

Using the Indicators for Social Accountability Tool (ISAT) in Health Professions Education to Develop a Social Accountability Action Plan for a Faculty of Medicine and Dentistry

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Abstract

As part of a global social accountability fellowship, the Indicators for Social Accountability Tool was completed for the Doctor of Medicine program and the Doctor of Dental Surgery program, both within the Faculty of Medicine & Dentistry at the University of Alberta in Edmonton, Alberta, Canada. Completion of the tool for two distinct programs within one faculty identified program strengths and areas where coordination across the faculty could lead to more socially accountable processes across multiple programs. Areas that warranted further refinement through a social accountability lens at the faculty level included faculty recruitment, faculty development, governance, and tracking program outcomes and societal impact.

Introduction

The University of Alberta is located in Edmonton, Alberta, Canada, and serves a large geographical area of 661,848 square kilometers,ⁱ with a population of 4.8 million people.ⁱⁱ The Faculty of Medicine & Dentistry (FoMD) is part of the College of Health Sciences and offers a wide variety of education and training programs for health professions.ⁱⁱⁱ The mission of the FoMD is “To serve the public with social accountability through partnerships, leadership, and innovation in education, research, and health care.”^{iv}

A Social Accountability Task Group was formed at the institution in 2021, at the request of the FoMD Dean, to develop recommendations for a social accountability framework. This framework was meant to enable the FoMD to meet its goal of directing education, research, and service activities toward addressing the priority health concerns of the communities it serves.^v The Task Group’s final report recommended the development of a standalone Social Accountability Unit, as well as the identification of a Social Accountability Lead and dedicated administrative and project management support.^{vi}

The FoMD Social Accountability Lead was hired in February 2023, and ongoing work has been guided by a Social Accountability Steering Committee. The Social Accountability Steering Committee is composed of faculty members and students doing work related to social accountability. Three committee members (KAD, KS, MNY) participated in the Social Accountability Fellowship, a collaboration to advance impact, accreditation, and leadership run by The Network: TUFH, NOSM University, and the Dr. Gilles Arcand Centre for Health Equity, and the University of Limerick.^{vii} The objective of this work was to develop a clear plan of action to advance social accountability within the FoMD.

Methods

The Indicators for Social Accountability Tool (ISAT) in Health Professions Education^{viii} is recognized internationally and was selected because of its ability to provide both a baseline assessment of social accountability across multiple institutional domains and a clear framework for next steps. As a first step, the team determined at which level the tool should be applied within the FoMD. Given the heterogeneity of programs offered within the FoMD, the decision was made to initially focus on one or two programs. Based on the roles and expertise within the fellowship team, the Doctor of Medicine (MD) program and the Doctor of Dental Surgery (DDS) program were identified as potential options.

After these two potential programs were identified, approval from program leadership was sought. The Associate Dean of the MD program, the School of Dentistry Executive Committee, and the FoMD Dean approved the plan to complete the ISAT for both programs. Publicly available information (e.g., material that was available on university or program websites or in the peer-reviewed literature) was compiled as a first step. Where information gaps were identified, the authors reached out to program leaders, administrators, and students for more information.

Once all available information had been compiled, an initial determination of the developmental phase for each of the core components was made by consensus (KAD, KS, MNY, NJ). The authors also drafted the action plan outlining how the program could move to the next phase for each component. Prior to formal submission for international recognition, program and school leads, student representatives, and the FoMD Dean will have a chance to provide feedback, add additional information, provide a rationale for changing the developmental phase, and/or revise the action plan. The FoMD Dean will provide final signoff on the documents prior to submission.

Results

Completing the ISAT for the MD program and the DDS program within the FoMD yielded valuable program-specific information and highlighted areas where collaborative efforts across FoMD programs could potentially have a bigger impact.

Within the MD program, dedicated streams for Black applicants,^{ix} Indigenous applicants,^x and rural applicants^{xi} exist. These streams were developed by Black, Indigenous, and rural faculty, are voluntary, and incorporate dedicated representation in file review. There is an emphasis on Black representation in the file review process for the Black applicant stream. Applications from Indigenous students are considered through an Indigenous application process and reviewed by an Indigenous Admissions Subcommittee. For rural candidates, a written statement and an interview with rural physicians and community members are required. The DDS program also has an Indigenous admissions process.^{xii} The MD program is expanding to offer decentralized medical education with the goal of addressing the primary care needs of rural, regional, and Indigenous communities across Alberta^{xiii}. The DDS program includes opportunities for students to offer care in rural and remote communities.^{xii} The MD program curriculum reflects the priority health, cultural, and social needs of the population and undergoes regular review and curriculum mapping.^{xiv} There is also an easily accessible web-based opportunity for students, faculty, and any members of the public to make curriculum recommendations.^{xiv} These suggestions are reviewed by the curriculum management unit, as well as the Social Accountability Council, with further input from the community sought when relevant. This low-barrier mechanism to receive curricular input from faculty and community members is one way that the MD program aims to be responsive to the needs of the communities it serves.

Community-based, community-engaged, and socially accountable research occurred across the FoMD. However, these forms of socially accountable research are largely supported by individual faculty members. This may change, however, as the University of Alberta's Strategic Plan for Research and Innovation^{xv} has recently highlighted Indigenous research and social transformation as key areas of growth. Additionally, within the College of Health Sciences, a new process is being developed to formalize interprofessional research 'hubs,' the first of which will focus on how climate change affects health.^{xvi}

Both programs identified a need to work towards a more socially accountable process for faculty recruitment, faculty development, and for measuring both program outcomes and societal impact. In addition, the new Social Accountability Unit is working on its own governance structure, specifically how to share information with existing advisory councils and include the perspectives of more community members in its decision-making process.

Discussion

Completion of the ISAT for two programs within the FoMD highlighted differences in how programs within the same faculty operated, and also identified common opportunities for improvement and collaboration toward greater social accountability, specifically focusing on the FoMD level, which may offer several efficiencies that are not present when leaving implementation to individual programs or departments.

While the requirements for each training program are unique, the development of selection criteria to improve diversity, tracking the socio-demographic characteristics of students, offering outreach and orientation pathway programs in underserved communities, and expanding scholarships and bursary programs could potentially be coordinated across programs. This stance

is supported by the ISAT Social Accountability Self-Assessment Tool Implementation Guide, Section 2 - Developmental phases towards social accountability (1.1 Student recruitment, selection, and support).^{viii} Given that university faculty often teach across multiple programs, faculty recruitment and development via a social accountability lens may also benefit from a faculty-wide coordinated approach (ISAT Section 2, 2.1 Faculty Recruitment, 2.2 Faculty Development).^{viii}

While faculty recruitment does have some impact on an institution's ability to do socially accountable research, other factors, such as the availability of funding to build community relationships, the available peer-reviewed research funding, and faculty evaluation standards, also impact a program's ability to move through the developmental phases.^{xvii} Including communities and external parties^{xviii} in governance models and decision-making requires time to build trusting relationships^{xix} and resources to ensure adequate compensation of community members. Assessing program outcomes and societal impact also presents opportunities for faculty-wide coordination and for the development of models that prioritize understanding priority health needs and proactively seeking consent from learners and communities so that programs can be refined based on iterative feedback.

Overall, completion of the ISAT for two distinct programs within one faculty, highlighted areas of strength within the programs, and identified areas where collaboration across the faculty could lead to more socially accountable processes across multiple programs.

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