



Family Medicine Pre-Accreditation Review

University of Toronto

August 11, 2020



Introductions

- University of Toronto Leadership
- The College of Family Physicians of Canada

Agenda

- Overview
 - Impact of COVID-19
- CanERA
 - Evidence
 - CanAMS
 - Standards
 - Status and Decisions
 - Resident input
- U of Toronto Review
 - Schedule and preparation
 - After the review

CanRAC..CanERA..CanAMS..CanWHAT?



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

Why is accreditation important?

- Ensures the quality of residency education provided across Canada
- Provides an external, objective feedback from peers
- Contributes to the internal CQI of residency programs and institutions
- Provides an opportunity to promote your program's strengths and discuss its areas for improvement, and to advocate for missing resources.

What is accredited?

- The Institution
- Royal College programs
- Family Medicine programs
 - Central family medicine program and Central enhanced skills program
 - Sites and enhanced skills category 1 and category 2 programs are not provided an accreditation status or follow up

Accreditation Review Teams

- RC and CFPC Conjoint Institution Team
 - PGME
- Royal College Team
 - Other specialty programs
- CFPC Team
 - Family Medicine and Enhanced Skills programs

Who is involved at U of T? (1 of 2)

- Dean and Postgraduate Dean(s)
- Family Medicine leadership team
 - Department Chair(s)
 - Family Medicine Program Director
 - Enhanced Skills Program Director
- Site Directors
- Enhanced Skills Program Directors
- Residents

Who is involved at U of T? (2 of 2)

- Teachers
 - Community teachers
 - Specialty teachers and allied health professionals involved in teaching family medicine residents
- Administrative staff
 - Central administrators and managers
 - Site and Enhanced Skills program administrators and managers
- Residency Program Committee members

Impact of COVID-19

Impact of COVID-19

- Acknowledgment of exceptional times
- Move from a one week, on-site review with face to face meetings to a fully virtual model

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

U of T November 2020 Regular Review

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

- Move from one week on-site review to two-week virtual review
- All accreditation activities:
 - Sun, Nov 22, 2020 - Fri, Dec 4, 2020
- **Family Medicine specific activities**
 - Sun, Nov 22, 2020 – Wed, Dec 2, 2020

U of T November 2020 Regular Review

Site and Enhanced Skills program reviews:

- Wednesday, Nov 25 – Friday, Nov 27

The final schedule assigning specific site and enhanced skills program reviews to specific dates has not yet been finalized and is actively being worked on at this time



CanERA Overview



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



8 YR Cycle & Data Integration

...regular accreditation reviews, balanced with ongoing integration of quality improvement data



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



Evaluation and Research

...systematic approach to the continuous improvement of CanERA

Accreditation Reform



Accreditation Review Process

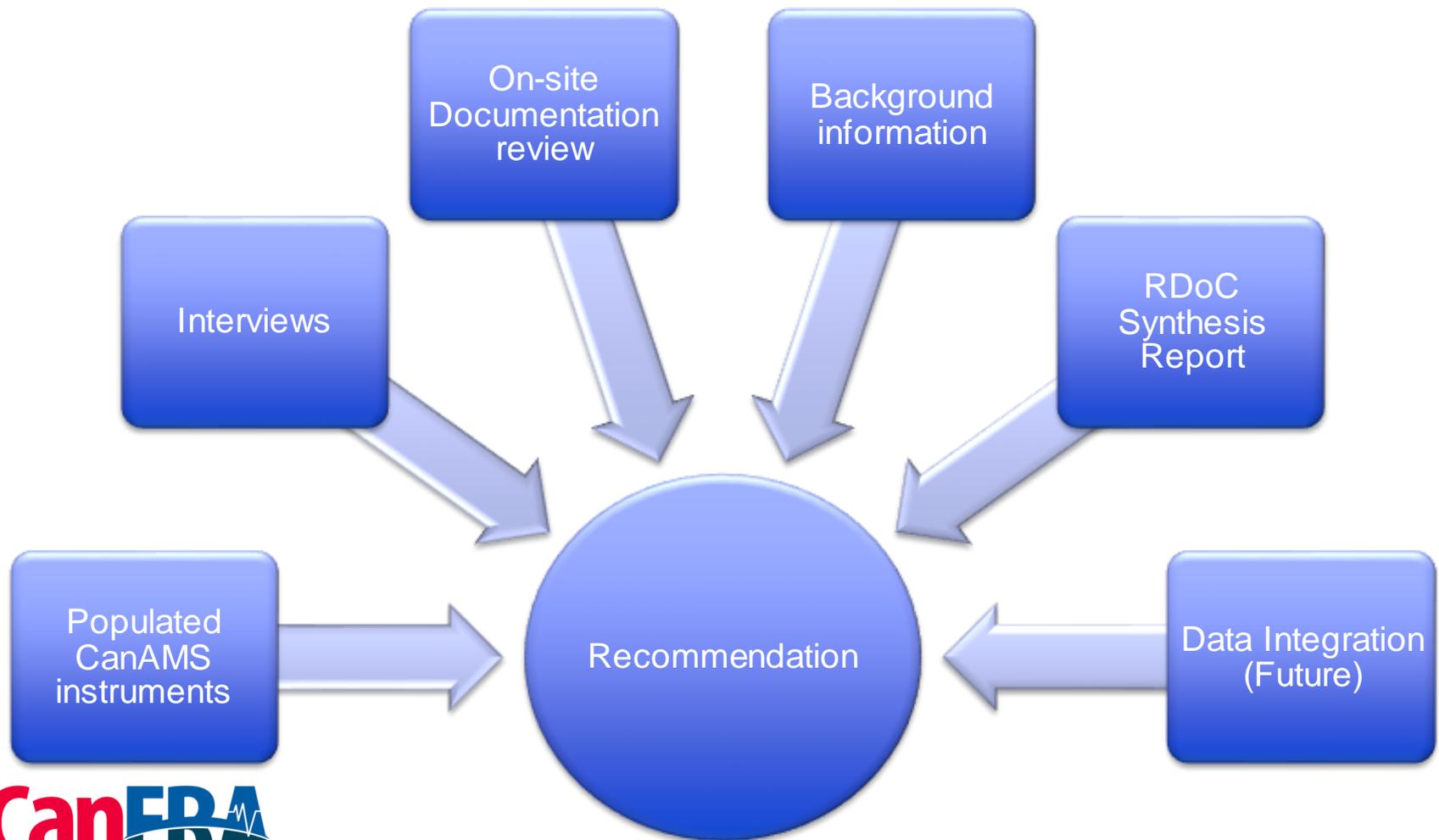




Evidence



What information informs the Accreditation Review?





CanAMS



CanAMS Program Profile Instruments

- Replace what were formerly known as Pre-Survey Questionnaires (PSQs)
- Used to collect data about central programs, sites and enhanced skills programs

CanAMS Program Profile Instruments

- Family Medicine Central
 - 1 instrument
- Family Medicine Central Enhanced Skills
 - 1 instrument
- Family Medicine Sites
 - 1 instrument per site
- Family Medicine Enhanced Skills Programs
 - 1 instrument per enhanced skills program

CanAMS Program Profile Instruments: Submitting content

- Reviewed by the Family Medicine and/or Enhanced Skills Program Director
- PGME review
- Submitted to CFPC by PGME
- Upon submission, content accessible to CFPC and team of accreditation surveyors



Accreditation Standards



New Accreditation Standards

Institution (PGME) Accreditation

- *General Standards of Accreditation for Institutions with Residency Programs* (Replacing the “A” Standards)

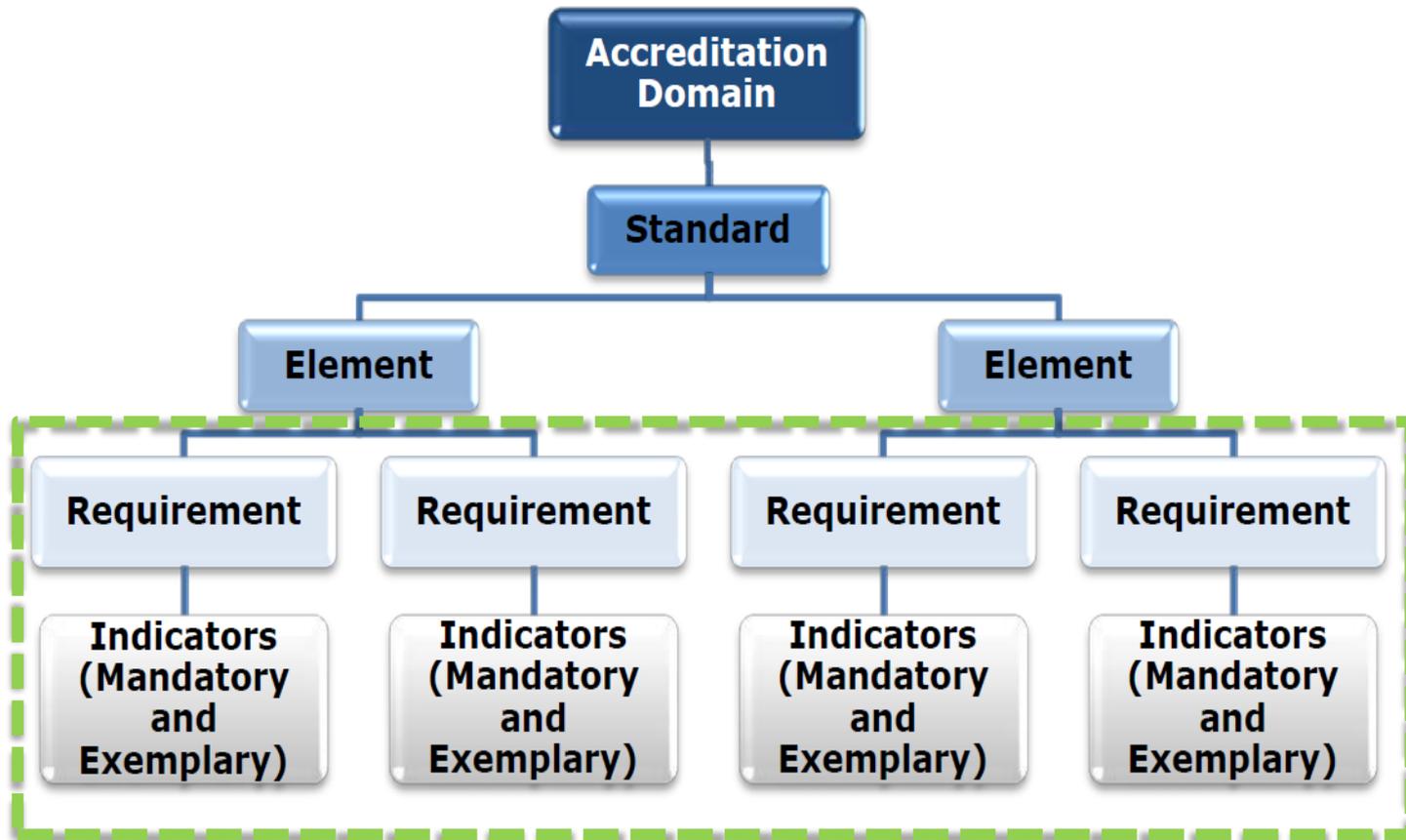
Residency Program Accreditation: The Red Book

- *General Standards of Accreditation for Residency Programs* (Replacing the “B” Standards)

How are the new standards different?

- Increased focus on outcomes (“show me that it works”)
- Increased clarity of expectations, including increased clarity around required evidence within the CanAMS
- Renewed emphasis on the learning environment and continuous improvement
- Accommodation of time and competency-based education models
- Alignment between General Standards of Accreditation for Residency Programs and the family medicine specific standards (the Red Book)

How are the standards different?



STANDARD 1: There is an appropriate organizational structure, with leadership and administrative personnel to support the residency program, teachers, and residents effectively.

Element 1.1: The program director leads the residency program effectively.

Requirement(s)	Indicator(s)
1.1.1: The program director is available to oversee and advance the residency program.	1.1.1.1: The program director has adequate protected time to oversee and advance the residency program, consistent with the postgraduate office guidelines and in consideration of the size and complexity of the program. 1.1.1.2 The program director is accessible and responsive to the input, needs, and concerns of residents directly or through the appropriate channels. 1.1.1.3: The program director is accessible and responsive to the input, needs, and concerns of teachers and members of the residency program committee directly or through the appropriate channels. 1.1.1.4: The family medicine program director is accessible and responsive to the needs and concerns of all site directors and the enhanced skills program director.

Culture Shift: Strengths and Weaknesses

- No longer reporting on “Strengths” and “Weaknesses” in the same way
 - Focus on **Areas for Improvement (AFI)** and **Leading Practices and/or Innovations (LPI)**
 - Opportunity to provide positive feedback (i.e. strengths) remains

Leading Practices and/or Innovations (LPI)

- A practice (method, procedure, etc.) that is:
 - Noteworthy for the discipline or residency education;
and/or
 - Unique or innovative in nature

Leading Practices and/or Innovations (LPI)

In other words...

- Something great that a program is doing that could and should be implemented in other programs, within the institution, or more broadly

Area for Improvement (AFI)

- A not met or partially met requirement
- Two types of AFI
 - Some AFI may:
 - Require College follow up review in two years (AFI-2Y)
 - Not require College follow up until the next regular accreditation review (AFI-RR)

STANDARD 1: There is an appropriate organizational structure, leadership and administrative personnel to support the program, teachers, and residents effectively.

Element 1.1: The program director leads the residency program effectively.

Requirement(s)

1.1.1: The program director is available to oversee and advance the residency program.

Indicator(s)

1.1.1.1: The program director has adequate protected time to oversee and advance the residency program, consistent with the postgraduate office guidelines and in consideration of the size and complexity of the program.

1.1.1.2 The program director is accessible and responsive to the input, needs, and concerns of residents directly or through the appropriate channels.

The program director is accessible and responsive to the input, needs, and concerns of faculty and members of the residency program committee directly or through the appropriate channels.

1.1.1.4: The program director is accessible and responsive to the needs and concerns of advanced skills program director.

Each Indicator "Meets" or "Does not meet"

Requirements rated as "Meets" or "AFI"

STANDARD 1: There is an a leadership and administrative program, teachers, and res

Element 1.1: The program director

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1.1.1.3: The program director is accessible and responsive to the input, needs, and concerns of teachers and members of the residency program committee directly or through the appropriate channels.

1.1.1.4: The family medicine program director is accessible and responsive to the needs and concerns of all site directors and the enhanced skills program director.

At the site and enhanced skills program level, requirements are Met or AFI.

At the Central Family Medicine and Central Enhanced Skills level, requirements are Met, AFI-2Y or AFI-RR.

CFPC only provides an accreditation status and follow up for the central programs.



Accreditation Status and Follow-Up



Possible Outcomes for your program

Accreditation Status	Follow-Up
Accredited Program	Next Regular Review
	Action Plan Outcomes Report
	External Review
Accredited Program on Notice of Intent to Withdraw	External Review

Follow-up by Regular Accreditation Review

- The residency program has demonstrated acceptable compliance with standards
- Timelines for follow-up align with the next regular review established in the accreditation cycle
- Expectations of ongoing continuous quality improvement throughout the cycle

Follow-up by Action Plan Outcomes Report (APOR)

- One (or more) significant area(s) for improvement impacting the overall quality of the program which requires follow-up prior to the next regular onsite review
- Can be evaluated via submission of evidence from the program.
- **Predictable 2-year follow-up**

Follow-up by External Review

- One (or more) significant area(s) for improvement impacting the overall quality of the program which requires follow-up prior to the next regular onsite review
- Best evaluated by external peer reviewers
- Factors that may suggest the need for follow-up by external review include but are not limited to:
 - Persistence of AFI(s) (i.e. identified at a previous review(s))
 - Nature of AFI(s) (i.e. the issues are best evaluated by a reviewer from outside of the university **and in some instances, from the same discipline**); and/or
 - Concerns with the program's/institution's oversight of CQI
- **Predictable 2-year follow-up**

Notice of Intent to Withdraw, follow-up by External Review

- There are major and/or continuing concerns which call into question the educational environment and/or integrity of the residency program and its ability to deliver high quality residency education

OR

- Despite notifications and reminders, the program has failed to complete and submit the required accreditation follow-up by the deadline
- **Predictable 2-year follow-up**

Principles for decision-making

- Increased emphasis on CQI
 - entrusting programs/institutions to drive their own CI.
 - demonstrated CQI efforts (e.g. AFIs identified)
- Iterative expectations for newer expectations; while understanding imperatives from the current system still apply.
- Ensuring consideration of:
 - persistence
 - impact on the education environment; and
 - strengths of the institution's internal review process.

Note: These are applied to the overall recommendation, not at the requirement rating/indicator level

Family Medicine and Enhanced Skills programs

Family medicine programs are large and complex. It is not uncommon for family medicine and enhanced skills programs to receive some sort of follow up.



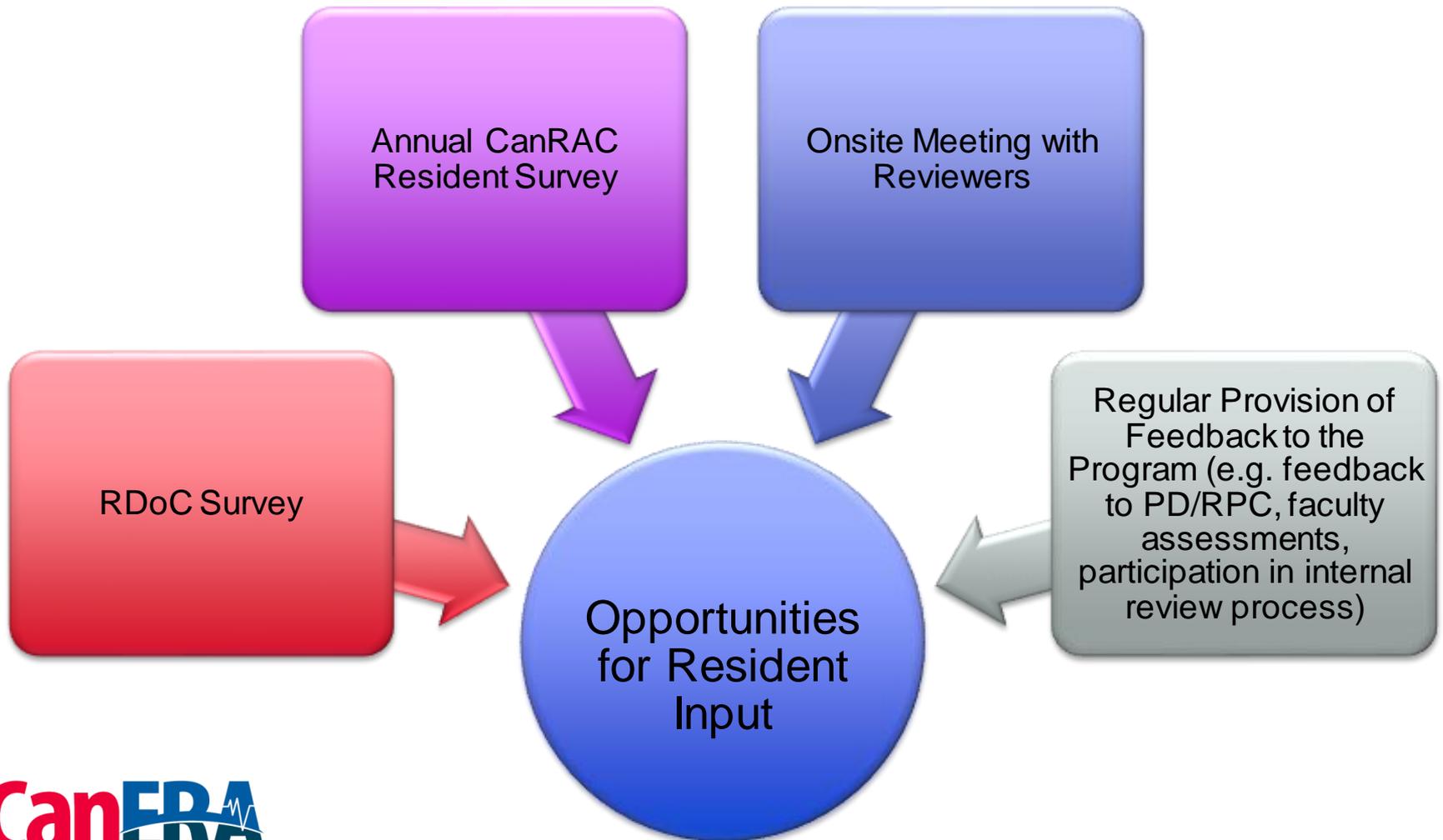
Resident Input



Resident Input

Residents are critical to the accreditation process, and their input is **highly valued within the accreditation process**

Opportunities for Resident Input





University of Toronto: Leadership Team and Schedule



University of Toronto: CFPC Leads

- CFPC Chair/Institution Co-Chair
 - Dr. Louise Nasmith, University of British Columbia
- Family Medicine Lead
 - Dr. Fraser Brenneis, University of Alberta
- Enhanced Skills Lead
 - Dr. Keith Wycliffe-Jones, University of Calgary

Schedule overview: Week 1

Day	Events
Sunday	<ul style="list-style-type: none">• CFPC Team meeting• CFPC and RC Team meeting• Decanal Team presentation
Monday	Program Overview meetings
Tuesday	
Wednesday	<ul style="list-style-type: none">• Site Reviews• Enhanced Skills Program reviews
Thursday	
Friday	

Schedule overview: Week 2

Day	Events
Monday & Tuesday	<ul style="list-style-type: none">• Family Medicine and Enhanced Skills Residency Program Committee meetings• Final meetings with Family Medicine Leadership team
	<ul style="list-style-type: none">• CFPC Team meeting (Deliberation and vote)
Wednesday/ Thursday	CFPC Exit Meeting
Friday	Conjoint Exit meeting (RC and CFPC)

Program Overview meetings: Monday-Tuesday (1 of 2)

- Family Medicine Program Director
- Enhanced Skills Director
- Department Chair
- Curriculum Lead(s)
- In-Training Assessment
- Faculty Development
- Other meetings as required
- Chief Residents
- Research
- Central Administrative Staff

NOTE: Some meetings will be held in parallel

Program Overview meetings: Monday-Tuesday (2 of 2)

Approximately 45 minutes per meeting

- 5 minute overview of portfolio
- Self identified strengths, LPI and AFI (if applicable)
- Majority of the time should be reserved for dialogue and a question and answer period
- Slides are permitted but not required and should be limited to 3-4 slides per individual/group

Site and Enhanced Skills Program reviews: Wednesday - Friday (1 of 3)

Meeting Schedule:

1. Site or Enhanced Skills Director (45 min)
2. Site or Enhanced Skills Administrator(s) (30 min)
3. Residents (60 min per groups of 25 residents)
4. *Teachers (45 min)
5. Site or Enhanced Skills RPC (30 min)
6. Final Q&A with Site or Enhanced Skills Director (15 min)

Site and Enhanced Skills Program reviews: Wednesday - Friday (2 of 3)

- Site and enhanced skills program visit teams will be comprised of 2-3 surveyors
- Each site or enhanced skills program team will visit 2-3 sites or enhanced skills programs
- All sites and enhanced skills programs will be reviewed
- You will receive the names and brief bios of your surveyors in advance of your site or enhanced skills program review

Site and Enhanced Skills Program reviews: Wednesday - Friday (3 of 3)

- Groups and individuals at the site and ES program level meeting with surveyors should be prepared to provide a brief overview of any self-identified:
 - Strengths or LPI's (if applicable)
 - AFI's (if applicable)
- For **resident and faculty meetings**, the above content should be provided in a **brief** Power Point or one-page summary
- For all other meetings (e.g. Site/ES Program Director, Site/ES program administrator, Site/ES RPC), no Power Point is required

Final meetings and Deliberation: Week 2

- CFPC team meetings
- Central FM and ES Residency Program Committees
- Program Director, Enhanced Skills Program and Department Chair Q&A
- Team Deliberation
 - Vote and recommendation for both central FM and ES programs

Family Medicine Exit Meeting

- Meeting with family medicine and enhanced skills program leadership to share **recommendation** for decision and follow up
- Present at this meeting:
 - Dean and Postgraduate Dean
 - Family Medicine Program Director
 - Enhanced Skills Program Director
 - Family Medicine Department Chair
 - Administrative Manager

What happens next?

- Surveyors generate a report sent the program within 8-10 weeks of the review
- Reports contain recommendation for status and follow-up
- Program provided a timeline to correct factual errors
- Final program submissions done through PGME
- CFPC's Residency Accreditation Committee reviews recommendation and reports and makes a final decision
- Following the meeting, a decision letter with the final status and follow up is sent to the PGME office and the program

Possible Outcomes for your program

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Timeline:

- Preliminary recommendation provided the week of the accreditation review
- Final decision made at Residency Accreditation Committee meeting: **May 2021**
 - Dean, Postgraduate Dean, Family Medicine Department Chair, Program Director, Enhanced Skills Program Director and Family Medicine Manager invited to attend



Preparation & Tips for the Day of the Review



Documentation Review

Documentation will be submitted via CanAMS with the following exceptions:

- Resident files
- Confidential committee minutes (i.e. those where resident names are listed)

Documentation Review

- Prior to each site and enhanced skills visit, there will be time allotted for reviewers to review resident files and confidential committee minutes

Documentation Review: Resident Files

- Resident files
 - A sampling, i.e., one or two residents from each site or enhanced skills program
 - When possible, include files of any residents in difficulty/requiring remediation
 - **Residents must provide written consent to have their files reviewed** (PGME to provide forms)

Documentation Review: Committee Minutes

- Residency Program Committee (RPC) minutes
- Competence Committee (or equivalent) minutes
 - Two years
 - Attendance

NOTE: Surveyors may ask for documentation that was not included. Additional resident files without a consent form cannot be provided. If additional Committee or non-resident specific files are requested, please be prepared to accommodate these requests.

Preparation for meetings (1 of 2)

- Review the Standards in the Red Book
- For group meetings (residents, faculty) meet together as a group to discuss the strengths and challenges of your program
- Be prepared to provide a **brief** (5 minute) overview of strengths, LPI, and AFI, if applicable
 - For Resident and Faculty meetings, please use the template provided
- Most of the allotted meeting time is for a question and answer session

Preparation for meetings (2 of 2)

Note: Whenever possible, concerns about the central program, site, or enhanced skills program should be identified prior to the onsite accreditation review.

Information to Include in Site/ES schedules

- Contact information of primary administrative contact at each location
 - Name, title, phone number
- List of all participants for each meeting
 - Names, titles, PGY levels for residents
 - Names of all faculty and RPC members
- Zoom call-in details

Tips for Review Day

- Please follow the schedule
 - Timing is tight and surveyors may have to redirect the questions or (politely) cut interviewees off
- Schedule 5 minute “breaks” between back to back meetings
- Encourage program participants to arrive on time



Following the Accreditation Review



Once the review is over

- Celebrate your achievements!
- Use the areas for improvement as part of your Continuous Quality Improvement (CQI) process

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
 - Keep CanAMS up to date
 - Enables readiness for CQI activities and spreads out the workload associated with prep for accreditation reviews

What if you have more questions?

- Questions re. the upcoming accreditation review:
 - Your central program directors
 - Stu Murdoch and Giovanna Sirianni
 - PGME via Laura Leigh and Jesse
- Questions about CanERA?
 - www.canera.ca