

## **Executive Summary: Australasian College of Dermatologists**

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The Australian Medical Council (AMC) document *Assessment and Accreditation of Specialist Medical Education and Training Programs and Continuing Professional Development Programs: Standards and Procedures* 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 Australasian College of Dermatologists (ACD) in 2007. On the basis of this assessment, the Council granted accreditation of these programs for three years, until December 2010, subject to conditions.

At the request of the College, and having considered the College's progress, in June 2010, the AMC extended this accreditation by 12 months.

In 2011, an AMC team completed the follow-up assessment of the College's programs, considering the progress against the recommendations from the 2007 AMC assessment. Under the AMC accreditation procedures, the 2011 review assessment may result in the extension of the accreditation to six years from the original assessment, that is until December 2013.

The Team reported to the 28 October 2011 meeting of 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 recommendation on accreditation, as presented to the November 2011 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 reports its accreditation decision to the Medical Board of Australia to enable the Board to make a decision on the approval of the program of study for registration purposes.

The AMC's finding is that, overall, the education, training and continuing professional development programs of the Australasian College Dermatologists meet the accreditation standards. Since its accreditation by the AMC in 2007, the College has significantly enhanced its educational and training activities. It has implemented the dermatology curriculum. The College has largely addressed the recommendations made by the AMC in 2007. There are some notable strengths including the completion of the curriculum, and the embedding of the curriculum in selection and assessment processes. The College's continuing professional development program is well established. Work is still required to complete the review of the curriculum and assessment methods.

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

The November 2011 meeting of AMC Directors resolved:

- (i) That the education and training programs and the continuing professional development program of the Australasian College of Dermatologists be granted ongoing accreditation to 31 December 2013, subject to satisfactory progress reports to the Specialist Education Accreditation Committee.
- (ii) That this accreditation is subject to the conditions set out below:
  - (a) By the 2012 annual report, evidence that the College has addressed the following recommendations from the accreditation report:
    1. Review the ACD policy statements and training documents to ensure graduate outcomes refer clearly to the competencies that distinguish the specialist dermatologist from other health professionals. (Standard 2.2)
    2. Complete the review of the dermatology curriculum with a focus on evaluation, fine-tuning and value-adding rather than further major change. (Standard 3.1)
    4. Articulate clearly the ACD's policy on:
      - the ongoing development of pass/fail standard-setting for all assessments;
      - the methods by which assessment information is used to reach the final decision about pass or fail in the Fellowship examination;
      - the quality of assessments, including reliability and evidence for validity, and the methods used in obtaining relevant indicators. (Standard 5.3)
    6. Communicate clearly on the scoring system and the weightings of the various components of the selection process for trainees. (Standard 7.1.3)
    7. Provide administrative support to the Trainee Representative Committee. (Standard 7.2)
    8. Develop and formalise a process for the selection of supervisors and examiners. (Standard 8.1.2 and Standard 8.1.4)
    10. Implement processes to ensure that the outcomes of the accreditation assessments of rural and regional rotations and overseas postings are clearly documented within the prescribed timelines. (Standard 8.2.1)
    11. Report on the roll out of its new accreditation process and on the establishment of an Accreditation Committee. (Standard 8.2.1)
    12. Ensure that the revised accreditation standards are made publicly available. (Standard 8.2.1)
    13. Develop a process and criteria for assessing and recognising continuing professional development (CPD) providers and/or the individual CPD activities. (Standard 9.1.3)

(b) By the AMC review of the College’s comprehensive report in 2013, evidence that the College has addressed the following recommendations from the accreditation report:

3. Review the overall assessment burden and evaluate the impact of new assessments, such as multi-source feedback and case-based discussion. (Standard 5.1.2)
5. Implement processes for regularly obtaining comment from consumers and non-medical health professionals in College evaluations, and involving them in more formal program review. (Standard 6.2.2)
9. Take a stronger role in implementing a system for regular review of supervisor performance, including seeking meaningful feedback from trainees. (Standard 8.1.3)
14. Demonstrate preparedness to develop a program for the evaluation and subsequent retraining of fellows whose performance has been found to be unsatisfactory, should that occur. (Standard 9.3)

In 2013, before this current 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 2017), 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 re-accreditation 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 meets accreditation standards are listed in the accreditation decision (pages 2 to 3). The Team’s commendations in areas of strength and recommendations for improvement are given below for each set of accreditation 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 ongoing leadership and dedication of office bearers and staff in progressing the College’s educational direction.
- B The College’s recent initiatives in its education and training programs.

C The College's engagement with the Australian Government resulting in securing significant funding to support the dermatology workforce development.

*Areas for improvement*

AA Develop and implement strategies to engage wider consumer representation in ACD decision-making committees. (Standard 1.1.2)

BB Revise the College's Education Plan to include information on how each task will be completed and what are the expected outputs identified for each task, goal, and objective. (Standard 1.2)

CC Progress the development of the College's Strategic Plan for 2011 onwards. (Standard 1.1)

DD Progress and report on the findings of the 2011 external governance review. (Standard 1.1)

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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Standard 2.2 (graduate outcomes) is substantially met.

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 3.1 (curriculum framework) is substantially met. The College has made considerable progress in implementing its curriculum but it is important that the formal review be conducted as planned.

*Commendations*

D The application and enthusiasm shown by College fellows and officer bearers in the development and implementation of the dermatology curriculum.

E The College's approach to flexible and part-time training.

F The College's contribution to the prevocational and undergraduate stages of the medical training continuum.

G Establishment of the joint FACD/PhD research pathway.

*Areas for improvement*

EE Communicate actively with employers and supervisors to ensure they are informed about professional indemnity insurance requirements, and that trainees involved in rural rotation are adequately indemnified. (Standard 3)

FF Integrate the joint FACD/PhD into the mainstream dermatology training program. (Standard 3.3.2)

GG Consider strategies for improving the uptake of and access to online learning modules by medical students and prevocational doctors. (Standard 3.5)

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

H The focus on, and achievements in, the development of online learning resources.

*Areas for improvement*

HH Continue to develop strategies to ensure that structured educational programs are equally accessible by trainees across all states. (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 MET
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Standard 5.1.2 (range of assessment formats) and Standard 5.3 (assessment quality) are substantially met.

*Commendations*

I The assessment blueprint which demonstrates the relevance of each assessment modality to the domain learning outcomes.

J Introduction of mechanisms to utilise direct observation of trainee performance using performance-based assessment.

K The development of Rotation Learning Plans.

L The College's development and implementation of process for assessment of overseas-trained dermatologists, and the support given to those who enter the College's training program.

*Areas for improvement*

II Publish the methods used to determine pass/fail decisions in assessments to trainees. (Standard 5.2)

JJ Evaluate the effect of the new assessment program on learner behaviour. (Standard 5.3.1)

KK Complete the external review of assessment and identify the College's strategies to address the recommendations. (Standard 5.1)

LL Implement the recommendations of the 2010 College's evaluation of the international medical graduate assessment process. (Standard 5.4)

6. The Curriculum – Monitoring and Evaluation	Overall this group of standards is MET
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Standard 6.2.2 (outcome evaluation) is substantially met.

*Commendation*

M Establishment of a process to seek feedback from trainees on assessment methods.

*Areas for improvement*

MM Continue to conduct and report on the biennial surveys of trainees and supervisors. (Standard 6.2.1)

NN Evaluation of recently-introduced assessment methodologies such as workplace-based assessment (see recommendation 3, Section 5). (Standard 6.1.1)

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 MET
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Standard 7.1.3 (documents and publishes its selection criteria) and Standard 7.2 (trainee participation in governance of their training) are substantially met.

*Commendations*

N The rigour, fairness and consistent application of selection policies embodied in the new National Trainee Selection Procedure.

O Current involvement of the Trainee Representative Committee on College training related committees.

*Area for improvement*

OO Formalise the requirement for trainee representation on College training-related committees. (Standard 7.2)

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 SUBSTANTIALLY MET
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Standard 8.1 (supervisors, assessors trainers and mentors) and Standard 8.2 (clinical and other education resources) are substantially met.

*Commendations*

- P Development of clear roles and responsibilities for supervisors.
- Q Development of the revised policy and process for the accreditation of training positions.

*Areas for improvement*

- PP Continue to develop and implement the mentoring scheme. (Standard 8.1)
- QQ Continue to promote engagement between individual faculties and state health jurisdictions. (Standard 8.2.4)
- RR Address the challenges of the accreditation process, namely:
  - expanding the pool and training of accreditors;
  - ongoing administration of visits;
  - systematic follow-up of recommendations and conditions on accreditation. (Standard 8.2)
- SS Review ACD policy to ensure the requirements of overseas posts are clear and promulgated widely to all trainees and supervisors on a regular basis. (Standard 8.2.1)

9. Continuing Professional Development (programs, retraining and remediation)	Overall, this group of standards is MET
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Standard 9.1.3 (process and criteria for assessing and recognising CPD providers and activities) and Standard 9.3 (remediation) are substantially met.

*Commendation*

- R The CPD program has been successfully blueprinted against the curriculum.

*Areas for improvement*

- TT Continue to evaluate the CPD program for continual improvement while incorporating feedback from participants. (Standard 9.1.3)
- UU Report on the outcome of the implementation of the *Mandatory Participation Policy in Professional Development and Recency of Practice* and its compliance with the Board’s recency of practice registration standard. (Standard 9.1.2 and 9.2)