Assessment of International Programs

Accreditation and Training

Questionnaire
This questionnaire is intended to be completed while referring to two documents:

1. The CFPC adaptation for postgraduate family medicine education of the WHO/WFME Guidelines for Accreditation of Basic Medical Education
2. The CFPC adaptation of the Postgraduate Medical Education WFME Global Standards for Quality Improvement for Family Medicine

Although the term family medicine is used throughout the documents in many contexts, general practice, family practice, or primary care may be interchanged. Whatever term is used, the intent is to refer to a discipline that provides continuous and comprehensive care, from pre-natal to palliative care, across all ages and in all settings.

Some questions may be best answered by providing or referring to accreditation standards and others by describing the usual practices of educational programs along with the methods by which they are monitored and held accountable for these practices.
1. Briefly describe the accreditation system for postgraduate family medicine programs and the authority under which this system operates. Include a listing of the organizations considered to be key stakeholders.

2. How are the accreditation standards or criteria determined and then made known to stakeholders?

3. What is the composition of the accreditation committee or council? Describe briefly how members are chosen and how stakeholders are represented. How are decisions made? How are dissenting opinions addressed? If members of the committee or council have defined roles or responsibilities, please provide specific descriptions for each.

4. What are the requirements for self evaluation or self review of the program undergoing accreditation? How often does this occur? How does this review influence quality improvement in the educational program? An outline of the components attached as an appendix would be helpful.

5. Describe the nature of on-site visits to training programs as part of the accreditation process, including duration, organization, team membership and how reports are made back to the accreditation review committee.

6. What is the role of the training program in setting up and organizing the accreditation visit?

7. Describe the process by which these standards are reviewed and updated.

8. Describe what is contained in the final accreditation report, who receives it and when and how it is used. Are final decisions made public?

9. List and describe the implication of the categories of accreditation decisions. Indicate the frequency with which they are used. A table of accreditation outcomes for the last 3 accreditation cycles would be helpful and should be attached, if possible.

10. Describe the safeguards to ensure the accreditation system can effectively address any attempts at unfairly influencing decision making (e.g. political pressure, declared or undeclared conflicts of interest, coercion)
1. Mission and Outcomes

1.1 Provide copies of the accreditation documents or statements which define the basis for the outcome objectives in family medicine postgraduate education and describe how these are used in by the educational programs in your setting, or under your jurisdiction.

1.2 Briefly describe the process by which these have been developed and reviewed.

1.3 Describe how accreditation standards foster the development of professionalism in family physicians, in particular to enable the doctor to act in the best interest of the patient and the public.

1.4 Provide a document containing the competencies that trainees are required to achieve as a result of their training programs. Please highlight the competencies listed in section 1.4, page 7 of the accompanying Adaptation for Family Medicine of the Postgraduate Medical Education – WFME Global Standards for Quality Improvement.

2. Training Process

2.1 Describe the prescribed training program required by accreditation standards, including the family medicine specific components, and any additional experiences or placements, both clinical and non-clinical. A schematic outline may be helpful.

2.2 What is the required degree of involvement of the family medicine training program and family physician teachers/preceptors in each of these experiences according to accreditation standards?

2.3 What is the expected role of the trainee in delivering patient care, according to accreditation standards?

2.4 Describe the nature of family practice as it should be experienced by trainees in your programs.

2.5 What are the standards for trainee supervision, feedback and assessment during the clinical components of the programs?

2.6 In what ways are programs expected to provide trainees with gradually increasing responsibility over their training?
2.7 What are the requirements for formal teaching, including seminars and small groups, about the theoretical and scientific basis for the discipline, as well as important organizational, legal, and ethical concepts.

2.8 Describe the expected balance between clinical service and education in the programs and how programs are required to monitor this.

2.9 How are trainees required to learn skills in critical appraisal of the literature, and evidence based medicine? What are the requirements for exposure to research?

2.10 How are programs required to demonstrate that trainees are actively engaged in providing care across the spectrum of patients and variety of problems in an adequate volume for learning?

2.11 What are the expectations for trainees related to learning and practicing the concepts of continuity of care?

2.12 Indicate how the following content areas are reflected in the accreditation standards and other program requirements, referring to section 2.3 of the Quality Improvement document:

- Dealing with undifferentiated problems and uncertain clinical situations
- Dealing with the psychosocial and cultural aspects of health care
- Communication skills with patients and other health professionals
- Understanding of the doctor patient relationship, including boundaries, power dynamics and issues of intimacy
- Use of medical records and documentation
- Knowledge of a bioethics framework, including the ability to apply it in the clinical situation
- Familiarity with relevant medico-legal issues
- Understanding of the concepts of quality assurance with the ability to apply it to aspects of practice
- Understanding of the non-biological determinants of health, and the impact on patients and community
- Ability to apply concepts of health promotion and disease prevention in clinical practice
- Knowledge of the health care system, including the use of community resources in providing care to patients

2.13 How are educational programs organized in your jurisdiction, and what are the requirements for governance and accountability?

2.14 What is the required role of trainees and other stakeholders in the governance of the program?

### 3. Assessment of Trainees

3.1 Describe the standards that refer to the process of assessing trainees, including the methods required of the training programs as well as any methods or examinations administered by the
jurisdiction or College, both in-training or formative and terminal. Indicate the relationship between these methods and the nature of clinical practice.

3.2 What are the requirements for the provision of feedback to trainees and for direct observation of their clinical performance during day-to-day clinical duties?

3.3 Describe the appeal mechanisms that are required at the training program level and at the level of the College or other authority.

4. Trainees

4.1 What are the accreditation standards for the conduct of admission to postgraduate training programs?

4.2 How are the numbers of trainees accepted into educational programs determined?

4.3 Describe the requirements for support, counselling and career guidance designed to meet the needs of trainees.

4.4 Describe the nature of trainees’ duty hours. What are the requirements for balancing service and education e.g. contracts?

4.5 How are interruptions to training (sickness or parental leave, military duty etc) and part time training positions handled?

5. Staffing

5.1 What are the required qualifications and responsibilities for teachers in the training programs?

5.2 What are the requirements for support of staff in their work as teachers, by the educational program and by the larger educational system?

5.3 What are the requirements for teaching of trainees during clinical placements?
6. Training Settings and Clinical Resources

6.1 Describe the expectations for the training sites in the educational programs. How are these monitored for appropriate variety, volume and case mix? Refer to 6.1 in the Quality Improvement document.

6.2 Describe possible outcomes if a training site is found to no longer be appropriate for family medicine trainees.

6.3 What are the requirements for trainees to provide out of hours or emergency care to family medicine patients? What are the settings in which this care occurs?

6.4 What are the requirements for trainees in providing antenatal, intrapartum and postpartum care to family medicine patients?

6.5 What are the requirements for trainees to provide care to family medicine patients in home, outpatient, hospital, and long term care settings?

6.6 What are the requirements for the physical facilities of training locations, including tools for information management?

6.7 What are the standards for communication and information technology for learning and patient care in the training programs?

6.8 Describe the expectations of trainees with respect to research during their training program.

6.9 How are educational experts engaged in the educational programs and what are the requirements for this involvement?

6.10 What is the policy for training experiences outside the trainee’s home program, either within or outside the country?
7. Evaluation of Training Process

7.1 What mechanisms are required to evaluate the outcomes of each training program? (Section 7, Quality Improvement document)

7.2 What mechanisms are used to evaluate the effectiveness of the training system as a whole?

7.3 Describe the involvement of stakeholders with respect to the results of the evaluation of training programs.

8. Governance and Administration

8.1 What is the required or accepted governance structure of training programs, and under what authority? Highlight in particular the roles of family medicine organizations and family physicians in this governance.

8.2 How is the completion of training recognized, and under what authority?

8.3 In addition to family medicine training, are there defined subspecialties of family medicine with training programs? Please list any, with resulting credentials and the authority under which these are recognized. Examples vary by country, but might include palliative medicine or emergency medicine.

8.4 What are the requirements for management and quality improvement of each training program? How is this implemented? Are there formal outcome measures? If so, please specify.

9. Continuous Renewal

9.1 Describe how the College or authority is involved in reviewing and updating the structure, function and quality of the training programs.

9.2 What studies or data have informed review of postgraduate programs in the last 5 years?

9.3 What standards support each training program in responding to societal needs and to new information and best practices in medical education?