,
25th January 2018.

Regulations

- (1) These Regulations may be cited as the Medical (Maintenance of Minimum Standards of Medical Education) Regulations No. 01 of 2018.

(2) The provisions of these regulations shall come into operation on the date on which the notification of the approval of Parliament is published in the *Gazette*.
- The minimum standards for medical education in a recognized university or institution shall be as set out in the Schedule hereto.



2 A

I කොටස: (I) ඡේදය - ශ්‍රී ලංකා ප්‍රජාතාන්ත්‍රික සමාජවාදී ජනරජයේ අති විශේෂ ගැසට් පත්‍රය - 2018.01.26

PART 1: SEC. (1) - GAZETTE EXTRAORDINARY OF THE DEMOCRATIC SOCIALIST REPUBLIC OF SRI LANKA - 26.01.2018

3. Every recognized university or institution within or outside Sri Lanka which grants or confers a medical qualification, alone or jointly with any Sri Lankan or foreign recognized university or institution under affiliation or under a twin medical programme shall ensure that the minimum standards set out in the Schedule hereto are adhere' to and maintain by such recognized university or institution in the conduct of its medical education.

4. For the purpose of these regulations -

"Medical qualifications" shall have the same meaning as assigned to it by section 19E of the Medical Ordinance;

"Recognized university" shall have the same meaning as assigned to it by section 19E of the Medical Ordinance;
and

"Twin Medical programme, means a programme or course of study leading to the award of medical education which is conducted in two separate recognized universities or institutions in the same country or two different countries, where each recognized university or institution independently awards its own medical qualification.

SCHEDULE

(regulation 2)

MISSION AND OUTCOMES :

1. There shall be a well-defined mission for every university or institution which conducts medical education which shall be formulated with the participation of its principal stake-holders. The mission statement shall address -
 - (a) the health needs of the community and health care system;
 - (b) medical research;
 - (c) Social accountability, professionalism and ethics; and
 - (d) global health.
2. The educational strategy shall be designed to produce medical practitioners competent at the basic level, which shall serve as a foundation for :
 - (a) taking on the role of a medical practitioner in the health sector;
 - (b) a future career in any branch of medicine;
 - (c) any post-graduate medical training; and
 - (d) a commitment to life -long learning.
3. The university or institution shall have and maintain institutional autonomy to formulate and implement policies with regard to-
 - (a) the design and contents and evaluation of the curriculum; and
 - (b) use of financial and human resources allocated for the implementation thereof.

For the above purposes there shall be established by the university or institution, a committee under the leadership of the medical academic head, which shall have the responsibility and authority for planning and implementing the

curriculum and programmes to secure its intended educational outcome, including innovations in the curriculum. The committee shall seek inputs from the environment in which medical graduates are expected to work and where appropriate, modify the programmes accordingly, In the formulation and implementation of policies, the committee may obtain the participation of student representatives especially in the design, management and evaluation of its curriculum and in other matters relating to students.

EDUCATIONAL PROGRAMME :

4. There shall be a well formulated, comprehensive curriculum model, together with instructional and learning methods designed to -
- produce competent and compassionate medical practitioners with required clinical skills and sound knowledge of the underpinning theoretical basis;
 - impact skills in research to enhance analytical and critical thinking, including the principles of the scientific method and evidence-based medicine;
 - nurture ethical and professional behaviour required for the humane practice of medicine,
 - instill self-reflection and self-learning skills to produce lifelong learners
- and be delivered in accordance with the principle of equality.

5. The curriculum of the university or institution shall incorporate, inter alia,-
- contributions from the basic biomedical sciences to understand the scientific knowledge, concepts and methods which are fundamental to the acquisition and application of clinical Science. The basic biomedical Sciences would include, anatomy, biochemistry and nutrition, cell biology, genetics, immunology, microbiology (including bacteriology, mycology, parasitology and virology), molecular biology, pathology, pharmacology and physiology as required to provide sufficient foundation for the clinical sciences;
 - contributions from-
 - the behavioural and social sciences which would include medical aspects of anthropology, psychology and sociology;
 - community medicine and public health which would include biostatistics, epidemiology, global health, primary health, hygiene, health promotion and social and preventative medicine;
 - medical ethics which deal with moral issues in medical practice such as values, rights and responsibilities related o physician behavior and decision making, and
 - medical jurisprudence, clinical forensic medicine and forensic pathology that deals with laws and other regulations of the health care delivery system, of the profession and medical practice.

For this purpose, students shall avail themselves of a minimum period of two hundred hours in planned learning in a community / first contact care setting, to engage in primary care, health promotion and preventative medicine; and a minimum of fifty hours in clinical forensic medicine and forensic pathology.

- contributions from the clinical sciences to ensure that the students acquire sufficient knowledge and specified clinical skills to assume appropriate professional responsibility after graduation. The clinical sciences would include general medicine and its subspecialties (e.g. cardiology, neurology), surgery and its subspecialties (e.g. orthopaedics, neurosurgery), obstetrics & gynaecology, paediatrics and its subspecialties, family medicine (general practice), psychiatry.

For this purpose, students shall avail themselves of at least three thousand hours of learning in the study programme, in planned regular contact with adequate number of patients in relevant clinical settings in order to acquire the required experience in patient care; and

- periods of training in the major clinical disciplines with sub-specialties, where appropriate, as follows:
 - a minimum of eight hundred hours of learning in internal medicine and related subspecialties (including, cardiology, dermatology, neurology, and venereology/ sexually transmitted diseases) in hospital based clinical training;
 - a minimum of eight hundred hours of learning in surgery and related specilaies (including anaesthesiology, ophthalmology, orthopaedic surgery, and oto-rhino-laryngology) in hospital based clinical training;

- (iii) a minimum of four hundred hours of learning in obstetrics & gynaecology in hospital based clinical training;
- (iv) a minimum of four hundred hours of learning in paediatrics in hospital based clinical training;
- (v) a minimum of two hundred hours of learning in psychiatry in hospital based clinical training; and
- (vi) the minimum hours of learning in the clinical disciplines may include not more than one-fifth of hours in a community -based setting.

6. It shall be the duty of the university or institutions to :

- (a) describe in the curriculum the content, extent and the sequence of courses and other curricular elements to ensure appropriate coordination between basic biomedical, behavioural and social and clinical subjects;
- (b) ensure a healthy blend of teaching and learning methods to facilitate the achievement of desired learning outcomes;
- (c) organize clinical training with appropriate attention to patient safety; and
- (d) ensure operational linkage between the educational programme and the subsequent stages of training or practice after graduation.

ASSESSMENT OF STUDENTS :

7. The University or institution shall define, specify and publish the principles, methods and practices to be followed in the assessment of performance of students and the criteria for setting the pass marks, grade structure and the number of re-takes permitted. Such principles, methods and practices shall -

- (a) be clearly and constructively aligned with the intended educational outcome and instructional methods;
- (b) include a sufficiently wide range of assessment methods, in order to cover knowledge, skills and attitudes;
- (c) be open to scrutiny by external experts and devoid of conflict of interest; and
- (d) promote student learning and provide an appropriate balance of formative and summative assessments to guide both learning and decisions about academic progress.

STUDENTS :

- 8. (a) The university or institution shall formulate and implement a policy on admission based on principles of objectivity and make a clear statement on the process of selection of students. The policy shall also take cognizance of the admission policy of the relevant state's higher education system, opportunities for differently-abled students and the transfer of students from one programme or university or institution to another when the curricula are compatible and there is academic continuity.
- (b) In the event that students enter the educational programme directly from secondary school, with at least twelve years of schooling, the duration of the medical educational programme shall be at least five academic year.
- (c) Every student admitted to the Medical Degree Programme of a university or institution shall have passed the General Certificate of Education (Advanced Level) Examination of Sri Lanka or an equivalent examination, in the subject of Biology, Chemistry and Physics with minimum grades of credit passes in the subjects of Biology and Chemistry, at one and the same sitting.
- (d) The university or institution shall specify the size of the student intake and relate it to its capacity at all stages of the medical educational programme.

(e) The university of institution shall -

- (i) Have a system for academic counselling of its students based on the progress of students;
- (ii) offer a programme of student support, including remedial teaching where necessary;
- (iii) ensure confidentiality in relation to counselling and support; and
- (iv) encourage and facilitate student educational activities, recreational activities and student organizations.

ACADEMICS STAFF:

9. The university or institution shall formulate and implement on -

- (a) staff recruitment, selection and promotion (which shall be consistent with those laid down by the University Grants Commission, in the case of universities in Sri Lanka), outlining the type, responsibilities and balance of academic staff between teachers of the basic biomedical sciences, the behavioural and social sciences, and the clinical sciences, in order to deliver the curriculum adequately and maintain a balance between medical and non-medical academic staff, a balance between full-time and part-time academic staff and a balance between the academic and non-academic staff;
- (b) the responsibilities of its academic staff in teaching of the basic biomedical sciences, the behavioural and social sciences and the clinical sciences; and
- (c) staff activity and development which-
 - (i) allow a balance between teaching, research and service functions;
 - (ii) ensure recognition of meritorious academic activities with appropriate emphasis on teaching, research and service qualifications;
 - (iii) ensure that clinical service functions and research are employed in teaching and learning; and
 - (iv) support teacher training, achievement and appraisal.

10. The university or institution shall -

- (a) conform to teacher-student ratios, in that there shall be not less than one teacher for every fourteen medical students, taking into account the permanent academic staff and the extended faculty of specialists in affiliated teaching hospitals and other health care settings;
- (b) ensure that all medically qualified staff engaged in patient care are registered with the designated body responsible for registration of medical professions in the relevant country;
- (c) have a minimum of one-half of the academic staff in the permanent cadre who are holders of doctoral level post-graduate qualifications; and
- (d) ensure that every individual staff member has sufficient knowledge of the organization of the medical curriculum.

EDUCATIONAL RESOURCES:

11. The University or institution shall have sufficient physical facilities for its staff and students to ensure that the curriculum can be delivered adequately. The physical facilities herein referred to shall include-

- (a) a minimum of two lecture halls with good acoustics and audio-visual aids and seating capacity for the total number of students in each batch, examination hall (s) that can accommodate all students in onebatch at a given time; and

an adequate number of smaller classrooms for tutorials and small group activities. If an intake of a batch is of one hundred students per year then it shall have a minimum of twelve class rooms/tutorial rooms with seating capacity for a minimum of fifteen students in each, and for a larger student intake, these facilities shall be correspondingly greater;

- (b) appropriate laboratories and museums for teaching the basic biomedical sciences with a learning environment which is safe for the staff and the students; and
- (c) a library with current editions of medical text books and reference books and periodicals, with adequate facilities to have access, through the internet or otherwise, to local and international medical journals.

12. The University or institution shall have access to at least one teaching hospital with university or institutions units, which may be supplemented by other affiliated hospitals to provide students with for teaching, adequate clinical experience including sufficient number and variety of patients, and clinical training facilities with adequate supervision. The hospitals used for teaching shall include training facilities in the major clinical specialties as specified in Standard 5 (d): internal medicine and related subspecialties (including cardiology, dermatology, neurology and venereology/sexually transmitted diseases); surgery and related specialties (including anaesthesiology, ophthalmology, orthopaedic surgery, and oto-rhino-laryngology); obstetrics & gynaecology, paediatrics and neonatology; and psychiatry, accident and emergency care.

If an intake of a batch is of one hundred students per year, then it shall have access to one or more affiliated hospitals used for teaching, with a minimum of seven hundred beds, including the university units (with at least one hundred beds each in internal medicine, general surgery, obstetrics & gynaecology and paediatrics and thirty beds in psychiatry), and notching a bed occupancy rate of a minimum of 75% in the preceding year. For a larger student intake these facilities shall be proportionately greater. Where more than one affiliated hospital is used for teaching, all hospitals collectively should provide the services expected of a teaching hospitals, e.g. laboratory services in Pathology, Biochemistry and Microbiology and radiology.imaging services.

13. The university or institution shall have access to a field practice area to provide students with adequate community-based clinical experience and access to facilities for training in clinical forensic medicine and pathology as required in Standard 5(b).

14. Other amenities for students shall include-

- (i) adequate study space, lounges and wash rooms;
- (ii) information technology facilities;
- (iii) recreational facilities;
- (iv) extra-curricular activities;
- (v) catering and housing facilities;
- (vi) access to healthcare facilities; and
- (vii) transportation facilities.

15. The university or institution shall formulate and implement policies that -

- (a) address appropriate use of the information and communication technology in the Educational Programme;
- (b) foster the relationship between medical research and education and describe the research facilities and priorities;
- (c) allow access to educational expertise where required and in particular, in curriculum development and in development of teaching and assessment methods, in that they deal with the process, practice and problems of medical education; and
- (d) pave the way for national and international collaboration with other educational institutions.

PROGRAMME EVALUATION:

16. The university or institution shall-
- (a) have a programme put in place for routine monitoring of its educational process and outcome;
 - (b) establish and apply a mechanism for programme evaluation, which -
 - (i) addresses the curriculum and its main components;
 - (ii) addresses student's progress;
 - (iii) identifies and addresses concerns; and
 - (iv) ensures the relevant results of evaluation influence the curriculum;
 - (c) self-evaluate its educational programme every five years by comprehensively addressing the context of its educational process, the specific components of the curriculum and the overall outcome and its social accountability;
 - (d) systematically seek, analyze and respond to teacher and student feedback and use the feedback results for programme development.
 - (e) analyze performance of cohorts of students and graduates in relation to its mission and intended educational outcome, its curriculum and provision of resources; and
 - (f) engage its academic staff and students in, management and governance, and in monitoring and evaluation of its educational programme.

GOVERNANCE AND MANAGEMENT:

17. The university or institution shall-
- (a) define its governance structures and functions and, where relevant, their relationship within the university or institution. The governance structures shall set out the committee structure and reflect representation from academic staff, students and other stakeholders;
 - (b) ensure transparency of the work of governance and its decisions;
 - (c) define the responsibilities of its academic leadership for management of its educational programme;
 - (d) have a clear line of responsibility and authority for resourcing the curriculum through a dedicated educational budget and allocating the resources necessary for the implementation of the curriculum and educational needs;
 - (e) have an administrative and professional staff that is appropriate to support the implementation of its educational programme and related activities and ensure good management and resource deployment; and
 - (f) have constructive interaction with the health and health related sectors of the society and government.

CONTINUAL RENEWAL:

18. The university or institution shall conduct periodic institutional evaluation . review of the mission, outcome, admission process and its effectiveness, educational programmes and their relevance, resources, facilities and the like to be undertaken by an independent evaluation team.
19. Every university or institution as dynamic and socially accountable entity shall conduct regular internal review, the outcome of which may be used for -
- (a) updating its structure and functions;
 - (b) rectifying its deficiencies, and
 - (c) allocating resources for continuous renewal.