



THEnet
Training for Health Equity Network



The Framework for Socially Accountable Health Workforce Education

Version II

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Suggested Citation

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Introduction

There is global recognition that the institutions training health workers need to better align their programs and strategies to meet the changing needs of all population groups. The impactful strategies of THEnet's partner institutions played an important role in convincing global policy leaders that social accountability principles and mechanisms are essential in this effort. THEnet partners and other socially accountable schools form effective partnerships with the health sector, policy makers and communities. They are vital contributors to health system development and agents of innovation and reform.

In 2011, THEnet, building on common and successful strategies of its founding partners and an existing social accountability model, developed a powerful, practical and comprehensive tool to help schools align the training of health workers with community needs. The goal is to support evidence based, socially accountable health workforce education that is people-centered and focuses on addressing inequities including social determinants of health including discrimination and access to needed social services. The Framework identifies key factors that affect a school's ability to educate a health workforce that will positively influence health outcomes and health systems performance and develops ways to measure and improve the outcomes across institutions and contexts.

Instead of merely counting how many graduates they produce, socially accountable health workforce education institutions assess whether the competencies of their graduates are aligned with community needs. Instead of only tallying how many articles their researchers have published, these schools consider the impact these articles have had on policy. And instead of basing their student recruitment policies on high test scores alone, they recruit students who are most likely to stay in communities where health professionals are scarce – and urgently needed. The Framework and its accompanying Toolkit helps schools design, modify, and evaluate these areas and guide institutions to become more socially accountable.

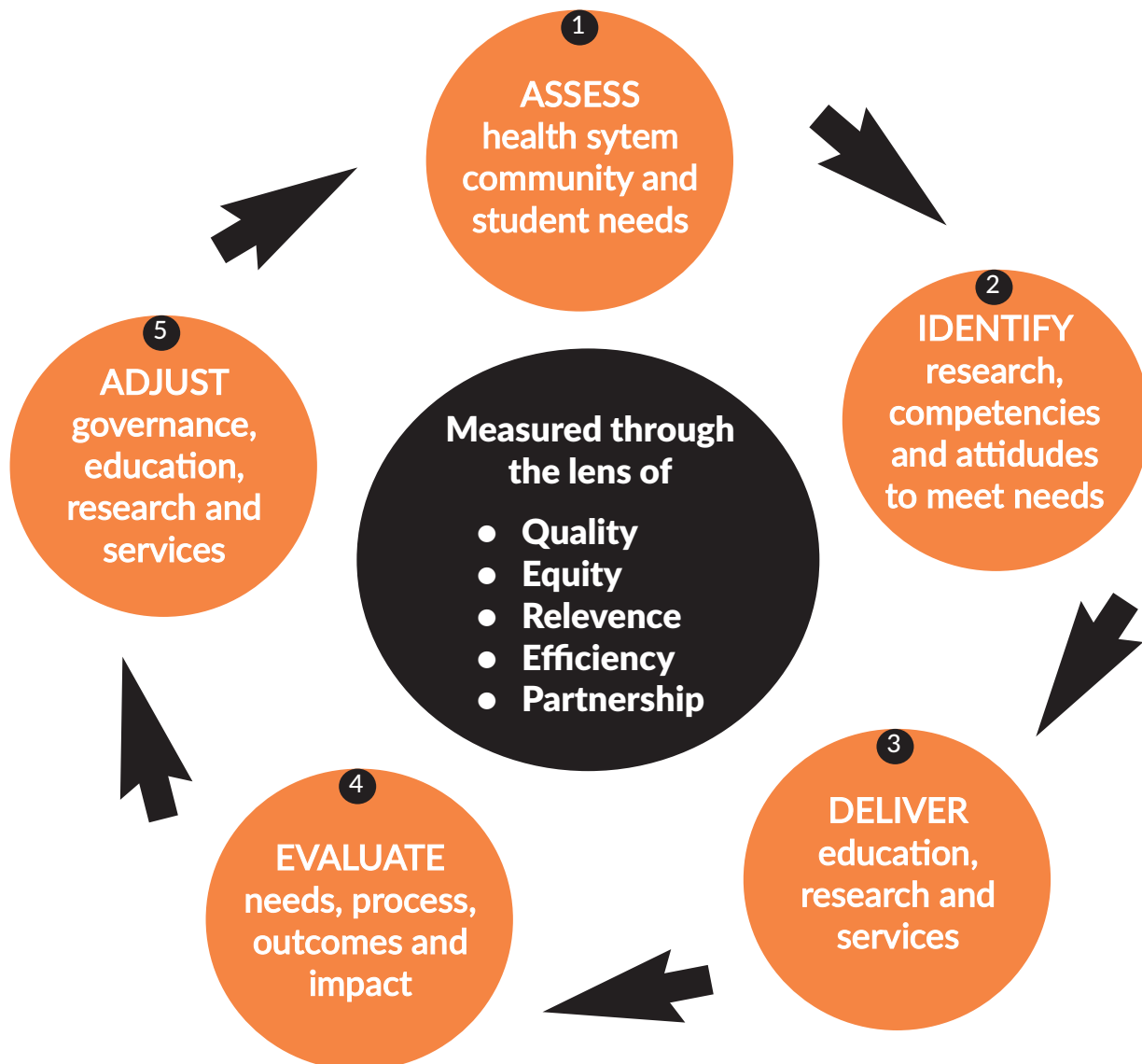
Please note: This document is a printable version of the Framework on Socially Accountable Health Workforce Education which is also available online. This document doesn't incorporate all relevant information and tools as they are updated regularly. THEnet continues to add tools and learning modules linked to the Framework. Please visit our website and join our Community of Practice to share your feedback, experiences and findings, connect with peers around the world and access the latest tools, relevant articles and updates.

Theory of Change

The model guiding the development of THEnet’s schools programs and its Framework, assumes that to meet the needs of the populations it serves, a school or program must be designed based on a thorough needs assessment and understanding of the environment it operates in. This includes the social systems it seeks to impact and how various systemic and other factors may influence its operations and outcomes. The assessment is conducted in collaboration with key stakeholders including health system actors and underserved communities.

Guided by the values it espouses the school then sets outcome objectives and selects strategies likely to

achieve them. Desired competencies of the health workers and research priorities are defined based on the need assessment. Schools then design and delivers programs to meet their defined outcomes. The school then evaluates its processes, strategies, outcomes and the impact the school is having on the systems, communities, and individuals it serves to ensure its activities are meeting needs. This is an ongoing process and the school must continue to examine their underlying assumptions, be proactive and responsive to changing needs and demands. THEnet logic model illustrates the key underlying assumptions and philosophy of THEnet and its member schools.





How Can You Use The Framework In Your Context?

- You can use it to integrate social accountability in the creation of a new program or health professional school
- You can use it to evaluate a particular institutional or educational strategy, program or element
- Evaluate the progress of your whole program to meeting health and health system needs

Please note that due to different school's contexts, not all indicators listed in the Framework will apply to your school.

How To Use The Framework

Here is a step by step guide for those assessing the impact of their institutional and educational strategies on health, equity and health systems.

1/ Ethics Application

Submit an ethics application to your ethics boards.

2/ Workshop

Conduct a workshop for the stakeholders of your school to familiarize them with the SA Framework and find out where you can locate some of the information.

3/ Collect Data

Use the information from the workshop to start collecting data through document review, and focus groups and interviews.

4/ Review And Analyze Data

Review and analyze data and determine strengths, weaknesses and gaps.

5/ Write Up Results

Synthesize, organize and write up results of the evaluation and identify opportunities for improvement and additional research.

6/ Report Dissemination

Share the report and results with others through presentation, publications and with THEnet so that we can learn from you.

What Needs Are We Addressing?

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Who do we serve?</p>	<p>We recognize and define the communities we serve with particular reference to underserved populations.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • We clearly define the communities and the areas or regions we serve • We clearly define and emphasize underserved communities as groups we are aiming to serve • Leadership, educators, learners and key stakeholders are aware of which regions and communities our school serves • The proportion of educators, learners and key stakeholders who have an awareness and understanding of our school's reference communities and regions 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine whether your school has clearly defined the communities and regions it serves:</p> <ul style="list-style-type: none"> • School and university mission and vision statement • Strategic plans • Annual report • Course material and learner manuals • Documents and data describing reference populations <p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • What communities and regions do you believe the school serves? • What are the communities and regions that the school does not serve as well as it could? <p><i>If the communities and regions the school serves have not been clearly identified, consider organizing stakeholder discussions and/or surveying learners and educators. Below are the types of questions to consider:</i></p> <ul style="list-style-type: none"> • Define the geographical region that the school is serving or should serve? • What communities have difficulty accessing health services? • What communities have poor health outcomes in this region?

What Needs Are We Addressing? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What are the needs of the communities we serve?</p>	<p>We identify the priority health and social needs of the communities and regions we serve and hold ourselves accountable for addressing these needs. This is done in collaboration with groups who are affected by the school's activities such as communities, health services providers and local authorities.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • We conduct a needs assessment to identify the priority health and health care needs of the communities we serve • We have a process to regularly review these needs • We document inequity in health outcomes across the communities and regions that we serve • Leadership, educators and learners can identify priority needs of the communities we serve • Needs assessments are conducted in partnership with communities and others affected by the activities of the school • The majority of leadership, educators and learners are aware of community health and health system needs • We have a process in place to regularly evaluate whether we are meeting identified needs 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine if your school has conducted a needs assessment:</p> <ul style="list-style-type: none"> • Documents and reports describing the process or outcomes of needs assessments • Needs assessment tools referred to and used • School strategic plan <p><i>If your school has not conducted needs assessments:</i></p> <ul style="list-style-type: none"> • Conduct document review of the most recent national, regional and local surveys and reports of health needs including demographics, epidemiological data, mortality/morbidity, burden of disease and socio-economic data <p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <p><i>If there is no school documentation of needs assessment:</i></p> <ul style="list-style-type: none"> • What is the process in place to identify priority needs of the communities the school serves? • What are the type of needs assessed? (e.g. health, social, financial) • Who participates in the process of assessing priority needs? • How are the education, research and service programs addressing the needs of the community? • How does the school evaluate whether it is addressing these needs?

What Needs Are We Addressing? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
What are the health needs of the communities we serve?			<p><i>If there is no process to assess the priority health needs of the community, consider using the following methods:</i></p> <ul style="list-style-type: none"> • Conduct focus groups, surveys, interviews and meetings with stakeholders including students, educators, community members, health service providers, and government authorities • Establish a mechanism to develop a consensus on priority needs the school should address

Additional Tools and Resources

Below are some resources that may help you. These are suggested tools only, and not developed by THEnet.

Health indicators for major health topics by country:

- WHO global health observatory which has country statistics including descriptive and analytical summaries of health indicators for major health topics. <http://www.who.int/gho/countries/en/>
- United States Agency for International Development Demographic and Health Survey Program (select the country quickstats menu. <http://www.measuredhs.com/>)

Tools to help you conduct health needs assessments:

- *Health needs assessment: a practical guide*. National Institute for health and Clinical Excellence, 2005. <https://www.urbanreproductivehealth.org/toolkits/measuring-success/health-needs-assessment-practical-guide>)
- Primary Health Care Research and Information Service Getting Started Guides: "Introduction to needs assessment in primary health care." http://www.phcris.org.au/guides/needs_assessment.php)

For the latest tools from THEnet go to the Framework Toolkit.

What Needs Are We Addressing? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What are the needs of our health system?</p>	<p>We identify the needs of the health system we work in. This is done in collaboration with groups who are affected by the school's activities such as communities, health care providers and local authorities.</p> <p>We are active contributors to improving the health system of which we are a part and making it more equitable through advocacy and reform.</p> <p>We understand and are able to describe the health workforce required to meet the priority health needs of the communities and regions that we serve.</p> <p>We emphasize and increase the provision of and access to comprehensive primary health care and prepare professionals who understand how to tackle social determinants of health.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • Regional health workforce audits that identify gaps in regional health workforce across cadres of health workers • There is documentation of collaboration with health sector partners to identify needs, strengths and weaknesses of the regional health system • School personnel participates in regional health planning and governance organizations and activities • There is evidence of responsiveness or changes in school curriculum in response to health system and workforce needs assessment • The number of and level of engagement in regional health service planning meetings • The number and proportion of school leadership, educators and learners involved in influencing policies and practice to improve health services and systems, with an emphasis on primary health care • The proportion of educators and learners involved in advocacy and health system reform 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine the degree to which your school has clearly defined the needs of the health system:</p> <ul style="list-style-type: none"> • Documents and reports describing the process or outcomes of needs assessments • Needs assessment tools referred to and used • Strategic plans detailing health system needs • University and school documents and/or referenced data describing health workforce priority needs and plans to address them such as accreditation documents, or documents on community partnerships • Curriculum documents describing competencies aligned with health system needs • Documents describing clinical and community rotations embedded in the health system • University and school documents or web pages and/or referenced data describing learner and staff activities that support the health system such as accreditation documents, or documents on community partnerships • Learners and staff reports, projects or research programs that address health system needs • Meeting notes or reports from committees, local health boards, professional bodies that address health system and workforce reform in which educators, staff or learner participate

What Needs Are We Addressing? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What are the needs of our health system?</p>			<p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • What do you believe are the health system needs in the communities and/or region the school serves? • What do you believe are the health workforce needs in the communities and/or regions the school serves? • How do you or others from your school support health system strengthening and workforce planning? (Educators) <p><i>If there is no process to assess health system needs, consider using the following methods:</i></p> <ul style="list-style-type: none"> • Conduct document review, focus groups, surveys, interviews and meetings with stakeholders including students, educators, leadership, community members, health service providers, and government authorities • Establish a mechanism to develop a consensus on priority health system needs the school should address <p><i>Suggested documents to identify the needs of the health system:</i></p> <ul style="list-style-type: none"> • International, national and regional health workforce articles, policies, reports and plans related to health system strengthening, guidelines on health workforce education reform, and needs assessments for health system strengthening

What Needs Are We Addressing? (continued)

Additional Tools and Resources

Below are some resources that may help you. These are suggested tools only, and not developed by THEnet.

Assessing health workforce needs:

- Dussault, G., Buchan, J., Sermeus, W., & Padaiga, Z. (2010). *Assessing future health workforce needs*. Copenhagen: World Health Organization. http://www.euro.who.int/__data/assets/pdf_file/0019/124417/e94295.pdf

Health inequality monitoring:

- World Health Organization. (2013) *Handbook on health inequality monitoring: with a special focus on low-and middle-income countries*. World Health Organization. http://apps.who.int/iris/bitstream/10665/85345/1/9789241548632_eng.pdf
- CSDH. (2008). *Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health*. Geneva, World Health Organization. http://apps.who.int/iris/bitstream/10665/43943/1/9789241563703_eng.pdf

Relevant reports, frameworks and guidelines

- World Health Organization. (2013). *Transforming and scaling up health professionals' education and training: World Health Organization guidelines 2013*. World Health Organization. http://apps.who.int/iris/bitstream/10665/93635/1/9789241506502_eng.pdf
- World Health Organization. (2016). Global strategy on human resources for health: workforce 2030. In *Global strategy on human resources for health: workforce 2030*. http://www.who.int/hrh/resources/global_strategy_workforce2030_14_print.pdf?ua=1

For the latest tools from THEnet go to the Framework Toolkit.

How Do We Work?

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What do we believe in?</p>	<p>We uphold and demonstrate shared values of social accountability as defined by THEnet:</p> <ul style="list-style-type: none"> • Quality • Equity • Relevance • Efficiency • Partnerships <p>Value definitions can be found on page 17.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • Social accountability values are explicit, known and understood by our learners, educators and leadership • Leadership, educators, learners and other partners affected by our activities, including community partners, are able to give examples of how these values are put into practice 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine the degree to which your school upholds social accountability values:</p> <ul style="list-style-type: none"> • School mission statement, vision statement and strategic plans • Annual reports • Course material and learner manuals • Educator recruitment and human resources policies and procedures (e.g. educators must indicate how they adhere to these values as part of a recruitment or performance assessment processes) <p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • What is your understanding of the values of the school? (What are the beliefs that underpin the strategies, approaches and activities of the school?) • The school's values are: [name the values], describe how these values are shown in the day to day workings of the school?

How Do We Work? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How do we work with others?</p>	<p>We partner with individuals, groups, the health sector and communities to design education, research and service activities that address the priority health and social needs of the communities we serve.</p> <p>Our partnerships reflect our genuine commitment to meaningful collaboration with communities, health services, health care providers, and local authorities.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • Community champions/point persons are identified and supported in our communities • There are organizational processes in place for community, health sector or school initiated partnerships that can involve education, research or service activities • Principles and processes are defined in a Memorandum of Understanding or in Terms of Reference documents that are established with the input and agreement of all partners, and include clarity on decision making and conflict resolution • Partners make clear and open communication an ongoing priority by striving to understand each other's needs and interests • Feedback among stakeholders in the partnership improves the partnership and its outcomes • Partners share resources and the benefits of the partnership's accomplishments and seek to develop a sense of equal power among partners 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine the degree to which your school works with others:</p> <ul style="list-style-type: none"> • Documents that describe programs of teaching, service and research designed and/or implemented with others • Evidence or documentation of community and health sector participation in school activities • Evidence or documentation of reciprocal benefits for the school, community and health sector in partnership outcomes • Meeting minutes from collaborations and partnership that describe actions and outcomes • Memoranda of understanding with health sector partners and communities • Documents and audits that describe financial, infrastructure, in-kind services and other resources provided by community members, health sector partners and school including educators and students • Learners handbooks, policy and cultural manuals outlining roles and responsibilities towards communities and partners • Community engagement manuals and policies (e.g. scholarships for learners to work or study in community settings)

How do we work? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How do we work with others?</p>			<p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • Tell me about how (name of specific project or program mentioned by participants) was developed? Who initiated the project/program? • If you have an idea for a project, how could you get it implemented? (Leadership, educators, learners and health sector stakeholders) • Can you provide examples of reciprocal benefits between our school and your organization or community? • How do partnership projects and/or programs benefit both the school and the organization and/or the community? <p><i>If there is no documentation on how the school works with others, consider the following questions:</i></p> <ul style="list-style-type: none"> • How does the school partner with the community in education, research and service? • How does the school partner with the health sector in education, research and service?

Additional Tools and Resources

Below are some resources that may help you. These are suggested tools only, and not developed by THEnet.

- The website of Community-Campus Partnerships for Health has a multitude of tools related to community engagement: <https://ccph.memberclicks.net/resources>
- The Health Extension Toolkit website has useful tools resources to help communities, and the primary care practitioners who serve them: <http://healthextensiontoolkit.org>

For the latest tools from THEnet go to the Framework Toolkit.

How do we work? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How do we make decisions?</p>	<p>Strategic decision-making at our school involves meaningful participation from all stakeholders.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • There are governance structures and processes in place to ensure meaningful participation of key stakeholders in corporate, fiscal and academic decision-making • Important school decisions reflect the input of key stakeholders including leadership, educators, learners and communities • Feedback and concerns of key stakeholders including leadership, educators, learners and communities regarding important school issues is reflected in decision-making • Key stakeholders participated in developing and/or updating the constitution, charter or mission statement • There are examples of policies and processes that changed in response to stakeholder feedback 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine the degree to which your school involves stakeholders when making strategic decisions:</p> <ul style="list-style-type: none"> • Policies and reports on programs or services that changed in response to stakeholder feedback • School organizational chart • Memoranda of understanding between school and stakeholder groups • School mission statement, constitution or charter • Minutes and notes from key committees and relevant meetings that describe actions and outcomes • Written stakeholder feedback and consultation reports • Membership lists for community committees (including learner groups) • Websites, social media outlets and pamphlets with community information indicating how communities can engage with the school

How Do We Work? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How do we make decisions?</p>			<p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners, and key stakeholders:</p> <ul style="list-style-type: none"> • Describe who is involved in decision making at the school. For example: <ul style="list-style-type: none"> • How are community members involved in decision making at the school? • How are health sector stakeholders involved in decision making at the school? • How are learners involved in decision making at the school? • In what ways do you feel that you can contribute to the decision-making processes of the school – in relation to education, research, service, and community partnerships?

THEnet Values Definitions:

Quality

- Health services must be delivered in a way that optimally satisfies both professional standards and community expectations.

Equity

- Opportunities for health gains are available to everyone. Health equity and social determinants of health should be considered in all aspects of education, research and service activities.

Relevance

- The most important and locally relevant problems are tackled first. Decisions on health resources are responsive to community needs and the principles of cultural sensitivity and competency.

Partnership

- Partnerships are key in developing, implementing and evaluating efforts between all stakeholders- faculty and students, communities, health and education systems, and schools.

Efficiency

- The greatest impact on health is achieved through cost-effectiveness and with available resources targeted to address priority health needs..

How Do We Work? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How do we manage resources?</p>	<p>Resources are allocated to support engagement with the stakeholders and communities in the regions we serve.</p> <p>Resources are allocated to the delivery of high quality programs in communities where there is the greatest need for the provision of high quality health services.</p> <p>We encourage reciprocal contributions between ourselves, the community and other stakeholders.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> Resources for community engagement and program operationalization are distributed according to priority needs A significant proportion of school resources are distributed beyond the main campus to other sites (community sites, placement sites, health sector teaching sites) (The absolute proportion to be decided based on school context and needs) Sufficient resources are available to operationalize the school's strategic plan related to community engagement Communities and the health sector make and receive in-kind or financial contributions Key stakeholders are satisfied with resource allocation There is documentation of partnership agreements for engagement with local communities Learner assessment results across sites are similar "Champions" are identified and supported in community and stakeholder groups Funding to support engagement and services in priority areas is sought from a range of sources 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are types of documents your school can use to determine how resources are managed:</p> <ul style="list-style-type: none"> Needs assessments and program report to determine whether goals are operationalized according to priority needs Documents and audits describing external partnerships, including Memoranda of Understanding Budgets and financial reports, indicating proportion of school resources allocated outside the main campus Evidence of grant funding supporting underserved populations (e.g. workforce plans, budgets and reports) <p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> How does the school allocate resources across its various programs? What is the process for matching funding and resource allocation with priority needs? (Leadership and key stakeholders) What is the process for reviewing resource allocation across the school and who is involved in this process? (Leadership) To what degree has the school allocated sufficient resources to all stakeholders involved in the planning and delivery of the health professional education programs to meet their needs? Can you provide examples to illustrate what you mean?

What Do We Do?

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Who are the educators and how are they trained?</p>	<p>We recruit and support educators who reflect the demographics of our reference population, the balance of clinical, biomedical and social sciences, and who support the principles of socially accountable health professional education.</p> <p>We engage and support community members and community health service providers as educators in a manner which strengthens local health services.</p> <p>We assess faculty performance and provide faculty development programs aligned with the goals of socially accountable health professional education.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • Educator selection and promotion processes reflect a diverse mix of professional, cultural, social and community backgrounds • There is a proportional representation and retention of underserved groups among academic, clinical, professional and supporting staff • There is use and recognition of community preceptors in underserved communities and across the region • The role of community members and preceptors as educators is formalized through adjunct appointments • Educator assessment and development programs are designed to update and strengthen teaching and clinical skills relevant to identified priority health care needs • Educators undertake training and development in cross-cultural skills • Educators undertake professional development in effective community engagement • Educator development programs accommodate diverse needs, producing adequate numbers of educators with up-to-date teaching and clinical skills that are relevant to priority health workforce needs • Educators from underserved groups are supported and mentored (professional development) 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine the degree to which your school has recruited and supported educators reflecting the reference population and who support social accountability:</p> <ul style="list-style-type: none"> • Logs or documents describing the number, geographical distribution, number of teaching hours and background of community preceptors • Human resources records describing proportional representation of population groups, and education training, amongst educators • Institutional policies on educator employment and promotion of educators from underrepresented groups • Policies and programs to support staff/faculty from underserved groups/communities/cultures • Documents describing school's policy and recognition of community members as educators • Surveys and documents on curriculum evaluation, including learner feedback on teaching, and changes made to the methodology due to this feedback • Documents and data on the quality of service delivery at teaching sites including community placement reports • Evidence of faculty development programs offered, skills assessment reports and attendance at these programs by educators and stakeholders (including cross-cultural skills and socially accountable education)

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Who are the educators and how are they trained?</p>			<p>Document Review (continued)</p> <ul style="list-style-type: none"> • Assessment and progress reports documenting input from educators and other stakeholders to determine needs for new and ongoing professional development • Audit of educator retention rates and faculty promotion rates <p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • What types of professional development have you undertaken? (Educators) • What additional professional development suggestions do you have? (Educators)

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Who are our learners?</p>	<p>We admit learners who reflect the socio-demographic characteristics of the communities and regions that the school serves with a particular focus on underserved populations and those deemed most likely to be willing to serve those populations and regions.</p> <p>We support their development towards becoming socially accountable health practitioners.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • Our learners are representative of the communities and regions we serve in terms of socio-economic status, geographic distribution, and representation of groups underserved in terms including religion, caste, or ethnicity • The proportion of learner population from the communities and regions the school serves • The proportion of learner population from the identified underserved populations • The ratio of attrition, progress and completion of learners from underrepresented/underserved populations compared to all learners are similar • There are explicit and targeted admission pathways and educational support for learners from underserved populations who may require additional support • Learner progress and completion rates across different groups of learners are similar • Existence of outreach/orientation programs to secondary schools in underserved communities that include learners from those communities: • The proportion of learners involved in recruiting via outreach/orientation programs • Advocacy efforts to support access to health professional education for underserved groups 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the type of documents used to determine the degree to which your school can identify the background and characteristics of learners:</p> <ul style="list-style-type: none"> • Learner admission and selection policies to identify admission pathways for underserved populations to enter your school • Learner database and faculty records describing proportional representation of learner populations (can be assessed through postcode or rural classification) • Selection records to monitor numbers of applications from students from underserved populations • Documents describing programs or groups that support learners from diverse populations (for example, high school pathways programs, rural learner groups, educator roles to support learners) <p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • How did you come to study at the school? (Learners) • What benefit do you think the students have had on this community? (Community) • What contribution do you think the students made to the community? (Community)

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Who are our learners?</p>			<p>Focus Groups/Interviews (continued)</p> <ul style="list-style-type: none"> • What advocacy efforts have students undertaken in this community? (Community) • How are the students supported while in this community? (Financial, infrastructure, mentors) • Do you think your interaction with students contributed to their values towards serving the underserved in rural communities? • What support is available for learners from non-traditional academic backgrounds within the school? (Educators and leaders)

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What do our learners learn?</p>	<p>We have a curriculum that embeds the social accountability values of quality, equity, relevance, efficiency and partnership, the principles of universal access to high quality primary health care, and integrates basic and clinical sciences with population health and social sciences.</p> <p>Our program trains learners to address the identified priority health and health system needs of the communities and regions that we serve (especially underserved populations).</p> <p>We assess the learners' acquisition of competencies relating to working in underserved areas and addressing health inequity.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • The education program, including curriculum content, reflects identified priority health, cultural and social needs of the community • We define the knowledge, attitudes and skills needed to meet the health needs of the populations and regions we serve • The number or proportion of curriculum weeks allocated to learning about high priority community health needs • Curriculum design, delivery, assessment and evaluation reflects the: <ul style="list-style-type: none"> • desired graduate attributes to meet needs • principles of primary health care • focus on social determinants of health • integration of basic and clinical sciences with population health and social sciences • Assessments include focus on competencies that will best prepare learners and graduates to meet the health needs of communities, with an emphasis on primary health care and professionalism • There is a strong alignment between the school's community needs assessment outcome and the desired graduate competencies 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the type of documents used to determine the degree to which your school's education program reflects priority health and social needs:</p> <ul style="list-style-type: none"> • Needs assessment findings and the alignment of needs with learning outcomes and graduate competency documents • Curriculum documents – planning documents, lists of learning outcomes aligned to required graduate competencies, workshops presenting curriculum, and publications • Curriculum database (and the alignment of learning outcomes and relative weighting with priority needs) • Assessment blueprint documents (to check assessment weighting against subject topics, making sure all have equal assessment, and the alignment of learning outcomes with graduate competencies and/or priority needs)

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What do our learners learn?</p>	<p>Our learners are learning to be highly competent health professionals with a commitment to learn about the health, cultural, and social needs of their community, with a focus on the needs of underserved groups.</p>		

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How do our learners learn?</p>	<p>Our training and teaching methods are based on the best available knowledge and are relevant and appropriate to the needs and context of learners.</p> <p>Teaching methods are student centered, service-based, case- or problem-based and the learners learn in context.</p> <p>Our learners learn through a curriculum developed in partnership with key stakeholders, and through direct engagement with the community.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • The curriculum methodology provides learners with: <ul style="list-style-type: none"> • learning experiences with adequate exposure to priority health needs, social determinants of health and cultural issues impacting the community • opportunities for interprofessional learning and team work • contextually appropriate simulation prior to community placement and engagement • Learner satisfaction with curricula and teaching methodology is reviewed on a regular basis • Level of learner satisfaction with curricula and teaching methodology is consistent across learning sites and is of high standing • Assessment is designed to assess the acquisition of the knowledge, skills and competencies required to meet needs • Teaching methodologies are aligned with expected socially accountable values to be shown in practice • Teaching methodologies are relevant and appropriate to learner’s needs and context • Length of time learners spend in supported, educationally sound community placements that are aligned with learning outcomes, graduate competencies, and priority needs of the community 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine the degree to which your school’s teaching methodology reflects learner needs and curricula aligns with graduate competencies:</p> <ul style="list-style-type: none"> • Learner handbooks • Faculty handbooks and/or training material • Curriculum database in which learning methods align with acquiring competencies to meet priority health needs • Accreditation documents in which methodology of curriculum is described • Learner community placement reports (including access to and opportunities for interprofessional learning) • Learner assessments including community and health sector feedback/evaluation on learner performance during clinical placements

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How do our learners learn?</p>			<p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders including communities and service providers:</p> <ul style="list-style-type: none"> • How well do teaching methods prepare learners from the school to work in and with communities? • What aspects of the curriculum address perceived local community needs? (Educators and learners) • Does the curriculum reflect the health challenges of the community? (Educators and learners) • By the end of the final year, do you think you will have appropriate knowledge and skills to be able to care confidently for common health conditions in the region you serve? (Learners)

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Where do our learners learn?</p>	<p>Our learners learn both on campus and in community-based off-campus teaching sites.</p> <p>Our education program provides learners with exposure to the broad spectrum of health including learning at sites where they will be exposed to the priority health, workforce and social needs of the communities we serve, as defined in collaboration with communities.</p> <p>Community placement sites are chosen to provide rich exposure to priority health needs whilst learning in the context in which graduates are expected to practice.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • The number of opportunities for learners to learn through placement opportunities in the community: <ul style="list-style-type: none"> • total numbers of 'learner weeks' spent in community placements and in primary care settings • total number of 'learner weeks/hours' spent practising in tertiary teaching hospitals • The number of 'learner weeks/hours' of placement in community/primary care settings • The number of 'learner weeks/hours' of placement in underserved communities • The number of "learner weeks" of placement sites closely mirrors the distribution of the population. • The geographical location of placement sites closely mirrors the distribution of the school reference population • Stakeholders involved in the creation and evaluation of community placements • There are continuous and sequential community and clinical experiences throughout the curriculum, with the length of time learners spend in placements congruent with learning needs • Placement occurs in the community where there are priority health, workforce and social needs: <ul style="list-style-type: none"> • needs have been defined through a needs assessment 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents your school can use to identify the community and clinical experiences reflecting learner and health service needs:</p> <ul style="list-style-type: none"> • Community profiles of placement sites showing demographic and health indicators • Learner placement policies and databases • Learner community placement reports • Community evaluation of community placements <p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • What do the learners do while on placement? (Community) • How do the learners work with you while on placement? (Educators in community/health sectors) • How do you provide health services or community development projects on placements? (Learners) • How do you work with the community/health service while on placement? (Learners)

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Where do our learners learn?</p>		<ul style="list-style-type: none"> • Process of selection for teaching sites is clearly defined: • Placements provide adequate learner exposure to priority health needs while learning in context <ul style="list-style-type: none"> • teachers/mentors are qualified and the learning outcomes are congruent with graduate competencies community and priority needs • safety of learners in the community is a priority and addressed • Clear guidelines are provided for learners as to their selection of placement location • There is a clear demonstration of partnerships with community in terms of off-campus teaching site selection • Assessment results are equivalent across teaching sites 	

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What contributions do we make to the delivery of health care?</p>	<p>Educators and learners are involved in service delivery related to improving the health of the communities and regions we serve.</p> <p>This service learning reflects the future working environments of graduates.</p> <p>Educators and learners are involved in community development and capacity-building.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • Learners provide services as part of their training that benefit local communities: <ul style="list-style-type: none"> • learners contribute to access or utilization of care • learners contribute to community development projects • The proportion of time of educators and learners are directly involved in service delivery • The number and proportion of joint appointments between education and health care organizations • The number of school activities that have been changed in response to community feedback on needs • Service learning is valued by leadership, educators, learners and key stakeholders • The number of learner projects undertaken in partnership with the community 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents used to determine the degree to which your school contributes to the delivery of health care:</p> <ul style="list-style-type: none"> • Human resource policy on service learning required by educators • List of adjunct educators and the type of services they provide including voluntary work • List of employed educators and the type of services they provide including voluntary work • Relevant human resource documents such as joint appointments • Records of learner service activity and projects including: <ul style="list-style-type: none"> • learner training and placement records • learner placement diaries (assessments) • outcomes of learner projects in communities • Changed policies or guidelines on service learning in response to community feedback • Documents including publications describing change in access, utilization or health status of communities served

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What contributions do we make to the delivery of health care?</p>			<p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • How do you work with health care professionals when on placement? (Learners) • What contribution do you think you and other students have on the local health workforce? (Learners) • Are there other contributions that you make to the community? Can you give an example? (Learners) • How do you give feedback on services provided by learners and teachers? (Community stakeholders) <ul style="list-style-type: none"> • how has the school responded to this feedback? Can you provide examples? • Tell me about what has changed in your community/facility as a result of having learners from (name of school) in your community/practice/health sector facility?

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Does our re-search program relate to the mission and values of social accountability?</p>	<p>The research agenda reflects the priority health and health system needs of the communities and regions we serve.</p> <p>The research agenda is developed and undertaken in partnership with key stakeholders.</p> <p>The research agenda has a focus on participatory and action-focused methodologies.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • The proportion of school research projects that are community based • The proportion of research projects that involve community members and other key stakeholders • The proportion of research projects that focus on solving priority health and health service issues • Demonstration that research projects focused on solving priority health and health service issues are: <ul style="list-style-type: none"> • culturally appropriate • affordable and sustainable, and • the proposed solutions are achievable • The number and proportion of projects employing participatory research methodologies • A research priority agenda that reflects social accountability values and aligns with regional priorities • An increasing proportion of research output (publications and grants) aligned with the priority health needs of the communities we serve • Demonstrated translational impact of research on health services, health outcomes, policy or practice 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are the types of documents your school can use to assess whether the research program and agenda address priority needs:</p> <ul style="list-style-type: none"> • Research strategy document (including how this links with findings from the school's needs assessment) • Research database or list of projects (and/or ethics applications) • Audit of school research grants and publications • Audit of higher degree research and honors learners and their projects • Audit of community requests for partnerships and projects • Research or school reports or accreditation documents that outline translational impact of research on policy or practice <p>Focus Groups/Interviews</p> <p>Below are the types of questions you can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • If you had an idea for a research project in the community, how could you work with the school to develop this project? (For community/health sector) • How have you worked with the school on research or evaluation projects? (For community/health sector)

What Do We Do? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Does our re- search program relate to the mission and values of social accountability?</p>		<ul style="list-style-type: none"> • The proportion of internal school grants, scholarships and higher degrees given based on research that focus on work with the communities and regions served, especially underserved communities • The proportion of research higher degree and honours learners undertaking projects addressing priority health needs • Records of community requests for partnerships and projects and actual research projects and partnerships • Memoranda of Understanding between the school and partners involved in research 	<p>Focus Groups/Interviews (continued)</p> <p><i>If there is no school documentation on this key component, consider the following questions:</i></p> <ul style="list-style-type: none"> • How is the research agenda developed at this school? Do you think it builds knowledge to help meet priority health and health system needs? Please give an example. • How does the school involve local community members in the design or implementation of research? • Has there been any change in policy or practice due to the impact of research from the school?

What Difference Do We Make?

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>Where are our graduates?</p>	<p>Graduates are distributed according to the population and health needs of the communities and regions that we serve, where they can best address health inequities and strengthen the health system.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • The location of graduates closely mirrors geographical distribution of health needs in the communities and regions we serve • The proportion of graduates who remain working with the communities and regions we serve or similar communities five years after graduation • The number or proportion of graduates working in underserved communities (as defined in needs assessment) • The number or proportion of graduates working in identified areas of health workforce shortage 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are suggested documents to identify the degree to which graduates are working in the areas of health and workforce needs:</p> <ul style="list-style-type: none"> • Internal or national graduate tracking data or reports • Alumni tracking data or reports • School publications • Regional health workforce documents or maps

Additional Tools and Resources

Below are some resources that may help you.

THEnet Graduate Outcomes Study Tool:

- A module developed by THEnet to guide schools through the process of planning, carrying out and analyzing graduate tracking. Available Fall 2017 on THEnet's website: <https://thenetcommunity.org/framework-toolkit/>

Some National Comparator Data Sets:

- Australia: MSOD National Data Report 2016. <https://thenetcommunity.org/resource/medical-schools-outcomes-database-national-data-report-2016/>
- Canada: AFMC- Graduation Questionnaire National Report 2016. <https://thenetcommunity.org/resource/graduation-questionnaire-national-report-2016/>
- United Kingdom: HEFCE – Healthcare, Medical and Dental Education and Research. <http://www.hefce.ac.uk/lt/Healthcare/mds/>
- United States of America: AAMC - School Enrolment Survey Report 2015. <https://thenetcommunity.org/resource/results-2015-medical-school-enrollment-survey/>

What Difference Do We Make? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What are our graduates doing?</p>	<p>Our graduates provide care well suited to the health needs of the communities and regions that we serve.</p> <p>They focus on generalist disciplines providing comprehensive primary health care (with attention to the social determinants of health).</p> <p>We produce graduates technically, socially and culturally suited to address the health and social needs of communities and the health system.</p> <p>Our graduates are active in advocacy and broader health systems reform.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • Graduate knowledge, attitudes and skills are relevant to their practice and setting • Evidence that gaps in health services in priority areas of disadvantage are being addressed by local graduates • The number and proportion of graduates engaged in providing primary health care • The number and proportion of graduates engaged in addressing the social determinants of health • The distribution of graduate specialization is proportional to health workforce and health service needs • The balance of graduates working in public versus private system, urban versus rural areas, primary versus secondary versus tertiary care settings reflects workforce and health care needs • The number and proportion of graduates undertaking postgraduate studies for specialization so they can better address needs of community and health workforce (focus on generalism and generalist specialists as needed) • Graduates are recognized by community and government as advocates for their patients and communities • The number and proportion of graduates in leadership roles within health service delivery system 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are suggested documents to review what your school's graduates are doing:</p> <ul style="list-style-type: none"> • School publications with alumni information • Accreditation documents outlining national competency requirements for health professional graduates • School database tracking graduate outcomes • Regional health workforce documents or maps • Regional or national registration or licensing databases (where available)

What Difference Do We Make? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How do we support our graduates and other health workers?</p>	<p>We are involved in the continuum of health professional education and support our graduates and other health workers in general to promote access, quality and efficiency of health care.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • The number and participation in continuing professional development programs offered by the school to support graduates and other health workers to work in areas addressing priority health needs • The number and uptake of continuing professional development programs for graduates and other health workers to be involved in teaching • The number and proportion of graduates and other health workers participating in continuing professional development appropriate to practice and setting • The number and proportion of graduates and other health workers who participate in training programs specific to local priority health needs • The number and proportion of alumni available to mentor learners, new graduates and other health workers • The number and proportion of graduates and other health workers who become adjunct academic tutors or adjunct supervisors in clinical practice 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are suggested documents to determine how your school supports its graduates and other health workers:</p> <ul style="list-style-type: none"> • Continuing professional development policies, programs and Memoranda of Understanding with postgraduate training providers • School human resources and clinical placement databases • School adjunct and clinical appointment policies <p><i>Audit of existing adjunct tutors and clinical supervisors:</i></p> <ul style="list-style-type: none"> • Assess for longitudinal participation • Satisfaction with existing levels of support and training • Assess for ongoing support required

What Difference Do We Make? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>How have we shared our ideas and influenced others?</p>	<p>We are engaged in a continuous process of critical reflection and analysis with others and disseminate what we learn in many ways.</p> <p>We influence policy makers, education providers and other stakeholders to transform the health system.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • The number of relevant publications • Number of hits and views of relevant material on school website • The number of relevant conference presentations • Media appearances or press releases related to social accountability and health professional education (and coverage in social media) • Partnerships with relevant stakeholders including other universities • Educator and learner exchanges relevant to social accountability related activities • Examples of policy changes in response to school influence • Active membership of and contribution to professional organizations relevant to social accountability • The number and topic of relevant joint research projects • The number and sites of peer education and mentoring visits • The number of requests for collaboration • Evidence of continual improvement in response to critical self-reflection and feedback 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are suggested documents to review how your school shares ideas and influences others:</p> <ul style="list-style-type: none"> • List of relevant school publications and conference presentations • Citation counts and other citation metrics of relevant publications • Relevant school website activity and metrics • Community meetings or newsletters • Register of academic exchanges • Annual and financial reports • Number of benefactors supporting the school • Register of involvement of school staff as office holders in non-profit and professional groups • Accreditation visits and external examiners reports • Policy records and quality improvement frameworks • Proof of research utilization • Documents listing responses to evaluation and self-assessment

What Difference Do We Make? (*continued*)

Additional Tools and Resources

Below are some resources that may help you. These are suggested tools only, and not developed by THEnet.

Consider social network analysis to map and measure relationships between people, groups, organizations and communities. It can also be used to measure the dissemination of learning.

- Knowledge Sharing Tools and Methods Toolkit – Social Network Analysis. <http://www.kstoolkit.org/Social+Network+Analysis>

For the latest tools from THEnet go to the Framework Toolkit.

What Difference Do We Make?

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What impact have we made with other schools?</p>	<p>We actively engage with and support other institutions across national boundaries to progress socially accountable health professional education.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • The number of schools joined in socially accountable projects • The number of schools recognizing social accountability as a core value • Changes to educational programs in other schools as a result of interaction with our school • Increasing number of enquiries from other health professionals about social accountability • The number of schools assisted to adopt socially accountable health professional education • The number and topic of relevant joint research projects • The number of publications and conference presentations (and citation metrics) • The number and site of peer education and mentoring visits • Mentoring ties and buddy relationships between schools • Site visit to other schools 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are suggested documents to identify the impact your school has made with other schools:</p> <ul style="list-style-type: none"> • School website and social media sites (tracking system of hits and participation) • Number of requests for collaboration • Meeting notes • Joint publications and conference papers with citation metrics • Documentation of mentoring relationships • Record of joint projects and project outcomes

Additional Tools and Resources

Below are some resources that may help you. These are suggested tools only, and not developed by THEnet.

Consider social network analysis to look at relationships between schools and the strengths of these ties.

- Knowledge Sharing Tools and Methods Toolkit – Social Network Analysis. <http://www.kstoolkit.org/Social+Network+Analysis>

What Difference Do We Make? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What difference have we made to the health of the communities and regions that we serve?</p>	<p>We improve the health and wellbeing of all in the communities and regions that we serve, with a particular focus on the health of underserved populations.</p> <p>We have a positive impact on priority health and social needs of our communities.</p> <p>We are recognized as agents of positive change by our partners and key stakeholders in the community.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> Improved health indicators across the communities and regions that we serve: <ul style="list-style-type: none"> mortality rates morbidity rates preventable hospitalizations Reduced inequity in health outcomes across the communities and regions that we serve Improvement in education completion and employment rates across the communities that we serve Increased community satisfaction with care Improved measures of access to care for all Improved access to health education opportunities for underrepresented groups Improvement in utilization of health services among underrepresented groups Models of partnership that reflect social accountability values Numbers of community meetings held Number of joint activities and level of participation Perceived impact of school by key stakeholders in the community and health service 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are suggested documents to identify the degree to which your school has influenced the health of the communities and regions it serves:</p> <ul style="list-style-type: none"> National and local health surveys and statistics Number of health services provided National and regional mortality and morbidity data Preventable hospital admissions data Memoranda of Understanding (or other arrangements with key stakeholders) School annual reports Social, economic, employment and infrastructure data for populations <p><i>Audit of health outcomes in communities:</i></p> <ul style="list-style-type: none"> Where data is not already collected and aggregated, a school might need to audit and collect data about health status and health service utilization, and work with the health system to strengthen systems for recording this information

What Difference Do We Make? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What difference have we made to the health of the communities and regions that we serve?</p>			<p>Focus Groups/Interviews</p> <p>Below are types of questions your school can ask in focus group discussions or in interviews with leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • How satisfied are you with the activities of the school in the region? • How have students and graduates of the school made noticeable improvements on the health of the communities in the region? • In what ways does the school help the local community to organize themselves for health action? • What examples are there of the school responding to community need? • What could the school do better to improve health outcomes?

What Difference Do We Make? (continued)

Key Component	Our Aims (aspirations)	How do we know we are achieving our aims? (indicators)	What data can be gathered? (suggested sources of evidence)
<p>What difference have we made to the health system in our region?</p>	<p>In partnerships with stakeholders, we contribute to the transformation of health systems to be of better quality, more equitable and cost effective as well as more relevant to the health needs of our reference populations.</p> <p>We improve access to and the quality of health care for the communities and regions that we serve.</p> <p>We help the health system to deliver health services in a way that optimizes cost benefit.</p> <p>We are recognized agents of positive change by our partners and key stakeholders in the health system.</p>	<p><i>The following indicators will assess our progress towards these aims:</i></p> <ul style="list-style-type: none"> • Improvement in health workforce numbers and retention in underserved areas • The demographic data of those accessing health services closely mirrors the demographics of those with the greatest health care needs • The availability and distribution of health services in the region better aligns with priority health needs of the community • Improving cost benefit of service provision (better outcomes for the same or lower cost) • A demonstrable improvement in quality improvement processes within the health system (and commitment to continuous quality improvement) • An improved safety record within the health system • Demonstrable changes in health care policy and/or health service delivery as a result of the school's activity • Models of partnerships reflect social accountability values • Health service providers perception of the contribution of the school • Leadership, educators and personnel in positions of responsibility within the health system 	<p><i>Use one or more of the following methods to gather data to assess progress towards these aims:</i></p> <p>Document Review</p> <p>Below are suggested documents to identify the difference your school has made to the health system in your region:</p> <ul style="list-style-type: none"> • Regional data about health workforce distribution and retention • Health service policies around quality improvement and safety • Health service utilization data • Health service budget and resource allocation • Memoranda of Understanding (or other arrangements) with key stakeholders • School annual reports • Human resources records <p>Focus Groups/Interviews</p> <p>Below are types of questions your school can ask in focus group discussions or in interviews leadership, educators, learners and key stakeholders:</p> <ul style="list-style-type: none"> • Are you able to give examples of changes in the health system in this region due to the activities of the school? • In what ways has health service capacity increased to meet health needs since the development of the school?