

Measuring Social Accountability through ISAT: A Qualitative Study of the Implementation Process at the Faculty of Medical Sciences of Universidad Nacional del Litoral, Argentina

By: Augusto Toretta*, Liza Carrera*, Verónica Levental*, Hernán Blesio*, Verónica Reus*, Valeria Yelena Kuttel*, Gabriela Fiorenza*, Viviana Cova*, Larisa Carrera*

*Faculty of Medical Sciences – Universidad Nacional del Litoral

Keywords: ISAT, Social Accountability, health professionals' education.

Abstract

Since its creation, the Faculty of Medical Sciences of the National University of the Litoral (FCM-UNL) has worked to establish strong ties with the community as an institution committed to its Social Responsibility. A group of representatives convened by PAHO built an instrument (ISAT) that made it possible to evaluate the SA of an institution and build a path to continue working with concrete actions in that sense that would allow continuous improvement. The FCM-UNL was part of the group of universities that agreed to participate in a pilot experience of 9 institutions that evaluated their SA through the application of that tool (ISAT) in joint work with THE TUFH Network. To evaluate the difficulties and strengths in the ISAT implementation process and its continuous improvement to ensure its generalization and acceptability, a qualitative study was designed through interviews with members of the team that implemented the instrument at the Faculty of Medicine. UNL Science. The results showed that the ISAT was a very useful resource that an institution could implement for its self-assessment. The implementation of ISAT requires an educational community that understands the scope of the SA concept as well as the commitment of the institution that this entails. The promotion of AS and the commitment of institutions in this sense can be favored by having this instrument that facilitates reflection by educational institutions, that has versions in the local language that can facilitate its understanding, and that people who are members of the committee that verifies the process can understand the language presented in the evidentiary documentation as well as that advice is available in its implementation process.

Introduction

Universidad Nacional del Litoral was founded in 1919 as a result of the 1918 University Reform movement in Argentina, which advocated for the creation of democratic and self-governing institutions to provide free, open, and public higher education. UNL is considered a beacon of culture and education and an engine of social and productive development for the region and the country, with international projection. The university is based in the province of Santa Fe, in the central area of Argentina. The university's main building is in Santa Fe city, but the university also has schools, institutes, and faculties in nearby cities (Esperanza, Reconquista, Avellaneda, Gálvez, Rafaela, and Sunchales). The Faculty of Medical Sciences of Universidad Nacional del Litoral (FCM-UNL) is one of the ten faculties in the university, the newest one. Since its creation

in 2006, it established its profile in line with the profile of the university and worked to become a benchmark in the region and the country by establishing strong links with the community. In the actions it has designed throughout its history, it has worked closely with different stakeholders and strategic partners to establish the locations of educational experiences, define the themes of its research projects oriented toward social problems, and carry out community-centered education.

In this regard, WHO defined SA as "the obligation to direct training, research, and activities to address the priority health concerns of the community, region, and/or nation they are mandated to serve." (WHO, 1995)

The Government, the health system, the community, and the population must work together to identify the problems that affect them and build sustainable solutions over time. Social Accountability in the training of health professionals process generates mechanisms that seek to promote equity in health, to carry out research projects relevant to the priorities of the population, and to improve access to and quality of health care, being essential the joint work between educators, health personnel, civil society organizations, and managers. (WHO, 1995, 2013; PAHO, 2015; Prihatiningsih et al, 2020)

Social Accountability focuses on the training process, on graduates' profiles, on research activities in order to improve the quality of care and finally to achieve the strengthening of the health system. In 2014, convened by the Pan American Health Organization (PAHO), a group of universities in the Latin American region began to develop a Consortium of Health Sciences Faculties for Social Accountability (SA). One of the most important projects of this consortium was to develop a tool that would allow them to evaluate their social accountability and establish a pathway toward this commitment. (Social Accountability Organization, 2020; Boelen, 2019) Later, PAHO brought together a group of leaders from the Region of the Americas to design a tool not only to assess the SA of the institutions but also to design their own plan of action for the coming years. This tool would help institutions to become more Socially Accountable to the public and people they serve and must have a set of basic indicators to assess Social Accountability that facilitates its application but also points a way forward. And ISAT was developed after several months of work. The ISAT's core domains are: 1. Student recruitment. 2. Faculty recruitment 3. Faculty development. 4. Curriculum 5. Curriculum: learning methods 6. Curriculum: types and location of educational experiences 7. Community-based research 8. Governance. 9. Stakeholder partnership and engagement 10. School outcomes 11. Societal impact. (Social Accountability Organization, 2020)

In a joint work with THE Network TUFH, a pilot experience was planned in which the Faculty of Medical Sciences of UNL participated along with eight other institutions from different countries in the world. Based on the ISAT, a web form was constructed that guided the application of the instrument through questions, and the evidentiary documentation had to be attached in each dimension evaluated. Each institution had to organize its own work plan and constitute a team that would afford the commitment. A committee made up of faculty, graduates, students, and community stakeholders was organized at the UNL School of Medicine, and the task was distributed among its members. Previously, the ISAT was introduced, and each

category was analyzed by all the committee members to evacuate any doubt about the process. Each participant had to work in one of the ISAT categories and look for supporting documentation. After finishing this process, all the participants shared their work with the committee, and the report was prepared by a small group. What is important to say is that ISAT Assessment is not an accreditation process. It is an institutional self-assessment process with external confirmation with a verification committee. The Verification Committee was made up of a group of participants from other universities and was able to verify the veracity of the answers throughout the interviews of the participants. (Social Accountability Organization, 2020; Utomo et al., 2022)

After finishing the process, the result showed us the situation where the school was in relation to its social accountability, and a pathway for future work was designed. In order to assess the difficulties and strengths in the process of implementing the ISAT in an Argentine public university and the continuous improvement of the ISAT to ensure its generalizability and acceptability, a qualitative study was designed through interviews with members of the team that implemented the instrument in the Faculty of Medical Sciences of the UNL.

Methodology

FCM-UNL decided to investigate the process of ISAT application and the perception of the people involved about the difficulties in the interpretation, the process of finding the required information, the complexity of the dimensions assessed, the importance of this initiative, etc. This paper draws on the qualitative interpretative research conducted in the group of participants that led the process of ISAT implementation in FCM-UNL. This group was conformed of teachers (some of them are academic/management staff), students, graduates, and representatives of stakeholders (one local policy advisor and two representatives of social organizations/institutions). The study was carried out based on semi-structured interviews. The criterion for inclusion was participation in all the stages of the process. The participants of the process of ISAT implementation were chosen for the authorities of the school based on the working areas proposed by ISAT (academic subjects, research subjects, graduates' affairs, students' affairs, stakeholders of the institution). The in-depth interviews were conducted with an interview guide that was developed specially for this study in order to contemplate the difficulties and weaknesses of the process of ISAT implementation. The tool was adjusted for adequacy, appropriateness, and clarity following the pre-testing. The interviews and discussions were audio-recorded and transcribed. Data analysis was done using a framework approach. This included coding and organizing data under common themes and interpretation. The interviews were conducted virtually and in person. Each participant voluntarily agreed to the interview, gave their consent to be recorded, and anonymously disclosed their answers. Thematic analysis was conducted using open and selective coding in a preliminary interview in charge of two researchers. After the open coding process with the first interviews, the research team constructed the axial codes by discussing the main themes of the open codes. The interview guide was organized into four key issues: 1) Difficulty in the interpretation of the information required, 2) Level of difficulty in obtaining the required information, 3) Clarity in the formulation of the different axes, and 4) Importance of the ISAT application for the institution,

with a systematic search for patterns to generate full descriptions capable of shedding light on the phenomenon under investigation.

Ethical approval: The study was included in an institutional project that was approved by the ethical scientific board of FCM-UNL. All participants were informed that their participation was voluntary and that non-participation would not cause them harm. The research team in this study consists of different health professionals and one educational expert. All of the team were experienced in research in medical education and qualitative research methods and/or were closely involved in the guidance of medical and nursing students in clinical practice or in training settings. All of them belong to the CEFIECS (Center for Studies, Training and Innovation in Health Sciences).

Results and Discussion

Seven teachers (four of them are academic/management staff), four students, two graduates, and two representatives of stakeholders (one local policy advisor and two representatives of social organizations/institutions) were interviewed.

According to the research question, the perception of the ISAT implementation process was the focus of this study. As described in the methodology section, participants talked about these four key issues: 1) Difficulty in the interpretation of the information required, 2) Level of difficulty in obtaining the required information, 3) Clarity in the formulation of the different categories in the form and 4) Importance of the ISAT application for the institution.

The results obtained after the analysis of the interviews were divided into the mentioned central themes and will be presented following that criterion.

Difficulties in the interpretation of the statements and requirements

Most participants stated that they had no difficulties during the interpretation. However, some agreed that in the ISAT implementation process, an institution should have the instrument translated into the language of the people who participate in the leading group. Some participants mentioned in the interviews the importance of having training prior to the implementation of the process in order to eliminate any doubts that may arise in the use of the form. In most of the interviews, it was suggested to maintain an open channel of communication through which doubts could be cleared up. Furthermore, those interviewed on many occasions proposed carrying out training sessions with experts who speak the same language in order to start with a solid base.

In relation to interpretation difficulties found by the participants, it is important to say that a point to consider for future implementations would be interesting to count on a support team or a consultant during the process. The tool in different languages would help with the implementation, the form filling, and the comprehension of the verification team of all the documents that an institution showed. It is important to note that the ISAT version used for the process carried out in FCM-UNL was in English. Language barriers were overcome by the team during the process, but it was highlighted as a possible difficulty for other organizations where

they do not have personnel trained in the use of English. A training session before the implementation could be helpful to eliminate any doubts that may arise in the use of the form. On this occasion, it was not necessarily due to the presence of a representative of the institution on the team that participated in the design of the instrument. In most of the interviews, it was suggested to maintain an open channel of communication through which doubts could be cleared up. –

Level of difficulty in obtaining the required information

The responses in this axis were unanimous, and it was highlighted that if the group of people participating in the study works on the items evaluated (research, academic aspects, graduates) within university life, then it is an instrument that can be used easily and intuitively. All participants agreed that experience in the field to be evaluated is a necessity. Thus, the leadership in each axis changed according to the theme to be evaluated. The students did not express difficulties in interpreting the instructions and collaborated on the answers, forming part of the team's work from their own experience at the institution. In this axis, there were six participants who agreed on one point to highlight, and that was the demand for time required to implement the instrument. Since there is no deadline for the presentation of results to the Peer Committee, but rather each institution defines the moment of its presentation, the articulation of daily tasks with data collection can be carried out without hindering each other. It is necessary to incorporate the activities into a schedule, organize the day taking this into account, and respect it. And they mentioned that for work monitoring, systematization meetings could also be virtual.

Clarity of the construction of different categories in the form

After having used the ISAT during the institution's self-assessment, the staff in charge carried out a retrospective analysis in relation to the construction of the questions in each category analyzed and their applicability. Four participants agreed that the logical order in which the questions are included in the form facilitates their resolution. None of the participants found bias in the questions; they reported that they were very clear, objective, and relevant for each category analyzed. Its construction had the sole objective of guiding the user in their self-assessment on a particular topic. Furthermore, its depth was considered sufficient. In addition, at the end of each question, the relevant supporting documents must be attached to provide validity to the development of the answer. In relation to these, the need for the evaluation committee to speak the language of the institution to be evaluated was raised in the interviews so that the documents could be presented in their original language since the translation and validation of the same would prolong and convert the process into a cumbersome task.

Importance of the ISAT application for the Faculty of Medical Sciences and for any institution

All the interviewees affirmed that if an institution intends to self-evaluate its situation in relation to the achievement of the objectives that respond to its social accountability and wants to formulate the road map to follow in the future to strengthen itself in that sense, ISAT is an appropriate method. 10 participants agreed that the structure and requirements are practical and directed toward the topics to be evaluated. Most of the participants agreed that the form contains

questions that address the topic in sufficient depth, and there is space for the writing and justification of each statement so that the committee can better understand the situation of the institution. Finally, the instrument makes a series of recommendations available to the institution to build its own path toward greater social accountability.

Conclusion

ISAT assessment was a very useful resource for FCM-UNL management. Institutions that train human resources in health and wish to work for their social accountability could count on an important tool for their self-assessment. ISAT allows an institution to assess its own situation at a given time and define the path to follow to continue reinforcing its commitment to social accountability. According to this study, the implementation of the ISAT would be advisable to be carried out with a Spanish form for Latin American institutions, which would facilitate the process. Instrument translation into Spanish can help to disseminate within the universities in Latin America.

The instrument must be explained to the team in charge previously, and this would be an important element to consider; experts or representatives of universities that have already gone through the implementation process could help in this regard. Interviews reflected that having technical support during the process would be very convenient.

There was agreement among all those interviewed that the tool was easy to apply and that it was useful in being able to design through it the path that the institution should follow. Although our study was carried out in only one medical school, it would be interesting to extend it to other institutions with other contexts.

Besides, ISAT implementation requires an educational community that understands the scope of the SA concept as well as the commitment of the institution that this entails. In this way, the meaning of this process can be better understood. The promotion of SA and the commitment of institutions in this sense can be favored by having this instrument that facilitates reflection by educational institutions. It is advisable after 1 or 2 years to re-evaluate those points that require a special action plan to assess their development and to have a look at the goals and purposes achieved. This will allow the definition of new goals for each institution in this regard.

References

Boelen C, Blouin D, Gibbs T, Woollard R. (2019) Accrediting excellence for a medical school's impact on population health. *Educ Health*. 2019; 32:41

Panamerican Health Organization. (2015) La Misión Social de la Educación Médica para alcanzar la equidad en salud. Informe de la reunión de Manaus, Brasil 2014. Available from: <http://www.observatoriorh.org/?q=memoria-de-la-reunion-la-mision-social-de-la-educacion-medica-para-alcanzar-la-equidad-en-salud>

Prihatiningsih TS, Kamal Y, Woollard R, Fisher J, Elhassan Abdalla M, Boelen, C. (2020). Social Accountability and Accreditation: Impacting Health System Performance and Population Health. *Social Innovations Journal*, 3. Retrieved from <https://socialinnovationsjournal.com/index.php/sij/article/view/528>

Social Accountability Organization. (2020) ISAT Available from: [Indicators for Social Accountability Tool in Health Profession Education Self-Assessment Guide and Tool Project Sponsor: USAID In Collaboration with the Global Consensus for Social Accountability \(researchgate.net\) https://socialaccountabilityhealth.org/](https://socialaccountabilityhealth.org/)

Utomo PS, Govender K, De Kempeneer A, Torres N. (2022) The Institutional Self-Assessment Social Accountability Tool (ISAT): Nurturing Social Accountability Progress in Medical and Health Professions Education. *Social Innovation Journals*. 14

World Health Organization (1995). Defining and Measuring the Social Accountability of Medical Schools. Available from: <http://apps.who.int/iris/handle/10665/59441>

World Health Organization (2013) Transforming and scaling up health professionals' education and training. Guidelines 2013. Available from: http://apps.who.int/iris/bitstream/10665/93635/1/9789241506502_eng.pdf