



## College of Medicine Accreditation Decision: Summary Version

*This is a summary version of the official letter of transmittal received from CACMS/LCME on October 16, 2013.*

*The full letter is available at [medicine.usask.ca](http://medicine.usask.ca)*

### Background

The U of S College of Medicine was placed on Warning of Probation in July 2011 by its accrediting bodies, the Committee on the Accreditation of Canadian Medical School (CACMS) and the Liaison Committee on Medical Education (LCME). This action resulted in a Limited Survey Visit by CACMS/LCME to the CoM in March 2013.

In October 2013, after reviewing the report of the survey team, CACMS/LCME voted to place the educational program leading to the MD degree at the University of Saskatchewan College of Medicine on probation. The College of Medicine remains fully accredited while it works to address the areas of concern.

The College of Medicine does not intend to request a consideration of this decision. We will instead focus our attention and resources on addressing the identified issues. It is important to remember the findings identified in the letter of transmittal are based on information that was current to March 2013. The findings stated here do not take in to account progress made in the last six months.

The letter outlined our standing and the findings on 14 standards specifically. In total, all medical schools are held accountable for approximately 140 standards.

### Standards in Compliance

Four standards previously cited for not being compliant were found to be in compliance. This means that as of March 2013, the college was meeting these standards.

- ED-8: Comparability across instructional sites
- ED-41: Functional integration of the faculty
- MS-37: Study space/lounge areas/personal storage space
- ER-4: Facilities needed to fulfill the mission of the school

**Standards in Compliance, with a need for monitoring** We were cited as ‘in compliance but with a need for monitoring’ on five standards. This indicates that the area or program is in compliance with the cited standard, but that monitoring by CACMS/LCME is required to ensure continued compliance.

- ED-9: (NEW) Notification of CACMS and the LCME of a major curricular modification

Finding: The CoM is planning to undergo a curricular revision to shorten pre-clinical training by half a year and lengthen Clerkship training by half a year, beginning in Fall 2014. Implications on resources to deliver the new curriculum could not be assessed.

- ED-30: Formative and summative assessments

Finding: One45 is used to complete and monitor student evaluations. Timely completion of summative evaluations had improved substantially. Clerkship (Phase D) Directors and Coordinators are aware of the expectation that evaluations must be completed within six weeks.

- ED-31: Formal feedback provided early enough to allow remediation

Finding: Students in a number of clerkship rotations were not receiving mid-rotation feedback. There is evidence of improvement, and the benchmark has been set at 90% compliance.

- ED-44: Equivalence of support services across sites

Finding: A student affairs director has been appointed in Regina, and student awareness in Regina is excellent. Two student affairs directors have been appointed in Saskatoon, however student awareness is low. Student health, fitness facilities and academic supports are equivalent in Saskatoon and Regina.



- MS-32: Student mistreatment policy

Finding: 2012 survey data shows favorable trends in awareness of mistreatment policies. Cited rate of mistreatment by nurses, patients and families, pre-clinical and clinical faculty is above the national mean.

**Noncompliance with Standards** We were cited as in noncompliance on 5 standards. Noncompliance indicates that the program does not meet one or more of the requirements of the cited standard.

- ED-2: Required clinical experiences and monitoring

Finding: Lists of clinical encounters and procedures have been developed for all clerkship rotations. The nature of the clinical experience, level of student responsibility, and appropriate clinical setting each encounter are documented but not described fully.

- ED-3: Dissemination of the educational program objectives to faculty

Finding: There is inconsistency in the communication in many clinical disciplines and it is not clear that all faculty who have a teaching role are made aware of the objectives of the educational program.

- ED-24: Resident preparation to teach and awareness of educational objectives

Finding: All residents must participate in the TIPS training course prior to completion of their residency programs. However, many residents will not complete this program until well into their first year of postgraduate training.

- ED-25a: (NEW) Clinical supervision ensures student and patient safety

Finding: Concern was expressed by students of inadequate supervision by Family Physicians for patients in labor during their obstetrics and gynecology rotations in Saskatoon.

- IS-9: Authority/responsibility for the program

Finding: The CoM is under the authority of an acting dean along with the full time presence of the vice-provost. Interpretation and implementation of A New Vision for the CoM is still in the formative stages. Governance is being rebuilt with eventual introduction of a vice dean for education with increased accountability and more direct reports. The current academic leadership puts a large amount of responsibility on a very limited number of people. There are plan to modify the financial allocation of funds to better support education. There is a commitment to progress toward a clearer process for workload distribution and accountability of university-paid full-time faculty. A new teaching inventory tool is being tested and should allow the dean to hold departments accountable for teaching responsibilities.

- IS-11: (NEW) leadership structure necessary to accomplish missions

Finding: The new structure of governance for the CoM is proposed to become three vice deans with increased accountability and control of resources. The vice deans (education, research and faculty engagement) will report directly to the (acting) dean. The impact of the proposed substantial reorganization of the CoM administration of the schools' ability to accomplish its mission is unknown.

## Timeline

- Early December 2013: consultation visit from CACMS/LCME to assist the dean in developing an action plan to address the areas of noncompliance and areas in compliance with need for monitoring
- Late December 2013: Action Plan to be submitted to CACMS/LCME for review
- January 2014: Action Plan to be reviewed by CACMS/LCME
- Early 2015: Limited Survey Visit by CACMS/LCME to assess progress towards compliance on standards addressed by the Action Plan

