HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

PROFESSIONAL BOARD FOR MEDICAL TECHNOLOGY

GUIDELINES FOR THE VIRTUAL EVALUATION OF CLINICAL TRAINING FACILITIES FOR MEDICAL TECHNOLOGY

XXXXX 2021

DEFINITION OF TERMS

Accreditation	The approval and recognition of professional programmes of study by the accrediting body. It is the recognition of academic and clinical quality by an impartial body, in this instance, the HPCSA. Graduates of accredited professional programmes are eligible for registration with the HPCSA, a legal requirement to practice the profession in South Africa. Accreditation status is valid for 5 years.
Board	Professional Board for Medical Technology as established according to section 15(1) of the Health Professions Act no 56 of 1976.
Approved training facility	Public or private laboratories where learners receive their professional practice/clinical training during formal periods of study.
Criteria for virtual accreditation	Standards, specified by the professional board with which a clinical training facility must comply for online evaluation.
Evaluation	Verification of the elements of the HEI or clinical training facility to determine if it meets the requirements for the registered qualifications in respect of learning outcomes, purpose, assessment as well as accreditation guidelines to uphold the education and training standards of the profession.
Evaluation panel	A team of experts appointed by the board to evaluate a professional education and training programme and clinical facilities to determine whether it meets the criteria for programme accreditation. The panel members are external to the HEI and its accredited clinical facilities.
Minister	Minister of Health of South Africa.
Professional board	A Professional Board as defined in the Health Professions Act number 56 of 1974. In this document the Board will be the Professional Board for Medical Technology.
Programme	Any combination of courses (subjects/modules/ including WILL and/or other requirements leading to a professional qualification and registration with the HPCSA.
Programme accreditation	Determination by the professional board of whether a facility ‘s professional programme of education and training meets the criteria for programme accreditation for registration of its graduates with the HPCSA.
Programme evaluation	Processes undertaken by the board (once every 4 years) to assess whether a training facility meet the criteria for programme accreditation for education and training in the profession.
The Act	Health Professions Act, 1974 (Act No 56 of 1974) as amended.

1. INTRODUCTION

The Health Professions Council of South Africa (HPCSA) was established by the Health Professions Act, 1974 (Act 56 of 1974). In terms of section 3(f) of the Act, the function of the HPCSA is to control and exercise authority in all matters relating to the education and training of health care professionals -*subject to legislation regulating health care providers and consistent with national policy as determined by the Minister*. The HPCSA is the quality assurance body for the education and training in the professions within its mandate.

The Council has, in accordance with the Act, established professional boards for the different healthcare professions to maintain and enhance the dignity of the professions and the integrity of the persons practicing the professions. The professions of Medical Technology fall under the ambit of the Professional Board for Medical Technology (MTB) hereinafter referred to as the Board). To ensure that the dignity and integrity of the professions are maintained, the board has as its key role, to determine, promote and uphold the standards of education and training, while keeping registers for each profession.

In section 16(3) of the Act, Professional Boards are authorised to approve a clinical facility 's professional programme of education and training. This is achieved through the evaluation and accreditation process of the academic and clinical components of the programme and a determination by the Board of whether the set criteria and standards have been met. The process relies on and is underpinned by the clinical facilities' honesty and ethical integrity.

Clinical facilities may only allocate students to clinical training facilities/units that have been accredited by the Board. Each HEI should apply to the Board for the accreditation of the clinical training facilities to which they intend allocating students for work integrated learning (WIL) in a workplace setting. The accreditation of clinical facilities is valid for a five-year cycle after which it expires, and a re-accreditation is required. This applies to clinical facilities in both the public and private sector.

Two types of evaluations are conducted on the clinical training facilities namely, one for new applications and one for re-accreditation. Due to the declaration of the Covid-19 pandemic as a national disaster in 2020 and the implementation of a lockdown, the Board has resolved to conduct virtual **evaluation** of clinical facilities whose accreditations are due to expire as well as new applications for accreditation. The purpose is to reduce the movement of people within the clinical facilities. The use of a virtual evaluation approach will be reviewed once the lockdown is lifted.

The Board approved panel members will only visit the clinical facility for new applications but will make their decision whether to visit based on the documentation provided by the clinical facility in addition to online interviews with respective staff members on a set date that is convenient to all parties.

This document sets out the guidelines of the Board to support the virtual evaluation process leading to the accreditation of a clinical facilities falling within its mandate. The Board conducts evaluation and approval of educational institutions separately from the clinical training facilities/based on what is described as "delivery and assessment sites" in SAQA's *Standards and Guidelines for Providers.*

The guidelines set out below are intended to explain the process, roles and responsibilities of the various parties for a virtual evaluation of clinical training facilities.

2. PURPOSE: EVALUATION OF CLINICAL FACILITIES

The purpose of evaluation of clinical facilities is to promote excellence in educational preparation while assuring the public, that students of approved programmes are educated in a core set of knowledge and skills required for competent, safe, ethical, effective, and independent professional practice.

Re-evaluation requires the Board to ensure the ongoing, sustained quality of education and training programmes as a facet of public protection. The Act, and the Boards' regulations, criteria and standards identify basic elements that must consistently exist in all accredited education programmes and their respective clinical facilities.

3. VIRTUAL EVALUATIONS GUIDELINES WITHIN THE COVID PANDEMIC PERIOD

The coronavirus pandemic has suspended business as usual for both the HPCSA as well as for clinical facilities. To ensure continuity in the short term, the HPCSA will be restructuring its operations, which includes an adaptation to the way that evaluations will be conducted for programmes within its ambit. To this end the following guidelines have been included to incorporate a flexible approach which is a blend of virtual and on-site evaluations with reliance on the former rather than on the latter. The self-evaluation exercise and preparation of the self-evaluation report is similar except that in depth reporting on aspects generally examined at the site visits, will now be submitted electronically.

3.1. APPROACHES TO VIRTUAL/ONLINE EVALUATIONS -

Methods of conducting evaluations

1. Desk top review of documents (including self-evaluation reports) recorded **(**audio/ video) of information.
2. All information to be reviewed should reach the HPCSA's offices by dates to be communicated in advance (at least 30days before the evaluation) by the HPCSA's secretariat. Facilities should submit information using courier, email or drop-offs to reach HPCSA's offices at times stipulated by the Secretariat.
3. Video-taped information could include imagery of, among others, physical structures and equipment which ordinarily would have been inspected during physical visits.
4. Generally, Evaluation panel members will individually review submitted material over 2 days, following receipt from the HPCSA's secretariat and provide feedback of the Chairperson of the panel for consolidation.
5. Evaluation panel members may decide to meet physically for no more than a day to collectively review submitted information.

Virtual interviews/Video conferencing

1. Evaluation panels may choose to interview, remotely, identified stakeholders (including students, interns, wherever applicable) in training facilities, if, following the review of submitted information, there is need for additional clarity and/or insights to augment submitted information.
2. Standard videoconferencing platforms may be used, especially Microsoft Teams, which is the HPCSA's preferred platform (the platform can be negotiated with the Panel).
3. All engagements on virtual platforms will be recorded.
4. Evaluation panel members may choose to visit Clinical facilities for physical assessments, but these would be over limited periods, generally a day. Institutions will be guided on the dates of the online meetings as well details regarding the site visit.

4. ROLES AND RESPONSIBILITIES OF THE BOARD AND SECRETARIAT

The roles and responsibilities before, during and after the virtual evaluation will be discussed.

Pre-evaluation

- The Education and Training Division should provide the training laboratories with the application form for the Approval of Training Laboratories (Form 108b)
- The evaluation panel is appointed by the Education Training and Registration Committee (ETRC) from the pool of Board approved evaluators. The panel consist of two evaluators, one will be the appointed panel convenor. At least one evaluator should be in the category/ specialisation being evaluated.
- Letters of appointment are sent to the evaluators by the Board secretariat/committee coordinator.
- The duly completed application form, video and relevant documentation received from the training facility is sent to the evaluators once the evaluation team is appointed.
- In addition sites that qualify to be virtually evaluated need to submit a video of the training site.

During the evaluation

- The evaluation panel to monitor the evaluation process and to redress if necessary.
- Training facility to provide any additional, relevant documents or information as required by the evaluation panel.

Post-Evaluation

- The Education and Training Division will communicate the outcome of the Board to the facility.

5. ROLES AND RESPONSIBILITIES OF THE FACILITY

The facility, as the accredited provider, is responsible for ensuring the quality of the learning experience according to the requirements of the registered standards and qualifications. It is for this reason that the professional board expects all staff members at the facility to be familiar with the contents of the *Guidelines for Virtual Evaluation of Clinical Training Facilities/* MTB and the relevant appendices. Each member should have a clear understanding and differentiation of the roles played by the Board as far as the education and training of the future professionals is concerned.

Pre-evaluation

Responsibilities of the clinical training facility prior to the evaluation.

- The clinical training facility is responsible for completing the relevant sections of the application form and submit all the required documentation and video with the application form, to the Board.
- It is the responsibility of the training laboratory manager of the clinical training facility, to inform members of staff and students as to when the virtual evaluation and online interviews will take place.

- It is necessary to inform staff that the evaluation panel will need virtual access to staff and students for online interviews. A suitable online platform for the interviews must be provided.
- Staff members should be familiar with the contents of the application form as well as what is expected of them during the evaluation process.
- Staff members should be conversant with their role and responsibilities as far as the training of future professionals is concerned. This should be clearly indicated in their job descriptions.
- Staff members should allow students to be interviewed online in a private space by the evaluators without fear of victimisation.
- The laboratory manager of the clinical training facility should have copies of all relevant documentation ready in case the evaluators need to refer to it in the online interview. e.g. training records, detailed equipment records, full staff details, copy of student contract / MOU, copies of logbooks/clinical assessment books/Code of Conduct/ student duty rosters etc.

During the virtual evaluation and online interviews

- The selected departmental representative/s from the clinical training facility must be accessible and available during the online interview process to answer any questions that the evaluators may have.
- The evaluators must be permitted to conduct online interviews with the relevant staff members as previously agreed upon. For these interviews, the interviewee should be seated in a quiet, private space with no distractions.

Post-evaluation

- Secretariat to provide any necessary comments regarding the report to the Clinical facility once it is received from the Board.
- Training facility to implement any improvements arising from the Board's decision regarding the evaluation outcome. These will be communicated to the clinical facility by the Board in the form of an Improvement plan.

6. ROLES AND RESPONSIBILITIES OF THE EVALUATORS

Pre-evaluation

- Once the Board has appointed the evaluation panel, the convenor will contact the training laboratory manager of the facility to arrange a date and time for the online interviews that is convenient to all parties. The entire evaluation process must be completed as soon as possible and at least six weeks before the ETRC meeting, to be included on the agenda.
- The convenor must discuss the outline of the virtual evaluation process, with dates for the online interviews as well as the submission of any outstanding or additional documents and/or reports to the Education and Training Division, with the facility.
- The convenor will draft a schedule for the online interviews that is suitable for all parties and send to the facility. The convener should consult with the training laboratory manager of the clinical facility to confirm the schedule.
- The Secretariat must forward copies of the completed application form and all the relevant documentation submitted by the facility to the evaluators for assessment.

During evaluation process

- Both the appointed evaluators must peruse the application form and documentation submitted by the clinical facility being evaluated. This will also include the viewing of a video taken of the relevant sections of the clinical facility.
- The evaluators should communicate online and/ or telephonically to discuss the contents of the application form and its documentation to plan the interview questions and determine if any additional information is needed from the clinical facility. During the interview with the clinical facility's appointed representative, the evaluators should check that the following are suitable and meet the criteria for learner training:
    - Verify the accuracy of the completed application form
    - Confirm the number, type, accreditation status and working condition of equipment and relevant accessories.
    - Ascertain that the range of equipment will enable students to gain clinical practice and develop clinical competence in relation to the approved curriculum.
    - Verify procedures performed will allow students to gain exposure to and develop clinical competence in all areas of the curriculum. This will include verification of what the evaluators observe on the video. (The purpose of the video is to replace the traditional tour of the facility and any other sections/departments relevant to the clinical training of the learners).
- During the interviews with the staff members and students, the evaluators will:
    - Verify that appropriate and relevant training and demonstrations will be carried out on site.
    - Determine the level of clinical supervision and accompaniment of the learners by all members of professional staff.
    - Confirm the person/s responsible for management and supervision of students.
    - Ascertain the level to which the clinical training department promotes an atmosphere that is conducive to quality learning.
    - Verify that there is a system of recording procedures performed and clinical assessments in place for the students.
    - Verify that learner assessments include aspects of ethics, human rights and medical law.
    - Confirm that appropriate students contracts/ MOUs are in place.
- The following persons may be interviewed online during the evaluation process to verify or obtain relevant information relating to the students' clinical training:
    - Staff member responsible for the clinical training and welfare of students/ interns at the clinical training facility.
    - A sample of all levels of students/ interns.
    - Qualified practitioners who may have an impact on student training.
- The evaluators should ask questions that include, but are not limited to information about:
    - Management's willingness and support for student training.
    - Role of qualified practitioners in providing guidance to the students.
    - Role of the appointed clinical training supervisor.
    - Role and conduct of the appointed assessor/s.
    - Role of the specialists or any medical practitioners in the clinical education/training of the learners.

- Availability and accessibility of the required resources for students – e.g., syllabi, study material, internet access.
- Student contracts and/ or MOU.
- How the facility ensures that quality of training is maintained in the facility.

Post-evaluation

- After the online interviews, the evaluators communicate online and/ or telephonically to discuss the information obtained and will compile a report using the relevant reporting template which must be submitted to the Board.
- The clinical facility report needs to reflect the following:
  - Names of the evaluators.
  - Representatives from the clinical training facility who were consulted by the evaluators during the virtual evaluation process.
  - Names of persons who were interviewed and their designations. **However, it is important to note that all students interviewed need to remain anonymous.**
  - Information regarding the available equipment.
  - Handling of patient records and workloads.
  - The evaluators should also provide general comments about the facility in relation to student training.
  - A summary of the critical points noted during interviews with the different professionals and students.
  - Recommendations for accreditation in accordance with the rating below:

    Approved – meets the minimum criteria for all aspects of clinical training.
    Not approved – does not meet the criteria for approval and is not suitable for the clinical training of students.

- The reports must be signed by both the evaluators.
- both evaluators may compile the report, but the convener must check and ratify the report before submission to the Board. The relevant reporting template must be used.
- The report is submitted to the Board four weeks prior to a ETRC meeting, in order to be included in the agenda for that meeting.

7. FEEDBACK TO THE CLINICAL TRAINING FACILITIES

- The feedback of the evaluations will be issued by the Education and Training Division following the approval of the evaluation report by the Board.
- The feedback is sent to the relevant persons clinical facility.
- The feedback should reach the clinical facility within four weeks of approval by the Board.
- Accreditation certificate will be issued to the approved laboratories.

8. APPEAL BY THE FACILITY TO THE EDUCATION TRAINING AND REGISTRATION COMMITTEE OF THE BOARD

- Should there be any dispute or queries regarding the outcome of the accreditation evaluation, this should be addressed in writing to the Education and Training Division for the attention of the Chairperson of the ETRC.
- This should be done within thirty (30) days of receiving the outcome.