

Royal College of Pathologists of Australasia

Executive Summary 2010

The AMC's *Assessment and Accreditation of Specialist Medical Education and Training Programs and Continuing Professional Development Programs: Standards and Procedures* outline the AMC procedures for accreditation of programs of study and training providers. They provide for the AMC to conduct follow-up assessments of accredited programs, in circumstances where the AMC has granted a limited period of accreditation or where the AMC wishes to review in detail the plans for a new development or major program change.

An AMC assessment team assessed the education, training and continuing professional development programs of the Royal College of Pathologists of Australasia (RCPA) during 2006. The 2006 assessment resulted in a decision by the AMC to grant accreditation to the College's education and training programs and the continuing professional development program for a limited period, until December 2010. The AMC placed conditions on the accreditation relating to reports to the AMC on progress in addressing the recommendations made in the AMC Accreditation Report.

The AMC resolved that before the expiry of this period of accreditation it would review the College's progress in relation to the key issues raised in the Accreditation Report with a view to extending the period of accreditation to the maximum period of six years, taking the accreditation until 31 December 2012. An AMC Team completed the review in September 2010, incorporating visits to a sample of the laboratories and hospitals in Australia and New Zealand accredited by the College for training as well as meetings with College committees, staff and office bearers. The Team reported to the 17 November 2010 meeting of AMC Specialist Education Accreditation Committee. The Committee considered the draft report of the 2010 assessment and formulated recommendations on accreditation within the accreditation options described in the AMC accreditation procedures. This report presents the Committee's recommendation on accreditation as endorsed by the AMC Directors and the detailed findings against the AMC 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 that provides it 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 Royal College of Pathologists of Australasia substantially meet the accreditation standards. There is no doubt that the College's training produces specialist pathologists of high quality, which in some disciplines is underpinned by sound educational and assessment processes. The College has recognised that many of the educational and assessment processes need improvement, and it is continuing to implement changes in the curricula, in assessment and in the educational support for trainees. Many of the changes

remain in the early stages of implementation and some of the College's plans need to be progressed urgently.

The November 2010 meeting of AMC Directors endorsed the accreditation report and resolved:

- (i) That the education and training programs and the continuing professional development program of the Royal College of Pathologists of Australasia be granted accreditation to 31 December 2012, subject to satisfactory progress reports to the Specialist Education Accreditation Committee and:
 - (a) by September 2012 evidence of substantial progress towards:
 - the implementation of assessment tools to reflect the educational objectives of the training program for all disciplines (Standard 5.1)
 - the College facilitating regular feedback to trainees on performance to guide learning with appropriate input from supervisors, and the College providing feedback to supervisors on trainee performance, where appropriate (Standard 5.2)
 - the implementation of a process across all disciplines for reviewing the validity, reliability and generalisability of all assessment tools used in discipline-based assessments and evidence that the assessment matrix maps appropriately against the generic and discipline-specific learning outcomes for all programs (Standard 5.3)
 - procedures in place for selection of supervisors who have demonstrated appropriate capability for this role (Standard 8.1)
 - processes in place to evaluate supervisor effectiveness, including feedback from trainees, and guidance for supervisors' professional development (Standard 8.1)
 - formalised and mandated training of examiners (Standard 8.1)
 - (b) by September 2012 evidence of:
 - appropriate resources and technical staff being provided to meet current and future educational activities (Standard 1.2)
 - constructive working relationships with all relevant health departments to promote the College's education, training and ongoing professional development activities (Standard 1.4)
 - processes to address issues of variation in curriculum development and trainee experience across the disciplines (Standard 1.5)
 - College processes to support longer term evaluation, review and subsequent changes to the curriculum and its components (Standard 1.5 and see Standard 6.1)
 - processes for regular review of the graduate outcomes against the community need for each training program, including those discipline training programs with very small numbers of trainees (Standard 2.2)
 - the implementation of the curriculum framework for the College's education and training programs in *all* pathology disciplines (Standards 3.1 and 3.2)
 - a systematic framework for program evaluation, with a particular focus on the use of evaluation information for program improvement (Standard 6.1 and see Standard 1.5)

- the College maintaining records on the outputs of the training program (Standard 6.2)
- increased transparency and consistency in the application of trainee selection processes, including in the use of the Basic Pathological Sciences examination as a selection tool, and in monitoring adherence to College selection guidelines, and to ensure that the College's role in appointment for training positions is clear to employers (Standard 7.1)
- improved mechanisms to inform trainees about the activities of College decision-making committees, including making appropriate use of the Trainee Advisory Committee (Standard 7.3)
- the establishment of a process with health services to ensure that the trainees can experience the breadth of the discipline in a variety of clinical settings (Standard 8.2)
- a process to monitor participation in recognised CPD activities and a process to counsel fellows who do not participate in ongoing professional development programs (Standard 9.1)

(ii) That the College provide a comprehensive report to the Specialist Education Accreditation Committee by September 2012 which will be the basis for the Committee to make recommendations concerning the ongoing accreditation of the College and its programs. Consideration of this report will entail discussion between AMC representatives and appropriate College committees, staff and office bearers.

Overview of findings

The findings against the AMC standards are summarised below. The Team's commendations in areas of strength and recommendations in areas for improvement are given below for each of the accreditation standards.

1. The Context of Education and Training (governance, program management, educational expertise and exchange, interaction with the health sector and continuous renewal)	Substantially meets the standards.
<p>Standards 1.1 (governance) and 1.3 (educational expertise and exchange) are met.</p> <p>Standard 1.2 (program management) is NOT MET. The continued development and enhancement of the curriculum and educational opportunities across the pathology disciplines will require substantial resources in the next few years, as well as the implementation of strategies to address the reluctance to change amongst fellows. Standard 1.2 can be addressed by evidence of appropriate resources and technical staff being provided to meet current and future educational activities by September 2012.</p> <p>Standards 1.4 (interaction with the health sector) and 1.5 (continuous renewal) are substantially met. The AMC requires evidence by September 2012 of:</p> <ul style="list-style-type: none"> • constructive working relationships with all relevant health departments to promote the College's education, training and ongoing professional development activities (Standard 1.4) • processes to address issues of variation in curriculum development and trainee experience across the disciplines (Standard 1.5) 	

- College processes to support longer term evaluation, review and subsequent changes to the curriculum and its components (Standard 1.5 and see Standard 6.1)

Commendations

- A. The ongoing leadership and dedication of the office bearers and staff in progressing the educational direction taken by the College.
- B. The establishment of the Lay Advisory Committee to provide advice and support to the RCPA Council regarding issues which affect the general community.
- C. The engagement with the Australian Government resulting in the securing of significant funding to support the development of the pathology workforce.

Recommendations

- 1. Ensure that the balance between central and regional governance of educational activities is appropriate to meet current and future needs.
- 2. Work with health service providers in Australia and New Zealand in relation to workforce training and development to ensure that the educational ideals of the College and the workforce priorities of health service providers are optimally balanced.

2. The Outcomes of the Training Program (purpose of the training organisation and graduate outcomes)	Meets the standards.
<p>Standard 2.1 (purpose of the training organisation) is met.</p> <p>Standard 2.2 (graduate outcomes) is substantially met. The AMC requires evidence by September 2012 of processes for regular review of the graduate outcomes against the community need for each training program, including those discipline training programs with very small numbers of trainees.</p>	

3. The Education and Training Program – Curriculum Content (framework; structure, composition and duration; research in the training program and continuum of learning)	Standards are NOT MET
<p>Standards 3.3 (research in the training program), 3.4 (flexible training) and 3.5 (the continuum of learning) are met.</p> <p>Standards 3.1 (curriculum framework) and 3.2 (curriculum structure, composition and duration) are NOT MET. The changes in curriculum and assessments since the 2006 AMC review are appropriate. They are well developed in some disciplines, but limited in others. These standards can be addressed by evidence of implementation of the curriculum framework for the College’s education and training programs in <i>all</i> pathology disciplines by 2012.</p>	
Commendations	

D.	The College’s development and dissemination of the ‘lab ordering module’.
E.	The College’s approach to flexible and part time training.
F.	The College’s partnership with the University of New South Wales linking undergraduate education and vocational training.
Recommendations	
3.	Re-evaluate the resources available to support the College’s educational role to ensure that they are sufficient to meet the accreditation standards across all discipline programs.
4.	Ensure that by 2012 all of the discipline training programs are consistent with the College’s own educational frameworks and meet the relevant AMC standards.
5.	Work with employers to support the wider adoption of clinical training networks and regional recruitment to training schemes, and to offer trainees employment for the length of their training, which will facilitate regional and rural training in pathology.
6.	In annual reports to the AMC, report on the integration of both technical and non-technical aspects of professionalism in the curricula.
7.	Ensure that the relevant College committees deciding on educational programs take into account the Quality Use of Pathology Project 2010 when determining graduate outcomes for each training program.
8.	Accelerate the development of a learning module on research methodology for access by all trainees.

4. The Training Program – Teaching and Learning	Meets the standards
Recommendations	
9.	Accelerate the development of structured educational materials, including those related to the non-technical skills, to benefit all trainees. These should include a range of resources delivered through online and interactive technologies, taking advantage of modern instructional design principles.
10.	Consider increasing the resources available to the education team specifically to enhance the design of the College’s educational website and to improve its utility as a learning adjunct to trainees in all disciplines.

5. The Curriculum – Assessment of Learning (assessment approach, feedback and performance, assessment quality, assessment of specialists trained overseas)	Standards are NOT MET
Standard 5.1 (assessment approach) is NOT MET. Despite progress in some disciplines, there are major components of the College training program where little progress has been made in implementing the appropriate recommendations from the 2003 external review of the College’s assessment processes. Standard 5.1 can be addressed by evidence of substantial	

progress towards the implementation of assessment tools to reflect the educational objectives of the training program for *all* disciplines by September 2012.

Standard 5.2 (feedback and performance) is NOT MET. Individual trainees only receive assessment feedback if they fail. The early source for performance feedback is the supervisors' reports and there are questions about how often issues related to performance are fully recorded on the forms. There was no evidence that the College provides feedback to supervisors on trainee performance. Standard 5.2 can be addressed by evidence that the College has made substantial progress by September 2012 towards facilitating regular feedback to trainees on performance to guide learning with appropriate input from supervisors and towards providing feedback to supervisors on trainee performance, where appropriate.

Standard 5.3 (assessment quality) is NOT MET but can be addressed by evidence of substantial progress by September 2012 towards the implementation of a process for reviewing the validity, reliability and generalisability of all assessment tools used in discipline-based assessments and by evidence that the assessment matrix maps appropriately against the generic and discipline specific learning outcomes for all programs.

Commendation

G The College's appreciable work in advancing the assessment practices for microbiology, in line with the recommendations of the 2003 Clarke report.

H The College's processes for the assessment of overseas-trained pathologists.

Recommendations

11. Develop a clear cross-discipline approach for the introduction of valid and reliable workplace-based assessments for relevant non-technical learning outcomes.
12. Strengthen the implementation of the supervisor training policy and send all supervisors a copy of the current supervisor manual and as they occur version-controlled subsequent amendments to the policy.
13. In annual reports to the AMC, report on phasing out the casebook assessment and replacing it with the proposed portfolio of case reports, research reports, posters and presentations.
14. Review the assessment feedback procedures in order to better meet the needs of all trainees.
15. Implement processes to ensure that supervisors are kept informed of trainee progress.
16. Address and implement the agreed recommendations of the Clarke Report on Assessment (2003) for all disciplines by 2012.
17. Develop further and publicise the assessment matrix for the pathology disciplines.
18. Implement a process for reviewing the validity, reliability and generalisability of all assessment tools used in discipline-based assessment, which is to be monitored by the Chief Examiners in each discipline.
19. In annual reports to the AMC, report on new policies and procedures developed to introduce flexible methods of assessing international medical graduates according to

their training, experience and area of practice.

6. The Curriculum – Monitoring and Evaluation	Substantially meets the standards.
<p>Standards 6.1 (ongoing monitoring) and 6.2 (outcomes evaluation) are substantially met. The AMC requires evidence of:</p> <ul style="list-style-type: none"> • a systematic framework for program evaluation, with a particular focus on the use of evaluation information for program improvement (Standard 6.1 and see Standard 1.5) • the College maintaining records on the outputs of the training programs (Standard 6.2) 	
<p>Commendations</p> <p>I. The high quality of the pathology trainees completing the training programs.</p> <p>Recommendations</p> <p>20. Develop a systematic framework for program evaluation, with a particular focus on the use of evaluation information for program improvement.</p>	
7. Implementing the Curriculum - Trainees (admission policy and selection, trainee participation in training organisation governance, communication with trainees, resolution of training problems and disputes)	Substantially meets the standards
<p>Standards 7.2 (trainee participation in training organisation governance) and 7.4 (resolution of training problems and disputes) are met.</p> <p>Standards 7.1 (admission and selection) and 7.3 (communication with trainees) are substantially met. The Team recognises that the College is not the employer of the trainees but considers that some procedural changes are required to meet the AMC standards for selection and to give greater transparency to the process. The AMC requires evidence by September 2012:</p> <ul style="list-style-type: none"> • of increased transparency and consistency in the application of trainee selection processes, including in the use of the Basic Pathological Sciences examination as a selection tool, in monitoring adherence to College selection guidelines, and to ensure that the College’s role in appointment for training positions is clear to employers (Standard 7.1) • of improved mechanisms to inform trainees about the activities of its decision-making committees, including making appropriate use of the Trainee Advisory Committee (Standard 7.3). 	
<p>Commendations</p> <p>J. The involvement of the Trainee Advisory Committee on College committees.</p> <p>K. The College’s establishment of an incident and complaints register.</p>	

Recommendations	
21.	Mandate for all appointment panels for training positions that a College fellow sits as a formal College representative, reporting to the College on the outcome of the selection process.
22.	Review the process for selection of trainees, increasing transparency to both trainees and supervisors. This review should address and clarify: <ul style="list-style-type: none"> ○ the place of the Basic Pathological Sciences examination as a requirement for entry to pathology training or as a component of training ○ the process for selection of those trainees who have been through the advanced standing pathway currently operating with the University of New South Wales.
23.	Set up mechanisms to enable the Trainee Advisory Committee to communicate with all trainees in a confidential way so that the views of the wider trainee community can be sought.
24.	Ensure that all supervisors are aware of their role in the management, and escalation of the management, of training problems.

8. Implementing the Training Program – Delivery of Educational Resources (Supervisors, assessors, trainers and mentors; and clinical and other educational resources)	Standards are NOT MET
<p>Standard 8.1 (supervisors, assessors, trainers and mentors) is NOT MET. The College plays a very limited role in the selection of supervisors. It has provided guidelines for the supervisor role and resources for supervisor support. These appear to be significantly underutilised with minimal overall uptake of supervisor training, and low levels of compliance with the College requirement for training every five years. Standard 8.1 can be addressed by evidence of substantial progress by September 2012 towards:</p> <ul style="list-style-type: none"> • procedures in place for selection of supervisors who have demonstrated appropriate capability for this role • processes to evaluate supervisor effectiveness, including feedback from trainees, and guidance for supervisors’ professional development • formalised and mandated training of examiners (Standard 8.1). <p>Standard 8.2 (clinical and other educational resources) is substantially met. The AMC requires evidence of the establishment of a process with health services to ensure that the trainees can experience the breadth of the discipline in a variety of clinical settings (Standard 8.2).</p>	
Commendations	
L.	The pilot of combined National Association of Testing Authorities and RCPA accreditation requirements.
M.	The College’s initiatives in evolving the measurement of the Clinical Learning Environment.
N.	The establishment of a Network Director of Training in anatomical pathology

training in New South Wales.

Recommendations

25. In annual reports to the AMC, report on the general implementation of the combined National Association of Testing Authorities / RCPA laboratory accreditation process.
26. Develop a process for evaluating yearly returns from training sites that takes into consideration the appropriateness of networked training and rotational arrangements.
27. Enforce the College's requirements for supervisor selection and training, and develop training modules to support consistency in application of workplace assessments and in supervisor reporting.
28. Take a stronger role in implementing a system for regular review of the performance of supervisors, incorporating regular feedback to supervisors on their work and progress as trainers.
29. Further develop support for State and Regional Councillors by appointing regional directors in all states and, where appropriate, in regions.
30. Formalise and mandate the training expected of examiners.

9. Continuing Professional Development (programs, retraining and remediation)

Meets the standards

Standard 9.1 (continuing professional development) is substantially met. The AMC requires evidence of a process to monitor participation in recognised CPD activities and a process to counsel fellows who do not participate in ongoing professional development programs by 2012.

Standards 9.2 (retraining) and 9.3 (remediation of underperforming fellows) are met.

Commendations

- O. The College's clear articulation of the program of approved CPD activities and its good communication to fellows about the continuing professional development program requirements.
- P. The College's fair and transparent approach to fellows who have been out of practice for some time or who require remediation.

Recommendations

31. Review the College's CPD policies to ensure they meet registration boards' standards, especially those relating to participation and audit.
32. Mandate adherence to CPD policies by fellows to ensure that they meet registration boards' standards, especially those related to participation and audit.
33. Review the College's retraining policies to ensure they meet Medical Board of Australia standards.

