

**MOTION FORM**  
**CANADIAN MEDICAL ASSOCIATION – GENERAL COUNCIL 2015**

<b>MOTION CATEGORY AND TYPE</b>	<b>x Policy Motion</b>			
Delegates' Motions	<b>Directive Motion</b>			
<b>MOVER</b> Dr. Salina Teja				
<b>SECONDER</b> Dr. Natasha Snelgrove				
<b>MOTION</b>				
The Canadian Medical Association affirms its support for the continued use of the arm's-length, anonymous pre-accreditation survey as an integral component of the national system of accreditation for postgraduate medical education.				
<b>1. SUBSTANTIVE RATIONALE</b>				
Resident input into the accreditation process is critical to a meaningful national process. Resident Doctors of Canada (RDoC) has been administering a pre-accreditation questionnaire since the early 1980s that ensures that residents' perspectives and concerns are accurately and adequately voiced in a safe and confidential manner. Currently, the process of obtaining resident input into the accreditation process is being examined by the Task Force on Resident Input into the Accreditation Process involving the Royal College of Physicians and Surgeons of Canada, Collège des médecins du Québec and College of Family Physicians of Canada. The continued use of the RDoC pre-accreditation questionnaire appears to be at risk. This is of significant concern to learner organizations (i.e., RDoC, Fédération des médecins résidents du Québec) and the residents they represent.				
On behalf of our 12,000 resident members, RDoC articulated four principles for resident input into the national accreditation process: namely, that it include (1) an external, third party, confidential survey of residents during accreditation; (2) an arms-length process between the faculties of medicine and the certifying bodies; (3) qualitative data gathering; and (4) the confidential, anonymized collection of feedback. However, RDoC is very concerned that the current direction and approach being taken by the Task Force does not reflect an explicit commitment to these principles, and may ultimately result in the abandonment of the resident pre-accreditation questionnaire.				
As the national voice for physicians across Canada, we believe that this endorsement by CMA will help ensure a continued commitment to physician health and wellness and encourage a meaningful focus on professionalism.				
<b>2. KEY STAKEHOLDERS:</b> Key stakeholders in the national accreditation process for postgraduate medical education include the accrediting bodies that are represented on the Task Force (i.e., the Royal College of Physicians and Surgeons of Canada, College of Family Physicians of Canada and Collège des médecins du Québec) and the representative learner organizations (Resident Doctors of Canada and their Provincial Housestaff Organizations, and the Fédération des médecins résidents du Québec).				
<b>3a. SUGGESTED IMPLEMENTATION:</b> Suggested implementation would be for the CMA to write a letter to the Task Force to strongly encourage them to continue to use the learner administered pre-accreditation survey that ensures resident input is meaningfully incorporated into accreditation in a confidential manner, and to more generally adopt/commit to the four key principles for a national accreditation process put forward by Resident Doctors of Canada.				
<b>3b. SUGGESTED IMPLEMENTATION (by mover/seconder):</b> RDoC would be pleased to provide any additional information/background on this issue as requested/required.				
<b>4. RELEVANCE TO CMA STRATEGY</b>				
<b>Medical professionalism</b>	<b>High</b>	<b>Medium</b>	<b>Low</b>	<b>N/A</b>
➤ Advance medical professionalism	x			
➤ Improve physician health and well-being	x			
➤ Strengthen the national voice of the CMA for the medical profession				x
<b>Patients and the public</b>	<b>High</b>	<b>Medium</b>	<b>Low</b>	<b>N/A</b>
➤ Lead national vision for a healthy population and world-class health care			x	
➤ Maximize strategic relationships		x		
<b>Growth and relevance</b>	<b>High</b>	<b>Medium</b>	<b>Low</b>	<b>N/A</b>
➤ Develop and market products and services that are highly responsive to member needs				x
➤ Increase member engagement, member satisfaction and membership growth		x		

**5. ESTIMATED RESOURCES REQUIRED (money, time, human)**

HR less than one person week	HR more than one person week – less than one person month	HR over one person month	Under \$5,000	\$5,000-\$50,000	Above \$50,000
<b>x</b>			<b>x</b>		

**6.** Has this motion (or similar) been presented to another organization by the mover/seconder?

No <b>x</b>	Yes	If yes, please indicate the name of the organization, when it was presented and the outcome.
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**7. ADDITIONAL COMMENTS:** The accreditation process is critical to ensuring quality postgraduate medical education (PGME) in Canada. The RDoC pre-accreditation questionnaire has been an instrumental tool used since the early 1980s to ensure that residents' perspectives and concerns are accurately voiced, in a safe manner, to effect positive change on the Canadian PGME system and ensure the development of high-quality medical practitioners who meet societal needs. Throughout the years, RDoC has sought to review and update the questionnaire to ensure it is aligned with changes in PGME standards, and saw the Task Force as an important opportunity to further improve the questionnaire, including increasing its contributions and transparency in the formal accreditation process, without compromising resident confidentiality. For more information/background, please see Appendix 3 "RDoC Pre-Accreditation Questionnaire". —

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