



National Study to Develop Recommendations for Social Accountability of Medical Schools in Turkey

**The Association of Evaluation and Accreditation of Medical Education
Programs**

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Social Accountability of Medical Schools

There is a large gap between the health resources available in the world and the needs of people. Medical education and medical schools has traditionally focused more on the diagnosis and treatment of diseases than on community-oriented approaches, and this focus has led to a specialist-oriented model in today's healthcare system. In spite of the increasing specialization and medical developments, inequalities in health still continue and filling the needed health services gap with appropriately tooled medical graduates remains an important problem (1, 2). These inequalities, coupled with the increasing burden of chronic diseases, have emphasized the need for medical schools to be socially accountable (2,3)

In 1995, Boelen and Heck defined the concept of social accountability for WHO as: *“the obligation of the faculty to direct their education, research and service activities toward addressing the priority health concerns of the community, the region, or nation they have a mandate to serve”* (4). The priority health concerns are to be identified jointly by governments, health care organizations, health professionals and the public (4, 5, 6, 7). This definition emphasizes that medical schools should not only improve ways to educate medical graduates in the knowledge and skills relevant for their work that will have a positive impact on people's health but also to be change agents for a more efficient, equitable and sustainable health system.

Social obligations of medical schools are defined at three levels: social responsibility, social responsiveness and social accountability. These concepts are often used as synonyms to the social obligations of the school but in reality, all have different and special meanings. Social responsibility refers to the social mission awareness of the organization. Socially responsible schools recognize that they have duties to meet the needs of society. The school recognizes that society plays a role in defining health services. In education, the school reflects this situation to the courses where public health policies and health determinants are included (3, 8). At the level of social responsiveness, schools conduct activities that respond to the priority health needs of the society by directing education, research and service activities (3). Schools focus on specific competencies that address health needs of the society. Socially responsive schools are identified with students who learn within the community and observe or participate in health-related activities (3). Social accountability is the highest level, encompassing all levels of social obligations. Socially accountable medical schools go beyond responding to needs, and foresee the health needs of society and work with the community and key stakeholders to tailor training programs as such (5). With these actions, schools have the opportunity to determine the actions' impact on the service provided by their graduates together with the impact on health system performance and the health status of the population and how they are reflected in the health

outcomes (3). Socially accountable medical schools are committed to ensuring that human resources for health are appropriately planned and graduates are placed in appropriate working environments (8). The relationship between the three levels of social obligation is shown in Figure 1 (1, 9).

	Social obligation scale		
	Responsibility	Responsiveness	Accountability
Social needs identified	Implicitly	Explicitly	Anticipatively
Institutional objectives	Defined by faculty	Inspired from data	Defined with society
Educational programs	Community-oriented	Community-based	Contextualized
Quality of graduates	Good practitioners	Meeting criteria of professionalism	Health system change agents
Focus of evaluation	Process	Outcome	Impact
Assessors	Internal	External	Health partners

Figure 1: The Social Obligation Scale

If the social accountability of medical education is to be more than a rhetorical ideal, it must lead to measurable results, but also be observable at the social level and reflected in the attitudes of graduates and educators (10). Although some accreditation systems ensure attention to social accountability or important aspects, unfortunately many medical schools have not yet undergone an accreditation process. Assessments made within the framework of standards focusing solely on the faculty part of the medical education programs fail to address the social accountability of medical schools (8).

The Study to Develop Recommendations for Social Accountability of Medical Schools in Turkey

The Association of Evaluation and Accreditation of Medical Education Programs (TEPDAD-Turkey) planned a study to elicit determine national recommendations for the social accountability of medical schools to guide and support medical schools in developing a capacity for social accountability. The study was completed in two stages.



Stage 1: Developing recommendations for Socially Accountable Medical Schools in Turkey, collecting expert opinions.

A *Delphi* technique was used at this stage. An open invitation was sent the deans and faculty of medical education departments of medical schools that have completed the accreditation process, TEPEAD members, related specialty associations (Medical education, Public Health and Family Physicians) and Turkish Medical Association Medical Education Council to participate in the study. Seventy-seven experts accepted the invitation were included and 61 (79%) of them completed the questionnaire.

Three open-ended questions taken from the Global Consensus for Social Accountability of Medical Schools (<https://healthsocialaccountability.org>) were electronically sent to these experts in medical education and responses were evaluated:

1. How should a medical school improve its capacity to respond to future health challenges in the society?
2. How could this capacity be enhanced, including the use of accreditation systems for self-assessment and peer review?
3. How should progress towards this end be assessed?

At the first round of the Delphi study, 61 (79%) of the invited experts completed the questions. Open-ended responses were coded by the TEPDAD social accountability working group members. A consensus was obtained in two discussion sessions and main themes are determined. After first round, expert opinions were collected in two consecutive rounds. All participants of the first round completed other two rounds. At the end of these three rounds 63 recommendations were classified under 5 themes.

Stage 2: The recommendations collected during the first stage were reviewed in a consensus workshop

An open invitation was sent to deans of all medical school in Turkey and members of the institutions who completed the Delphi study for a consensus workshop convened on March 8, 2019. 68 members from 39 different institutions including the Deans' Council of Medical Schools, experts from medical schools, Turkish Medical Association, related specialty associations and public representative participated in the workshop. At the end of the workshop 54 recommendations were classified under the five themes identified in stage 1.



Recommendations for Social Accountability of Medical Schools in Turkey

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Tıp Eğitimi Programları Değerlendirme ve Akreditasyon Derneđi

THEME 1. FOCUSING ON THE HEALTH NEEDS OF THE SOCIETY

Medical schools have the responsibility to train physicians who will meet the health needs in the context of the population structure, social, cultural and environmental characteristics of the whole society, primarily in the region where they are located.

Medical schools are responsible for

1. Preparing graduates to be familiarized with the community which they will serve in the future
2. Identification of social, economic and cultural health determinants,
3. Describing the institutions and their functioning,
4. Determining the roles and responsibilities of health workers, and
5. Enhancing health organization and policies of the country,

Therefore, the medical school directs education, research and service activities in line with the health priorities of the society. It contributes to research aimed at identifying current and future health problems and needs of society. In light of the findings obtained, it creates opportunities for cooperation by establishing communication and cooperation with all health institutions and organizations in the region and country and contributes to the development of solutions for the health problems of the society. This can be achieved by predicting the health needs of the country, providing services effectively on time, ensuring graduates are employed in appropriate places and by creating public awareness related to health promotion and prevention.

Socially accountable medical schools consider the needs of the society in planning and implementation of education, research and health-care. Social accountability ensures the well-being of people by working with main stakeholders such as health care professionals, health care providers, health service organizations, health insurance agencies, policy makers and civil society. Medical schools aim to contribute to the development of the health system by defining the current and future health problems and needs of the society, educating the health workers of the future, developing the research agenda and providing efficient and effective health services with qualified graduates capable of working on health determinants.

THEME 1. Recommendations related to Focusing on Health Needs of the Society

Medical schools need to;

- 1.1** be aware of the environmental, demographic, social and cultural changes of the region and the country they serve.
- 1.2** create opportunities for research to determine the health needs of the society they serve regionally, nationally and internationally.
- 1.3** collaborate with the health stakeholders to meet the health needs of the society.
- 1.4** monitor the health indices and generate policy recommendations for the future needs.
- 1.5** contribute to the health policies related to the social determinants of health besides prevention and treatment of diseases and act as leaders for policy development.
- 1.6** inform the society about the factors affecting health.



THEME 2. HEALTH SERVICE DELIVERY

Health services include all planned activities to protect and improve the health of the individual and society, to treat patients, to ensure that the disabled people can survive independently.

Medical schools aim to contribute to the physical, mental and social well-being of individuals and maximize society's "well-being and health" with the health services they provide.

Therefore, medical schools must fulfill their responsibilities at all stages of health care (preventive, therapeutic, rehabilitative and health-promoting); plan and deliver health services on the basis of principles and values such as "high quality", "equality", "efficiency", "equity".

"High quality" in health services is the delivery of services in accordance with both scientific norms and standards besides the individual needs.

"Equality" is the delivery of services without any difference between individuals in terms of the right to be healthy and to reach health service delivery.

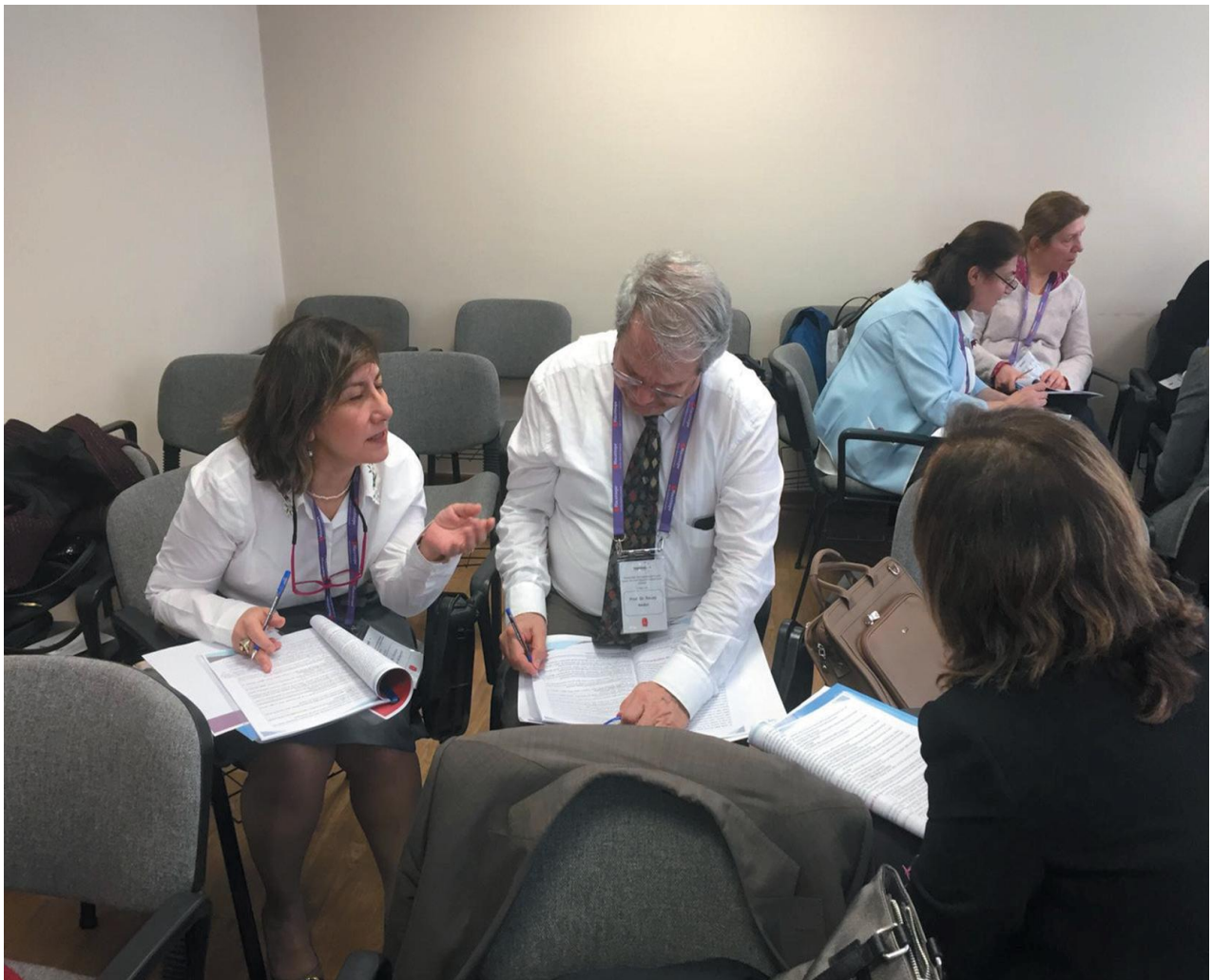
"Equity" means that the needs of individuals determine the accessibility and quality of services.

"Effectiveness" is to seek the most effective system for human health and to ensure the optimal use of available resources.

Today, health care has become so complex that it cannot be provided by a single health professional. An effective teamwork is the basis for health care delivery. The variety of professions related to health care is increasing. Health care should be provided by teams of a range of professionals working together for the same purpose, complementing each other in terms of knowledge, skills, powers and responsibilities. Adequate provision of health care will increase the health level of individuals and society.

THEME 2:	Recommendations Related to Health Service Delivery
	Medical schools need to;
2.1	maintain a balance between education, research and service.
2.2	be innovative in the provision of education-oriented health care and should do research and reflect the results to the education programs.
2.3	provide health services in equality and equity.
2.4	carry out education, research and service functions in ways that cover primary, secondary and tertiary health services in an interdisciplinary approach.
2.5	provide health care services in a comprehensive, qualified, evidence-based, cost-

	effective and patient-centered approach, in line with the needs of the community.
2.6	ensure that their students take active role within a team of postgraduate students and faculty members, in the scope of their competencies in meeting the health needs of the society.
2.7	take precautions ensuring patient safety in the provision of education-oriented health services.
2.8	analyze their ability of meeting the health needs of the society by monitoring health indicators.



THEME 3. INSTITUTIONAL STRUCTURE AND MANAGEMENT

Socially accountable medical schools establish an institutional culture that supports social accountability. Transparent, systematic and auditable mechanisms should be used in management processes. Schools should continuously monitor and build a capacity to respond to the health needs of the society through education, research and service. For this purpose, appropriate institutional structures should be established. Medical schools should identify their institutional goals and objectives with participation of internal and external stakeholders and share with transparency. They should plan, implement and assess their service, research and training, in cooperation and collaboration with the civil society leaders, lawmakers, service providers and non-governmental organizations. Medical schools should advocate for health promotion, and take on leadership in social responsibility projects/studies enhancing stakeholder participation and inform the society with relevant information and outcomes.

Theme 3. Recommendations Related to Institutional Structure and Management	
	Medical schools need to
3.1	be transparent, auditable and accountable management in the fields of education, research and health care services.
3.2	determine their aim and objectives in collaboration with internal and external stakeholders and be transparent in the process.
3.3	include promotion and prevention of health its' aim and objectives of medical schools.
3.4	prioritize the health needs of the society and create an institutional culture for health promotion and prevention.
3.5	form a body to plan and implement social accountability in school.
3.6	advocate for health care and resources prioritizing vulnerable groups of the population.
3.7	contribute to social responsibility projects with various stakeholders to develop the society's capacity to respond to health needs.
3.8	have a constructive interaction and cooperation with law-makers, service providers and non-governmental organizations in health care, research and education activities.
3.9	contribute to defining the roles of health professionals clearly and comprehensively with the participation of relevant stakeholders.

THEME 4. EDUCATIONAL PROGRAM AND IMPLEMENTATION

A socially accountable medical school need to be able to demonstrate that the curriculum is designed to meet the current and future health needs of the community.

Curricula include the intended competencies (goals and objectives) of the graduates; the content to provide the basis of these competencies; the methods and tools (teaching strategies) that direct the activities to be delivered; and the assessment and evaluation used to measure whether these intended competencies are reached.

The educational aims and objectives of a socially accountable medical school should be formulated to cultivate graduates who can investigate and monitor the present and future health needs of the society and the factors affecting health; who can contribute to the solution of these needs; who can contribute to the production of health policies; who is a change agent and a health advocator who respects professional values and responsibilities and is competent for lifelong learning and teaching.

The content of the curriculum of a socially accountable medical school should cover the primary health needs of the community and the communal, social, economic and environmental determinants of health in the institution's respective location and region.

The teaching and learning methods and strategies of the curriculum should be designed to address social accountability within a multidisciplinary approach. The teaching and learning methods and strategies could include outcome-based education, problem-based learning, active learning, on-the-job training, community-based and in-community education, inter-professional learning, among others. These methods and strategies should ensure that physicians acquire competencies to fulfill their roles and responsibilities in society.

Medical schools should also evaluate whether the changes made within the scope of social accountability meet the objectives of the curriculum. These evaluations should be part of a continuous internal as well as external program evaluation system, which also includes accreditation processes.

Theme 4	Recommendations Related to Educational Program and Implementation
Theme 4.1	Aims and Objectives
	Medical schools need to;
4.1.1	aim to train physicians with the competencies required for the provision of health care within the scope of their roles* and responsibilities. *professional, communicator, collaborator, health advocate, scholar, manager
4.1.2	aim to educate physicians that will have the competence and sensitivity to identify, investigate, monitor the factors that affect health and contribute to the health needs of the society.
4.1.3	aim to provide physicians lifelong learning and continuous self-improvement skills.
4.1.4	plan their education programs to ensure their graduates acquire professional values and professionalism.
4.1.5	include research related to the health needs of the society in the. program objectives
Theme 4.2	Content
	Medical schools need to;
4.2.1	prioritize health promotion in educational programs and address the social, economic and environmental determinants of health in a holistic manner.
4.2.2	form the content of education programs in such a way as to provide an interdisciplinary approach to health needs.
4.2.3	cover the cultural characteristics of the society; regional, national and global priority health problems; and periodically update the program considering national core curriculum and other scientific studies in the educational program and report with the participation of internal and external stakeholders.
4.2.4	ensure that health policies, economics, law, sociology, philosophy and communication are included in their education programs and that their curriculum covers the social and humane dimensions of medicine.
4.2.5	train all students to be able to conduct research on public health during their education.
Theme 4.3	Educational Methods and Strategies
	Medical schools need to;
4.3.1	design their educational programs with an outcome-based* education approach. *outcome: competencies of the graduates should be defined.
4.3.2	include learner-centered approaches in their education programs.
4.3.3	provide their students with opportunities for inter-professional learning* to promote collaboration and teamwork. *inter-professional learning: two or more professions learn with, from and about

	each other to improve collaboration and the quality of care
4.3.4	include educational practices in the community in their educational programs.
4.3.5	include learner-centered activities (such as student congresses, student presentations) focused on improving public health in their education programs.
4.3.6	take into account the contribution and participation of external stakeholders, internalizing an interdisciplinary and inter-professional approach.
Theme 4.4	Program Evaluation
	Medical schools need to;
4.4.1	evaluate their programs by establishing an autonomous and continuous program evaluation system.
4.4.2	monitor their graduates' performance with regards to their response to the priority health problems and the needs of the society, and their contribution to the health system.
4.4.3	evaluate the effectiveness of the changes made within the scope of social accountability in educational program
4.4.4	carry out process, outcome and impact assessments of their programs, considering their social obligations.
Theme 4.5	Students and Educators
	Medical schools need to;
4.5.1	determine the number of students they can teach by considering their infrastructure, manpower and overall teaching capacity.
4.5.2	have a sufficient number of qualified faculty members who can effectively implement the educational program.
4.5.3	organize continuous professional development activities for graduates and faculty members.



THEME 5. DEVELOPMENT AND EVALUATION OF SOCIAL ACCOUNTABILITY

One of the main objectives of medical schools is the recognition and fulfillment of their social obligations which must be assessed by evaluation of their social accountability. The pursuit and implementation of this objective should be regarded as one of the primary responsibilities of medical schools toward the society. The medical schools should have a policy and a governance that recognize social accountability and impact on society's health as in its mission.

Accreditation standards and processes, which are powerful tools for institutional change and improvement, define principles that effectively evaluate the educational program characteristics of medical schools. In the accreditation process, medical schools use a periodic internal evaluation and improvement process according to the standards defined through education, research and service delivery. The fact that there is a process for accreditation shows the efforts of medical schools to comply with certain standards and processes. Internal evaluation is supported with an external evaluation done at regular intervals, offering recommendations for improvement.

Medical schools also systematically and periodically should evaluate their status related to social accountability by using qualitative and quantitative criteria that reflect their performance towards accreditation standards. Harmony to these standards is an indispensable task of socially accountable medical schools. For this purpose, medical schools should prepare education programs intended for both present as well as future health problems and needs of the society by establishing communication and cooperation with health institutions, organizations and the civil society. It is important to conduct this community-based program, within the framework of agreements with health institutions and managers in the region. Societal needs and priorities should be taken into account in determining the objectives and criteria in evaluating the education program. Within the social accountability assessment process, medical schools should benefit from the evaluation of other medical schools, students and patients as well as self-evaluation.

THEME 5. Recommendations related to Improvement and Evaluation of Social Accountability
Medical schools need to
5.1 cooperate with the institutions* representing the local community and evaluate their opinions and suggestions in order to develop the capacity of the school to respond to health problems and needs.
*institutions: health institutions, municipalities, other relevant organizations, non-

	governmental organizations and professional organizations such as physicians
5.2	define the principles related to social accountability, share these principles with the society and seek the contribution and support of the society in these processes.
5.3	establish common protocols with health managers and decision makers in order to conduct community-based/oriented studies.
5.4.	define their aims and criteria for education, research and service in their strategic plans by considering the social needs and priorities of the communities they serve.
5.5	establish an institutional structure that monitors and evaluates continuous development and quality processes.
5.6	seek feedback from their graduates and other stakeholders in assessing the extent to which educational programs are community-based and addressing the needs of society.
5.7	use accreditation processes to assess their capacity to respond to health needs and problems of the society.
5.8	use multidimensional assessment** in the evaluation process regarding social accountability.
	**multidimensional assessment: self-assessment, peer-assessment, patient-assessment and student assessments



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