

Standards of Accreditation for Areas of Focused Competence Programs in Adult Cardiac Electrophysiology

Publication date: November 1, 2019

INTRODUCTION

The *Specific Standards of Accreditation for Areas of Focused Competence (AFC) Programs in Adult Cardiac Electrophysiology* are a national set of standards maintained by the Royal College of Physicians and Surgeons of Canada for the evaluation and accreditation of Adult Cardiac Electrophysiology 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 Adult Cardiac Electrophysiology, and to ensure these programs adequately prepare 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 Adult Cardiac Electrophysiology. 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*.

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.

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.

STANDARDS OF ACCREDITATION FOR AREAS OF FOCUSED COMPETENCE
PROGRAMS IN ADULT CARDIAC ELECTROPHYSIOLOGY
NOVEMBER 2019

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.	2.1.1.2 (modified): The AFC program incorporates all required competencies contextual to the AFC discipline for the relevant CanMEDS roles. ¹

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.	2.2.1.3 (modified): The system of assessment includes identification and use of appropriate assessment tools tailored to the experiences and competencies being assessed; assessment tools may include an In-Training Evaluation Report (ITER), oral and written examinations, or a validated logbook. 2.2.1.4: Trainees complete a Competency Portfolio for the Diploma in Adult Cardiac Electrophysiology.
2.2.2: There is a mechanism in place to engage trainees in a regular discussion for review of their performance, including timely support for trainees not attaining the required competencies as expected.	2.2.2.7 (Exemplary): <i>There are regular, documented meetings between the AFC program director and each trainee to discuss and review trainee performance and progress.</i>

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.

¹ These may include: Review of intracardiac tracings with discussion of interpretations and various methods of proof of mechanism and site of origin of tachycardias; review of arrhythmia related electrocardiogram (ECG) tracings; review of implanted intracardiac device (including ICD/CRT) interrogation interpretation and programming methodology discussion; critical review of publications related to cardiac arrhythmias diagnosis or treatment (journal club); review of adverse patient outcomes, including complications of electrophysiology or implanted device related procedures, unexpected deaths, and adverse outcomes related to clinical decision making.

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)
<p>3.1.1: The patient population is adequate to ensure that trainees attain required competencies.</p>	<p>3.1.1.2: The volume and diversity of patients available to the AFC program are sufficient to support trainee acquisition of knowledge, skills, and attitudes relating to population aspects of age, gender, culture, and ethnicity, appropriate to Adult Cardiac Electrophysiology.</p> <p>3.1.1.3: The volume and diversity of patients and procedures is sufficient to provide trainees with adequate patient management experience.</p> <p>3.1.1.4: The volume and diversity of patients provides trainees with adequate exposure to patients with arrhythmia management issues.</p> <p>3.1.1.5: The volume and diversity of patients provides trainees with adequate exposure to procedures related to arrhythmia management.</p> <p>3.1.1.6: The AFC program has adequate procedure volumes for each trainee in the program to perform :</p> <ul style="list-style-type: none"> • Diagnostic electrophysiology studies (100 – 150 [primary operator and analysis] are suggested; 50 are expected to involve patients with supraventricular arrhythmias); • Ablations for supraventricular tachycardia (At least 50 are suggested); • Pacemaker/ implantable cardioverter-defibrillator implantations (At least 75 [primary operator] are suggested; it is recommended that at least 25 be ICDs and at least 20 be revisions); • Coronary sinus (LV) lead placements for CRT (At least 15 are suggested); • Transseptal punctures (At least 20 [supervised performance] are suggested); • Left-sided procedures (At least 5 using the retrograde aortic approach are suggested); • AF ablation training (30 to 50 [supervised ablations] are suggested); • Complex atrial flutter ablation training (15 to 20 procedures are suggested); • Scar-related VT ablation training (15 to 20 procedures are suggested).

**STANDARDS OF ACCREDITATION FOR AREAS OF FOCUSED COMPETENCE
PROGRAMS IN ADULT CARDIAC ELECTROPHYSIOLOGY
NOVEMBER 2019**

3.1.1.7 (Exemplary): *The volume and diversity of inpatients, postoperative patients, outpatients, and patients with potential inherited arrhythmia syndromes provide trainees with exposure to the full breadth of potential patient problems, including:*

- *adequate experience in assessment;*
- *implantation and follow-up of implantable cardiac arrhythmia devices;*
- *assessment of patients with supraventricular tachycardia;*
- *ventricular arrhythmias;*
- *syncope; and*
- *inherited arrhythmia syndromes.*

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 (Exemplary): *The AFC program has access to one or more electrophysiology laboratories and operating rooms equipped to perform simple and complex ablation procedures; a pacemaker/implantable cardioverter-defibrillator (ICD)/ cardiac resynchronization therapy device (CRT) implantation and follow-up program; and an inpatient, outpatient and emergency department consultation program.*

3.1.2.6 (Exemplary): *The AFC program has access to electrophysiology studies using advanced mapping systems, and to perform complex device implantation.*

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 adult Cardiology.

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

Requirement(s)

Indicator(s)

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

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 and academic teaching; appropriate research; and assessment and feedback to trainees.

3.2.1.4: The AFC director is a Cardiologist who has completed further training in cardiac electrophysiology and whose major clinical practice focus is related to the diagnosis and treatment of cardiac arrhythmias.

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* in addition to the indicators detailed below.

Element 4.1: The safety and wellness of patients and trainees is promoted.

Requirement(s)	Indicator(s)
4.1.2: AFC education occurs in a safety-conscious learning environment.	4.1.2.6 (Exemplary): Trainees review radiation safety procedures with the radiology team or radiation safety officer.

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 – Area of Focused Competence discipline committee and Office of Specialty Education
September 2019

Approved – Based on version revised by the specialty committee dated December 2012