CACMS 101: A Primer on Accreditation of Canadian MD programs[1]

CACMS
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CACMS 101: A Primer on Accreditation of Canadian MD programs
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[1] This Primer is an abridged guide to accreditation basics. For precise information on procedures, standards and elements, the reader is advised to consult the CACMS Rules of Procedure and the CACMS Standards and Elements. All referenced documents can be found on the CACMS website.

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Executive Summary

CACMS 101: A Primer on Accreditation of Canadian MD programs is a compendium of information about medical school accreditation in Canada in an abridged form. The *Primer* contains commonly used acronyms and their definitions and answers to many of the questions that a person new to medical school accreditation might have.

The *Primer* is intended for use in conjunction with the CACMS Rules of Procedure and the CACMS Standards and Elements.

For your convenience, sections of the *Primer* are hyper-linked from the Table of Contents to the appropriate section of this document. If your questions are still not answered or you have suggestions for other content to include, contact the CACMS Secretariat at: CACMS@afmc.ca.

Glossary of commonly used acronyms in CACMS accreditation

Acronym	Name
AAMC	Association of American Medical Colleges
AAN	Accreditation Administrators Network
ACCC	AFMC-CMA-CACMS Council
ACMC	Association of Canadian Medical Colleges
AFMC	Association of Faculties of Medicine of Canada
AMA	American Medical Association
AY	Academic Year
C	Compliance
CACME	Committee on Accreditation of Continuing Medical Education
CACMS	Committee on Accreditation of Canadian Medical Schools
CFMS	Canadian Federation of Medical Students
CFPC	College of Family Physicians of Canada
CM	Compliance with a need for monitoring
CMA	Canadian Medical Association
CMQ	Collège des médecins du Québec
CQI	Continuous Quality Improvement
DCI	Data Collection Instrument
ED	(United States) Department of Education
FMEQ	Fédération médicale étudiante du Québec
FMRAC	Federation of Medical Regulatory Authorities of Canada
FUAL	Faculty Undergraduate Accreditation Lead
ISA	Independent Student Analysis
LCME	Liaison Committee on Medical Education
MD	Medical Doctor
MDCM	Medicinæ Doctorem et Chirurgiæ Magistrum
Mini-DCI	Mini Data Collection Instrument
MOA	Memorandum of Agreement
MOU	Memorandum of Understanding
MSPR	Medical Student Performance Record
MSS	Medical School Self-Study
NC	Noncompliance
PGME	Postgraduate Medical Education
PSC	(CACMS) Policy Subcommittee
RC	Royal College of Physicians and Surgeons of Canada
RoP	Rules of Procedure
S	Satisfactory
S & E	(CACMS) Standards and Elements
SCESC	Standing Committee on Education Sub-Committee on Continuous Quality Improvement in Undergraduate Medical Education
SM	Satisfactory with a need for monitoring

SSC   (CACMS) Standards Subcommittee
SVR   Site Visit Report
TUMEA   Task Force on Undergraduate Medical Education Accreditation
U   Unsatisfactory
UGME (UME)   Undergraduate Medical Education
WFME   World Federation for Medical Education

What is accreditation?

Accreditation is a term used to describe a voluntary process that an educational institution undergoes to confirm that one or more of its educational programs meets minimum standards.

Why accredit a medical school program?

Accreditation often confers a benefit to the graduates of a program. In the case of medical school accreditation, graduates of accredited programs are advantaged over others in obtaining residency positions.

How has medical school accreditation in Canada evolved?

Starting in 1942, Canadian medical education programs were accredited solely by the Liaison Committee on Medical Education (LCME), which is based in the United States of America (US). The LCME is an accrediting body sponsored by the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA). The LCME derives its accrediting authority in the US from the United States Department of Education.

The Committee on Accreditation of Canadian Medical Schools (CACMS) under the sponsorship of the Canadian Medical Association (CMA) and the Association of Faculties of Medicine of Canada (AFMC) formerly, the Association of Canadian Medical Colleges (ACMC), was created in 1979 to act as the reliable authority for the accreditation of programs of medical education leading to the MD degree in Canada.

Following the formation of the CACMS, Canadian medical education programs received accreditation from the LCME and the CACMS using a joint process. From 1979 to 2007, although joint visits took place, separate decisions by the CACMS and the LCME resulted in schools receiving two separate decision letters with two different timelines.

From 2008 to June 2014, separate deliberations of the CACMS and the LCME occurred with a reconciliation process resulting in one, combined accreditation decision based on the harshest decision of the two bodies.

A new Memorandum of Understanding (MOU) between LCME and CACMS sponsors in December 2013 initiated the process by which the CACMS gained sole responsibility for adjudicating satisfaction with accreditation elements and compliance with accreditation standards. In this arrangement, effective July 2014, LCME authority was restricted to the review and revision of CACMS's recommendations for accreditation action and required follow-up. A second MOU signed between the sponsors in 2017 confirmed this arrangement until September 2021.

In June 2021, the sponsor organizations agreed to implement separate processes in which the CACMS assumes sole and independent authority for accreditation of Canadian medical education programs and the LCME continues to accredit medical education programs in the United States. Unless otherwise specified, Canadian medical education programs will continue to be LCME-accredited until June 30, 2025, at which time LCME accreditation of Canadian medical educations programs will cease.

In 2014, the World Federation for Medical Education (WFME) recognized the CACMS as the accreditation body for Canadian medical education programs. The current term of WFME recognition expires in 2024.

How is the CACMS governed?

CACMS is overseen by the AFMC-CMA-CACMS Council (ACCC). The overall purpose of the Council is to serve as a conduit between the sponsoring organizations and the CACMS and to provide oversight of the CACMS. The ACCC facilitates communications among the AFMC, the CMA and the CACMS, to improve long-term planning on matters related to MD program accreditation and to facilitate the functions of the CACMS.

Who are the voting members of the CACMS?

The AFMC and CMA each appoint five professional members and one public member to the CACMS, the Collège des Médecins du Québec (CMQ) appoints one member. These members each have a vote at meetings of the CACMS. Of the professional members of the CACMS, at least three must be practitioners and at least three must be medical educators. The Canadian Federation of Medical Students (CFMS) and the Fédération médicale étudiante du Québec (FMEQ) each appoint two members to the CACMS. All four student members may speak at CACMS meetings, but each student organization is entitled to only one vote. Although CACMS members are appointed by organizations, they are not representatives of those organizations. Observers from the Royal College of Physicians and Surgeons of Canada, the College of Family Physicians of Canada, and the Federation of Medical Regulatory Authorities of Canada attend meetings of the CACMS but have no vote.

How is the CACMS managed?

The CACMS Secretariat supports the operations of the CACMS and the Committee on Accreditation of Continuing Medical Education (CACME). The Secretariat has formal responsibility for managing all activities and documentation related to the accreditation of Canadian medical education programs and university continuing professional development offices. Secretariat staff attend all meetings of the CACMS and its subcommittees and CACME and its subcommittees.

With respect to MD programs, the CACMS Secretariat communicates with Canadian medical schools on all accreditation matters on behalf of the CACMS. The Secretariat develops all documentation related to accreditation, selects site visit teams, and develops and provides training sessions for programs undergoing accreditation review, site visit team members and CACMS members.

The Secretariat is comprised of professional and administrative personnel. As of 2021, the Secretariat is comprised of four full-time administrative staff positions and two professional staff, a secretary and an assistant secretary, who oversee the operations of the CACMS and the CACME. The two professional staff share a full-time equivalent position (60/40, respectively). The Secretariat is responsible for recruitment and training of additional professional and administrative staff. Secretariat staff are hired by the AFMC.

What programs can be accredited by the CACMS?

The CACMS accredits complete and independent medical education programs whose students are geographically located in Canada for their education, and which are offered by universities that are chartered and operated in Canada. The medical education (i.e., MD) programs meeting these criteria of all seventeen AFMC member medical faculties (16 medical schools and 1 medical university) are accredited by the CACMS.

How does an accreditation decision happen?

Through a process that included sponsor approval, stakeholder consultation and a public hearing, the CACMS created two documents: The CACMS Rules of Procedure and the CACMS Standards and Elements.

These documents, respectively, provide the operational rules of accreditation and the minimum expectations by which a medical education program will be judged. A more detailed description of the Accreditation Site Visit Process can be found in the *CACMS Rules of Procedure* (page 11).

The Secretariat creates the documents medical education programs are required to submit for CACMS accreditation-related processes. These documents include the Data Collection Instrument (DCI), the Medical School Self-Study (MSS), and the Independent Student Analysis (ISA) necessary for full visits as well as forms used to satisfy required notifications and status reports (e.g., mini-DCI).

For full visits, the Secretariat assembles a team of site visitors (4-6 people) who review the documents while keeping in mind the requirements of the elements. The team reviews the school through a 2-stage visit (first stage is virtual and second stage is on site) and writes a report based on its review of the materials supplied and the information obtained during the visit process. In its report, the visit team provides a recommendation on each of the accreditation elements (96 elements in 2021). Possible element ratings are: Satisfactory (S), Satisfactory with a need for monitoring (SM), or Unsatisfactory (U). For any elements rated SM or U, the team also provides a finding that addresses the gap(s) between its observations and the stated requirements of the element.

Once the report is submitted to the CACMS, the Secretariat assigns two CACMS members to conduct a thorough review of the team's report and its findings. These reviewers present their views to the CACMS and votes are taken on the reviewer's recommendations for each element. The reviewers may agree or disagree with the recommendations made by the visit team and add or modify any findings.

When the ratings for all elements of a standard are finalized, the CACMS considers the ratings of the elements within a standard and votes to determine a compliance recommendation for the standard. Compliance ratings for standards are: Compliance (C), Compliance with a need for monitoring (CM), or Noncompliance (NC). This process is repeated until all elements of all twelve standards are considered.

Complete definitions of element and compliance ratings can be found in the CACMS Rules of Procedure (Section III – Conduct and outcomes of CACMS meeting).

Once the standards are rated, the CACMS votes on an accreditation status (e.g., full accreditation, accreditation for a limited term, warning, probation, or others) and follow-up recommendations (e.g., a status report, an action plan, a Secretariat consultation, a limited visit or others).

After the CACMS meeting, a letter signed by the CACMS Secretary is sent to the university president and copied to the dean. The letter and final team report are held confidential by the CACMS but may be disclosed by the university at its discretion. Any element rated as SM or U and/or standards rated CM or NC requires follow-up. In these cases, the CACMS Secretariat sends an additional letter to the dean and a document (i.e., Mini-DCI) that specifies the details of the required follow-up.

See the CACMS Rules of Procedure for details on accreditation decisions, actions and follow-up activities including limited visits which follow similar, but not identical procedures (Section III – Conduct and outcomes of CACMS meeting) .

How can an element be added, deleted, or modified?

Requests for modifications to the elements are directed to the CACMS Standards Subcommittee (SSC). In addition to approximately half of the CACMS membership, the SSC includes another voting member who is not a member of the CACMS.

Requests come to the SSC in one of four ways: 1) through the Secretariat, 2) through members of the SSC, 3) by directive of the CACMS, or 4) via correspondence to the CACMS. The correspondence is reviewed by the CACMS Steering Committee to determine whether the request will be considered by the SSC, the CACMS Policy Subcommittee or both.

When reviewed by the SSC, the request may lead to a change or no change in an element or series of elements. Changes that are relatively minor and impose no new requirements on programs may be recommended by the SSC and approved by the CACMS.

Substantive changes must follow a lengthier process that includes consultation with sponsors followed by a public hearing for which at least three months advance notice of the proposed change is given. Public hearings will be held in a virtual or hybrid (virtual and in-person) format to ensure broad participation. Revisions to the proposed change may be necessary after sponsor consultation or the public hearing. If this is the case, the matter returns to the SSC.

Amendments to the elements are posted at least 18 months before they are required in an upcoming accreditation visit. Depending on when a suggestion for change is presented to the SSC and how long is required for the SSC to devise agreed-upon language, the process for instituting a new or revised element can take 2.5 to 3 years before it comes into force.

Substantial detail on the procedures for change appear in the CACMS Rules of Procedure (Appendix C).

How can Rules of Procedure be amended?

Proposals for changes to the rules can arise in ways similar to proposals for changes to elements. The Policy Subcommittee (PSC) is comprised similarly to the SSC, except that it does not have a non-CACMS voting member.

Minor changes approved by the PSC can be approved by the CACMS without further outside consultation, but in the case of major policy changes, the proposed revision(s) must go for sponsor consultation.