Accreditation and Residents

Dr Keith Wycliffe-Jones Chair, CFPC Accreditation Committee and Survey Chair

Dr Shirley Schipper Member, CFPC Accreditation Committee and Survey Chair

Dr Ric Almond, CFPC Director of Accreditation

Dr Robin Clouston, RDoC representative ,CFPC Accreditation Committee

Dr Steve Hawrylyshyn, Ex Resident Surveyor

Ms Judith Scott, CFPC Accreditation Manager
Accreditation and Residents

We have no conflicts of interest to declare
Accreditation and Residents

Objectives

• Know how FM accreditation works including the role of the Resident on a survey team
• Recruit potential Resident surveyors for 2016
• Know how residents can provide input into programs undergoing accreditation
Accreditation and Residents

Plan

• Context (15 minutes)
• Resident roles (15 minutes)
• Large group discussion-Q&A (50 minutes)
• Wrap Up(10 minutes)
Accreditation and Residents

Accreditation is...
Accreditation and Residents

Accreditation is...

- A peer-review process of *continuous quality improvement*
- Based on *standards* common to all postgraduate medical training programs in Canada
- An *opportunity* to promote a program’s strengths and identify areas for improvement
Accreditation Standards

- New “Red Book” (2012)
- B standards
- CanMEDS-FM
- CFPC Evaluation Objectives
- CFPC Curriculum documents
- Triple-C/competency-based focus
- Program evaluation/CQI
- Competency-based assessment
Accreditation and Residents

General Standards of Accreditation

• “A” Standards
  - Apply to University, specifically the office of the Postgraduate Dean and Educational sites

• “B” Standards
  - Apply to EACH residency program
Accreditation and Residents

The B-Standards

- STANDARD B.1: ADMIN. STRUCTURE AND SUPPORTS
- STANDARD B.2: GOALS AND OBJECTIVES
- STANDARD B.3: LEARNING ENVIRONMENT
- STANDARD B.4: RESOURCES
- STANDARD B.5: CLINICAL, ACADEMIC, AND SCHOLARLY CONTENT OF THE PROGRAM
- STANDARD B.6: ASSESSMENT OF RESIDENT PERFORMANCE
The CFPC Accreditation Process

The Accreditation Committee makes a final decision on the program’s status and recommends follow-up to ensure CQI.

Information about the program (PSQs) is sent from the University to the CFPC.

The University rectifies any factual errors and sends the report back to the Accreditation Committee.

The CFPC and the RCPSC organize the accreditation visits to the residency programs.

The survey team visits the program, makes a recommendation, writes a report, and sends it to the University. 

University

Accreditation Committee

Survey Team

CFPC
Current process (contd.)

CFPC Accreditation Committee

i) New Program Accreditation
ii) Accredited program with/on;
    - Regular cycle review (currently 6 years)
    - Progress report
    - Internal review
    - External review
    - Notice of intent to withdraw
Current process (contd.)

- Accreditation Committee makes final decision - meets q6mo
- Transmittal letters
- Final reports after Accreditation Committee
- Offer of follow up round-table discussion with Program/PGME
Continuous Quality Improvement (CQI)

Shift in FM from point-in-time quality assurance exercise to approach focused on Continuous Quality Improvement

- Program Evaluation – related standards
- Survey reports
- Progress reports
- Internal Review
- External review
Challenges

- Intense for Programs/schools and Surveyors
- Episodic and restrictive
- (Some) standards open to interpretation
- Survey teams –leadership, coordination, consistency
- Tick box vs qualitative/in-depth
- Culture of Pass/Fail vs CQI
- Done to vs done with
- Resident protection
New standards and process-development

- Need for updated standards
- Build on CQI approach - *continuous improvement*
- Balance between outcomes and process
- Improve transparency/consistency
- FMEC-PG accreditation alignment
- Support programs and PGME offices
- Reduce burden/fatigue
- Promote innovation
New standards and process-development

• New PG standards development- RCPSC, CMQ, CFPC
• Institution level categories of accreditation
• New process development;
  - Accreditation Management System (AMS)
  - Program Action Reports vs mandated internal reviews
  - 8 year cycle
Proposed Accreditation Reform: Implementation Plan

**July 1st, 2019**

New Standards & Processes Apply to all.

**Prototype ("P") 1**

P2

P3

Cohort 1

Cohort 2

Cohort 3

Cohort 4

Cohort 5

Cohort 6

Cohort 7

Cohort 8

Cohort 9

Cohort 10

Cohort 11

Cohort 12

Cohort 13

Cohort 14

Cohort 15

Cohort 16

Cohort 17

**Winter/Summer 2016 AC approval: Balanced cycle, removal of IRs, and Inst. status (endorse draft stds)**

**June 2017 AC approval: New stds, process**

Provide surveyor AMS to AB & Queens teams

Provide program AMS & New Stds to Dal and McGill

Calgary (Feb 2015)

McMaster (Apr 2015)

Sask. (Nov 2015)

Sherbrooke (Apr 2016)

Memorial (Sept 2016)

Ottawa (Nov 2016)

Laval (April 2017)

Alberta (Nov 2017)

Queens (Nov 2017)

Dalhousie (Nov 2018)

McGill (April 2018)

Western (Nov 2019)

UBC (April 2020)

Toronto (Nov 2020)

Montreal (April 2021)

NOSM (Sept 2021)

Manitoba (Nov 2021)

Calgary (April 2023)

McMaster (Nov 2022)

Sask. (Oct 2022)

Montreal (April 2024)
Accreditation

Questions?
Residents and accreditation

Why should residents act as surveyors?

- Opportunity to enrich the academic experience of residents and to increase understanding of accreditation - discover “accreditation in action”
- Opportunity to develop leadership skills
- Opportunity to network
Residents and accreditation

Opportunity to claim Mainpro Credits

• Can carry over up to 30 Mainpro-M1 and 5 Mainpro-MC credits into your first active cycle.
• Claim credits for Accreditation visits as any other physician would.
• Claim **Mainpro-M2 credits** under “Non-Mainpro Accredited programs” for **1 credit per hour** of participation.
• You can fill out a “Linking Learning to Practice” form to claim 2 Mainpro-MC + 2 bonus Mainpro-M1 credits.
Accreditation and Residents-process

Before the Accreditation Survey

- Pre-Survey visit - the College meets with the Programs and chief residents several months before the visit
- Pre-Survey documentation for the Survey Team is prepared. These include:
  - Pre-survey questionnaires (PSQs) completed by the programs
Current process

- Pre-survey questionnaires (PSQ’s) - on IGLOO
- CFPC survey team (9-12):
  - Survey Chair from CFPC Group
  - A standards (PGME office) reviewer
  - Resident Rep(s) (2 Reps for Quebec visits – 1 Rep outside Quebec)
  - FMRAC Rep
  - Post-Graduate Dean
  - Program & Site Directors
  - Enhanced Skills lead reviewer
  - Palliative Care reviewer
Current process

On-site Survey

- Sunday to Thursday/Friday
- Visit all sites
- Tri-angulation of data
- Exit meeting - recommendation of status and follow-up;
  - 2 year program
  - Enhanced Skills Program
  - (Palliative Care Program-conjoint exit)
Accreditation and Residents

What is the focus of the survey team during the visit?

- **EVIDENCE** on how the program is meeting standards
Accreditation and Residents

What is the focus of the survey team during the visit?

- Program director
  - Overall view of program
  - Response to previous challenges
- Department head
  - Support for program
  - Resources available to program
- Teaching faculty
  - Involvement with residents
  - Communication with program director
Accreditation and Residents

Meeting with ALL residents

- Looking for balance of strengths & challenges; focus on Standards
- Of all the meetings, the time with the residents has perhaps the greatest influence on the surveyors
Accreditation and Residents

Topics discussed with residents (anonymous)
How the program supports residents to achieve competencies

- Objectives of training
- On-going assessment of resident performance
- Increasing professional responsibility
- Academic program / protected time
- Program evaluation
- Career counseling; Safety; Intimidation and harassment
- Resident support
Accreditation and Residents

Other Resident input

• RDoC survey data – shared with resident rep

• Residents in program - involvement in preparation for accreditation and contributions during and post visit
Accreditation and Residents

In Summary

• Residents are critical to the process, and your input is highly valued
Accreditation and Residents

2016 Surveys

• Université de Sherbrooke – April 3-8, 2016
• Memorial University – September 11-16, 2016
• University of Ottawa – Nov 27- Dec 2, 2016

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Accreditation and Residents

Thank-you