

External Accreditation and Learning Outcomes: Managing the Process

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Learning Outcomes: Practically Speaking

April 22-23, 2013

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Purpose

- Explore best practices for managing the accreditation process for professional programs including
 - The assessment of competency based outcomes as established by the accrediting body while still satisfying the requirements of the MTCU Program Standards
 - Evaluation methods by which the students and faculty are engaged in the teaching/learning process.
 - The sharing of a recent accreditation story

Accreditation and Learning Outcomes: How they Intersect

Governing Body

Ontario College Quality Assurance Service

- Program Quality Assurance Process Audit (PQAPA) who reports to OCQAS based on the Ministry approved Credentials Framework

Accreditation

- Regulatory bodies
- Accreditation Canada provides assistance



Ontario College Quality Assurance Service

Service de l'assurance de la qualité des collèges de l'Ontario

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How they Intersect

PQAPA

- A program quality management system that identifies and rectifies weaknesses, and facilitates the evolution of the program to deliver/maintain its relevance (PQAPA, 2012)

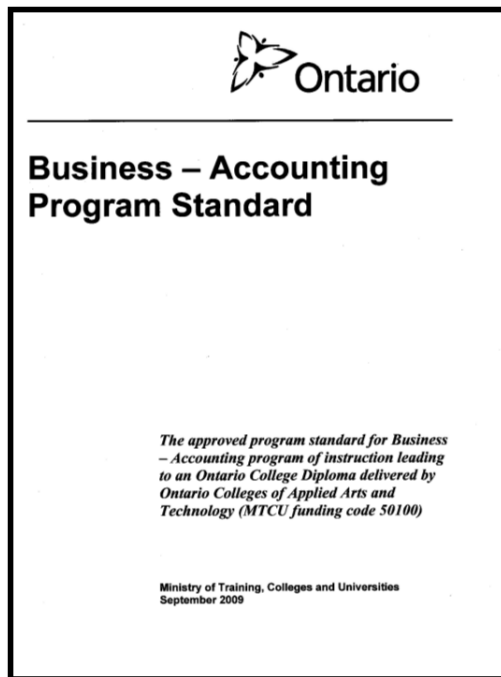
Accreditation

- Independent judgment about whether an institution and/or program meets predetermined standards of quality
- Recognized process of validation
- Rigorous external evaluation process that comprises self-assessment against a given set of standards, and the award or refusal of accreditation status

Approach/Quality Concept

Credentials Framework

- Outcomes based



Accreditation

- Competency based
- Evidence based
- Complement internal program evaluation and improvement

Purpose

Program Review

- Review programs, courses, and academic standards
- Monitor improvements following the review
- Systematic measurements of indicators that program outcomes are being met
- Ensure changes to curriculum and current

Accreditation

- Ensure national standards for educational programs contribute to the competency of graduates for entry into professions at both provincial and national levels

Examination Areas

Program Information

- Provincial standards
 - Skills and knowledge of entry level practitioner
 - Reliable demonstration
- Program outcomes
- Course outcomes

Accreditation

- Relevance
- Students
- Resources
- Integration
- Program evaluation

(CMA, 2011)

Vocational Learning Outcome

The graduate has reliably demonstrated the ability to

1. Practice in a professional manner.

Elements of the Performance

- ▼ Understand the legislated responsibilities of self-regulated professions and the role that the regulatory body has in protecting the public
- ▼ Understand the role that professional associations have in promoting the profession
- ▼ Understand how societal and professional efforts can be directed toward achieving a healthier society and quality health care and services
- ▼ Be sensitive to diversity*
- ▼ Conduct oneself in an ethical manner



Respiratory Therapy Program

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Program Mapping

PROGRAM MAPPING Respiratory Therapy RST2										
	LEVEL FIVE		LEVEL SIX			LEVEL SEVEN		LEVEL EIGHT		
PROGRAM VOCATIONAL LEARNING OUTCOMES	RESP-5014 Clinical Theory 1	RESP-5009 Clinical Practicum 1	RESP-5015 Clinical Theory 2	RESP-5011 Clinical Practicum 2		RESP-5012 Clinical Theory 3	RESP-5013 Clinical Practicum 3	RESP-5016 Clinical Seminars	# OF COURSES EVALUATING THE OUTCOME	TOTAL FOR PROGRAM
1 - Introductory										
2 - Intermediate										
3 - Advanced										
The graduate has reliably demonstrated the ability to: (Source: MTCU Code 61615)										
1. Practice in a professional manner.	2	2	2	23		3	3		6	14
2. Practice competently, safely, and effectively in diverse practice settings*.	2	2	2	23		3	3		6	20
3. Communicate effectively with clients* and health care team members.		2		23			3		3	14
4. Participate as a team member to support clients** achievement of their health outcomes.		2		2			3		3	14
5. Assess clients* in a comprehensive manner.	2	2	23	2		3	3		6	25
6. Collect and interpret information to plan, implement, and evaluate outcomes-based* practice.	2	2	23	23		3	3		6	19
7. Select and use a variety of respiratory* modalities to support clients** achievement of their health outcomes.	2	2	23	23		3	3		6	25
8. Collaborate with clients* and health care team members to develop, implement, and evaluate clients** learning plans.		2		23			3		3	10
9. Integrate theory, principles, and concepts into respiratory* practice.	2	2	23	23		3	3		6	24
10. Incorporate research theory into practice.	2	2	23	2		3	3			
TOTAL # OF OUTCOMES EVALUATED BY EACH COURSE	6	9	6	9		6	9	0		
V = Vocational Courses E = Essential Employability Skills Courses										
GM = General Education (mandatory) G = General Education (elective)										
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Course Mapping

2011 RESPIRATORY THERAPY NATIONAL COMPETENCY PROFILE:

COMPETENCIES

Course: _____ RESP-1018, THEORY of EQUIPMENT _____

Delivered: Unit/Week	Com p- Ref. #	Competency Details	Course taught in Level <u>RST4- 1:</u> Level taught to - 1–Introductory 2–Intermediate 3–Advance	Teaching Methodolog y: D - Didactic L – Low Fidel H – High Fidel C – Clinical	Method of Evaluation: (e.g., Written exam, scenario, presentation, essay) Value/Weight?	Reference(s):	Assessment tool (if applicable):
STATEMENT OF COMPETENCE: 1. PROFESSIONALISM (PROFESSIONAL CONDUCT)							
	1.1	Use professional and respectful language, behavior, and attire	1	D	W: M-C/S-A; participation	CRTO: Standards of Practice	
	1.2	Demonstrate support and caring towards patients, co-workers and others					
	1.3	Adhere to scope of practice limitations	1	D	W: M-C/S-A; participation	CRTO: Standards of Practice	
	1.4	Adhere to professional medical, legal and ethical guidelines/regulations	1	D	W: M-C/S-A; participation	CRTO: Standards of Practice	

Competency Profile

Clinical Applications III	4S	4S	4S	4S	2S		2S	2S	2S	2S	2S	9S	6S	9S	3S	4S	9S	2S	70/70
Level 4																			
Advanced Pathophysiology II	1D	1D	4D				2D	4D	2D				2D	2D			2D		20/45
Cardiopulmonary Pharmacology			2D	1D					9D						10D			3D	25/45
Clinical Aspects of Ventilatory Management		10S	10S					10S						30D					30+30/60
Orientation to Clinical Experience 2	4&2 D&S	4&2 D&S	4D	2&2 D&S	2&2 D&S	2D	2D	3S											22&8/30
Neonatal and Pediatric Respiratory Care	1D	1D	4D					4D	4D	2D			3D	8D	6D		3D	4D	40/60
Clinical Applications IV	6S	6S	6S	6S	2S		4S	6S	4S	4S	4S	2S	4S	9S	3S	1S	1S	2S	70/70
Level 5/6/7																			
Clinical Theory I	6D	4D	7D	8D	4D	5D	3D	10D	6D	5D	6D	2D	5D	7D	6D	7D	7D	2D	100/100
Clinical Practicum 1	20C	20C	20C	15C	5C		15C	30C	10C	15C	20C	15C	20C	30C	15C	13C	10C	2C	275/275
Clin Theory 2	4D	2D	7D	6D	4D	5D	3D	8D	8D	5D	6D	6D	5D	7D	8D	7D	7D	2D	100/100
Clinical Practicum 2	15C	15C	10C	10C	8C		15C	20C	15C	20C	25C	15C	20C	40C	15C	15C	15C	2C	275/275
Clin Theory 3	10D	6D	14D	14D	8D	10D	6D	18D	14D	10D	12D	8D	10D	14D	14D	14D	14D	4D	200/200
Clinical Practicum 3	35C	35C	30C	25C	16C		25C	50C	25C	34C	45C	36C	32C	70C	30C	26C	30C	6C	550/550
Total Hrs	157	145	170	120	74	46	90	237	138	141	164	115	135	294	123	100	129	42	
Didactic	79	59	90	61	48	48	33	112	71	52	58	38	49	136	63	41	62	22	1122
Simulation	26	34	28	24	7	0	8	29	17	20	16	11	14	18	6	5	12	10	285
Clinical	70	70	60	50	29	0	55	100	50	69	90	66	72	140	60	54	55	10	1100

Detailed Content

STUDENT COURSE INFORMATION

FANSHAWE COLLEGE OF APPLIED ARTS AND TECHNOLOGY
HEALTH SCIENCES
SEPTEMBER 2012

RESP-1018 THEORY OF EQUIPMENT

Vocational Course Learning Outcomes:

Upon successful completion of this course, the student will be able to:

1. Discuss the therapeutic indications for medical gases as identified. (NCP 4.8/4.9/9.7/9.8/18.3)
2. Identify and describe medical compressed gas cylinders and bulk storage and distribution systems with regard to identification, construction, regulation and safety features, transport and storage. (NCP 4.8/4.9/9.7/18.3)
3. Identify and describe pressure reducing valves and flow metering devices with regard to identification, construction, principles of operation, regulation and safety features, and therapeutic/clinical applications. (NCP 4.8/4.9/9.7)
4. Discuss the use of oxygen gas as a therapeutic intervention with regard to indications, contraindications, toxicity and regulation and safety. (NCP 9.7/18.4)

Mapping 2011 National Occupational Profile

“I do hope there’s an opportunity for you to share this work down the road, both to provide appropriate recognition for work done well but also to share what may very well be a best practice for curriculum mapping in RT programs across Canada.”

Kevin Taylor, Registrar at the College of Respiratory Therapists of Ontario and member of The National Alliance of Respiratory Therapy Regulatory Bodies (December, 2012)

Paramedic Program



Curriculum Implications Arising from Accreditation

Our story...



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Why Become Accredited?

- Often - no choice
- Increase portability for graduates
- Improve transfer options for graduates
- Enhance marketing opportunities
 - “Now CMA approved”
- Implies higher quality
- Apply critical lens to every aspect of program curriculum



Our experience...



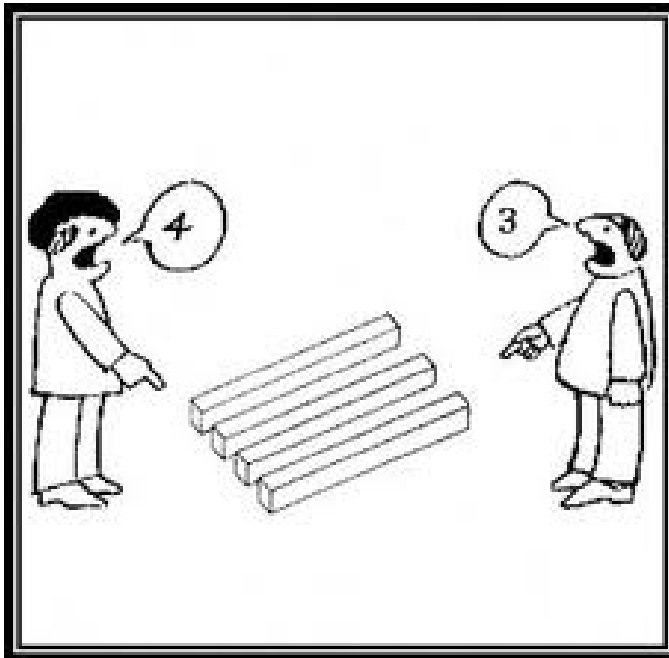
Fanshawe College Primary Care Paramedic – NOCP Cross Reference

Area 4 Assessments and Diagnostics

	Course Code Academic Understanding	NOCP – PCP	Simulated Setting	Clinical or Field Preceptorship Setting
	PARA-1001 PARA-3001 PARA-1003 PARA-3003	Perform assessment techniques for neurological illnesses and injuries.		
	PARA-1001 PARA-3001 PARA-1003 PARA-3003	Adapt assessment techniques to neurological history findings.		
4.3.e Conduct respiratory system assessment and interpret findings.		P		FLDP-5001
	PARA-1001 PARA-1003	Explain the pathophysiology of specific respiratory illnesses and injuries listed in Appendix 4B.		
	PARA-1001 PARA-1003	Apply assessment techniques specific to the respiratory system.		
	PARA-1001 PARA-1003	Evaluate findings related to the etiology, pathophysiology and manifestations of the respiratory illnesses and injuries listed in Appendix 4B.		
	PARA-1001 PARA-1003	Perform assessment techniques for respiratory illnesses and injuries.		
	PARA-1001 PARA-1003	Adapt assessment techniques to respiratory history findings.		
4.3.f Conduct obstetrical assessment and interpret findings.		S	PARA-5001	
	PARA-3004 PARA-5001	Explain the pathophysiology of specific illnesses and injuries to the female reproductive system listed in Appendix 4B.		



Evaluation Paradigm Shift



Achievement of Competencies Primary Care Paramedic

Student:

Based upon and referenced to the National Occupational Competency Profile / Paramedic Association of Canada



Area:	Competent		Competent		Competent		Competent		Theory		Not Comp.		Final Signature / Comments
5. Therapeutics	PCR	Initial	PCR	Initial	PCR	Initial	PCR	Initial	PCR	Initial	PCR	Initial	
P - 5.7.b Immobilize suspected fractures involving axial skeleton.	MAR 1 2010	9	12	54	18								TCL Feb 24, 2010
S - 5.8.b Follow safe process for responsible medication admin.		5	12	57	18								March 2, 2010 TCL MAR 7-1-2010
S - 5.8.c Administer medication via subcutaneous route.	Feb 15, 2010	17	Feb 16, 2010	17									Feb 16, 2010 TCL MAR 7-1-2010
S - 5.8.d Administer medication via intramuscular route.		5	15	58	11	March 2, 2010	11						March 2, 2010 TCL MAR 7-1-2010
S - 5.8.b Administer medication via sublingual route.	40	12	57	12	March 2, 2010	12	March 18, 2010	B3					MAR 7-1-2010 TCL March 2, 2010
S - 5.8.j Administer medication via oral route.	40	11	March 4, 2010	17			March 18, 2010	B4					MAR 7-1-2010 TCL March 18, 2010
S - 5.8.i Administer medication via inhalation.		8	12	18	11								Feb 5, 2010 TCL MAR 7-1-2010

Patient Call Report number must be included with each entry.

Program professor random cross-check validation performed? (Date and Signature):

Thank you for taking the time to assist with the initial education of these Primary Care Paramedic students. For more information on these competencies, please visit www.paramedic.ca. In the event of a critical performance error or health and safety concerns please contact Sherry Jacklin at 519-645-3467 (pager).

Last updated: January 5, 2010

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Meeting the Rigours of an Accreditation Model

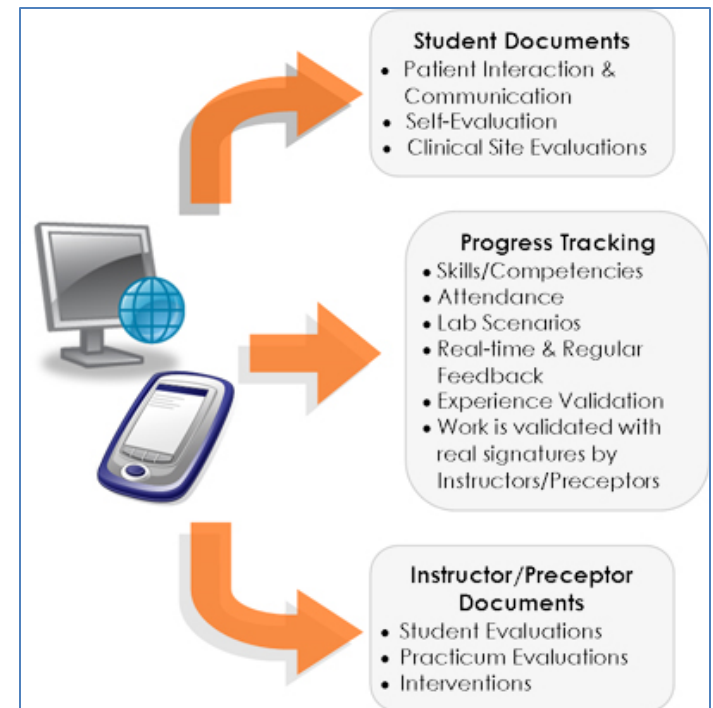
- Increased quantity of equipment
- Hired several additional staff
 - Reduced Faculty : student ratio
 - Employ technicians (TA`s)
- Now on our third tracking process
 - End of term
- Redesign lab (simulation) classes
- Re-define terms of field practice
 - Competency vs Hours

More Lessons Learned

- Impact on faculty
 - ``I check off boxes more than I teach``
- Required an ever greater buy in from community partners (e.g., hospitals, clinics, ambulance services)
 - Involve them in the process
- Expanded training programs for preceptors
- Increased support for preceptors

Still Learning...

- Dedicated support staff
- Utilization of technology to improve process
 - Electronic tracking systems
- Sign offs vs learning
- Centre for Academic Excellence to support accreditation



As we get closer to cocktail hour...

- Yes, I would do it all again!
- Leverage enhancements for your students
- Greater degree of assurance that our students ``have reliably demonstrated the ability to...``
- Connect with others

CONTACT INFORMATION:

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