

Standards of Accreditation for Areas of Focused Competence Programs in Acute Care Point-of-Care Ultrasonography

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INTRODUCTION

The Standards of Accreditation for Areas of Focused Competence (AFC) Programs in Acute Care Point-of-Care Ultrasonography are a national set of standards maintained by the Royal College of Physicians and Surgeons of Canada for the evaluation and accreditation of Acute Care Point-of-Care Ultrasonography AFC programs. The standards aim to provide an interpretation of the General Standards of Accreditation for Areas of Focused Competence Programs as they relate to the accreditation of AFC programs in Acute Care Point-of-Care Ultrasonography, and to ensure these programs adequately prepare AFC trainees to meet the health care needs of their patient population(s) upon completion of training.

The standards include requirements applicable to AFC programs and learning sites and have been written in alignment with the standards organization framework used in the general standards that aims to provide clarity of expectations, while maintaining flexibility for innovation.

These standards are intended to be read in conjunction with the *General Standards of Accreditation for Areas of Focused Competence Programs*, as well as the discipline-specific documents for Acute Care Point-of-Care Ultrasonography. In instances where the indicators reflected in the *General Standards of Accreditation for Areas of Focused Competence Programs* have been modified within this document to reflect a discipline-specific expectation, the indicator as reflected in this document takes precedence.

STANDARDS

DOMAIN: PROGRAM ORGANIZATION

The *Program Organization* domain includes standards focused on the structural and functional aspects of the AFC program, which support and provide structure to meet the general and discipline-specific standards of accreditation for AFC programs.

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

Refer to Standard 1 and its various components within the *General Standards of Accreditation for Areas of Focused Competence Programs*.

Element 1.2: There is an effective and functional AFC program committee to support the AFC program director in planning, organizing, evaluating, and advancing the AFC program.

Requirement(s)	Indicator(s)
1.2.1: The AFC program committee is composed of appropriate key AFC program stakeholders.	1.2.1.1 (modified): Major academic and clinical components and relevant learning sites are represented on the AFC program committee, including a member from emergency medicine.
	1.2.1.4 [Exemplary]: The AFC program committee includes member from each of the ultrasound ¹ imaging departments, including medical imaging, cardiology, and obstetrics and gynecology.

DOMAIN: EDUCATION PROGRAM

The *Education Program* domain includes standards focused on the planning, design, and delivery of the AFC program, with the overarching outcome to ensure that the AFC program prepares trainees to be competent for practice in the discipline.

¹ A comprehensive sonographic examination aims to systematically map out normal and disordered anatomy, assess function and dysfunction in the body, and/or provide guidance for an interventional procedure.

STANDARD 2: Trainees are prepared for independent practice in the AFC discipline.

Refer to Standard 2 and its various components within the *General Standards of Accreditation for Areas of Focused Competence Programs* in addition to the indicators detailed below.

Element 2.1: The AFC program is designed to facilitate trainees' attainment of the required competencies.

Requirement(s)	Indicator(s)
2.1.1: The AFC program's design and delivery is based on the standards of training for the AFC discipline.	2.1.1.6: There are a sufficient number and variety of archived teaching cases to meet the educational needs of the Acute Care POCUS AFC trainees.
	2.1.1.7: The acute care POCUS service has a structured quality assurance program with follow-up that includes comparison to reference standards (including pathology review, surgical findings comprehensive imaging review, and clinical follow-up) and a mechanism for peer review of POCUS studies.
	2.1.1.8 [Exemplary]: Simulation is incorporated into the curriculum plan to ensure adequate experience in uncommon or unusual ultrasound-guided procedures, including pericardiocentesis.

Element 2.2: There is an effective, organized system of trainee assessment.

Requirement(s)	Indicator(s)
2.2.1: The AFC program has a planned, defined and implemented system of assessment.	2.2.1.4: Oral and written formative evaluations such as In-Training Evaluation Reports (ITERs) are performed at intervals of no longer than two months in order to assess the progress of the AFC trainee and to provide timely feedback. The ITERS review both the procedural and non-procedural competencies related to Acute Care POCUS.
	2.2.1.5: The validated logbook of cases signed by the supervising physician is reviewed as part of the assessment process.
	2.2.1.6: The program of assessment includes the Royal College Objective Structured Assessments of Technical Skills (RC-OSATS) for the AFC in Acute Care POCUS.

DOMAIN: RESOURCES

The *Resources* domain includes standards focused on ensuring that the AFC program's clinical, physical, technical, financial, and human resources are sufficient for the delivery of the education program and, ultimately, to prepare trainees for practice in the discipline.

STANDARD 3: The delivery and administration of the AFC program is supported by appropriate resources.

Refer to Standard 3 and its various components within the *General Standards of Accreditation* for Areas of Focused Competence Programs in addition to the indicators detailed below.

Element 3.1: The AFC program has the clinical, physical, technical, and financial resources to provide all trainees with the educational experiences needed to acquire all competencies.

Requirement(s)	Indicator(s)
3.1.1: The patient population is adequate to ensure that trainees attain required competencies.	 3.1.1.2: The AFC training sites have access to patients who undergo acute care POCUS in the following areas: General/abdominal; Pelvic; Cardiac; and Procedural guidance.
3.1.2: Clinical and consultative services and facilities are effectively organized and adequate to ensure that trainees attain the required competencies.	 3.1.2.5: The AFC program has access to an emergency department and to other clinical services that include outpatient clinics and inpatient beds. 3.1.2.6: The clinical facilities are organized to provide the AFC trainee with opportunities to perform acute care POCUS-guided procedures. 3.1.2.7: The AFC program has access to facilities for comprehensive imaging and correlation of POCUS imaging. 3.1.2.8: The AFC program has access to: A department of medical imaging; A department of obstetrics-gynecology; A department of cardiology; A department of ophthalmology; and An intensive care unit. 3.1.2.9: AFC programs that offer a pediatric stream have access to a pediatric emergency department and pediatric specialists, including radiologists and cardiologists.
3.1.3: The AFC program has the necessary financial, physical, and technical resources.	 3.1.3.5: The AFC program has access to the equipment to perform transabdominal and transvaginal ultrasound, point-of-care echocardiography, and high-frequency soft tissue ultrasound. 3.1.3.6: The AFC program has access to the equipment to perform acute care POCUS-guided procedures. 3.1.3.7: The AFC program has access to appropriate ultrasound systems and an imaging archiving system with reporting functions.

- **3.1.4:** There is appropriate liaison with other programs and teaching services to ensure that trainees experience the breadth of the discipline.
- **3.1.4.2:** The university sponsors an accredited program in Emergency Medicine (Royal College or College of Family Physicians of Canada (CFPC)). If a pediatric stream is offered, the university sponsors an accredited program in Pediatric Emergency Medicine.

Element 3.2: The AFC program has the appropriate human resources to provide all trainees with the required educational experiences.

Requirement(s)

3.2.1: Teachers appropriately implement the curriculum, supervise and assess trainees, contribute to the program, and role model effective practice.

Indicator(s)

- **3.2.1.1 (modified):** The number, credentials, competencies, and scope of practice of the teachers are adequate to provide the breadth and depth of the discipline, including required clinical teaching, academic teaching, appropriate research, and assessment and feedback to trainees. The teaching faculty includes individuals with expertise in echocardiography.
- **3.2.1.2 (modified):** The number, credentials, competencies, and scope of practice of the teachers are sufficient to supervise trainees in all learning environments, including when trainees are on-call. There are a minimum of two staff members who are AFC diplomates in Acute Care POCUS (or who can demonstrate completion of dedicated training in POCUS) to supervise AFC trainees at all levels and in all aspects of POCUS provision. They are part of an active accredited residency program in Emergency Medicine or Pediatric Emergency Medicine.
- 3.2.1.4: The AFC director
 - Has Royal College certification (or equivalent) in any primary specialty, or CFPC certification (or equivalent);
 - Has demonstrated specialty expertise in Acute Care POCUS, as demonstrated by at least three years in practice and/or completion of a formal period of training in POCUS; and
 - Is actively involved in the practice of Acute Care POCUS.

DOMAIN: LEARNERS, TEACHERS, AND ADMINISTRATIVE PERSONNEL

The *Learners, Teachers, and Administrative Personnel* domain includes standards focused on safety, wellness, and support for learners and teachers.

STANDARD 4: Safety and wellness are promoted throughout the learning environment.

Refer to Standard 4 and its various components within the *General Standards of Accreditation* for Areas of Focused Competence Programs.

STANDARD 5: Trainees are treated fairly throughout their progression through the AFC program.

Refer to Standard 5 and its various components within the *General Standards of Accreditation for Areas of Focused Competence Programs*.

STANDARD 6: Teachers effectively deliver and support all aspects of the AFC program.

Refer to Standard 6 and its various components within the *General Standards of Accreditation for Areas of Focused Competence Programs*.

DOMAIN: CONTINUOUS IMPROVEMENT

The *Continuous Improvement* domain includes standards focused on ensuring a systematic approach to the evaluation and improvement of the AFC program.

STANDARD 7: There is continuous improvement of the educational experiences to improve the AFC program and ensure trainees are prepared for independent practice in the discipline.

Refer to Standard 7 and its various components within the *General Standards of Accreditation for Areas of Focused Competence Programs*.

Drafted – AFC Working Group in Acute Care POCUS (March 2019) **Approved** – Specialty Standards Review Committee (October 2019)