

مجتمع صحي بكفاءة
Healthy Community with Competency



الهيئة السعودية للتخصصات الصحية
Saudi Commission for Health Specialties

Quality Assurance in Graduate Health and Medical Training Initiatives in Programs supervised by SCFHS

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Contents

<i>Overview of SCFHS & Time line</i> 1	<i>Context & Approach</i> 2	<i>GHM Quality Matrix</i> 3	<i>Success factors</i> 4
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*Overview of
SCFHS &
Time line*

1

1 April 2019

3

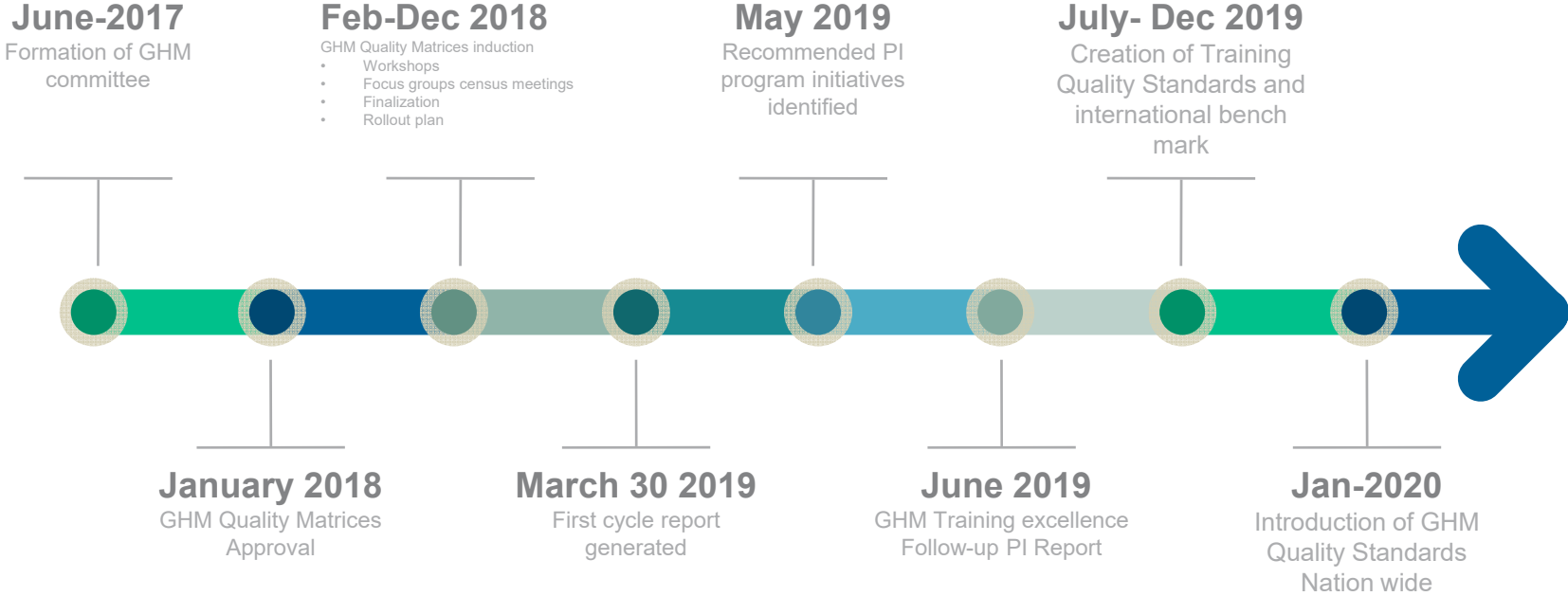
Overview



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- ❖ KSA is undergoing a significant transformation guided by the ambitious 2030 Vision.
- ❖ The Saudi Commission for Health Specialties (SCFHS) is the country's regulatory body for certification of all GHM since its establishment in 1992.
- ❖ The GHM Training Quality Initiative provides a national framework for continuous quality improvement and its associated quality indicators for GHM training supervised by the SCFHS.

GHM Training Quality development Time Line





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**Context &
Approach**

1 April 2019

6

Context



- ❖ Few countries have actually taken the initiative to pursue Quality measurement in competency-based postgraduate training.
- ❖ In June 2017, the first quality indicators committee was formed in SCFHS to create the postgraduate quality indicators.
- ❖ Objectives:
 - To improve the quality of GHM training;
 - To provide a means for subjective assessment of residency programs and training centers;
 - To guide Training programs and training centers through a systematic performance improvement system; and
 - To assist Program Directors in reviewing the conduct and educational quality of their programs.

Approach

- ❖ The model was inspired by the Kirkpatrick Model to evaluate the effectiveness of the current training model.
- ❖ The decision to evaluate training is mainly conducted to:
 - Decide whether to continue or discontinue training programs;
 - To gain information how to improve future training programs;
 - To justify the existence of training by showing how it contributes to the overall objectives and goals of the national healthcare system.
- ❖ Fifth stage was developed (Training Governance)

Data Collection Methods



Qualitative subjective surveys that were distributed

- Resident surveys
- Program director surveys

Departmental operational KPIs



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***GHM Quality
Matrix***

3

GHM Quality Matrix

<i>Kirkpatrick Domain</i>	<i>KPI ID</i>	<i>KPI</i>	<i>Purpose</i>	<i>Data 2018</i>	<i>Trend</i>
REACTION	GMHQI 1.1.0	% Residents satisfaction	The aim is to estimate the satisfaction of residents	83.1%	↑
	GMHQI 1.2.0	% Trainer satisfaction	The aim is to estimate the satisfaction of trainers.	71%	-
	GMHQI 1.3.0	% PDs satisfaction with center	The aim is to estimate the satisfaction of trainers	72%	-
	GMHQI 1.4.0	% Residents burnout	The aim is to estimate the resident burnout rate	66%	↑
	GMHQI 1.5.0	% PDs satisfaction with SCFHS	The aim is to estimate the satisfaction of PD with SCFHS services.	82%	-

Cont. GHM Quality Matrix

Kirkpatrick Domain	KPI ID	KPI	Purpose	Data in 2018	Trend
LEARNING	GMHQI 2.1.0	% Program Directors (PD) who attended PD Training Course offered by the SCFHS	The aim is to estimate the number of program directors who attended the SCFHS PD training course in a given year	38%	
	GMHQI 2.2.0	Number of Trainers in PGMT programs who successfully completed SCFHS Training certification	The aim is to estimate the number of PGMT trainers who completed the SCFHS training Certification course in a given year	238	↑
	GMHQI 2.3.0	% Surveyors who've successfully completed SCFHS's Accreditation Training	The aim is to estimate the number of surveyors who successfully completed the SCFHS Accreditation certification training course in a given year	47.75%	
	GMHQI 2.4.0	% Resident compliance to minimal procedure, case exposure policies, required competency index	The aim is to estimate the number of programs that complied with minimal case exposure policies required competency index in a given year	(Can not be measured for now)	
	GMHQI 2.5.0	% Residents who have received Residents Evaluation by program in a specific period	The aim is to estimate the number of residents who received their evaluation forms on time in a specific period.	67%	
	GMHQI 2.6.0	% Research included in curricula	The aim is to estimate the number of research projects that residents participated based on their curricula in a given year	50%	

GHM Quality Matrix

<i>Kirkpatrick Domain</i>	<i>KPI ID</i>	<i>KPI</i>	<i>Purpose</i>	<i>Data in 2018</i>	<i>Trend</i>
	GMHQI 2.7.0	% Burnout policy implementation	The aim is to estimate the policy implementation of burnout detection and prevention programs to all those who are involved in training in a given year	58.4%	
	GMHQI 2.8.0	% Compliance with implementing incorporated e-log system in each program	The aim is to estimate the compliance rate with implementing incorporated e-log system in each program in a given year	4.7%	
LEARNING	GMHQI 2.9.0	% Residents who fulfilled their promotion criteria	The aim is to estimate the number of residents who fulfilled their promotion requirement criteria in a given year.	95.7%	
	GMHQI 2.10.0	% Residents who passed the board exam	The aim is to estimate the number of residents who passed their board exam in a given year	82.3%	↓
	GMHQI 2.11.0	% Disciplines who incorporated simulation in their curricula	The aim is to estimate the number of disciplines who incorporated simulation training in their curricula in a given year.	32%	
	GMHQI 2.12.0	% Residents who have received an annual master rotation plan	The aim is to estimate the number of residents who have received their annual rotation plan on time in a given year.	80%	
	GMHQI 2.13.0	% Adherence to the annual Master plan	The aim is to estimate the number of residents who complied with their annual master plan in a given year.	75%	

Cont. GHM Quality Matrix



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Kirkpatrick Domain	KPI ID	KPI	Purpose	Data in 2018	Trend
Training Governance	GMHQI 3.1.0	% Centers with complete goals and objectives for residency program	The aim is to estimate the number of training centers with complete goals and objectives for their residency programs	88%	
	GMHQI 3.2.0	% Completed trainer evaluation per program	The aim is to estimate the compliance of residents in filling out the trainer evaluation forms per rotation annually.	67%	
	GMHQI 3.3.0	% Adherence to accreditation requirements	The aim is to estimate the adherence rate of training institutions to accreditation requirements in a given year	96%	
	GMHQI 3.4.0	% PDs Turnover rate	The aim is to estimate the number of PD who did not complete their full term in a given year.	44%	
	GMHQI 3.5.0	% Accreditation complicate score	The aim is to estimate the compliance of training centers with the accreditation standards in a given year	To be reported: Q4 2019	
	GMHQI 3.6.0	# violations with the matching regulations	The aim is to estimate the number of violations in the matching process in a given year	1.31%	

1 April 2019



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Success factors

4

1 April 2019

15

Training Quality Engagement

1 Assess

The GHM training programs current status

- Initial quality matrix results

3 Implement

Best Practices

- Develop the GHM Training excellence award
- GHM Training Quality Standards
- PI Projects throughout the GHM training cycle annually



2 Construct

comprehensive electronic data management system

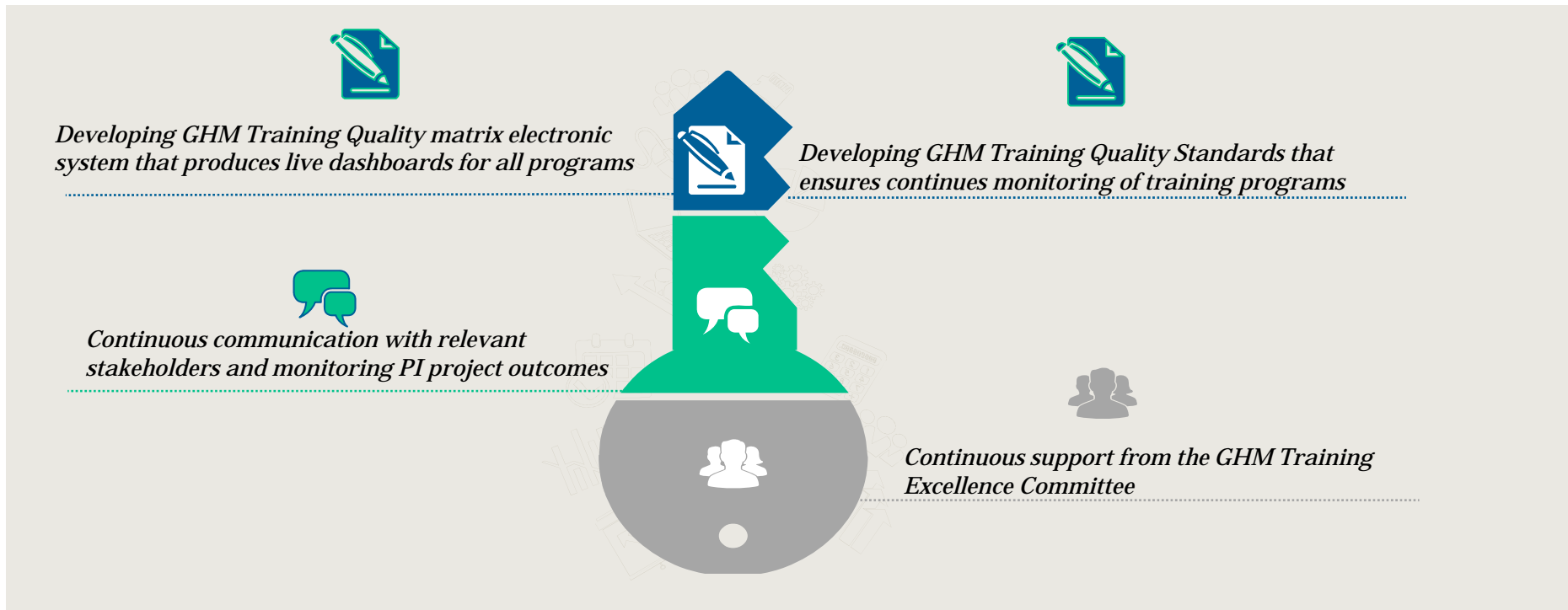
- Design GHM Training Performance management system
- Design Performance improvement system
- Design GHM training Quality standards that is internationally compatible

4 Post Implementation

Training Quality Monitoring and Reporting

- GHM Training Quality Reporting Mechanism
- Continues communication with all stakeholders
- Knowledge Transfer Assurance

Success Factors





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Thank you...