

**MEDICAL AND DENTAL PROFESSIONS BOARD**

**ACCREDITATION OF FACULTIES/SCHOOLS OF MEDICINE FOR POSTGRADUATE  
(SPECIALIST) EDUCATION AND TRAINING PURPOSES**

**CRITERIA**

The Subcommittee for Postgraduate Education and Training (Medical) of the Medical and Dental Professions Board of the Health Professions Council of South Africa is tasked with the following functions :

***To prepare and implement a system of accreditation of faculties/schools of medicine at the level of postgraduate and specialist education and training, which shall include the following:***

1. To prepare and to maintain an accreditation/evaluation format.
2. To set and constantly review the minimum standards of medical education and training at these levels.
3. To determine the criteria for accreditation at the levels of postgraduate and specialist education and training and to specify -
  - a. core curricula for the different disciplines;
  - b. criteria with which the end product of postgraduate and specialist education and training should comply;
  - c. methods by which the end product of postgraduate and specialist education and training is to be evaluated.
4. With a view to paragraph 3, to continuously review such aspects as the –
  - a. education process followed;
  - b. education methods and techniques employed.
5. To set up and maintain a list of experts who are generally acknowledged and accepted as capable to undertake the evaluation of faculties/schools of medicine for accreditation purposes at the postgraduate and specialist levels.
6. To appoint teams of experts from such a list to undertake the full-scale evaluation of faculties of medicine for such accreditation.

7. To receive and review evaluation reports from the appointed teams of experts, and to take all required steps resulting from the evaluations.
8. To receive, review and take whatever steps are necessary to consider requests from faculties/schools pertaining to any aspect of their teaching programmes which might affect their future accreditation status.

***To consider, make recommendations and, where applicable, to deal with all matters of policy pertaining to the recognition of subspecialties and specialties in medicine, and the education and training in such subspecialties and specialties such as the following:***

1. Accreditation of teaching hospitals/facilities and satellite teaching hospitals/departments/facilities.
2. Accreditation of teaching units in subspecialties.
3. Matters pertaining to the duration of education and training, recognition of related disciplines, rotation and supervision of senior registrars (subspecialties) and registrars (specialties).

### ***Nature and purpose of the evaluation***

The evaluation of teaching programmes in the health sciences concerns all aspects of the institution, including the educational programmes, facilities and clinical as well as support services relevant to their teaching and learning activities. It should determine whether the teaching methodologies match the requirements of a changing medical environment. The evaluation may include all other aspects such as specialisation, research and continuing professional development.

Given the social responsibility required of the institutions, the evaluation should consider whether objectives are matched with available resources, the performance of the education and training and health care systems are satisfactory and whether students graduate with appropriate knowledge and skills.

The evaluation of a health-sciences programme is firstly an internal process. It must be understood as a collective task in which all members of the faculty must participate throughout. The opinions and experiences of all parties should be obtained, including those of students and graduates. Such institutional self-evaluation is vital and should always precede the on-site visit of external evaluators. This is necessary to ensure successful external evaluation and subsequent implementation of any recommendations.

### ***The evaluation process***

The evaluation of an education and training programme has three main components:

- a. Self-evaluation by the institution.
- b. External evaluation.
- c. Follow up of the evaluation reports.

## **SELF-EVALUATION**

### *Data collection*

Data collection is the first step in any evaluation exercise. It depends on the competence of the school's management, which enables the systematic acquisition of the quantitative and qualitative information necessary for any self-analysis and for the external evaluation. Success of the subsequent stages depends on the quality of the first stage.

Data on the following is to be submitted:

### **1. Hospital/Clinical Facilities**

- a. List of clinical and laboratory/investigative departments
- b. Beds per department
- c. Inpatients per year per department
- d. Investigative/operative procedures per year per department
- e. Outpatients per year per department
- f. Budgetary provision for academic/teaching hospital and additional staff
- g. Physical facilities for teaching and training

### **2. Each teaching department to provide the following:**

- a. Annual report
- b. 5 year record of entries and pass rate in national examinations
- c. Staff establishment with description of functional categories
- d. Consultant and teacher profiles
- e. Selection processes for registrar and junior staff appointments
- f. Duty rosters
- g. Description of service profiles and subspecialty units
- h. Description of teaching and training programmes
- i. Description of research activities
- j. Description of outreach and scientific links

### **3. Learning environment**

- a. Library
- b. Information support (Internet, computer databases etc)

### **4. Physical working environment**

- a. Accommodation
- b. Access and transportation

### *Self-evaluation report*

Self-analysis includes a critical examination of the results of the data collected by the institutional evaluation team covering all aspects of the faculty/school.

The conclusions and recommendations on their findings are then drafted and consensus is achieved. These should consist of identifying and describing the strengths and weaknesses of the programmes. Recommendations should also be based on the objectives of the institution, its social responsibilities and the impact of these responsibilities on the institution and the community.

### ***The self-evaluation report is forwarded to the external evaluators.***

The participation of students and graduates in the self-analysis exercise is essential. They should also produce their own evaluation report dealing with the aspects that most concern them, such as programme content, teaching methods, student life, and their professional experiences.

***Their report is forwarded directly to the external evaluators in order to minimise reticence and to encourage freedom of expression.***

## **EXTERNAL EVALUATION**

The purpose of the external evaluation is to validate the institutional self-evaluation at two levels, namely processes and outcomes. Other observations and findings relevant to the teaching programmes may also be made.

The self-evaluation report is submitted to the external evaluation team to study prior to their visit. The on-site inspection visit comprises the collection of additional information, formal and informal meetings with staff and students at all levels and visits to the teaching and training facilities. Meetings with other stakeholders such as representatives of the Ministries of Health and Education are desirable.

A team of four evaluators should suffice and include expertise in clinical, basic science, research and medical education and to be representative of the consulting, diagnostic, surgical and obstetrics and gynaecology disciplines.

### **1. *Structured interviews are conducted with the following:***

- a. Medical superintendent
- b. Dean
- c. Each head of department
- d. Head of nursing services
- e. Representatives of the registrars
- f. Representatives of non-head specialists
- g. Representatives of undergraduate students

## **2. *Inspection and description of facilities:***

- a. Outpatients
- b. Inpatient wards
- c. Operating theatres
- d. Labour wards
- e. Neonatal care unit
- f. Casualty Department
- g. Intensive care units
- h. Libraries
- i. Laboratories
- j. X-ray department
- k. Supporting and paramedical disciplines
- l. Community clinics and outreach facilities

## ***Evaluation Report***

This report consists of a statement of compliance with eligibility for accreditation; a summary of strengths and weaknesses and recommendations by the team of evaluators.

### **1. *Eligibility as postgraduate teaching Institution***

- a. Presence of all major clinical disciplines
- b. Full-time specialist staff in all major clinical disciplines
- c. Full-time registrars in an appropriate teacher:registrar ratio (not < 1:2) allocated exclusively to working in the education and training discipline
- d. Description of registrars' working time to include non-service work time dedicated to studying
- e. Independent academic existence for tertiary, but not necessarily superspecialist care
- f. Adequate ancillary, laboratory and investigative services for tertiary care
- g. Hospital profile must provide for training exposure in all components required for general specialist training in major clinical disciplines

### **2. *Adequate access to library and scientific databases***

Including major medical journals

### **3. *Scientific participation by the academic staff in major disciplines***

- a. Academic advancement (MD, PhD, presentations at major congresses)

- b. Research activity and publication record

#### **4. Successful academic management**

Audit of departmental activities

#### **5. Established success with postgraduate education and training**

- a. All university examinations must have major input from independent external examiners
- b. In comparison with national averages, similar numbers of trainees are entering and passing national exit examinations (Colleges of Medicine) within the prescribed time.
- c. All trainees demonstrate an understanding of and participation in research by presentation at national/international congresses and/or interdepartmental meetings

***At the end of the visit, the team presents a verbal report to the academic authorities, e.g. Dean and/or Head of the teaching institution, on the main observations and recommendations.***

The draft written evaluation report by the visiting team is forwarded to the dean/head of the faculty/school to ensure that it contains no error in the data or of interpretation. The evaluation team then finalises its report.

***The final report, amended and approved by all members of the team, is addressed to the Head of the teaching institution and copied to the Dean/Head of the faculty/school. This document is a confidential report exclusively for internal use.***

The final report and the comments on the report by the Dean/Head of the faculty/school and those of individual departments are then served to the full meeting of the Medical and Dental Professions Board. On consideration thereof, full accredited status or conditionally accredited status are granted and any other appropriate resolution pertaining to the relevant teaching institution's programme of postgraduate medical education and training are taken.