

2022

*Accreditation Framework for*

MEDICAL  
EDUCATION

OF MEDICAL  
TEACHING  
INSTITUTIONS

Policy Board  
Government of KPK



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## INTRODUCTION

Medical Education is an integral function of Medical Teaching Institutions (MTI) and the MTI Act necessitates delivery of quality education as per the highest standards. The Khyber Pakhtunkhwa Policy Board of Medical Teaching Institutions highly values patient safety and quality of healthcare delivery in the MTIs. It recognizes the importance of structures regulating delivery of education to future medical professionals and leaders.

For this purpose, the Policy Board is notifying the accreditation framework for Medical Education at Medical Teaching Institutions. This framework provides an expectation of minimum performance level by the governance, leadership, staff and students in all MTIs. The expectations are documented in this framework in the form of standards and measurable elements.

This framework has the following sections:

1. **Standards:** This section describes the minimum performance level expected from the MTI. For each standard, measurable elements are identified – specifying the evaluation mechanism for each standard.
2. **Accreditation Methodology:** This section describes how the standards are evaluated in an MTI.
3. **Scoring:** This section describes how standards are scored during the accreditation process.
4. **Baseline Evaluation:** This section identifies how an MTI can perform baseline evaluation for identifying its standing against the standards.
5. **Training and Orientation:** This section identifies the different types of trainings that each level of governance and leadership must have gone through to understand the requirements of the standards and their effective implementation
6. **Planning for Compliance:** This section identifies how planning process can be performed for ensuring that gaps identified during baseline evaluation are addressed.

Section 1

# STANDARDS



For any teaching institute, quality of its educational program reflects its performance. The Governing body is ultimately responsible for the selection and quality of its education program(s). The effective leadership, led by the Board of Governors and management, including hospital director, medical director, dean, nursing director, finance director and other departmental heads ensure planning, execution and continuous monitoring of its educational programs.

The following are a list of minimum standards to be complied by all MTIs



## STANDARDS

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### SECTION I: Role of Governance and Leadership

#### Standard 1

MTI Governance and Management ensures provision, approval and implementation of medical education and training programs.

- 1.1 MTI Governing body and the leadership decides provision of medical education, and ensures alignment of educational programs with the mission of the MTI.
- 1.2 MTI leadership and governance approves key performance indicators (KPIs) for medical education, training programs and ensures continuous documented monitoring of this data.
- 1.3 MTI leadership reviews medical education program(s) at least once every year. This review process and its outcomes are documented. To gauge the effectiveness of the program(s), the review process includes patient and staff satisfaction with the care provided under the program, among other key components.

#### Standard 2

MTI Governing body and leadership ensures adequate resources including required staff, technology, patient population and facility to support the goals of the medical education program.

- 2.1 MTI Governing body and leadership ensures adequate number of staff with relevant education, training and experience are available to meet the requirements of medical training program(s). The staffing plans and staff roles are evidence-based and documented.
- 2.2 MTI Governing body and leadership ensures adequacy of facilities, technology and other resources to support the delivery of medical education program.
- 2.3 MTI Governing body and leadership maintains documented evidence on sufficiency of the relevant patient population to fulfil the requirements of medical education program.

#### Standard 3

MTI ensures standardized process for identification of teaching staff, and definition of their role in clinical and educational settings.

- 3.1 MTI has standardized process for identification of all teaching staff in all clinical settings. Identification includes their clinical and educational titles.
- 3.2 MTI has a structured process to ensure its clinical staff is informed on the current list of teaching faculty and staff, their authorities, responsibilities and accountabilities.
- 3.3 MTI has a structured mechanism to ensure credentials and titles of clinical staff and teaching faculty are reviewed at regular intervals. Any change in privileges, credentials and/or titles is timely communicated to relevant stakeholders to ensure up to date information is available for staff and patients.



## SECTION II: Students and Trainees

### Standard 4

MTI has a structured process defining frequency and intensity of supervision required for every level of student and trainee involved in care provision.

- 4.1 MTI defines and ensures supervision required for each level of medical student and/or trainee in every specialty. The process of supervision level takes into account the demonstrated competency of medical students and trainees. The supervision is consistent with the MTI policy, programs and safety of patient care.
- 4.2 Hospital maintains a complete current list of medical students or trainees. For each student or trainee, there is documentation of enrollment status, relevant certification(s) and/or license(s) required. This also takes into account any factors that may influence the level of supervision.
- 4.3 Medical records maintained by trainees are reviewed regularly to ensure the completeness of documentation.

### Standard 5

Medical students and trainees comply with the hospital policies and the care is provided in accordance with the quality and patient safety standards.

- 5.1 All students and trainees go through a comprehensive orientation plan before joining their respective departments. Orientation plan is documented and compliance is monitored.
- 5.2 MTI ensures that the medical students and trainees are aware of ongoing healthcare quality and patient safety programs and projects, and their participation is evident in such programs.
- 5.3 For MTI's quality monitoring, the medical students and trainees are included in data collection processes specifically related to clinical indicators, pathways implementation and incidents.

### Standard 6

Medical trainees in the MTI are authorized to provide services through the MTI's established relevant structured processes. The structured process may include; credentialing, privileging, job specification and/or other similar processes.

- 6.1 MTI hires or engages the trainees through credentialing, privileging, job specification, or other relevant process.
- 6.2 MTI decides the circumstances under which the medical trainee is allowed to provide certain level of services.
- 6.3 MTI evaluates the outcomes of the services provided by the medical trainees.

Section 2

# METHODOLOGY



## ACCREDITATION METHODOLOGY

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In order to evaluate an MTI on this framework, the policy board shall appoint inspectors who would evaluate the MTI based on a pre-defined checklist through an online electronic application.

However, before the actual accreditation, following steps are to be taken to provide support to the MTIs for effective implementation of the standards:

### Baseline Evaluation

The standards will be shared with all the Board of Governors of MTIs. The Board of Governors and the management of MTIs shall perform a baseline self-evaluation. The baseline evaluation shall also include collection of evidence of compliance with each of the standard.

### Training and Orientation

The Policy Board shall arrange for training and orientation for members of the Board of Governors and management of MTIs. The training shall focus on various means that can be adopted for compliance with the standards based on international best practices. Pertinent audience for the training shall include the members Boards of Governors, Deans, Medical Directors, Hospital Directors and Nursing Directors. Secretaries to the Board of Governors shall also be part of the training program.

### Plan for Compliance

Once the leadership of the MTI are trained on the requirements and approaches to compliance, the MTIs shall be required to update the baseline evaluation performed. Moreover, a plan for compliance is to be required to be submitted to the Policy Board. The plan shall have to identify concrete steps that the MTI is planning to take, including the timelines for each of the step. This would give a clear timeline to the Policy Board for 100% compliance by the MTIs. A template for such plan is attached in Annexure A.

At the receipt of the plans, the Policy Board shall issue a calendar of the evaluation of the MTIs.

### Evaluation Methodology

In order to evaluate an MTI on the standards, Policy Board shall nominate inspectors who will verify compliance. For the evaluation, the inspector will evaluate:




1. **Self-Assessment:** The inspector will identify whether the self-assessment done was comprehensive to encompass all the standards identified in the accreditation framework. Moreover, the inspector will identify whether the self-evaluation exercise was an effective and collaborative exercise where system gaps are identified.
2. **Plan:** The inspector will identify whether the plan for compliance is indeed based on the self-assessment. Moreover, the inspector will identify whether the tasks identified in the plan are completed in a timely fashion.
3. **Inspection:** The inspector will evaluate the compliance level of the MTI against each of the standard. The inspector, after going through the evidence of compliance for each of the



standard, shall mark each standard as either:

- a. *Met*: When all the requirements of the standard are met
- b. *Partially Met*: When few of the requirements of the standard are met, but not all
- c. *Not Met*: When the requirements of the standards are not met.

Based on the results of the MTIs, each of the MTI shall be classified into the following categories:

Category	Description
 Green	MTI scores more than 90% on the evaluation by the inspector and is meeting timelines in the strategies identified in the improvement plan
 Yellow	MTI scores more than 60% on the evaluation but less than 90% by the inspectors and is meeting timelines in the strategies identified in the improvement plan.  OR  MTI scores more than 90% on the evaluation by the inspectors but is <b>not</b> meeting timelines in the strategies identified in the improvement plan.
 Red	MTI scores less than 60% on the evaluation by the inspectors.

# ANNEXURE

## Accreditation Framework for Medical Education

#	Accreditation Standard	Deficiency Identified	Action(s)	Completion Date
1.	ME.1.2	The data for selected indicators was inadequate.	<ul style="list-style-type: none"><li>- Refresher training of data entry personnel</li><li>- Weekly update report shared to the leadership</li><li>- Monthly report shared with KP Policy Board Secretariat</li></ul>	9 <sup>th</sup> February 2022
2.	...	...	...	...
3.				