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Standards and the Curriculum: Think Global but Act Local

Abstract:

One aim of the Asian Medical Education Association is to “... identify ... and enhance the characteristic features and strengths of Asian medical education” and consideration of the standards and curriculum for medical education is one of the most important methods to meet this objective.

The concept of the medical curriculum continues to evolve. Over the last fifty years, six, seven, or more models of curricula have come and gone – including ideas on instructional skills, learning theory, learning objectives, integrated learning, systems-based or modular, student-led, social accountability, competence-based and more¹. The evidence that any one idea is better than any other is very slender. There are many examples of attempts to create a curriculum of global applicability, and none has succeeded, probably because, while many aspects of medical knowledge are universal, the needs of the medical student and of the newly-qualified doctor are specific to the context in which he or she is studying and working. Definition of the aspects of medical knowledge that are of relevance everywhere is certainly also required, within this locally-defined curriculum.

What do we mean by the “context” of study and of practice? This context is not just the profile of disease, the health-care system and the culture in which medicine is practised, but is also the social, economic and political circumstances for education and health-care, and the constraints of physical and human resources that are available.

The creation of a curriculum relevant to the context of the student does not, of course, preclude the curriculum including elements relevant to the international practice of medicine. Nor does a suitable contextual curriculum prevent selection by the student of additional or optional elements to enhance the learning of each individual. Nor does a curriculum relevant to the place where the student has studied inhibit international mobility of medical graduates.

If we cannot reasonably make a common curriculum, how can we ensure the quality of education, and verify that the student has learned medicine to a suitable standard? The approach of the World Federation for Medical Education has been to create and promulgate standards for education that guide decision-making about every aspect of curriculum design, implementation and quality-assurance. These standards are set out for basic medical education (up to the qualifying medical degree postgraduate medical education (PGME) and continuing professional development (CPD)².

Standards therefore do not define exactly what must be taught and learned, but how content is to be selected and how well it must be taught, learned, assessed and managed. The standards are applicable whatever the curriculum. “Standards are intended to guide medical education

¹ Grant J. (2017) Principles of contextual curriculum design. In Swanwick, T. et al (in press, 2017) Understanding Medical Education: Evidence, Theory and Practice. Second addition. Wiley Blackwell.

² <http://wfme.org/standards> (Accessed 29 June 2017)

programme development and evaluation, facilitate diagnosis of strengths and weaknesses relating to the medical education programme, and to stimulate quality improvement.” It was intended that the main use of the WFME standards would be in quality development within each individual medical school, but standards are useful nationally and internationally in the accreditation of medical education. Furthermore, strong national standards-based systems of accreditation have allowed WFME to create its internationally-recognised programme for the Recognition of Accreditation, a thoughtful stimulus for quality in education, and a promoter of international mobility of doctors.

Standards for education help to ensure that education is of high quality. If some curricula are not of high quality, what can be done to improve them, without damaging the need for the curriculum to be relevant to the local context? A new idea is that we might agree standards for the content of a curriculum: this is a plan for the future.