

ABCs of Accreditation in Medical Education

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Abstract

The main objective of this paper is to introduce the concept of accreditation to the academic staff of the medical schools. We discussed the definition, purposes, standards and procedures of accreditation of medical institutions. Also we highlighted briefly some debatable issues regarding accreditation of medical institutions

Keywords: medical institutions, graduates, Self-evaluation.

What is accreditation?

Accreditation is a peer review process of maintaining established standards set forth by a given discipline, and the means by which these standards may be measured with distinct goals of showing improvement and demanding accountability.¹ It aims at establishing the status, legitimacy or appropriateness of an institution or an educational programme (i.e. to attest the educational quality of an educational programme, and the capability of a given institution to attain the objectives of that programme) The ultimate goal of accreditation is to improve the current performance in medical education, and then ensure that the future doctors attain adequate standards of education and professional training². All the components of an educational programme (e.g. syllabuses, resources and educational environment) constitute the material of accreditation (the accreditation standards)^{3,4}.

Accreditation can be for an institution or a programme. The institution accreditation refers to the accreditation of the whole institution, including all its programmes, sites, and methods of delivery, without any implication as to the quality of the study programmes of the institution⁵. It is usually based on an evaluation of whether the institution meets specified minimum (input) standards such as staff qualifications, research activities, student intake and learning resources.

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It might also be based on an estimation of the potential for the institution to produce graduates that meet explicit or implicit academic standard or professional competence.⁶ Programmes accreditation establishes the academic standing of the programme or the ability of the programme to produce graduates with professional competence to practice⁶.

The accreditation process is not an end in itself. It is rather like a laboratory investigation which provides a diagnosis on the condition of an institution.⁴ It is rather a golden gate of sustained quality improvement through periodic evaluations of the resources and educational programmes of the accredited institution.⁷ Accreditation entails efficient and remarkable reforms in the medical education far more than the traditional institutional infrequent revisions of curriculum and teaching methods. In fact, what is really important is what a school will do to improve its quality after the accreditation⁴.

What purposes does accreditation serves?

Accreditation is important for development of medical education and health care through assuring that the medical school can provide a good learning environment suitable for graduating doctors with good competencies⁴. Thus accreditation serves the interests of the public and the students enrolled in the attested programmes (the high demand on places of medical education might lead to proliferation of schools of dubious qualities)⁴. The accreditation is expected to help today doctors to cope with the explosion in medical and

scientific knowledge and technologies by acquiring the abilities of lifelong self learning.⁴ For institution accreditation is expected to initiate and promote culture of external evaluation and self-review, and to assist in resource mobilization. With globalization (manifested by expansion in trade in health services accreditation and in numbers of migrating doctors) can be a tool for international recognition and categorization of medical schools⁷.

Historically, the concept of accreditation was first known in the United States, and later has also been widespread in Central and South America and Eastern Europe⁸. Now it has moved into the European Union as part of the Bologna Process. The Liaison Committee on Medical Education (LCME) was established in 1942 as an accrediting agency authorized by the US Department of Education to serve the interests of the public. The mission of LCME was to accredit medical educational programmes leading to MD degrees in USA and Canada⁸. Declaration of Bologna (June 1999) called for establishment of a competitive European Higher Education area attractive to students and scholars (at home and abroad)⁴. In 2004 The WHO and the WFME established the International Task Force on Accreditation on Medical Education, with the aim to establish a sustainable accreditation system to ensure a medical education of a high quality throughout the world⁴.

The accreditation system

The accreditation process is the assessment by accrediting bodies of the compliance of medical education institutions and programmes with nationally or regionally accepted standards of educational quality. Accreditation processes often involve:

- *Self-evaluation*: It is analysis of an institution's available resources and the effectiveness of its educational programmes by its staff.

- *A study visit or peer review* and a decision by the accrediting body in the form of a *report* stating the accreditation status of the institution.

Setting standards of accreditation

The important and early steps in establishing an accreditation system is to set the standards of accreditation, and to establish the accreditation body. Initially, a committee should initiate a wide discussion (through meetings and seminars) on the suitable standards among concerned partners (e.g. teaching staff, professional associations, public representatives), in addition to reviewing similar standards abroad. Then the committee should approve rules and procedures of accreditation.

The accreditation standards (issues in accreditation) define the knowledge, skills and professional attitudes expected at the end of an educational programme (under- or postgraduate), and the good practice of delivering of medical education and training (including judgment on educational facilities and resources). These standards can be international, regional, national or sub-national (in countries with large numbers of medical schools)⁴.

Institutional self study

This is a detailed report contains listing and analysis of an institution's available resources and the effectiveness of its educational programmes, prepared by the staff of the institution. The self-study is, then, verified or reviewed by the accrediting body to judge the compliance of the institution to the set accreditation standards. To detail:

- **The institutional settings**: site, date of establishment, number of batches and students graduated, mission and objectives, governance structure, components and their functions, budget practice and academic management.

- **Educational programme**

- ▲ Educational objectives and broad competencies (knowledge, skills, attitudes) required of students at graduation

- ▲ Curriculum design and development (relevance to current and anticipated needs of society, comprehensiveness: coherence, adequacy (if local and national expectations achieved), curricular model.

- ▲ Curriculum content:

- Emphasis on (basic science/clinical, didactic/practical, community based/hospital based, preventive/curative/rehabilitative, primary/ secondary/tertiary)

- Extent of integration,
- Amount of elective time,
- Attention to new topics such as medical ethics, geriatrics, economics of health,
- Student workload,
- Teaching and learning methods, student assessment and grading system and how to monitor their reliability and validity.
- Staff and student satisfaction.

▲ **Curriculum management:**

- If there is fully authorized committee responsible of administration and review of curriculum,
- Curriculum and programme evaluation (staff and students' opinions. Opinions of technical experts on programme evaluation, reports of external examiners on performance of students at final examinations, quality of professional performance of graduates)
- If the institution regularly performs partial or comprehensive reviewing of its objectives, structure and activities

▲ **Other programmes in the parent institution (university)**

- **Resources:** number and composition of administration staff, number, qualifications and disciplines of teaching staff and their recruitment and promotion criteria, their distribution as fulltime/part-time and medical/non-medical, finances, lecture theatres, tutorial rooms, dissection rooms, clinical skills centres, pathology museums, laboratories (holdings and accessibility), hospitals and other facilities for clinical training and other facilities for clinical training (outpatient clinics, emergency clinics, community health centres, physicians; offices), libraries, information technology resources, educational development and teaching training, research facilities and programmes.

- **Students:** number, characteristics (age, sex, geographic representation), applications, admission criteria, enrolment,

quality (compared to national population of medical students or other programmes), attrition, results, counselling and other, institution support of students' extracurricular activities, services, career distribution of graduates.

- **Collaboration with other institutions on medical education** (other medical schools nationally and internationally, government agencies responsible of planning and providing higher education, private institutions interested in health professions education/health care delivery)

- **Collaboration on health care development** (with agencies responsible of providing health care in the community, with governmental agencies responsible for planning, providing and assessing health care).

Accreditation body

An accreditation body is an organization delegated to make decisions, on behalf of the higher education sector, about the status, legitimacy or appropriateness of an institution, or programme⁵. The UNESCO definition of accreditation body is 'A (non-) governmental or private educational association of national or regional scope that develops evaluation standards and criteria and conducts peer evaluations and expert visits to assess whether or not those criteria are met'⁵. There are different types of accreditation bodies (e.g., agencies, councils, commissions, etc.), focused on general accreditation, specialized accreditation, professional accreditation, regional accreditation, national accreditation, distance education accreditation, etc^{2, 5}. The possible members of accreditation bodies include teaching staff, members of professional associations, and public members

Accreditation procedures

The accrediting body is expected to perform 'accreditation survey; verify and evaluate educational and training processes and environments, and criteria of the end products of education and training so as to decide on the accreditation status⁴, the evaluation of an institution to identify its level of compliance with the applicable standards of the

accreditation body and to make determinations concerning its accreditation status. The survey includes an evaluation of documents and information (evidence) provided by the personnel of the higher education institution, following on-site observations by mandated visitors⁵. The findings of the accreditation survey (accreditation portfolio) will base the decision of accreditation body on the accreditation status of the concerned institution or programme⁵.

In principle, an institution or programme is either accredited or it is not. Often, though, there are interim or provisional accreditation decisions that translate into a range of accreditation statuses⁶. The possible list of decisions includes provisional accreditation (for new schools), accreditation, continued accreditation (pending attention to areas of non-compliance), probation and withdrawal of accreditation.⁴ Accreditation decisions are usually limited to a fixed and stated period of time, after which the institution or programme is required to engage with a more or less rigorous re-accreditation process⁵. Re-accreditation is the follow up to accreditation once the duration of accreditation has been reached. It may involve a comprehensive review or may involve a limited procedure to establish continuation⁵.

Accreditation in Sudan

The accrediting body of medical schools in Sudan is the Accreditation Committee for Accreditation of Medical Schools (ACAMS), formed jointly by the Ministry of Higher Education and the Sudan Medical Council (SMC). The ACAMS had adopted the accreditation standards of the World Federation for Medical Education. The levels (status) of accreditation as set by ACAMS are 'accredited', 'accredited after meeting specified conditions' and 'not accredited'. The duration of accreditation for accredited schools is five years, after which the school should enter in a reaccreditation process.

The accreditation of medical (and other) schools is a new concept in Sudan. Many medical teachers and even schools' administrators are not even aware with the

concept of accreditation, and may confuse it with the role of the SMC. The ACAMS has to disseminate the 'culture' of accreditation among schools' staff to avoid after years of establishing its work. The ACAMS also need to exert some effort to disclose its activities.

Conclusion

The accreditation is widespread throughout the world from India to Middle East and the European Union as part of the Bologna Process. The real value of accreditation is that provide for improvement and development of a given system, and not to be viewed as an all-or-non process (the goal should be always to help institution to be accredited. At a minimum, accreditation helps in identifying qualifications that will satisfy the minimum acceptable standards (thus protecting both patients and students from programmes of poor qualities)⁴. To fulfil its mission efficiently, the accreditation body should be representative (but independent) to all concerned parties, and have authority both to accredit and to sanction. The accreditation process itself should be time limited, feasible to a given socioeconomic and cultural situation, relevant, valid, reliable, comparable and should include a process for appeal⁴.

There are certain challenges face the process of accreditation. There are difficulties in developing credible and valid standards or in achieving a consensus on them. Currently, accreditation is a voluntary process (carried out at the request of the institution), but it may soon get compulsory due to professional and market pressures. In some countries (USA, Canada) medical licensure laws require that doctors be graduate of accredited medical schools. There are possible problems of shortage of resources necessary for activities of accreditation. Other challenges include authorization of accrediting bodies, consequences of not being accredited, conjunction between accreditation and certification and licensure and duration of time at which to correct areas of non-compliance and disclosure of accreditation status to the public⁴. There are doubts that limitation of number and size of medical

schools that might possibly occur as a result of accreditation (especially in countries with limited resources) will lead to a deficit in number of doctors. There is a view in certain areas in developing countries that having doctors with rather poor standards is better than laying responsibility of health care to nurses and paramedical staff.

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أبجديات الاعتماد في التعليم الطبي.

عوض محمد أحمد

الملخص:

الهدف الاساسي لهذه الورقة هو طرح مفهوم الاعتماد لاعضاء هيئة التدريس بكليات الطب. حيث اننا ناقشنا التعريف، الاهداف، المعايير وطرق اعتماد المؤسسات الطبية. كما اننا ألقينا الضوء علي الامور الخلافية المتعلقة باعتماد المؤسسات الطبية.