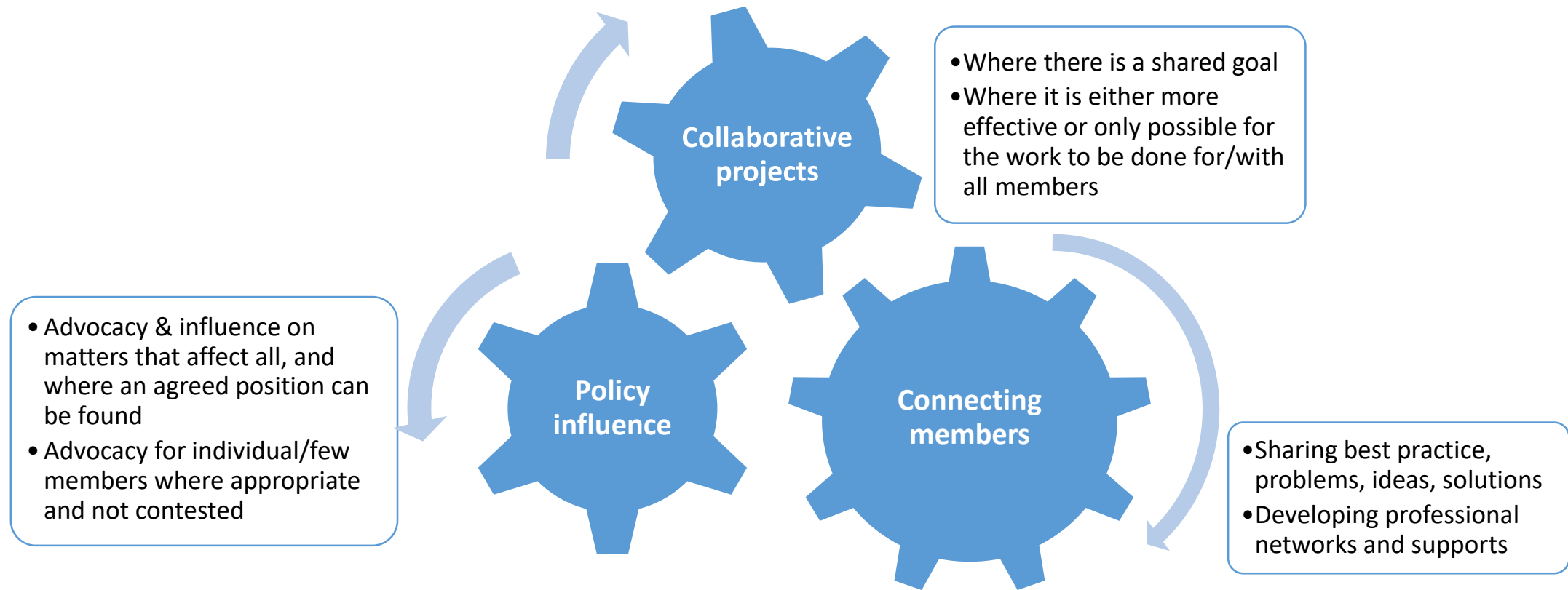


Our Vision: Improving people’s health through the continual development of medical education and research leading to high-quality, work-ready medical graduates and excellence in health research that our communities need.

Working collaboratively to advocate on behalf of members and increase Medical Deans’ impact on relevant Policy decisions and actions.



Sustainable organisation
with effective & appropriate governance

Efficient operations and ‘right touch’ processes
Increased transparency to members

High-performing team



Connecting members

SUCCESS IS...

- Well-utilised member vehicles, sharing best practice and discussing common issues
- Well-attended member meetings; positive feedback from members and guests
- MDANZ utilised to build professional and personal networks



Collaborative projects

- Source of accurate, collated data and analysis on medical students/graduates
- Demonstrating the consistency and quality of medical graduates and medical school training, and members' CQI work
- Indigenous strategy co-developed with partners and progressing



Policy influence

- Source of policy advice/ideas for Ministers, DoH and DoE
- Established policies / positions on key matters
- Well-represented on relevant advisory groups; our input sought
- Strong, strategic relationships with key organisations; leveraged for mutual benefit

Our Objectives

1. Support members to develop quality medical graduates through education, training and assessment
2. Inform medical workforce planning
3. Promote improvements in Indigenous health through education and workforce development
4. Promote excellence in health and medical research
5. Promote improvements in rural health through education and workforce development
6. Provide a collegial forum for the exchange of information and the development of policy
7. Provide leadership
8. Support Social Accountability and community engagement
9. Strengthen connection and engagement with medical students

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PRIORITIES

1. Support members to develop quality medical graduates through education, training and assessment

- a) Graduate competencies: increase visibility of medical school QA and QI work; engage in and influence transition to internship work and outcomes
- b) Benchmarking: Clarify purpose and value of AMC assessment benchmarking project; develop advocacy plan and member communications plan; establish effective and documented processes
- c) Innovation & sustainability: stimulate consideration of 'Dr of the future' and implications for medical schools and others; active MECC and MELANZ membership; establish effective and useful networking/sharing vehicles

2. Inform medical workforce planning

- a) MSOD: Establish sustainable position for MSOD in relation to other data collections/surveys, with collection mechanisms that will achieve strong response; ensure continued govt. funding
- b) Data linkage: Deliver data linkage between MSOD/medical school data and data on registered Drs
- c) Policy: Contribute to workforce planning policies and strategies; input sought

3. Promote improvements in Indigenous health through education and workforce development

- a) Strategy: Develop strategy to guide MDANZ activities and advocacy
- b) LIME Network: Support LIME's work where value can be added; engage to seek their input into MDANZ strategies and initiatives; participate and support LIME Connection conferences
- c) AIDA: Deliver on intent and initiatives in the 2019-2021 AIDA-MDANZ Collaborative Agreement; establish next Agreement for 2022-2024; continue to foster and grow strong, mutually beneficial and support partnership; secure input into MDANZ work where relevant
- d) Te ORA: Establish Collaborative Agreement, and foster and strengthen relationship

4. Promote excellence in health and medical research

- a) Advocacy: for a supported pathway to a career as a clinician-researcher
- b) Disseminate: Relevant information and external developments to members

5. Promote improvements in rural health through education and workforce development

- a) Evidence base: Build stronger information base through MSOD and data linkage project
- b) Advocacy: Promote achievements of medical school and regional training initiatives; advocate for stronger role for RTHs (or similar); develop policies and responses to proposed policies that will support improved distribution of medical workforce
- c) Partnerships: Strengthen relationship with FRAME and other key stakeholders

6. Provide collegial forum for the exchange of information and development of policy

- a) Governance: Increase transparency of decision-making to members; increase communications to members on key activities and outcomes
- b) Committees: Bed-down new Standing Committees processes and support; ensure consistent and well-supported use of Basecamp; increase transparency of outputs to all members
- c) Webinars: Trial series of regular webinars with members; evaluate and determine their value, sustainability and areas for improvement

7. Provide leadership

- a) Meetings: Deliver well-attended and well-received annual conferences and mid-year meetings
- b) Relationships: Foster strong connection with relevant Ministers and their offices, opposition Ministers, and Dept. Health and Dept. Education, and other key stakeholders
- c) Media: Increase profile of Medical Deans and its positions, and the contributions of medical schools

8. Support Social Accountability and community engagement

- a) Standing Committee: Ensure clear priorities and workplan in place and progressed; contributing to objective 5 (rural health/workforce)
- b) Inherent Requirements: Finalise Review with continued strong and wide-ranging engagement; implement communications/advocacy plan

9. Strengthen connection and engagement with medical students

- a) Engagement: Foster strong connection with AMSA and NZMSA Presidents, Exec. Officer and other key members; participation in Annual Conference
- b) Input: AMSA and NZMSA on relevant Medical Deans committees; consult on relevant issues