**Area of Focused Competence (AFC) Diploma Programs**

**UNIVERSITY AFC PROGRAM APPLICATION FORM –**

**SINGLE DISCIPLINE ENTRY PATHWAY**

Area of Focused Competence (AFC) Programs are Diploma Programs accredited by the Royal College of Physicians and Surgeons of Canada (RCPSC). AFC programs are highly specialized, designed to address societal and patient population needs that are not met by existing specialty and subspecialty disciplines. AFC programs also provide recognition for areas of supplemental or advanced training.

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| **SECTION 1 – RCPSC AFC DISCIPLINE RECOGNITION** |
| AFC Program Name: | Enter AFC Program Name |
| Is the AFC discipline recognized by the RCPSC? | - Select - |
| *\*If you selected “No,” please note that the RCPSC must approve the recognition of the AFC discipline before you complete and submit the AFC Program University Application Form to Postgraduate Medical Education (PGME). If the AFC program has not yet been recognized by the relevant RCPSC Committee on Specialty Education (CSE), you will need national support. Please refer to the* [*RCPSC AFC Recognition Process*](https://www.royalcollege.ca/en/standards-and-accreditation/discipline-recognition/afcs.html) *for the next steps on how to apply. Please be aware that obtaining approval for recognition of a new AFC discipline from the RCPSC typically takes one to two years.* |
| Please provide the link to the [RCPSC Competency Training Requirements](https://www.royalcollege.ca/en/standards-and-accreditation/information-by-discipline.html) for this AFC: | Insert the link to the RCPSC website where the AFC Program Competency Training Requirements PDF can be found |

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| **SECTION 2 –** **AFC PROGRAM LEADERSHIP AND ADMINISTRATION** |
| As per the RCPSC [General Standards of Accreditation for AFC Programs](https://www.royalcollege.ca/en/standards-and-accreditation/pgme-accreditation/afc-programs) (Standard 1), AFCs must have *“…an appropriate organizational structure, leadership and administrative personnel to effectively support the AFC program, teachers and trainees.”*The degree/amount of support for programs will be based on the complexity and size of the program. PGME has created [Guidelines for RCPSC Accredited Program Support](https://pgme.utoronto.ca/sites/default/files/inline-files/Guidelines-for-Residency-Program-Support-for-PDs-and-PAs-UofT-PGME-20191.pdf) to help programs ensure they have the appropriate amount of support needed to effectively support the AFC program. |
| Program Director’s Name: | Enter AFC PD’s Name |
| University Rank: | - Select Rank - |
| Primary Email Address: | Enter AFC PD’s Email |
| Primary Site: | Enter Primary Site |
| Department: | - Select Department - |
| Confirmed Protected Time (FTE)\*: | Confirm Protected FTE |
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| Program Administrator’s Name: | Enter Administrator’s Full Name |
| Email Address: | Enter Administrator’s Email |
| Department:  | - Select Department - |
| Confirmed Protected Time (FTE)\*: | Confirm Protected FTE |
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| **\*Optional Information to Outline Program Support Models** |
| Given that the model for Program Director protected time may vary, support can come from multiple sources for a specific program. If the protected time will be allocated from various sources, please provide a detailed description below.NOTE: If the program has decided to share the Program Director's time with a Co- or Assistant Program Director, kindly provide their details below. |
| Click or tap here to enter text. |
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| **\*If applicable:** |
| AFC Co-/Assistant Program Director’s Name: | Enter AFC Co-/Assistant PD’s Name |
| Type of Role: | - Select Role - |
| University Rank: | - Select University Rank - |
| Primary Email Address: | Enter AFC Co-/Assistant PD’s Email |
| Department:  | - Select Department - |
| Confirmed Protected Time (FTE): | Confirm Protected FTE |

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| **SECTION 3 – AFC PROGRAM DETAILS** |
| To ensure program organization and delivery has been considered, please complete the following details below: |
| Program Length: | Enter Program Length e.g. 1 year |
| Type of Training Status for Learners: | - Select Training Status - |
| Required or Rolling Start Date:  | - Select Start Date Type - |
| Estimated number of learners per academic year\*: | Enter estimate # of learners/academic year |
| *\*The estimated number of learners (per academic year) should align with the recommended amount of protected time available for the Program Director and Administrator.*IMPORTANT NOTE: PGME, in collaboration with the Office of Clinical Affairs, has established a process outlining the requirements and expectations for University of Toronto faculty members interested in AFCs. While it is possible for faculty to participate in an AFC on a full-time basis, it is likely that the majority will participate on a part-time basis. To access this information, please refer to [AFC Resources](https://pgme.utoronto.ca/afc-resources). |

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| **SECTION 4 – DEPARTMENTAL SUPPORT FOR RESOURCES** |
| According to the RCPSC [General Standards of Accreditation for AFC Programs](https://www.royalcollege.ca/en/standards-and-accreditation/pgme-accreditation/afc-programs) (Standard 3), “*the delivery and administration of the AFC program is supported by appropriate resources.”* It is critical that the sponsoring department have formally committed to supporting the AFC application before proceeding to the accreditation stage. The Department Chair must confirm their commitment to providing ongoing financial support for the AFC. This support should include:* Funding for the annual RCPSC program fee
* Protected time for the Program Director and Administrator
* Any other necessary resources that may arise
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| Is the AFC program supported by the Department? | - Select - |
| \*If you selected “Yes,” you **must** include a formal letter from the Department Chair outlining their support with your University AFC Program Application package. Failure to provide this letter will result in the application being considered incomplete.\*\*If you selected “No,” please note that departmental support is required before you complete and submit the University AFC Program Application Form to PGME. |

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| **SECTION 5 – TERMS OF APPLICATION** |
| Date of Application submitted to PGME:  | - Select Date of Submission - |
| By signing this, I acknowledge the commitment and effort required for the accreditation process, understanding that it may take between 12 to 24 months. I am submitting this application to PGME as an expression of my readiness to commence the accreditation steps. I am fully dedicated to this process and hereby submit my university application. |
| Name of AFC Program Director: | Enter AFC PD’s Name |
| Signature:(Digital signature images can be inserted by double clicking the “X”) |  |
| Date of Signature: | - Select Date of Signature - |
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| If applicable, name of AFC Co-/Assistant Program Director: | Enter AFC Co-/Assistant PD’s Name |
| Signature:(Digital signature images can be inserted by double clicking the “X”) |  |
| Date of Signature: | - Select Date of Signature - |