

# **AAMSE 2016 Session 207D**

## ***Reconcilable Differences:***

### **Common Core Principles Across Standards for Medical Certification Programs**

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# AGENDA

- ▶ Terminology refresher: Types of standard-setting programs
- ▶ Basic principles of legal defensibility
- ▶ Accreditation standards for medical certification programs
  - ▶ Differentiating factors
  - ▶ Commonalities
- ▶ Impact on program development and delivery choices
  - ▶ Program development process
  - ▶ Assessment development and delivery options
- ▶ Major decision points

# CERTIFICATION

- ▶ Independent validation by a non-governmental organization that a person has demonstrated the level of knowledge, skill, or ability required to practice an occupation, profession, or role at a defined level of competence.
- ▶ Certification is sometimes voluntary but may be mandated by a government entity.
- ▶ Certificants are usually authorized to use a designation or title to communicate their certified status to consumers, employers, business partners, and other stakeholders.
- ▶ Certificants must demonstrate continued competence or enhanced competence through periodic recertification.



# LICENSURE

- ▶ The mandatory process by which a government entity authorizes a person to engage in a profession, occupation, or role after verifying that he or she has satisfied relevant criteria and has demonstrated the level of knowledge, skill, or ability required to practice that profession, occupation, or role at a defined level of competence.



# CERTIFICATE

- ▶ Recognition that an individual has completed a discrete course of study—based on attendance, participation, or an assessment.
- ▶ A certificate program usually has a narrower scope (course of study) than a certification program (knowledge, skill, or ability required to practice an occupation competently).
- ▶ A designation or title is usually not granted at the completion of a certificate program.



# ACCREDITATION

- Independent validation by a non-governmental organization that a program, process, institution, building, business, organization, or other thing (other than a person) has satisfied a set of standardized criteria.

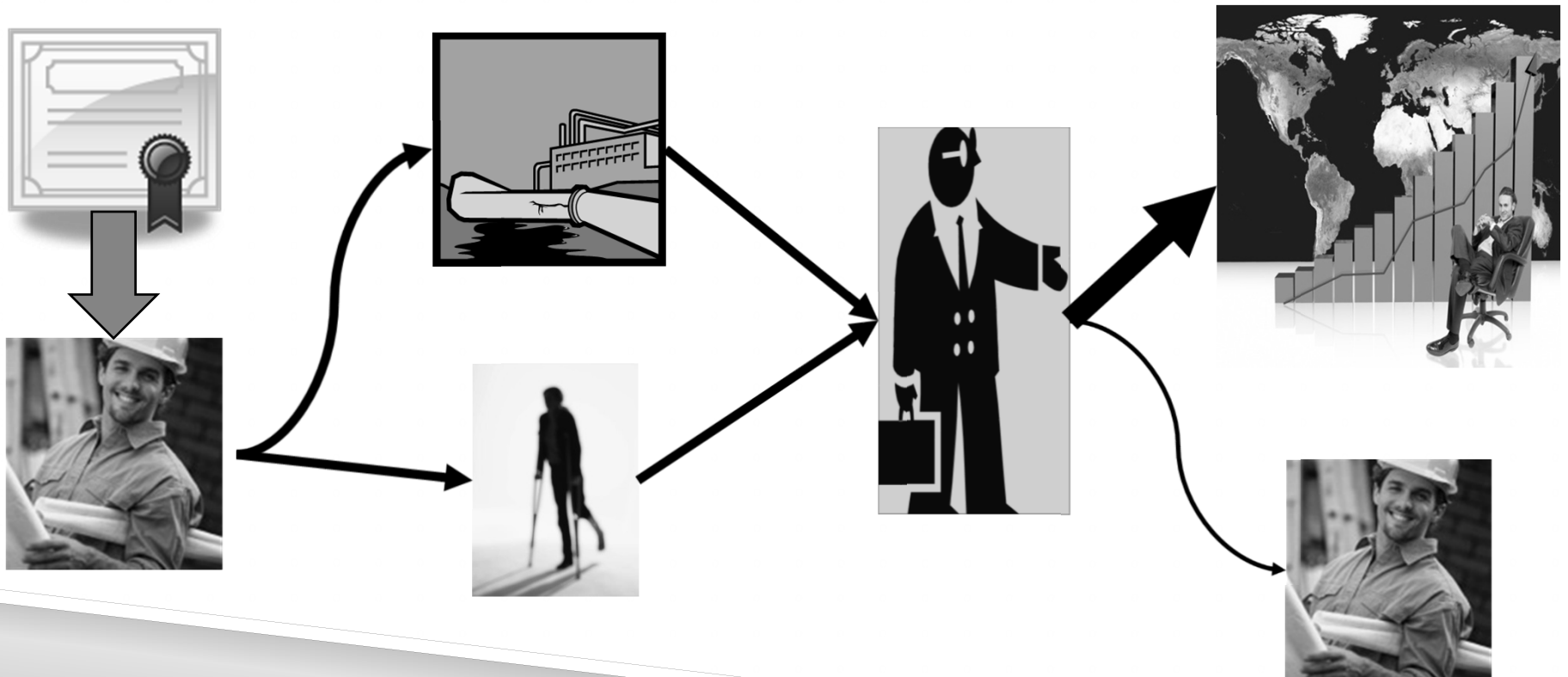


# BASIC PRINCIPLES OF LEGAL DEFENSIBILITY

Managing the risk inherent in standard-setting programs.

# WHAT HAPPENS WHEN SOMETHING GOES WRONG

- ▶ High-stakes v. low-stakes
- ▶ Who gets sued
- ▶ Insurance rates



# THREE BASIC PRINCIPLES TO MINIMIZE RISK

- ✓ Have a rational basis for every decision
  - ✓ Avoid undue influence
- ✓ Do what you say you are going to do

# WHO WATCHES THE WATCHERS?

- ✓ Certification reassures stakeholders that practitioners meet standards
- ✓ Accreditation enhances the reliability of certification programs

# CROSS-OCCUPATIONAL ACCREDITATION STANDARDS

- ▶ History
- ▶ Purpose
- ▶ Content
- ▶ Use

National Commission for Certifying Agencies

Standards for the  
Accreditation of Certification Programs



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Approved February 2002  
Revised September 2004  
Revised November 2006 (editorial only)  
Revised December 2007 (editorial only)  
Revised January 2010 (editorial only)  
Revised November 2014

INTERNATIONAL  
STANDARD

ISO/IEC  
17024

Second edition  
2012-07-01

Conformity assessment — General  
requirements for bodies operating  
certification of persons

Évaluation de la conformité — Exigences générales pour les  
organismes de certification procédant à la certification de personnes



Reference number  
ISO/IEC 17024:2012(E)

© ISO 2012



ANSI/NOCA 1100 -

**Standard for  
Assessment-Based  
Certificate Programs**

*An American National Standard*

March 2009 (e)



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EUROPEAN UNION OF MEDICAL SPECIALISTS

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Received 10/2006; Revised 7/2007; Received 3/2011; Received 6/2012; Received 5/2013; Revised 7/2013; Revised 2/2014; Revised 6/2014; and 6/2015 (most not chosen from *Overlaid Compositeness: Overlaid Compositeness made*).

December 2012



professional  
standards  
authority

**General Medical Council**  
Regulating doctors  
Ensuring good medical practice

MEDICAL COUNCIL ACCREDITATION STANDARDS  
FOR  
POSTGRADUATE MEDICAL EDUCATION AND TRAINING

### 1. CONTEXT OF EDUCATION AND TRAINING

## 1.1 GOVERNANCE

- 1.1.1 The training organisation's governance structures and its education and training, assessment and continuing professional development functions are defined.
- 1.1.2 The governance structures describe the composition and terms of reference for each committee, and allow all relevant groups to be represented in decision-making.
- 1.1.3 The training organisation's internal structures give priority to its educational role relative to other

## 1.2 PROGRAMME MANAGEMENT

- 1.2.1 The training organisation has established a committee or committees with the responsibility, authority and capacity to direct the following key functions:
- o planning implementing and reviewing the training programme(s) and setting relevant policy and procedures
  - o setting and implementing policy and procedures relating to the assessment of overseas trained specialists
  - o setting and implementing policy on continuing professional development and reviewing the effectiveness of continuing professional development activities
- 1.2.2 The training organisation's education and training activities are supported by appropriate resources including sufficient administrative and technical staff.
- 1.2.3 Funding and Resource Allocation - there must be a clear line of responsibility and authority for budgeting of training resources. The training bodies must be adequately funded in order to plan and deliver training.

### 1.3 EDUCATIONAL EXPERTISE AND EXCHANGE

- 1.3.1 The training organisation uses educational expertise in the development, management and running professional and compares its performance



**German Medical Association  
(Joint Association of the State Chambers of  
Physicians in Germany)**

(Model) Specialty Training Regulations  
2003

**As amended on 25.06.2010**

# TECHNICAL DIFFERENCES

## NCCA

- ▶ More detailed requirements for publicizing program stats, policies, and procedures
- ▶ More detailed requirements for documenting the rationale underlying decisions about policies and procedures
- ▶ Defines requirements for exam specifications
- ▶ More detailed requirements for cut score studies
- ▶ Defines requirements for assessment scoring and score reporting

## ISO 17024

- ▶ Does not require alignment with a purpose statement
- ▶ No “public member” requirement
- ▶ Extensive HR requirements
- ▶ Impartiality requirement, but no explicit nondiscrimination requirement
- ▶ Specifies requirements for suspension or revocation of credentials
- ▶ Stricter requirements for document control and security
- ▶ More prescriptive exam security measures
- ▶ Does not explicitly require a cut score study
- ▶ Much more extensive management system (QA / QC) requirements
- ▶ (Used to require continuous monitoring of certificant competence, but no longer)

## CESMA

- ▶ Minimal standards
- ▶ Evolving process
- ▶ Anti-sponsorship

## ABSNC

- ▶ No education / certification firewall
- ▶ No financial resource requirement
- ▶ No HR requirement
- ▶ Detailed technical requirements for candidate eligibility
- ▶ No record-retention or confidentiality requirement
- ▶ No COI / impartiality requirement

# PRACTICAL DIFFERENCES

## NCCA

### ► Cost

- Initial Application: USD 2,500
- Onsite Audit: USD 0
- Annual Fee: USD 4,315 – 11,795  
(USD 935 / program over 2)
- Reaccreditation: USD 2,500 / 5 years

### ► Vintage: 1977

### ► Predictability of Assessment

### ► # of Accredited Programs: 305 (135 orgs)

### ► Brand Recognition

- Allied Health Professions
- USA

## ANSI / ISO / IEC 17024

### ► Cost

- Information Visit: USD 1,250 / day + travel
- Initial Application: USD 3,000
- Onsite Audit: USD 1,250 / day + travel  
(initial + years 1, 3, 5, etc.)
- Annual Fee: USD 3,000 – 25,000  
(0.6% revenue)

### ► Vintage: 2003

### ► Predictability of Assessment

### ► # of Accredited Orgs: 56 (170 programs)

### ► Brand Recognition

- Technology
- Engineering
- Construction
- Global

# POINTS OF COMMONALITY: NCCA, ISO 17024, & ABSNC

- ▶ Must define scope and certified population
- ▶ Certification body is a legal entity with autonomy over core certification decisions
- ▶ Members of the certification body must be diversely representative of the certified population (with some representation of other stakeholders)

# POINTS OF COMMONALITY: NCCA, ISO 17024, & ABSNC

- ▶ Avoid conflicts of interest and undue influence; ensure impartiality
- ▶ Firewall education from certification to avoid antitrust / unfairness exposure
- ▶ Leverage appropriate resources (human, financial, IT, etc.)
- ▶ Publicize all standards and policies (eligibility, application process, assessment content and format, retesting, accommodations, recertification, appeals, disciplinary rules, fees, nondiscrimination, etc.)

# POINTS OF COMMONALITY: NCCA, ISO 17024, & ABSNC

- ▶ No grandfathering or exceptions—all must meet standards to be certified
- ▶ Record retention, confidentiality, and publication of certificant directory
- ▶ Safeguard exam security (no unproctored / remote-proctored exam administration)
- ▶ Have a rational basis for all decisions: Job analysis, exam development, cut score study, item analysis, pace of change in the certified profession, etc.

# POINTS OF COMMONALITY: NCCA, ISO 17024, & ABSNC

- ▶ Exam administration should be fair, uniform, and maximize reliability of results
- ▶ Must require periodic recertification to validate continuing competence or demonstrate continual enhancement of competence
- ▶ Provide stakeholders with mechanism to complain about certificants
- ▶ Provide applicants, candidates, and certificants with due process, including right to appeal adverse decisions
- ▶ Certifying organization should conduct QA and QC

# POINTS OF COMMONALITY

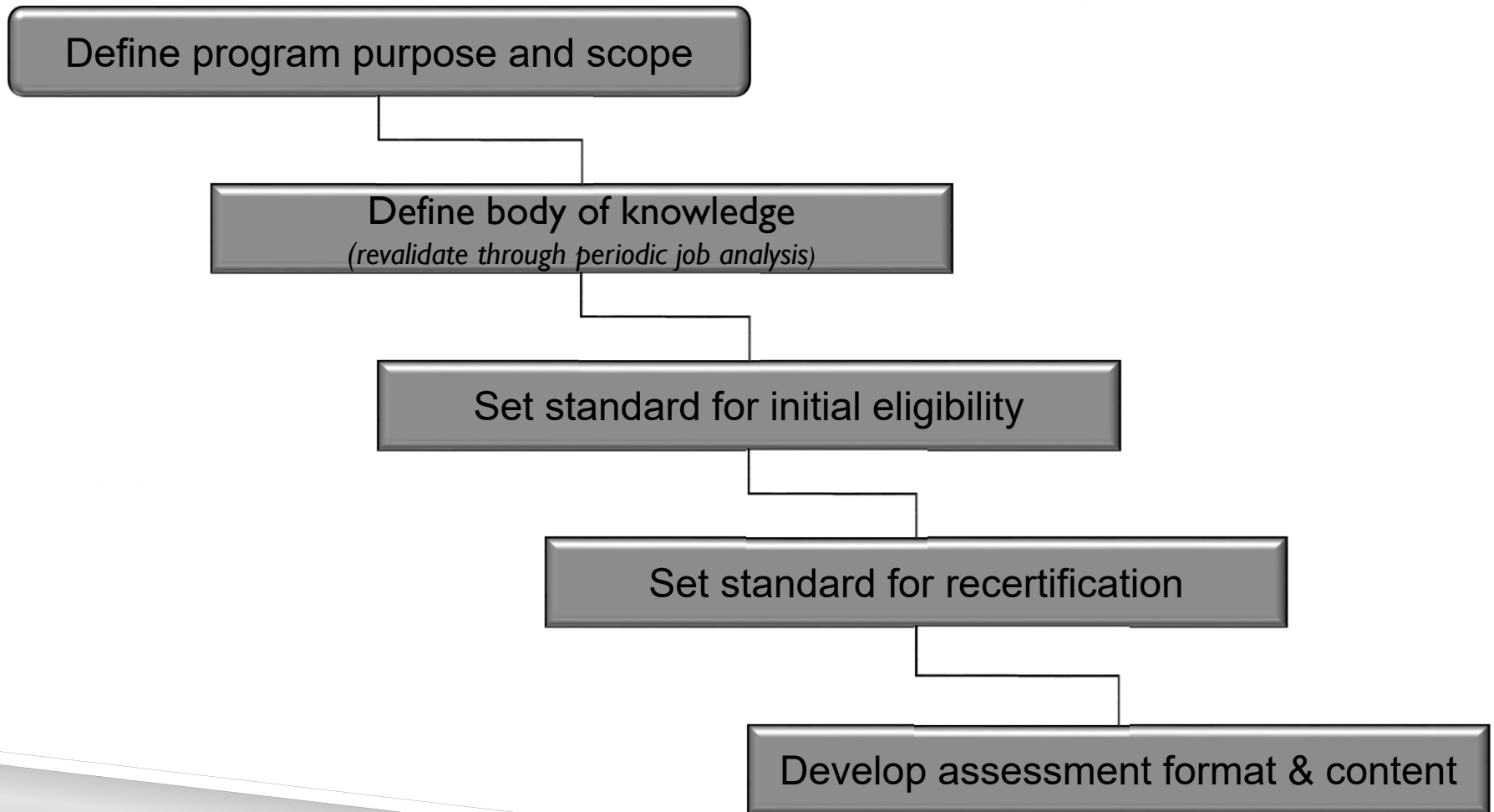
## ANSI / ICE 1100 for Certificate Programs

- ▶ The certificate provider shall be structured so as to give stakeholders confidence in its competence and integrity and shall **publish** all essential information related to the assessment-based certificate program to ensure that stakeholders understand its **purpose**, scope, and requirements.
- ▶ The certificate provider is responsible for all activities performed on its behalf and shall ensure these activities are performed properly by qualified individuals.
- ▶ The certificate provider shall **maintain orderly and accurate records**, documents, and/or other materials and manage them in a responsible manner.
- ▶ The certificate provider shall set **quality standards** for the certificate program and shall **evaluate the program** using these standards.
- ▶ The certificate provider shall ensure that the **education/training is developed and delivered by qualified individuals** and that **the content, design, and delivery are suited to the intended learning outcomes and consistent with generally accepted instructional design principles**.
- ▶ The certificate provider shall conduct an assessment of participants' accomplishment of the intended learning outcomes and shall ensure that the procedures used to develop and conduct the assessment(s) and to evaluate/score participants' performance are **consistent with accepted measurement principles and the intended use of the certificate**.
- ▶ A certificate shall be issued only in accordance with documented requirements and procedures, and certificate holders shall be informed of the proper uses of the certificate.

## UK GMC Standards for Curricula & Assessment Systems

- The **purpose** of the curriculum must be **stated**, including linkages to previous and subsequent stages of the trainees' training and education. The appropriateness of the stated curriculum to the stage of learning and to the specialty in question must be described.
- The overall **purpose** of the assessment system must be **documented** and **in the public domain**.
- The curriculum must set out the general, professional, and specialty-specific content to be mastered, including: (a) the acquisition of knowledge, skills, and attitudes demonstrated through behaviours, and expertise; (b) the recommendations on the sequencing of learning and experience should be provided, if appropriate; (c) the general professional content should include a statement about how *Good Medical Practice* is to be addressed.
- **Assessments** must **systematically sample the entire content**, appropriate to the stage of training, with reference to the common and important clinical problems that the trainee will encounter in the workplace and to the wider base of knowledge, skills and attitudes demonstrated through behaviours that doctors require.
- Indication should be given of how curriculum implementation will be managed and assured locally and within approved programmes.
- The **curriculum must describe the model of learning appropriate to the specialty and stage of training**.
- Recommended learning experiences must be described which allow a diversity of methods covering, at a minimum: (a) learning from practice; (b) opportunities for concentrated practice in skills and procedures; (c) learning with peers; (d) learning in formal situations inside and outside the department; (e) personal study; (f) specific trainer/supervisor inputs.
- The choice of **assessment method(s)** should be **appropriate to the content and purpose** of that element of the curriculum.
- Mechanisms for supervision of the trainee should be set out.
- **Assessors/examiners will be recruited against criteria** for performing the tasks they undertake.
- Assessments must provide relevant feedback to the trainees.
- The methods used to set standards for classification of trainees' performance/competence must be transparent and in the public domain.
- **Documentation will record the results** and consequences of assessments and the trainee's progress through the assessment system.
- Plans for curriculum review, including **curriculum evaluation and monitoring**, must be set out.
- Resources and infrastructure will be available to support trainee learning and assessment at all levels (national, deanery and local education provider).
- There will be lay and patient input in the development and implementation of assessments.
- The curriculum should state its compliance with equal opportunities and anti-discriminatory practice.

# CERTIFICATION PROGRAM DEVELOPMENT PROCESS



# INITIAL DECISION POINTS

- ▶ What Is the Program Purpose?
- ▶ What Is the Intended Scope?
  - ▶ Who Is the Target Audience of Certificants
  - ▶ One Level or Multiple Levels of Experience
  - ▶ Global Standard or Local Endorsement Modules
  - ▶ Single Language of Practice or Local Translation
- ▶ Knowledge Assessment or Performance Assessment
- ▶ Delivery Platform: Computer-Based or Not
- ▶ Market Analysis – Value Proposition and Likely Volume

# SUMMARY

- ▶ Developing a certification program is a highly complex undertaking with an strong value proposition.
- ▶ Several accreditation standards exist; while there are differentiating factors, all reduce to the same core principles of legal defensibility:
  - ▶ Have a rational basis for every decision
  - ▶ Avoid undue influence
  - ▶ Do what you say you are going to do
- ▶ Many options exist within the boundaries of legal defensibility.

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