Program Administrators

University of Toronto
Pre-Accreditation Review Visit
July 2020
Welcome & Introductions
Presentation Objectives

To understand:

- Accreditation review timing
- The purpose of accreditation
- CanERA – What is it?
- The accreditation review process
- The role of the program administrator in an accreditation review
  - In preparation for the review
  - The day of the review
  - Following the review
**Canadian Residency Accreditation Consortium:**
The conjoint group representing the Royal College, CFPC, and CMQ tasked with the development and ongoing improvement of CanERA

**Canadian Excellence in Residency Accreditation:**
The name given to the new system of accreditation

**Canadian Accreditation Management System:**
The digital accreditation management system, a fundamental component of CanERA
CanRAC’s Response to the Global Pandemic

• recognize the impact of COVID-19 on clinicians, residents, and staff, and on the healthcare and medical education systems in general
• consider and prioritize the safety of all individuals along with the practicality of travel
• make the best decisions possible based on the information available
• communicate that information as it becomes known, and revisit decisions regularly as the situation changes
CanRAC’s Response to the Global Pandemic

- maintain critical operations as much as possible with flexible and creative solutions, balanced against the many other demands on health care providers
- maintain the integrity and rigour of the CanERA accreditation process
- manage individual exceptions, both in the moment and with guidance at later points in the process, rather than shifting all accreditation activities downstream (recognizing that it is uncertain how long the COVID-19 pandemic may persist)
U of T November 2020 Regular Review

In consideration of “Zoom Fatigue”, multiple time zones and additional factors, some modifications have been made to the original plan:

• **Two week duration**: Review will begin on Sunday, November 22, 2020 and conclude on Friday, December 4, 2020

• Program reviews will occur on **Mondays, Tuesdays and Thursdays**
  – Survey team deliberations will occur on Wednesdays and Fridays

*The final schedule assigning specific program reviews to specific dates has not yet been finalized and is actively being worked on at this time*
Impact of COVID-19

• Acknowledgment of exceptional times
• Accreditation does not ignore the present circumstances but does not focus on them; objective is to evaluate residency programs and institutions as would occur in a typical accreditation review
• Royal College’s Principles for Decision-making in a Changing Environment
Why is accreditation important?

- Ensures the quality of residency education provided to residents across Canada
- Provides an external, objective evaluation against required expectations
- Contributes to the internal continuous quality improvement (CQI) of residency programs and institutions
CanERA introduces ten key changes...

- New Standards: updated for institutions and programs to improve clarity
- New Evaluation Framework: including rating at the requirement level, and identification of leading practices and innovations
- Institution Review Process: consisting of an enhanced institution review, including an institution accreditation decision
- New Decision Categories & Thresholds: to improve consistency of decisions
- Enhanced Accreditation Review: refined processes, enabling efficient and focused accreditation reviews
- Digital Accreditation Management System (CanAMS): to facilitate accreditation & quality improvement activities
- Emphasis on the Learning Environment: increased focus on the quality and safety of the learning environment
- Emphasis on Continuous Improvement: including a focus on empowering and supporting institutions and residency programs
- 8 YR Cycle & Data Integration: regular accreditation reviews, balanced with ongoing integration of quality improvement data
- Evaluation and Research: systematic approach to the continuous improvement of CanERA
Standards of Accreditation
Standards of Accreditation

Institution (PGME) Accreditation

• General Standards of Accreditation for Institutions with Residency Programs

Residency Program Accreditation

• General Standards of Accreditation for Residency Programs

• Specific Standards of Accreditation for each discipline
Standards Organization Framework

Accreditation Domain

Standard

Element

Requirement

Indicators (Mandatory and Exemplary)

Requirement

Indicators (Mandatory and Exemplary)

Requirement

Indicators (Mandatory and Exemplary)

Requirement

Indicators (Mandatory and Exemplary)

Key level of focus
Emphasis on Value of and Support for Administrative Personnel

STANDARD 8: Administrative personnel are valued and supported in the delivery of the residency program.

Element 8.1: There is support for the continuing professional development of residency program administrative personnel.

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<th>Requirement(s)</th>
<th>Indicator(s)</th>
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| 8.1.1: There is an effective process for the selection and professional development of the residency program administrative personnel. | 8.1.1.1: The standardized job description for residency program administrative personnel outlines the mandate, expectations, time allocation, reporting and accountability for the role, and is applied effectively.  
8.1.1.2: Residency program administrative personnel are selected based on the central criteria and guidelines.  
8.1.1.3: Residency program administrative personnel receive professional development, provided centrally and/or through the residency program, based on their individual learning needs.  
8.1.1.4: Residency program administrative personnel receive feedback on their performance in a fair and transparent manner. |
Additional Discipline-Specific Documents

Traditional residency programs:
• Objectives of Training (OTR)
• Specialty Training Requirements (STR)

CBD* residency programs:
• Competencies
• Training Experiences

AFC Programs:
• Competency Training Requirements (CTR)
• Competency Portfolio
  – For the candidate
  – For the educator

*Programs are held to standards in place 12 months in advance of review

* Competence by Design
Question

• Do you know where to find the specialty-specific documents (OTR, STR, SSA) for your program?

• In the CanAMS program documents folder
Getting ready for your upcoming regular accreditation review
The Program Accreditation Review Team

- Chair – Dr. Andrew Warren
- Deputy Chair – Dr. Lisa Welikovitch
- Surveyors
  - Specialists from another discipline
  - two surveyors per program
- Resident representatives (RDoC / FMRQ)
  - accompany surveyors on selected program reviews (Resident surveyors review a variety of programs!)
- Regulatory authorities representative
- Other observers
Regular Accreditation Review Process

- Program/Institution Submits CanAMS Evidence Instruments
- Specialty Committee (SC) Provides Input
- Program Response
- Residency Accreditation Committee Makes Final Decision
- SC Reviews Report & Provides Input
- Surveyors develop Report and Recommend Decision
- Accreditation Review
Which programs will be reviewed?

- All programs that are “active” at the time of the onsite portion of the accreditation review
  - There is a resident/trainee, as appropriate (this includes visa residents/trainees), registered for the complete program (i.e., they participate in all components of the accredited program, following the program curriculum)
  - **Exceptions:** Programs with follow-up reviews where the deadlines are more than six months prior to or following the date of the regular accreditation review are not typically reviewed

- Inactive programs are not reviewed: Accreditation status is withdrawn if inactive for two regular accreditation reviews in a row
Accreditation Review: Your Role as PA

- Pre-review: Create and organize logistics for program review schedule
- Pre-review: Assist with CanAMS instrument population/review
- Pre-review: Prepare documentation (e.g., resident files and minutes)
- Pre-review: Assist in ensuring PD response to specialty committee questions is uploaded

Accreditation Review: Participation in the review and onsite support
Create and organize logistics for program review schedule
Creating the Accreditation Review Schedule

- Assignment of specific program reviews to specific dates is not yet final
- Inform PGME office quickly if you foresee a definite scheduling conflict
  - e.g., residents/faculty attending specialty conference
- The PGME office will provide you with a copy of the program review schedule template
- Any questions/concerns with the schedule should be directed to your PGME office
Accreditation Review Schedule Template

• **Includes:**
  – Document review
  – Program Director
  – **Program Administrator**
  – **Department/division chairs**
  – Residents** (groups of max 15-20)
  – Teaching faculty**
  – Competence Committee (or equivalent)
  – Residency Program Committee (RPC)
  – Additional (15 min) meeting with program director (if required)
  – Exit meeting (15 min) – the next morning at the hotel (7:30am)
  – Breaks

** Scheduled anytime after PD but before RPC
Other Information to Include in Schedule

• Contact information
  – Names, titles, locations, phone numbers

• Digital platform/connection information - TBD

• List of all participants for each meeting
  – Names, titles, PGY levels for residents
  – Indicate if in person or via videoconference
Let’s walk through a typical program review schedule…

• Document review (45 min)
  – Scheduled at the beginning of the review

• Program Director (60 min)
  – Always scheduled after the document review
Let’s walk through a typical schedule…

• Program Administrator (You!) (15 min)
  – Scheduled after the program director but before the RPC meeting

• Department Head/Division Chair (15 mins)
  – Scheduled after the program director but before the RPC meeting
Let’s walk through a typical schedule…

• Residents
  – One hour per group of residents
    • If more than one group, divide by PGY level or junior/senior
  – Scheduled after the program director but before the RPC meeting
  – ALL residents invited to attend/participate in their resident meeting(s)
Let’s walk through a typical schedule…

• Residents (cont’d)
  • Are visa trainees or (clinical) fellows invited to attend?
    • Different funding / title across Canada
    • For accreditation purposes only, a resident is a person who is following the same academic program/training as a resident eligible to write College exams – funding doesn’t matter!
Let’s walk through a typical schedule…

• Residents (cont’d)
  – Suggestions to help residents prepare:
    • Complete the resident organization questionnaire
    • Have residents meet as a group to discuss strengths and challenges prior to visit
    • Help residents understand what to expect
Let’s walk through a typical schedule…

• Faculty (45 min)
  – Scheduled after the program director but before the RPC meeting
  – Teaching faculty who sit on RPC need only attend RPC meeting. If all faculty sit on RPC, separate faculty meeting is not required.
Let’s walk through a typical schedule…

- Competence Committee (30 minutes)
  - All members to attend
- Residency Program Committee (45 minutes)
  - MUST be the LAST meeting of the review (other than PD touch base)
  - All members to attend, including resident representative(s)
  - Smaller programs: Faculty and RPC meetings can be combined when most faculty are also members of RPC
  - Important: PD attends part of meeting
Let’s walk through a typical schedule…

- Exit meeting with program director
  - Surveyors inform program director of:
    - **recommendation** on the accreditation decision
    - Any leading practices and/or innovations identified
    - Any areas for improvement that specifically require follow-up in two years (AFI-2y)
  - The accreditation review report is not provided at this time
Tips for Organizing the Schedule

• As soon as you learn your date, book your residents and involved staff right away
• If resident will be on off-service rotation, inform that service as soon as possible and request the resident be released for the meeting(s)
• Book any video-conference equipment
• Review draft schedule with PD before submitting to PGME
  – Respect recommended time limits
• Notify all participants about the review
  – Their role
  – Their attendance
• Send out a reminder to all attendees a few days before the review to attend their specific meeting and to arrive on time
Submitting the Schedule

- Submit your draft schedule to the PGME office
- They will review it and submit it to the Royal College
- The Royal College may request revisions to the schedule
CanAMS instrument population/review
This is the first impression of the program:

- Be clear and concise!
- No typos, spell out abbreviations, and use consistent formatting
- Ensure uploaded documents are formatted appropriately and uploaded to the relevant section
- Ensure evidence is current and all hyperlinks are working (links must not require a password)

Deadline for completion provided by PG office

The first time around this can still be a fair bit of work; however, moving forward much of this will be a process of review for updates
CanAMS Instruments

- Wherever possible, please utilize the narrative section provided, rather than uploading documentation (unless it is truly appropriate).

- If uploading a document, include an overview of what is attached in the narrative, to give a sense of what the purpose of the attachment is.
Access to CanAMS Instruments

Specialty Committee

Royal College

University

ALLOWS ACCESS TO EVIDENCE (3-4 MONTHS IN ADVANCE)

ALLOWS ACCESS TO EVIDENCE

PROVIDE COMMENTS

ALLOW ACCESS EVIDENCE & COMMENTS

Program Director

Surveyor

ADDS COMMENTS

ALLOW ACCESS EVIDENCE & COMMENTS

Surveyor
Prepare for the formal documentation review
Formal Documentation Review

• The following must be available during the document review:
  – Residency Program Committee (RPC) minutes (past two years)
  – Competence Committee (or equivalent) minutes
  – Resident files
    • A sampling, i.e., one or two residents from each year, including files of any residents in difficulty/ requiring remediation
    • If electronic assessments (e.g., one45), provide computer access
    • Additional files may be required by the surveyors

Tip: Ensure that you have the resident sign a release of information letter to allow the reviewers to view their file
Preparing the Resident Files

• Ensure that all documentation is well organized and up-to-date

• Resident files (sampling)
  – Recommended breakdown:
    • Contact information
    • Summary of rotations/learning experiences
    • Documentation of meetings with PD
    • Contracts, leaves, remediation contracts w/schedules, objectives/competencies, assessments etc.
    • Royal College documentation
    • Assessments
    • Application forms
Preparing the Minutes

- Residency Program Committee (RPC) Minutes
  - Two years
  - Attendance

- Competence Committee (or equivalent) Minutes
  - Two years (though at this point in time the CC may not have been in existence for two years)
  - Attendance
What should you do if the surveyors request a resident file and the resident has not given permission for their file to be shared?

- File cannot be provided to the surveyors
- Advise the surveyors that resident has not consented
- Tip: When obtaining consent prior to the survey, reassure residents that their files are being reviewed for process:
  - Are meetings with PD happening?
  - Are assessments performed and documented in a timely way?
  - What is process for remediation?
Assist in ensuring program director response to specialty committee questions is uploaded
Responding to Specialty Committee Input

- Uploaded to CanAMS (Documents tab) 1-2 weeks in advance of the accreditation review
  - PG Office will notify the program director when available
- Response deadline will be provided (typically a week to respond)
- PD asked to be clear and concise in their response
- The surveyors may ask for additional information during the various meetings
Participation in the review and support on review day
Your Meeting with the Surveyors

- Discussion may focus on (but not be limited to):
  - Overall impression of the program
  - PA specific professional development opportunities, protected time, roles/responsibilities.
Tips for Review Day

• Be available to assist as needed
• Follow the schedule
• Send reminders to ensure that participants attend and arrive on time
Who should you contact if you have any questions at any point during the accreditation process?

- Your PGME office
- The Royal College does not communicate directly with program administrators or program directors
What happens after the accreditation review?

- **SURVEY TEAM**
- **ROYAL COLLEGE**
- **SPECIALTY COMMITTEE**
- **UNIVERSITY**
- **RESIDENCY ACCREDITATION COMMITTEE**

Flow of information:
- Reports from SURVEY TEAM to ROYAL COLLEGE
- Reports and Responses from ROYAL COLLEGE to UNIVERSITY
- Reports from UNIVERSITY to ROYAL COLLEGE
- Reports and Responses from ROYAL COLLEGE to SPECIALTY COMMITTEE
- Post-accreditation Review Consultation from SPECIALTY COMMITTEE to RESIDENCY ACCREDITATION COMMITTEE
Review of Preliminary Report for Errors of Fact

- Anticipated to be provided to PG office (to provide to program) eight to ten weeks following the accreditation review
- Will include a recommended decision
- Not yet reviewed or finalized by the residency accreditation committee
- Program has two weeks to respond to errors of fact
- Communicate any errors of fact to PG office for transmittal to Royal College
## Possible outcomes for your program

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<tr>
<th>Accreditation Status</th>
<th>Follow-up</th>
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<tbody>
<tr>
<td>Accredited Program</td>
<td>Next Regular Accreditation Review</td>
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<td></td>
<td>Action Plan Outcomes Report (APOR)</td>
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<tr>
<td>Accredited Program on Notice of Intent to Withdraw</td>
<td>External Review</td>
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**Timeline:**
- Preliminary recommendation provided prior to conclusion of the accreditation review
- Final decision made: **Spring 2021**;
  - Dean and postgrad dean will attend *(Communicated June 2021)*
Question

• Do residents lose credit for their training if the program receives a status of ‘accredited program on notice of intent to withdraw accreditation’?
  – No – notice of intent is determined by the types of areas for improvement identified at the time of the review and results in an external review within 24 months
  – If accreditation is withdrawn at the subsequent review, the residents receive credit for their training to the end of that academic year
  – The university is responsible for placing the residents at another university to complete their training
Once you receive your accreditation decision…

- **Celebrate** your program’s achievements!
- Use the areas for improvement as part of the program’s **CQI** process (including prep for two-year follow-up, if applicable)
Ongoing Accreditation Expectations

• It’s not “over” – accreditation is a process of continuous quality improvement (CQI)

• The program has a responsibility to:
  – Maintain alignment with standards
  – Respond to and track progress associated with any areas for improvement identified via the last accreditation review and/or via data/information integrated throughout the cycle
  – Keep CanAMS up to date!
    • Enables readiness for CQI activities and spreads out the workload associated with prep for accreditation reviews
Lessons Learned

- Be familiar with the standards
- Keep documents up-to-date in between visits
- Start early, do a little often
- Reminders are essential – participants are busy people
- Get organized early
  - Checklists are helpful
Things to Remember

• The program administrator plays a key role in the accreditation process

• Your knowledge and organizational skills will be an asset to the program throughout the accreditation process

• You are not alone
  – Every program across the country goes through accreditation

• Don’t be afraid to ask questions
  – PGME office
  – Colleagues (within university or from same discipline)
Q & A
What if you have more questions?

• Questions re. the upcoming accreditation review:
  – Your program director and/or postgraduate office.
  – Your postgraduate office will contact us if necessary.

• Questions about CanERA?
  – www.canera.ca
Thank You!