

1. Introduction

This document outlines the policy and procedure for accreditation of areas of focused competence (AFC-diploma) programs. This document aims to align AFC (diploma) accreditation with existing accreditation processes in postgraduate medical education.

2. Background

In February 2011, the Council of the Royal College of Physicians and Surgeons of Canada (“**Royal College**”) approved a new category of discipline recognition – AFC (diploma) programs. AFC (diploma) programs are competency-based programs providing additional training building upon a broader discipline. They are not residency programs, but instead are designed to recognize established disciplines of medicine that enhance scope of practice. Successful completion of an AFC (diploma) program confers a new distinct Royal College credential – the DRCPSC. In order to achieve this credential, trainees are assessed through a summative portfolio against competency-based milestones.

3. Initial Evaluation Phase

An initial evaluation phase commenced on July 1st 2012, when the first AFC accredited program became active¹. The initial evaluation phase will be for a period of ten years and will allow adequate time to effectively operationalize the accreditation process and systematically evaluate its efficiency and effectiveness. Further details with respect to evaluation of the AFC (diploma) program accreditation process will be set out in a separate policy document. It is intended that the results of the evaluation will inform any changes to the existing accreditation process for AFC (diploma) programs.

4. Organizational Structure

The organizational structure for accreditation of AFC (diploma) programs includes oversight from a variety of stakeholders, as identified below.

4.1 Areas of Focused Competence – Accreditation Committee (AFC-AC)

A subcommittee of the Accreditation Committee, the Areas of Focused Competence – Accreditation Committee (“**AFC-AC**”), has been formed and granted responsibility for the accreditation of all AFC (diploma) programs. The AFC-AC is responsible for general oversight of AFC (diploma) programs and will make all accreditation decisions. Decisions of the AFC-AC will be final, pending any appeal process.

The AFC-AC is composed of ten individuals, including a chair. The term of office of the chair is two years, renewable once, for a maximum of four years. The chair must be a member of the Accreditation Committee. The other members of the AFC-AC have a term of two years, renewable twice, for a maximum of six years. Two reviewers are assigned for each accreditation review. The first reviewer is responsible for presenting the review and making a motion with respect to the categories of accreditation. The second reviewer will indicate whether he or she supports the first reviewer’s motion. The second reviewer may also make additional remarks if he or she feels it is necessary and/or if he or she disagrees with the first reviewer. If the second reviewer disagrees with the first reviewer, another member of the AFC-AC may second the first reviewer’s motion. Once a reviewer’s motion is seconded, all

¹ Transfusion Medicine became active on July 1, 2012, after converting from a subspecialty to an AFC program.

remaining members of the AFC-AC are invited to comment. Following a comment and question period, all members of the AFC-AC vote on the accreditation decision. A quorum shall consist of three (3) members of the AFC-AC. A simple majority is required for approval of a motion.

4.2 *AFC Committees/Subcommittees*

The responsibilities of AFC (diploma) committees or subcommittees with respect to accreditation are similar to the responsibilities of specialty committees for the primary specialties and subspecialties. Responsibilities include providing consultative input to AFC programs through development and maintenance of standards of accreditation ("**SAs**"), competency training requirements ("**CTRs**"), and review of applications for accreditation and review of the documentation for programs undergoing review.

Applications for accreditation and documentation of AFC (diploma) programs undergoing accreditation review are sent to the applicable AFC committee or subcommittee, as set out below.

4.2.1 Multiple Parent Disciplines

AFC (diploma) programs with multiple entry routes and multiple parent disciplines (for example, Sport and Exercise Medicine, which trainees can enter from a variety of disciplines including Pediatrics and Surgery) will be overseen by an AFC committee. Similar to the process for specialties and subspecialties, members of the applicable AFC committee will be responsible for reviewing the AFC (diploma) program's documentation and providing feedback to the chair of the AFC committee. The chair will review the feedback of its members and make a recommendation for accreditation to the AFC-AC for final decision.

4.2.2 Single Parent Discipline

AFC (diploma) programs with one or multiple possible entry route(s) but only one parent discipline (for example, Echocardiography, the parent discipline of which is Cardiology) will be overseen by an AFC subcommittee, structured under the umbrella of the parent specialty committee. Similar to the process for residency programs, members of the applicable AFC subcommittee will be responsible for reviewing the AFC (diploma) program's documentation and providing feedback to the chair, who will then review all feedback and make a recommendation for accreditation.

Additionally, the chair of the parent specialty committee will be offered an opportunity to review the relevant documentation and provide a consultation to the AFC-AC for accreditation. The recommendation of the specialty committee chair of the parent discipline will be provided to the AFC-AC for consideration, but will not override the recommendation of the AFC subcommittee chair.

The recommendations of both chairs, as applicable, will be weighed by the AFC-AC when making the final accreditation decision. If a recommendation is not received from either the chair of the specialty committee of the parent discipline or the chair of the AFC subcommittee, this will not hinder the process moving forward to the AFC-AC for final decision.

4.3 *Royal College Educational Standards Unit*

The Educational Standards Unit of the Royal College is responsible for supporting the accreditation process of AFC (diploma) programs, including the activities of the AFC-AC.

5. Standards of Accreditation

Standards of accreditation separate from the "A" and "B" standards for residency programs have been developed for all AFC (diploma) programs; namely, the *General Standards for Areas*

of Focused Competence (AFC) Programs 'C' Standards ("**C** Standards"). Similar to the "A" and "B" standards, the "C" Standards are general standards for all AFC (diploma) programs. The "C" Standards are encompassed under four general headings: Administrative Structure, Resources, Educational Program and Assessment of Trainee Performance, and were approved by the Accreditation Committee in October 2011 and the Education Committee in November 2011. See Appendix A for a copy of the "C" Standards. In addition, each individual AFC (diploma) program is required to have standards of accreditation (SA) specific to its discipline.

6. Categories of Accreditation

The categories of accreditation for AFC (diploma) programs are aligned with the 2012 categories for residency program accreditation and are set out below. The deadlines with respect to these categories of accreditation are intended to ensure that reviews occur in a cyclical nature typically at the two, three year or six year point in the review cycle.

6.1 Applications for Accreditation

- Accredited New Program – The applicable AFC (diploma) program has submitted an application that demonstrates acceptable compliance with the "C" Standards. Within 24 months² of the date of the decision letter, a mandated internal review must be conducted.
- Defer – The application meets most of the "C" Standards, but clarification is required from the AFC (diploma) program on several areas before the AFC-AC can be assured that all components of the program are in place. AFC (diploma) programs that have been deferred once will return to the AFC-AC for decision, at which the AFC-AC must grant an accreditation status; the AFC-AC cannot defer an accreditation status more than once.
- No Approval – The applicable AFC (diploma) program application does not demonstrate acceptable compliance with the "C" Standards. A new application will be required.

6.2 Categories of Accreditation and the Review Cycle

- Accredited Program (Regular Survey) – The applicable AFC (diploma) program demonstrates acceptable compliance with "C" Standards, and therefore will be reviewed again at the next regular review, in six years' time. The AFC (diploma) program will undergo the usual internal review by the university, at mid-cycle.
- Accredited Program with Progress Report – The AFC-AC identifies specific issue(s) that require follow-up, which can be done via a formal report but a complete review of the entire AFC (diploma) program is not required. The written progress report by the AFC director will be due within 12 months of the decision letter from the AFC-AC. Any subsequent review resulting from the progress report will occur within 24 months following the new accreditation decision of the AFC-AC, or at the next Regular Review.
- Accredited Program with Internal Review – The applicable AFC (diploma) program has major issues in more than one of the "C" Standards. A mandated internal review must be conducted within 24 months. This status is also given to those programs that successfully reapply for accreditation following inactive status or periods of not being registered with the Royal College (see 6.3 other terms, below).

² Review will be done in conjunction with either the midpoint of the university's accreditation cycle, or with the regular onsite survey review, whichever is sooner.

- Accredited Program with External Review – Major issues are identified in the applicable AFC (diploma) program in more than one of the “C” Standards AND a) concerns are specialty specific and best evaluated by a reviewer from the discipline; b) concerns have been persistent, OR c) concerns are strongly influenced by non-educational issues and can be best evaluated by an external reviewer. The AFC (diploma) program will have an external review conducted within 24 months of the accreditation decision from the AFC-AC.
- Program on Notice of Intent to Withdraw Accreditation – Major and/or continuing non-compliance with one or more of the “C” Standards has been identified, which calls into question the educational environment and/or integrity of the program. An external review will be conducted within 24 months of the accreditation decision from the AFC-AC, by two specialists and, if needed, one trainee. Trainees in the program or already contracted to enter the program, as well as all applicants to the program, *must* be advised immediately by the AFC director of the status of the program. At the time of the review, the program will be required to show why accreditation should not be withdrawn.
- Withdrawal of Accreditation – The applicable AFC (diploma) program has major or continuing non-compliance with one or more of the “C” Standards and fails to demonstrate why accreditation should not be withdrawn. The decision will become effective immediately, unless there are trainees enrolled in the program in which case it becomes effective at the end of the academic year in which the decision is made, or whenever the trainee completes the program; whichever is sooner. A request to reactivate the program will not be considered for at least 12 months following the date of the accreditation decision of the AFC-AC.
- Mandated Review – If no trainee is in the program at the time of the scheduled onsite review, the AFC (diploma) program receives the status of **inactive**. The program will be required to complete a mandated program review once a trainee has been in the program for a minimum of four (4), up to a maximum ten (10), months³. This review will have the same format and documentation requirements as a regular onsite review.

6.3 Other Key Terms

Additional key terms related to the categories of accreditation are described below.

- Retroactive – Owing to the competency-based nature of AFC (diploma) programs, the concept of retroactivity will not apply in the context of AFC (diploma) programs. Trainees will be able to submit their summative portfolio for assessment by the Royal College once the program has an accredited status.
- The status of active/inactive is based on whether or not a trainee is present in the program. If there is no trainee in the program at the time of the onsite review, the program will not be reviewed, and will receive the status of **inactive**. Upon reactivation (i.e. entry of an AFC trainee into the program), the program will be required to participate in a mandated program review, which will take place once a trainee has been in the program for a minimum of four (4), up to a maximum ten (10), months. The Faculty/School of Medicine must notify the Educational Standards Unit (ESU) in writing within two months from when the first trainee(s) has been enrolled in the program, and specify the date that training commenced. Upon receipt of this notification, the ESU will confirm the deadline for submission of the mandated Internal Review. If there is still no trainee in the program at the time of the next regular onsite

³ The timeline of between four (4) and ten (10) months is recommended, to ensure the AFC trainee remains in the AFC program by the time of its accreditation review. Since AFC programs are competency-based, it is possible that some trainees will complete a program in as little as six months (though the expected timeline is between 1-2 years).

survey, accreditation will be withdrawn, and the program will be required to submit an abridged reapplication for accreditation.

- Registered with the Royal College – A program is registered with the Royal College by paying the annual program registration fee (see 8 Annual Program Registration Fee). Programs that becomes unregistered more than twice in a regular accreditation cycle (i.e. more than twice in six years) will be required to submit an abridged reapplication for accreditation.

7. Accreditation Review Process

The following section outlines the key components of the accreditation review process, including the review cycle, the process for review and the role of specialty committees and trainees in the process.

7.1 Review Cycle

The review cycle for accreditation will be every six years. The regular onsite survey at the six-year mark will be conducted in conjunction with postgraduate reviews and will be conducted onsite. This review cycle allows AFC (diploma) programs to be aligned with existing accreditation processes.

7.2 Onsite Review

Onsite reviews will be conducted in accordance with the postgraduate accreditation review cycle. Onsite reviews will be conducted for all regular surveys and external reviews, if there is a trainee available and in the program. A single reviewer will be responsible for conducting the onsite review of each AFC (diploma) program. This individual will be required to have expertise in accreditation, but may not be a specialist in the discipline. The accreditation review will occur in a single day, in conjunction with the one week postgraduate accreditation review process. Each program undergoing review will be required to submit the following materials electronically prior to the onsite review, similar to the process for residency programs:

- Program pre-survey questionnaire (PSQ)
- Competency-specific goals and objectives
- Academic curriculum/program
- Agendas of the AFC program committee meetings
- Sample trainee evaluation forms

The following additional materials will be made available to surveyors at the time of the onsite review:

- Minutes of the AFC program committee meetings
- Trainee evaluations/portfolios
- Aggregate data from the Trainee Exit Questionnaire (TEQ)

7.2.1 Mandated Review

As outlined in section 6.2, if there is no trainee in the program at the time of the scheduled onsite review, the AFC (diploma) program receives the status of **inactive**. The program will be required to complete a mandated program review once a trainee has been in the program for a minimum of four (4), up to a maximum ten (10), months⁴. This review will have the same format and documentation requirements as a regular onsite review.

⁴ The timeline of between four (4) and ten (10) months is recommended, to ensure the AFC trainee remains in the AFC program by the time of its accreditation review. Since AFC programs are competency-based, it is possible that some trainees will complete a program in as little as six months (though the expected timeline is between 1-2 years).

7.3 *University Internal Review*

Similar to the postgraduate accreditation process, a university with AFC (diploma) programs will be required to conduct a mid-cycle internal review of its programs between formal Royal College onsite reviews.

7.4 *Appeal*

An appeal process will be available in circumstances that a university does not agree with a decision of the AFC-AC with respect to accreditation.

7.5 *Roles of Trainees in the Process*

Trainee input in the accreditation process is extremely valuable. Given the competency-based nature of AFC (diploma) programs and the likelihood that AFC (diploma) programs will have a small number of trainees, many of whom start and finish their training at different times throughout the academic year, it may be difficult to speak directly with current trainees while conducting an onsite review. To address this challenge, all trainees will be asked to complete a Royal College administered trainee exit questionnaire (“**Trainee Exit Questionnaire**”) upon exiting an AFC (diploma) program. Once a trainee has completed and submitted their final summative portfolio to the Royal College via the ePortfolio (eDiploma) platform, the trainee will be directed to the Trainee Exit Questionnaire. The Trainee Exit Questionnaire will not be a replacement for direct conversation and feedback with trainees, but will provide an additional source of information for surveyors when reviewing a program.

The Trainee Exit Questionnaire will ask about the training environment and the trainee’s general experience, and will provide an opportunity for confidential feedback. The Trainee Exit Questionnaire will include a disclaimer that the Trainee Exit Questionnaire will not be examined prior to the next review of the program and is not intended as a mechanism to deal with urgent matters. Instead, the Trainee Exit Questionnaire will direct all urgent matters to be dealt with directly through the appropriate university authority. Accreditation reviewers will be provided with an aggregate summary (by academic year) of the applicable Trainee Exit Questionnaires at the time of the onsite review. In addition, if an AFC (diploma) program has received five or more Trainee Exit Questionnaires; overall aggregate data will be collated and made available to the postgraduate dean for medical education and the program director.

8 Annual Program Registration Fee

Each accredited AFC (diploma) program will be required to pay an annual program registration fee, billed each year in April for the upcoming academic year (July 1-June 30). All AFC (diploma) programs, including those without current trainees, will be required to pay the annual fee. This fee is part of the business model for cost-recovery as set out by Royal College Council for the overall AFC (diploma) category of discipline recognition.

If an AFC (diploma) program has not paid the annual program registration fees required by the Royal College, it will be deemed to be no longer registered with the Royal College (see 6.3 re registration status). The program will be re-registered when the program pays its annual registration fee. If a program becomes unregistered more than twice (i.e. three times or more) in a regular six-year review cycle, the program will be required to submit an abridged reapplication for accreditation.

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