



IAMRA

IAMRA Webinar: Registration Assessments in a Pandemic Environment

The International Association of Medical Regulatory Authorities (IAMRA) has launched a new series of free webinars, examining a range of topics of interest to global regulators. The Zoom-based webinars feature speakers and panelists representing diverse regulatory and health organizations.

On August 6, IAMRA hosted **“The Medical Regulator’s Role in Cultural Safety and Health Equity,”** which was inspired by the Black Lives Matter movement and examined the role of medical regulators in ensuring that people of all races and cultures have equal access to care and treatment, as well as the subconscious biases that may be entrenched in regulatory processes. Led by Joan Simeon, MPM, Chief Executive Officer of the Medical Council of New Zealand, speakers included Curtis Walker, MB, ChB, FRACP, Chair of the Medical Council of New Zealand; Bryant A. Murphy, MD, MBA, President of the North Carolina Medical Board (U.S.); and Dr. Kgosietsile Letlape, President of the Health Professions Council of South Africa and Chair of IAMRA.

On August 26, IAMRA hosted **“COVID-19 and the Acceleration of Virtual Care and Virtual Regulation: Lessons and Questions from Canada.”** The webinar explored the topic of virtual governance and virtual performance accountability. Speakers included Heidi Oetter, MD, Registrar and Chief Executive Officer of the College of Physicians and Surgeons of British Columbia and Chair-elect of IAMRA; Fleur-Ange Lefebvre, PhD, Executive Director and Chief Executive Officer of the Federation of Medical Regulatory Authorities of Canada; and Scott McLeod, MD, CCFP, FCFP, Registrar and CEO of the College of Physicians and Surgeons of Alberta.

IAMRA’s latest webinar, **“Registration Assessments in a Pandemic Environment,”** held September 28, focused on the key issues of assessment that are of interest from an international regulatory point of view, including the impact of the COVID-19 pandemic on registration assessments, interim arrangements for assessments, planning for the future and risk

mitigation. Led by Paul Reynolds, Director of Strategic Communications and Engagement at the UK’s General Medical Council (GMC) and a member of the IAMRA Management Committee, speakers included Richard Hankins, PhD, Head of Assessments at the GMC; Philip Pigou, LLB, Chief Executive Officer of the Australian Medical Council; David Johnson, MA, Chief Assessment Officer at the Federation of State Medical Boards; and Michael Barone, MD, Vice President of Licensure Programs at the National Board of Medical Examiners.

IAMRA will host additional webinars throughout the remainder of the year. Recordings of the webinars are available to IAMRA members in the Members Only section of the IAMRA website, and to non-members through the IAMRA Secretariat.

For more information on the webinars or IAMRA, please contact the IAMRA Secretariat at secretariat@iamra.com.

Source: IAMRA website and email news announcements

New Zealand

Cultural Safety and Health Equity Report and Recommendations Released in New Zealand

The Medical Council of New Zealand, in partnership with Te Ohu Rata O Aotearoa (Te ORA) — an organization representing Māori medical students and medical practitioners — has released an independent research report outlining findings on the current state of cultural safety and health equity delivered by physicians in New Zealand.

The report examines equity and care delivery issues between New Zealand’s minority Māori population and New Zealanders of European descent, who make up approximately 70% of the nation’s population.

The report, released September 25, examines conscious and unconscious biases and other issues that contribute to systemic racism and a lack of health equity among Māori patients, offering a series of recommendations to address these issues.



While Māori patients' experiences are the focus of the report, it states that "many of the challenges and solutions will be applicable to other ethnic groups and populations who experience inequitable health care."

Among the report's observations are that systemic racism must be acknowledged, along with the structural barriers in New Zealand's medical system that can lead to inequities. The report recommends a number of remedies, including steps to raise awareness of and respect for cultural differences, the implementation of recruiting strategies to increase the number of Māori physicians and ensuring that Māori populations have a greater role in governance and decision-making within health organizations.

According to the Medical Council, the report forms the baseline from which a wider evaluation will be undertaken on a range of initiatives in a joint program between the Medical Council and Te ORA.

"While this report offers an insight into current practice that we can learn from, it is only the first step on this long journey," said Curtis Walker, MB, ChB, FRACP, Chair of the Medical Council. "We know there is much work to do."

"Colonization and systemic racism has had a significant effect on health outcomes and we need to understand that inequity is deep-seated in our society, it is complex and it can impact on patient engagement in their health care and the choices they make," said Professor David Tipene-Leach, Chair of Te ORA.

The full report is available from the Medical Council its website, www.mcnz.org.nz.

Source: Medical Council of New Zealand news release, September 25, 2020

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United Kingdom

New Guidance from UK's GMC Stresses Shared Decision Making as Key to Good Patient Care

The UK's General Medical Council (GMC) has published new guidance urging physicians to put a stronger emphasis on involving patients more

proactively in decision-making and other elements of their care.

According to the GMC, following several "key principles" of consent and decision-making helps achieve better outcomes, while at the same time lessening the likelihood of complaints by patients about the care they receive.

The GMC's new guidance, published in September, takes effect November 9, 2020.

Included is a single-page summary with key principles physicians need to know. Among them:

- All patients have the right to be involved in decisions about their treatment and care, and to be supported to make informed decisions.
- Decision making is an ongoing process focused on meaningful dialogue, based on the exchange of relevant information specific to the patient.
- All patients have the right to be listened to, and to be given the information they need to make a decision and the time and support they need to understand it.
- Doctors must try to find out what matters to patients so they can share relevant information about the benefits and harms of proposed options and reasonable alternatives.
- Doctors must start from the presumption that all adult patients have capacity to make decisions about their treatment and care. A patient can only be judged to lack capacity after assessment in line with legal requirements.

Colin Melville, MB, ChB, the GMC's Medical Director and Director of Education and Standards, noted that physicians work in "pressured environments and in challenging circumstances, impacting on the time they have with patients. It is therefore critical their conversations with patients are meaningful, and that they support patients to make decisions that are right for them."

The full guidance is available at the GMC's website, www.gmc-uk.org.

Source: GMC news release, September 30, 2020