

## **Executive Summary: Australasian College of Sports Physicians**

The Australian Medical Council (AMC) describes its requirements for accrediting specialist programs and their education providers in the documents:

- *Standards for Assessment and Accreditation of Specialist Medical Education Programs and Professional Development Programs by the Australian Medical Council 2010*; and
- *Procedures for Assessment and Accreditation of Specialist Medical Education Programs and Professional Development Programs by the Australian Medical Council 2011*.

An AMC Assessment Team assessed the education, training and professional development programs of the Australasian College of Sports Physicians (ACSP) in 2008. On the basis of this assessment, the AMC granted accreditation of the education and training program and the professional development programs of the College for six years, until December 2014 subject to satisfactory progress against the recommendations in the accreditation report and a review visit in 2011.

In 2011, an AMC Team completed the review of the College's programs, considering the progress against recommendations made by the 2008 AMC assessment. The Team reported to the 28 March 2012 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 AMC Directors in April 2012, 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 of Sports Physicians meet the accreditation standards. Since its accreditation in 2008, the College has largely addressed the recommendations made by the AMC. The College has significantly strengthened its governance structures, educational and training activities. The College has made considerable progress in clarifying its purpose and in the translation of this purpose into standards of training and continuing professional development. The College is commended for the completion of the curriculum review, development of explicit learning outcomes, an expanded suite of assessment tools and the engagement of educationalists, registrars, consumers and other stakeholders in this process. The College is required to develop a plan for the on-going development and review of the curriculum and assessment process.

The AMC Directors resolved:

- (i) That the accreditation of the education and training programs and the continuing professional development program of the Australasian College of Sports Physicians to 31 December 2014 be confirmed, 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 progress report, evidence that the College has addressed the following recommendations from the accreditation report:
    - 1 Finalise and formally approve the terms of reference for all committees and College roles. (Standard 1.1)
    - 2 Develop a plan for on-going development and review of the curriculum and assessment processes. (Standard 3.2)
    - 3 Develop and publish specific learning objectives for the interstate year and implement an information campaign detailing the College's reconsideration, review and appeals process for registrars seeking exemption from the interstate year. (Standard 3.2)
    - 4 Introduce the Professional Learning Portfolio to document registrars' individual learning plans and to inform reflective discussion with supervisors and State Training Coordinators. (Standard 4.1.3)
    - 8 Approve a policy on assessment of overseas-trained specialists that is separate from the College's policy on other paths to fellowship. (Standard 5.4)
    - 9 Document the College's requirements for the assessment of overseas-trained specialists and make this information publicly available. (Standard 5.4)
    - 10 Publish in a publicly-accessible place the weightings for various elements of the selection process. (Standard 7.1.3)
    - 13 Implement the planned program of training site accreditation visits and report on its effectiveness as site visits are completed in each state, territory or region in Australia and New Zealand. (Standard 8.2.1)
  - (b) By the 2013 progress report, evidence that the College has addressed the following recommendations from the accreditation report:
    - 6 Ensure educational support is available to assist registrars to meet the requirement for completion of an Early Management of Severe Trauma (EMST)/adapted trauma course. (Standard 4.1.2)
    - 7 Develop a formal process to inform Clinical Training Supervisors of the progress in the program of registrars who are transferring into their location. (Standard 5.2)
    - 11 Implement the 'train the trainer' program, for new supervisors and for the ongoing development of existing supervisors and Clinical Training Coordinators. (Standard 8.1.2)
    - 14 Implement a process to audit CPD activity reported by fellows to meet the Medical Board of Australia's CPD requirements. (Standard 9.1)

- 15 Review the requirements of the MOPS program; map the program objectives to the revised curriculum and the CanMEDS competencies. (Standard 9.1)
- (c) By the AMC review of the College’s comprehensive report in 2014, evidence that the College has addressed the following recommendations from the accreditation report:
  - 5 Develop processes to facilitate greater sharing of tutorial resource materials across states and regions. (Standard 4.1.2)
  - 12 Introduce a process for obtaining registrars’ feedback on the satisfaction with their mentoring relationship. (Standard 8.1)
  - 16 Endorse and implement the remediation policy for fellows who have been identified as underperforming. (Standard 9.3).

This accreditation decision covers the College’s programs for the recognised specialty of sport and exercise medicine.

In 2014, 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 (c) 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 that the College meets accreditation standards are listed in the accreditation decision above (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 College’s significant progress on governance issues, including the strategic plan, terms of reference and policies since 2008.
- B The College’s engagement of educationalists, registrars, consumers and other stakeholders in the curriculum redesign process.

*Areas for improvement*

- AA Consider further initiatives in succession planning to mitigate the risk that much of the unique corporate knowledge and day-to-day operations rests directly with the Chief Executive. (Standard 1.2)
- BB Develop and implement a formal risk management process to assist the College in identifying, assessing, preventing and managing risks. (Standard 1.2)

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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*Commendation*

- C The College's significant progress in further clarifying its purpose and the translation of this into standards for training and continuing professional development.

*Areas for improvement*

- CC Refine the mission statement, strategic plan and operational plans of the College to ensure alignment between them and to increase the community's understanding of the role of sport and exercise medicine physicians, involving consumers (including sporting bodies), registrars and other stakeholders in this process. (Standard 2.1)

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 3.2 (curriculum structure, composition and duration) is substantially met.

*Commendations*

- D The College's revision of the curriculum, including the explicit learning outcomes, the expanded suite of assessments and the suggested teaching and learning methods.
- E The College's review of the mandatory research requirements for training and the flexible suite of research options available for registrars.

*Areas for improvement*

- DD Actively communicate with registrars, Clinical Training Supervisors and Clinical Training Instructors on the features of the revised Manual for Candidates to ensure that all are aware of the Manual and changes made to it. (Standard 3.1)

4. The Training Program – Teaching and Learning	Overall this group of standards is MET
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Standard 4.1.2 (integrated practical and theoretical instruction) and 4.1.3 (increasing degree of independent responsibility) are substantially met.

*Commendation*

- F The standardisation of tutorial program content through the development of defined learning objectives.

*Areas for improvement*

Refer to recommendations 4, 5 and 6.

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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Standard 5.2 (performance feedback) is substantially met. Standard 5.4 (assessment of specialists trained overseas) is substantially met.

*Commendations*

- G The College's significant effort in the development of mini-CEX, DOPS and case-based discussion assessments which match the curriculum and enhance the learning objectives.
- H The College's introduction of team and event coverage assessments.

*Areas for improvement*

- EE Clarify whether the Professional Learning Portfolio will be a formative aid to learning only, or will also be used as a summative assessment mechanism. (Standard 5.1)
- FF For assessment by the Part 2 examination, continue to revise and enlarge the bank of MCQ questions and continue removing all Type 2 (K-type) questions. (Standard 5.3)
- GG Provide feedback to candidates who fail the Part 2 examination; for long cases by stating which aspects of the assessment was unsatisfactory, and for short cases where there is an overall assessment, which cases were unsatisfactory and why. (Standard 5.2)

6. The Curriculum – Monitoring and Evaluation	Overall this group of standards is MET
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*Commendation*

- I The College's involvement of a wide range of stakeholders, including other health professionals and the registrar group in curriculum development.

*Areas for improvement*

- HH In engaging consumers, consider the value of engaging with consumer groups of specific relevance to the College such as sporting teams. (Standard 6.1)
- II Continue to obtain feedback data from registrars, Clinical Training Supervisors and newly graduated fellows on a routine and anonymous basis in relation to all aspects of the training program and report on the findings. (Standard 6.1 and 6.2)

JJ Publicly report on graduate numbers in the College’s annual report or similar publication. (Standard 6.4)

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) is substantially met.

*Commendations*

J The College’s use of external observers to give independent feedback on the selection panel’s interview process and for scoring of CVs.

K The involvement of registrars in College governance including the Council, the Training Committee, and Research, Curriculum and Website Sub-committees.

*Areas for improvement*

Refer to recommendation 10.

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) is substantially met. Standard 8.2.1 (process and criteria to select and recognise hospitals, sites and posts for training purposes) is substantially met.

*Commendations*

L The College’s implementation of a feedback process for examinees to comment on their Part 2 examination experience.

M The College’s mentor program, the increasing number of registrars aligned with mentors and the way the College has encouraged this initiative.

*Areas for improvement*

Refer to recommendations 11, 12 and 13.

9. Continuing Professional Development (programs, retraining and remediation)	Overall, this group of standards is SUBSTANTIALLY MET
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Standard 9.1 (continuing professional development) is substantially met. Standard 9.3 is substantially met.

*Commendation*

NONE

*Areas for improvement*

- KK Develop a structured process to identify fellows who are participating in other CPD programs. (Standard 9.1.4)