1. **PURPOSE**

To serve as an advisory body regarding the provision of detailed qualitative formative program evaluation for each of the Royal College of Physicians and Surgeons of Canada (RSPSC) and College of Family Physicians of Canada (CFPC) Residency Programs and each Family Medicine site at the University of Manitoba in order to improve residency training.

2. **REPORTING STRUCTURE**

2.1 The Faculty PGME Accreditation Committee reports to the Associate Dean PGME and to the Faculty of Medicine PGME Executive Committee.

3. **CHAIRPERSON AND MEMBERSHIP**

3.1 The Chair of the Committee shall be the Program Director, PGME Accreditation.

3.2 The membership of the Accreditation Committee shall consist of the following:

3.2.1 The Faculty Lead PGME Core Curriculum

3.2.2 Chair, Basic Clinical Year (BCY) Subcommittee

3.2.3 The Chairpersons of the PGME Committees of Surgery, Internal Medicine, Pediatrics and Family Medicine

3.2.4 Five (5) Residency Program Directors from primary Residency Programs appointed by the Associate Dean, PGME

3.2.5 Program Lead, PGME

3.2.6 One member from the Department of Medical Education

3.2.7 FHS Project Manager, Accreditation

3.2.8 Two (2) residents appointed by the Professional Association of Residents and Interns of Manitoba

3.2.9 Other members as necessary invited by the Chair

3.3 The Faculty strives to achieve diverse membership on its committees in accordance with the College of Medicine Diversity Policy, and this should therefore be considered when appointing committee members that are not *ex-officio* members.

4. **FUNCTIONS OF THE COMMITTEE**

4.1 The Accreditation Committee is responsible for overseeing the Accreditation Process of the six-year accreditation cycle for PGME Residency Programs accredited by the Royal College of Physicians and Surgeons of Canada (RSPSC) and the Family Medicine Program accredited by the College of Family Physicians of Canada (CFPC) in concordance with the College of Medicine PGME policy. These responsibilities include without limitation the following:

4.1.1 Developing and implementing the master schedule of all Internal Reviews, External Reviews, Progress Reports and Regular Surveys of Residency Programs during the Accreditation Cycle

4.1.2 Selecting Survey teams for the Residency program Internal Reviews

4.1.3 Appointing Working Groups to:

4.1.3.1 Review Pre-survey documentation
4.1.3.2 Internal Review Reports
4.1.3.3 Residency Program/Site Director’s Response to the report
4.1.3.4 Specialty-specific documents for additional strengths or weaknesses of the Residency Program/Site as they pertain to the Residency program’s compliance with accreditation standards
4.1.3.5 Providing, to the AC, recommendations for follow-up action
4.1.4 Providing Residency Program Directors and Site Directors feedback regarding any revisions to Pre-survey documents, responses to survey reports, etc.
4.1.5 Accreditation Committee members shall serve as liaison persons with others in the areas from which they represent.
4.1.6 Accreditation Committee members, individually and collectively, shall deal with matters before the committee in such a way that the interests of the College of Medicine take precedence over the interests of any of its constituent parts, should those interests conflict or appear to conflict.
Members of the Committee who experience conflict of interest with regard to a particular matter may remain on the Committee so long as they declare the conflict and recuse themselves from any vote related to the matter.

5. TERM OF OFFICE

The Term of Office of each member shall be for the term the individual is in the position noted in 3.2, or in the case of the appointed Residency Program Directors, for a two-year term with one two-year term optional renewal. The resident appointments shall be for one-year terms.

6. QUORUM

Fifty percent (50%) plus one shall constitute a quorum of the Committee

7. NUMBER OF MEETINGS

The committee shall meet twice per year with additional meetings as subject to the call of the Chair.

8. NOTICE OF MEETINGS

The agenda shall be prepared and distributed to the members of the Accreditation Committee at least 48 hours prior to the meeting.

Approvals:

Dean, Faculty of Medicine
Original Approved: Dean’s Council & FEC:
Approved: PGME Executive Committee Oct 11, 2016
Committee Contact: Associate Dean, PGME