

Executive summary: Royal Australasian College of Medical Administrators

The Australian Medical Council (AMC) document *Procedures for Assessment and Accreditation of Specialist Medical Education Programs and Continuing Professional Development Programs, 2011* describes AMC requirements for accrediting specialist programs and their education providers.

An AMC assessment team assessed the education, training and professional development programs of the Royal Australasian College of Medical Administrators (RACMA) in 2008. On the basis of this assessment, the Council accredited these programs for four years, until December 2012, subject to conditions.

In July 2012, an AMC team completed the follow-up assessment of the College's programs, considering the progress against the recommendations from the 2008 AMC assessment. Under the AMC accreditation procedures, the 2012 review may result in the extension of the accreditation to six years from the original assessment, that is until December 2014.

The team reported to the 5 November 2012 meeting of the Specialist Education Accreditation Committee.

The Committee considered the draft report and made recommendations on accreditation to AMC Directors within the options described in the AMC accreditation procedures.

This report presents the Committee's recommendations, as presented to the November 2012 meeting of AMC Directors, and the detailed findings against the accreditation standards.

Decision on accreditation

Under the *Health Practitioner Regulation National Law Act 2009*, the AMC may grant accreditation if it is reasonably satisfied that a program of study and the education provider meet an approved accreditation standard. It may also grant accreditation if it is reasonably satisfied that the provider and the program of study substantially meet an approved accreditation standard, and the imposition of conditions will ensure the program meets the standard within a reasonable time. Having made a decision, the AMC provides its report to the Medical Board of Australia to enable the Board to make a decision on the approval of the accredited program of study as providing a qualification for the purposes of registration.

The AMC's finding is that, overall, the education, training and continuing professional development programs of the Royal Australasian College of Medical Administrators meet the accreditation standards. Since its accreditation by the AMC in 2008, the College has significantly enhanced its educational and training activities. The College has largely addressed the recommendations made by the AMC in 2008. There are some notable strengths including the implementation of the Medical Leadership and Management Curriculum, and the embedding of the curriculum in selection and assessment processes. The College's continuing professional development program is well established.

The AMC notes that since the 2012 review the College has considered and begun to address a number of the recommendations in this Report.

The November 2012 meeting of the AMC Directors resolved:

(i) That the education and training programs and the continuing professional development program of the Royal Australasian College of Medical Administrators be granted ongoing accreditation to 31 December 2014, subject to satisfactory progress reports to the Specialist Education Accreditation Committee.

(a) By the 2013 progress report, evidence that the College has addressed the following conditions:

- 1 Fully implement the process for teaching and assessing the defined competency of Scholar. (Standard 3.3)
- 2 Review the requirements for the management practice folio to ensure the aims and requirements are clear for each cohort of trainees, and provide appropriate tools to support candidates to satisfy the requirements. (Standard 5.1)
- 3 Report on the implementation of the research-based case study. (Standard 5.2)
- 6 Implement processes for engaging other health care professionals and consumers in the evaluation process. (Standard 6.2.2)
- 7 Document and publish the criteria used to adjudicate applications to the accelerated pathway, including the weighting applied to various elements of the selection process. (Standard 7.1.3)
- 8 Develop mechanisms to ensure that trainees have access to timely and correct information about their training status to facilitate their progress through training requirements. (Standard 7.3.3)
- 9 Develop a policy to guide the resolution of conflicts or disputes between candidates and supervisors or preceptors. (Standard 7.4.2)
- 10 Formalise the procedure for candidates seeking reconsideration or review of a decision to clarify the stages that precede a formal review as outlined in the policy “Review of Decisions of Board and its Committees”. (Standard 7.4.3)
- 12 Work with the Medical Council of New Zealand to ensure that New Zealand Fellows are aware of the annual, rather than triennial, requirement of at least ten hours for peer review, and that the Continuing Education Program includes a professional development activity that meets the Medical Council of New Zealand’s requirement for an annual audit activity. (Standard 9.1)

(b) By the AMC review of the College’s comprehensive report in 2014, evidence that the College has addressed the following conditions:

- 4 Develop a formal mechanism to enable early identification and remediation of under-performing candidates. (Standard 5.2)
- 5 Develop ways to collect qualitative information on outcomes. (Standard 6.2.1)

- 11 Develop a process for evaluating de-identified appeals and complaints. (Standard 7.4.4)
- 13 Include consumer involvement in Continuing Education Program (CEP) reviews. (Standard 9.1)

This accreditation decision relates to the College’s programs of study and continuing professional development program in the recognised medical specialty of medical administration.

In 2014, before this period of accreditation ends, the AMC will seek a comprehensive report from the College. As well as reporting on the conditions listed under (b) above, the report should outline the College’s development plans for the next four to five years. The AMC will consider this report and, if it decides the College is continuing to satisfy the accreditation standards, the AMC Directors may extend the accreditation by a maximum of four years (to December 2018), taking accreditation to the full period which the AMC will grant between assessments, which is 10 years.

At the end of this extension, the College and its programs will undergo a reaccreditation assessment by an AMC team.

Overview of findings

The findings against the nine accreditation standards are summarised below. Only those sub-standards which are not met or substantially met are listed under each overall finding.

Conditions imposed by the AMC so the College’s programs meet accreditation standards are listed in the accreditation decision (pages 2 to 3). The Team’s commendations of areas of strength and recommendations for improvement are given below for each set of standards.

1. The Context of Education and Training (governance, program management, educational expertise and exchange, interaction with the health sector and continuous renewal)	Overall this group of standards is MET
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Commendations

- A The reform of the College governance and organisational structure since the 2008 AMC accreditation assessment which has led to more fellows contributing to the College’s education and training activities.

Recommendations for improvement

- AA Given the importance of the role of Jurisdictional Coordinator of Training, communicate their role to health departments.

2. The Outcomes of the Training Program (purpose of the training organisation and graduate outcomes)	Overall this group of standards is MET
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Commendations

- B The clarity and focus of the curriculum document in terms of its articulation of the organisational purpose of the College and the learning outcomes of the training program.

3. The Education and Training Program – Curriculum Content (framework; structure, composition and duration; research in the training program and continuum of learning)	Overall this group of standards is MET
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Standard 3.3 is substantially met.

Commendations

- C The College Medical Leadership and Management Curriculum.
- D The initiation of the RACMA Young Doctors’ Program.

Recommendations for improvement

- BB Progress the implementation of the health services evaluation research requirements of the program. (Standard 3.3)
- CC Continue to review and strengthen processes for assessing applications for recognition of prior learning and advanced standing to ensure consistency in decision-making. (Standard 3.4)

4. The Training Program – Teaching and Learning	Overall this group of standards is MET
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Commendations

- E The focus on, and achievements in, the development of online learning resources.
- F The introduction of the webinars for education support for both candidates and fellows as part of their continuing professional development, as well as the enhanced support for supervisors and preceptors.
- G The pilot of the MiniMex Simulated Management Learning initiative.

Recommendations for improvement

- DD Continue to monitor the educational relevance of the masters degree courses, as the curriculum changes, particularly with respect to the College’s new research and leadership requirements. (Standard 4.1.2)

5. The Curriculum – Assessment of Learning (assessment approach, feedback and performance, assessment quality, assessment of specialists trained overseas)	Overall this group of standards is SUBSTANTIALLY MET
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Standards 5.1 and 5.2.1 are substantially met.

Commendations

- H The increasing range of assessment methods, which are appropriately aligned to the components of the fellowship training program.
- I The opportunity provided for unsuccessful examination candidates to receive one-on-one feedback from the Censor on examination performance.

Recommendations for improvement

- EE Review the effectiveness of College procedures for communication with candidates over changes to assessment requirements and timing to ensure it is clear and timely. (Standard 5.1)
- FF Continue to develop and apply well documented processes for reviewing the quality, reliability, consistency, and rigour of its assessment approach and methods. (Standard 5.3)
- GG Provide supervisors who are not College fellows access to professional development in assessment methods and in providing feedback to candidates. (Standard 5.3)

6. The Curriculum – Monitoring and Evaluation	Overall this group of standards is MET
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Standard 6.2 is substantially met.

Commendations

- J The ongoing development and review of the RACMA fellowship training program, combined with evidence of debate and reflection within the College committees and the fellowship.
- K The introduction of candidate and supervisor annual surveys.

Recommendations for improvement

- HH Seek external expertise to evaluate the fellowship training program. (Standard 6.1)

7. Implementing the Curriculum - Trainees (admission policy and selection, trainee participation in governance of their training, communication with trainees, resolution of training problems, disputes and appeals)	Overall this group of standards is SUBSTANTIALLY MET
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Standard 7.1.3 is not met. Standards 7.3.3, 7.4.2, 7.4.3 and 7.4.4 are substantially met.

Commendations

- L The College’s active role in seeking government-funded Specialist Training Program places, and in selection to those positions.
- M The inclusion of candidates in the governance structure of the College and decision-making on matters relating to education and training.

Recommendations for improvement

- II Improve communication with candidates regarding training program requirements with a focus on clear presentation of changes to the program that clarify which candidates are affected. (Standard 7.3.1)

8. Implementing the Training Program – Delivery of Educational Resources (supervisors, assessors, trainers and mentors; and clinical and other educational resources)	Overall this group of standards is MET
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Commendations

- N The development of a comprehensive faculty education program.
- O The opportunities for feedback from candidates regarding supervisor performance, by means of the candidate survey and candidate training reports.
- P The development of accreditation procedures aligned with the curriculum and consistent with AMC standards.
- Q Collaboration with jurisdictions and private health providers to achieve additional training positions for candidates by means of Specialist Training Program and other sources of funding.

Recommendations for improvement

- JJ Ensure that all aspects of the faculty education program relevant to workplace supervisors are available to all supervisors, including those who are not fellows of the College. Progress reports on the delivery of the faculty education program to supervisors, preceptors and censors will be required. (Standard 8.1.1)
- KK Continue implementation and evaluation of new accreditation procedures, including an assurance that all positions accredited for training have been assessed in accordance with the newly developed policy. (Standard 8.2.2)

9. Continuing Professional Development (CPD programs, retraining and remediation)	Overall, this group of standards is MET
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Standard 9.1 is substantially met.

Commendations

- R The successful blueprinting of the continuing education program against the curriculum.
- S The range of continuing education resources available on the College website and the strong focus of the continuing education program on continuous quality improvement.
- T The significant improvement in the number of fellows participating in the continuing education program.