Message from the PGME Associate Dean

Our system, programs and people have done extraordinarily well in the external reviews these past two weeks. I thank all of you profusely for your efforts at a very challenging time. For those whose program got the outcome that you expected, I congratulate you on your achievement. For those whose program got something different, I congratulate you, too, on succeeding as an education leader contributing to highly sought-after programs that graduate amazing physicians. We cannot lose sight of the fact that we have a high bar in Canada and accreditation helps us to aspire to better and better outcomes and processes.

The period after accreditation is a bittersweet time. The preparatory work is over, but we all have feedback to address. We have had major validation of our work, yet there is always more that could have been done. We have a personal framework for making sense of the outcomes but others may have a different view and we must help them 'process' the results. We have dedicated so much time and effort to this important work, yet the world has moved on and other issues have arisen to consume our time and focus.

Lots of thoughts and emotions and sentiments come out during these times. I encourage all to take a break and think in general terms about the summary feedback received. We will get the preliminary reports of all CanRAC requirements in mid December and the full reports with narrative in late January or early February. Throughout, we are committed in PGME to start working on the obvious things that we must address as a system and within individual programs and awaiting the details to inform an approach to the more nuanced areas requiring attention. We have lots of time to develop well thought out plans to move all programs forward.

This is my fourth accreditation cycle, starting as a PD in 2001. For each one, I have had a different role. Despite what have certainly been highs and lows, the things that have remained constant (in no particular order) are the dedication of all involved to improve our programs, the ability of our learners to enrich the academy and the enduring positive change that results from accreditation.

I am very pleased with the outcomes this week and look forward to sharing the journey ahead.

Glen Bandiera, MD, FRCPC, MEd
Associate Dean, Postgraduate Medical Education
Questions? Contact me: adpgme@utoronto.ca or our Accreditation team: pgmecoordinator@utoronto.ca
News and Updates

Our Accreditation Visit is now complete and overall, we did very well! Congratulations!

2020 PG Accreditation – Recommended Outcomes
Below is a summary of the recommended accreditation outcomes provided by the survey teams. The Accreditation Committees will review these recommendations in spring 2021 and provide each program with a formal letter indicating their accreditation outcome.

PGME Institution
As part of the new accreditation process, for the first time the PGME Institution also received its own accreditation outcome. The PGME Institution’s recommended outcome is:

- Full Accreditation with follow-up by Action Plan Outcomes Report (APOR) in 2 years

PGME Programs

Full Accreditation with follow-up at Regular Review (in 8 years)

- Adolescent Medicine
- Adult Cardiac Electrophysiology (AFC)
- Adult Cardiology
- Adult Clinical Immunology & Allergy
- Adult Critical Care Medicine
- Adult Endocrinology & Metabolism
- Adult Gastroenterology
- Adult Hematology
- Adult Infectious Diseases
- Adult Respiratory Medicine
- Adult Rheumatology
- Anatomical Pathology
- Child & Adolescent Psychiatry
- Clinical Investigator Program
- Colorectal Surgery
- Cytopathology (AFC)
- Developmental Pediatrics
- Forensic Pathology
- Forensic Psychiatry
- General Internal Medicine
- General Surgical Oncology
- Geriatric Medicine
- Gynecologic Oncology
- Gynecologic Reproductive Endocrinology & Infertility (GREI)
- Maternal Fetal Medicine
- Medical Genetics & Genomics
- Medical Microbiology
- Medical Oncology
- Neonatal Perinatal Medicine
- Neuroradiology
- Neurosurgery
- Nuclear Medicine
- Occupational Medicine
- Ophthalmology
- Orthopedic Surgery
- Otolaryngology Head and Neck Surgery
- Pain Medicine
- Palliative Medicine
- Pediatric Clinical Immunology & Allergy
- Pediatric Critical Care Medicine
- Pediatric Emergency Medicine
- Pediatric Endocrinology & Metabolism
- Pediatric Gastroenterology
- Pediatric Hematology Oncology
- Pediatric Infectious Diseases
- Pediatric Nephrology
- Pediatric Radiology
- Pediatric Respiratory Medicine
- Pediatric Rheumatology
- Pediatric Surgery

Dec. 2020
What happens after the accreditation review?

Preliminary Reports

Preliminary reports from the reviews will be available and distributed to programs in mid-December. These reports will include tables that list each of the accreditation standard requirements and will indicate the review team’s findings as to if your program has met, partially met or not met each requirement. Standards that are partially or not met will be marked as Areas For Improvement (AFIs).

In the new model of accreditation, programs and institutions will no longer be provided with an explicit list of strengths and weaknesses. The AFIs are automatically generated in the system when a related requirement is not fully met. Strengths and innovations are based on surveyor opinion and are captured in the narrative section that is included in the full final report; these will not be included in the initial preliminary report that is provided in December. Recommendations about program status and follow-up are made by the entire survey team.
during the visit. The preliminary reports will thus indicate the survey team’s recommended accreditation status and follow-up. Please note this is just a recommendation at this point. The official accreditation status will be received in the spring following confirmation by the Accreditation Committees of the corresponding Colleges. In rare circumstances, the survey team may feel that a program deserves recognition for implementing a Leading Practice and Innovation (LPI). These will also be provided in the final full report; we do not want programs and individuals to be surprised when the customary list of strengths is not presented up front like in the old model.

Accreditation Reports

The final reports, including narrative, will be available and distributed to programs in mid-February. At that time, you will have a short window to review the report and to respond with any corrections to errors of factual information. PGME will support programs through this process. More information, including timelines, will be available in February.

Accreditation Outcomes

The Accreditation Committees will review the University of Toronto on-site survey documents early in the Spring and all the programs and the institution will receive a formal letter indicating their accreditation outcome in the Spring.

Based on the findings of the review the possible outcomes for each program, and the PGME institution are as follows;

- Accredited program follow-up by regular accreditation,
- Accredited program follow-up by Action Plan Outcomes Report (APOR) in 2 years,
- Accredited program follow-up by external review in 2 years, or
- Accredited program on notice of intent to withdraw accreditation follow up by external review

Given the emphasis on continuous improvement throughout the accreditation cycle, some programs are required to provide evidence of progress either through an outcomes report or external review in 2 years.

QUESTIONS?

For all accreditation related matters and questions, please email: pgmecoordinator@utoronto.ca

Resources
Accreditation Website
Accreditation Standards

Please continue to visit the COVID-19 section of the Post MD webpage for the latest news and updates https://pg.postmd.utoronto.ca/the-latest-on-covid-19/.