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**AMSE – Ljubljana declaration on the Staff of the Medical School**

A medical school is not defined by its history, or by its buildings and facilities, or by its management. A medical school is primarily its people. Without good staff and students, a medical school will fail.

Therefore, the most important task for those who run a medical school, under the leadership of the dean, is the recruitment and continuing support of staff and students. Above all, it is essential to recruit, motivate, reward and retain excellent staff, and this is particularly important in view of the challenges facing medical education in the future.

Academic staffing matters, in total, are an important part of the autonomy of the university. The specific issues in the medical school, in the particular settings in which teaching and research take place, are the questions of parity and equity with the health care system. The medical school must maintain its academic mission, while at the same time working together with its health care partners in the delivery of education, clinical care, and research.

Academic clinical staff provide clinical care, and leadership and innovation in the health care system, in addition to their responsibilities in teaching and research. Teaching and research are essential for the quality and development of health care, and clinical teaching and research flourish in high-quality clinical settings.

There are difficulties in the recruitment and retention of clinical academic staff in medical schools, because of inadequate recognition and reward of these multiple responsibilities. **In particular, the circumstance in many countries, where a disparity exists between salaries and conditions of work for clinical staff of the medical school and salaries and conditions that are available for their colleagues in the health care system, is not tolerable.**

Governments, medical regulatory authorities, medical professional associations, and other responsible bodies, in close dialogue with medical schools, must ensure that conditions and salaries for academic clinicians are always considered together with, and matched to, health care system salaries and conditions of work. There are examples of good practice in many European countries.

The environment in which medical school staff work must provide good and secure facilities, satisfactory working conditions, and a sympathetic, positive and academic ethos. Salaries, and conditions of employment, must reflect all the responsibilities in clinical work, teaching, research and in management. Academic staff must have the equipment and technology they require, which must be up-to-date, and they must be supported in their personal and professional development.

Reward must be related to the entirety of the activity of the academic, but must also be related to performance. Planning of work in the domains of teaching, clinical work, research, and other activities must be clear, and must be honoured both by the staff member and by those to whom he or she is responsible. Time agreed for research and teaching must be assured. Greater responsibility and commitment of time must be matched by financial reward.

This planning of the job will normally require tripartite agreement between the individual academic, the management of the medical school, and the management of the relevant clinical service or facility, irrespective of the detailed configuration of the clinical service. This will not apply in structures where the health care and the medical school administration are combined.

The definition of the plan of work for the individual academic must be associated with a system of regular appraisal, and a personal development programme, including mentoring, and feedback on performance. Staff must be supported in the development of their teaching, clinical and research skills. The plan of work must include realistic targets to be met. Staff who persistently fail to meet realistic targets, for example, in teaching or in clinical performance, should not be retained.

In non-clinical departments of the medical school, all conditions of work must be such that medically qualified staff as well as non-medical staff are attracted into basic science teaching and research. Conditions must be such that medical and non-medical staff work together equitably. This is important not just in basic sciences but also in translational medicine and science.

Reliable data on the numbers and levels of clinical academic staff in medical schools are essential in planning and development of medical education, research, and clinical work. The practice of the Medical Schools Council annual survey in the United Kingdom is commended.

**In summary, the recruitment, reward and retention of medical school clinical academic staff requires:**

- **Adequate and protected time for teaching, research, clinical activities and for personal development. This timetable should be tailored to the talent of the individual, and annually monitored and discussed**
- **Equitable conditions of employment and reward, related to the plan of work and performance of the individual academic**
- **A supportive, well-resourced academic and clinical environment**

Academic medical staff, both clinical and pre-clinical, must be valued for their multiple contributions. A medical school leads, within its parent university, in the engagement of society with the academic mission of the university. The academic staff of the medical school lead in essential education and training of medical and paramedical professionals, in high-quality and innovative health care, and in research which often jointly with other scientific, technological and social science schools of the university.

All these activities are essential for the creation of future generations of doctors, for the good of society as a whole. The present situation in some jurisdictions is putting this future at immediate risk.