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

**What is an Area of Focused Competence (diploma) program?**

An area of focused competence (Diploma) program is a specialized discipline of specialty medicine that addresses a legitimate societal need, but does not meet the Royal College criteria for a specialty, foundation program, or subspecialty. Typically, AFCs (Diplomas) represent either a) *supplemental* competencies that enhance the practice of physicians in an existing discipline, or b) a *highly specific and narrow* scope of practice that does not meet the criteria of a subspecialty. In both scenarios, AFCs (Diplomas) do not prepare a physician for practice, but rather recognize areas of supplemental or advanced training.

Typically, AFC (Diploma) programs do not require as much administrative infrastructure and have fewer national programs as compared to specialties or subspecialties. AFCs (Diplomas) are typically 1-2 years in length, but there is an increased emphasis on acquisition of competencies, rather than strict time guidelines, for the completion of an AFC (Diploma) program.

**Criteria for Recognition: AFC (Diploma) disciplines**

**Criterion 1: Evidence of Need – For physicians with advanced skills or narrow scope of practice**

* Defined scope of practice and serving specific populations or a narrow range of conditions
* Well-defined and recognized health need (currently not being satisfied by any other recognized discipline)
* Positive contribution towards improving medical care and health outcomes

**Criterion 2: Defined Scope – In-depth, application body of knowledge beyond scope of foundational specialty or subspecialty**

* Distinct supplementary medical knowledge and skills characterized by depth and high specificity
* Unique advanced constellation of competencies that are beyond those typically needed to practice
* Knowledge base is dynamically founded on evidence and ongoing research
* Typically requires 12 to 24 months to be acquired

**Criterion 3: Relationship to other disciplines – Not a foundation for additional competencies**

* Supplementary competencies
* Builds upon primary specialties, foundation programs, or subspecialties
* Typically does not replace practice in an existing discipline, but provides an opportunity to acquire competencies to enhance an existing practice

**Criterion 4: Impact on existing specialty system – addition of area of focused competence (diploma) program must not adversely affect existing and related disciplines**

* A proposed AFC (Diploma) discipline that includes competencies which overlap with those in the Objectives of Training of an existing discipline or disciplines MUST obtain the explicit written support of the specialty committee(s) in that discipline or disciplines
* Recognition of field of medicine will enhance and strengthen the ability to provide effective care and not lead to significant fragmentation of patient care

**Criterion 5: Infrastructure and sustainability – Adequate infrastructure to sustain the discipline**

* At least one site capable of mounting a training program in Canada
* Identifiable group of experts with capacity to provide a high quality residency experience
* Sufficient ingredients exist for appropriate program infrastructure
* Existence of professional organization(s) capable of advancing the field

**Process for Application**

The process to apply for an AFC (Diploma) program will mirror the existing processes for recognition of a new primary or subspecialty discipline. Interested applicants, usually consisting of the existing specialty committee in which the AFC (Diploma) program will reside, or an established National Specialty Society or similar national group, will be required to complete and submit the application form. Applicants will also be required to submit, as part of their application:

* A letter of intent,
* A draft version of the Competency Training Requirements (CTR),
* A proposed approach for candidate assessment including a list of possible assessment tools,
* the completed application form, and
* A letter of support from at least one training site authority, describing how they will support appropriate infrastructure to implement the discipline, should it be approved.

Depending on the scope of the proposed AFC (Diploma) and its overlap with existing disciplines, letters of support from impacted specialties and subspecialties may also be required.

Deadlines for the initial expression of interest will be six months before the Committee on Specialties meeting, or May 1st for the October meeting and October 1st for the April meeting, to allow time for the Office of Education to work with the applicant and guide them through the application process. Upon receipt of the draft application by the Office of Education, the application will be reviewed for completeness and the application fee processed. Deadlines for the receipt of the final version of applications will be approximately two months before the Committee on Specialties meetings; the *April* Committee on Specialties (COS) meeting will have a deadline of February 1st, while the *October* meeting will have a deadline of September 1st.

The process for review by the COS will involve the same two stages as that for the existing specialty/subspecialty recognition process, with an initial review (Part I) by the COS, and national consultation with stakeholders followed by a second review by the COS for a final decision (Part II). The range of stakeholders consulted will be less extensive than that for specialty/subspecialty applications, and will include specialty committees and related National Specialty Societies (NSSs) for impacted disciplines only, Faculties of Medicine (deans and postgraduate deans), Ministries of Health (MOHs), Medical Regulatory Authorities (MRAs), and residents’ associations.

Following the endorsement at Part II by the Committee on Specialties, the application will require endorsement by the Education Committee, before being implemented. The Executive Committee of Council, and Royal College Council, will be informed of the decision. The current Royal College process for appealing a decision of the COS will be available, as needed.

**Royal College Infrastructure and Governance**

**Part of an existing specialty committee**

If approved as a recognized discipline of the Royal College, each AFC (Diploma) program will be supported within the sponsoring specialty committee (SC) (i.e., Cardiology for cardiac electrophysiology).

**Part of a new specialty committee if no single parent committee exists or if the AFC (Diploma) program overlaps with several disciplines**

Where no single or existing SC is appropriate (i.e., Aboriginal health), a new discipline committee will be created. The process of creating a new committee will be the same as that which exists now, with the creation of an initial working group, followed by formal appointment of a nationally representative discipline committee.

As is the case for specialty and subspecialty disciplines, the SC will be responsible for developing and maintaining the discipline-specific documents for the diploma program, which will include the CTR – to replace the existing Objectives of Training (OTR) and Specialty Training Requirements (STR) documents, the summative portfolio, and the specialty-specific accreditation (SSA) requirements.

**Admissions**

There are 4 types of eligibility, based on the entry criteria of individual programs:

1. Primary specialty prerequisite (e.g. pediatric pathology)
2. Subspecialty prerequisite (e.g. cardiac electrophysiology)
3. Non-clinical programs such as clinician educator, medical administration, or patient safety (entry limited to those with the “MD‟ designation)
4. Conjoint programs with the College of Family Physicians of Canada (CFPC) - under development (entry limited to those with Royal College or CFPC certification).

Applicants will need to specify on their application form which of these four types of eligibility applies to their proposed AFC (Diploma) program.

**Assessment**

AFC (Diploma) programs are based upon a period of medical training and supervision, and like other formal disciplines recognized by the Royal College, require demonstration of proficiency in those skills and competencies outlined in the national standards. Unlike Royal College specialties and subspecialties, however, the AFC (Diploma) programs *will not* be assessed by comprehensive (written and oral) examinations. AFC (Diploma) program requirements will be assessed using a *structured summative portfolio*.

The portfolios will be based upon a template developed by the Office of Education that will include a list of available assessment tools that can comprise the portfolio. Each specialty committee will then be responsible for developing their portfolio requirements that document achievement of all competencies and experiences outlined in the AFC (Diploma) Competencies Training Requirements (CTR), and selecting the most appropriate assessment tools based on the requirements being assessed. The portfolio for each AFC (Diploma) discipline will be reviewed and endorsed by the Evaluation Committee before being implemented.

A draft version of the CTR document is required as part of an AFC (Diploma) application. The CTR template is available through the Office of Education by contacting COS@royalcollege.ca. A document outlining the proposed approach to assessment, including a list of possible assessment tools is also required. Portfolios will be developed with individual discipline groups only after the discipline has been formally approved by the Royal College.

**Accreditation**

Accreditation is the external review of an institution or program, against accepted, established standards, resulting in an evaluation of its overall quality, as well as an (often time-limited) decision about the institution or program’s ability to continue to offer education to trainees.

A new accreditation process, including new ’C’ standards, has been developed for the AFC (Diploma) programs; program evaluation will be based on the specialty-specific standards of accreditation (SSA) driven by the AFC (Diploma) CTR.

**Credentialing**

A new credential will be conferred for Royal College diplomates, the Diplomate of the Royal College of Physicians and Surgeons of Canada (DRCPSC).

The credentialing process will be similar to that which exists now for specialty and subspecialty disciplines, with the Office of Education reviewing each candidate’s documents to assess eligibility to proceed to the formal assessment stage, the review of the diploma portfolio. A Practice Eligibility Route (PER) will also be implemented for those AFC (diploma) candidates who are already in practice in the discipline.

Once the AFC (diploma) program has been successfully completed, annual renewal as a Diplomate (for Fellows of the Royal College) or Diplomate Affiliate (for individuals not certified by the Royal College) is required in order to use the DRCPSC designation.

**Fee Structure**

The following fees will be introduced as part of a cost-recovery business model:

1. Application Fee for review by Committee on Specialties:

$ 14,000 per application (**as of April, 2013**).

* The application fee is to be paid in full up front. Reimbursement of application fees will not be provided should an application be rejected by COS.
1. Program Fee for Accreditation: $ 2000 per program/school
2. Credentialing Fee: $ 350 per candidate, including Practice Eligibility Route (PER)
3. Assessment Fee: $ 500 per candidate, including PER
4. Annual Dues: Fee set annually by the Royal College

Please note that the Royal College does not provide clerical support or financial assistance to complete the application.

**IDENTIFICATION OF APPLICANT BODY AND/OR SPONSORING ORGANIZATION**

Name of the proposed diploma discipline (in both official languages):

**Name and address of applicant:** \*

**Telephone #**  **Fax #**

**E-mail:**

**Submission date**  **Signature:**

*If necessary, please add a separate page with the names and addresses of co-applicants.*

* **NOTE**: Please identify a single address for receipt of all correspondence relating to this application.

**GENERAL INFORMATION** **(Questions 1 to 6)**

## 1. What is the name of the proposed diploma discipline (in both official languages)?

X:

## 2. What are the entry criteria for this discipline?

**[ ]  Type A:** Royal College specialty *(please specify)*:

[ ]  **Type B:** Royal College subspecialty *(please specify)*:

[ ]  **Type C:** Any MD

[ ]  **Type D:** Conjoint program with the CFPC *(still under development)\_*

**3. For Type A and Type B above, describe the relationship of this proposed diploma discipline to the parent specialty(ies) or subspecialty(ies). [ ]  N/A**

X:

**4. Is there a National Specialty Society for the parent specialty(ies) or subspecialty(ies)? Yes** **[ ]  No** **[ ]  N/A [ ]**

 **If yes, please specify.**

X:

**5. Is there a National Specialty Society for the proposed diploma discipline?**

 **Yes** **[ ]  No** **[ ]**

 **If yes, please identify.**

 X:

## 6. Describe the relationship between these societies (if applicable).

X:

## SPECIFIC INFORMATION (Questions 1 to 8)

## 1. Please describe the unique nature of the proposed diploma discipline.

##  *(What supplemental competencies or highly specific scope of practice is included that requires distinct recognition? What is the defined and recognized societal health need not currently being satisfied by any other recognized discipline? What positive contribution towards improving medical care and health outcomes does this discipline make?)*

X:

## 2. Please provide a list of journals and publications that support this special area.

## *(Demonstrate the value that these add to the medical literature. Indicate if they are peer‑reviewed, indexed, the scope of distribution [national/international], the subscription volume, and Canadian contribution to these publications. Where meetings or societies are cited indicate the scope of these and the contributions of Canadian physicians to these meetings or societies.)*

X:

**3. Are there training programs and/or established clinical fellowships for this discipline in Canada? Yes** **[ ]  No** **[ ]**

(Please describe including where the training takes place, how many trainees/year, what is the duration of the training, what are the sources of funding for these programs.)

X:

**4. How will the recognition of this proposed diploma discipline affect the parent (sub)specialty(ies) and other related specialties?** *(Will there be overlap of patient populations, procedures, investigative techniques, areas of research? Please include both positive and negative implications.)*

X:

**5. a)** **How would recognition of this diploma discipline affect:** *(Impact should be interpreted broadly and include community, the delivery of medical care, cost‑savings. Population health data should be included, if applicable.)*

  **i. Delivery of medical care?**

X:

 **ii. Meeting community needs?**

X:

 **iii. Health care budgets?**

X:

 **b) What role will the consultant in the proposed diploma discipline play in meeting community needs?**

X:

 **c) Describe the academic role of the consultant in this discipline.** *(What would be the requirements for teaching and research, if the specialist was part of an academic/tertiary care centre?*

X:

 **d) Describe the patient population served by this discipline*.*** *(This should include variety and volume of patients with supporting information.)*

X:

 **e) Please estimate how many physicians are currently practicing the proposed diploma discipline in Canada and in which locations***. (This should reflect the national physician workforce for the proposed specialty/subspecialty.)*

X:

 **f)** **Describe the current practice profiles of the physicians engaged in this discipline.**

X:

 **g) Outline future (5 years and 10 years periods) projected workforce needs (FTEs) for practicing physicians in the proposed field.**

X:

 **h)** **What is the impact of technology both in terms of requirements to practice and expected impact of future technological development on the need for the proposed diploma?**

X:

**6. Why is recognition by the Royal College essential for the success of the proposed diploma discipline?**

X:

**7. What would be the projected effects on the Canadian health care system from the recognition of the proposed diploma discipline? Include both potential positive and negative impacts.**

X:

**8. Please identify Canadian organizations and stakeholders who should be consulted regarding this application.** *(Other than the groups identified in the Part II, Consultation section. The applicant is required to provide the names and addresses of the identified organizations and stakeholders)*

X:

# DISCIPLINE SPECIFIC INFORMATION:

A completed application form must include the following:

1. **A draft version of the Competency Training Requirements (CTR) for the diploma discipline.**

This document should describe the key competencies to be acquired. The CTR template is provided as an example and should be used as a guide. (Please contact COS@royalcollege.ca

for the latest version of the template.)

*Note: A proposed discipline that includes competencies which overlap with those in the OTR of an existing discipline or disciplines MUST include, as part of this application, written letters of support of the specialty committee(s) in that discipline or disciplines.*

1. **A document outlining the proposed strategy for the assessment of competencies to ensure that graduates of postgraduate training programs in this proposed diploma discipline are competent specialists.**

This document must include:

* 1. A list of possible assessment tools to comprise the summative portfolio
1. **Outline the implementation issues for the proposed diploma discipline. Include information on:**
	1. Number of sites capable of mounting a training program in Canada, including the number of training positions estimated at each site.

X

* 1. Please estimate the number of faculty currently available nationally with expertise in the proposed diploma discipline and identify where they are located across the country.

X

* 1. What will be the funding implications for training opportunities?

X

* 1. Please describe any anticipated impacts on Postgraduate Medical Education or practice systems in any region.

X