



College of Medicine Accreditation Decision: Summary Version, October 2015

This is a summary version of the official letter of transmittal received from CACMS/LCME on October 16, 2015.

Full documents are available at medicine.usask.ca

Effective October 16, 2015, the Undergraduate Medical Education Program at the University of Saskatchewan's College of Medicine is returned to full accreditation for an extended period, to March 2018. Accreditors will return for the next full accreditation visit in fall 2017, several months later than originally anticipated. Since 2011, the college has committed to investing much hard work and energy to address long-standing accreditation issues. The outcome of returning to full accreditation, for an extended period of time, is an indication from our accreditors that changes underway in the college are delivering the intended results. As we turn our focus towards preparing for the fall 2017 visit, we are mindful the accreditation process is about continuous quality improvement. We remain steadfast in our pledge to provide quality medical education to students in communities across Saskatchewan. A strong provincial College of Medicine benefits the people of Saskatchewan by serving as a cornerstone to our provincial healthcare system.

Background

Undergraduate Medical Education programs in Canada are accredited by the Committee on the Accreditation of Canadian Medical School (CACMS) and its American equivalent, the Liaison Committee on Medical Education (LCME). Accreditation is required in order for a school's graduates to be licensed and eligible for postgraduate medical training.

Since 2011, the Undergraduate Medical Education Program at the U of S College of Medicine has worked to address long-standing accreditation challenges. In May 2015, accreditors conducted a limited site survey to evaluate the college's progress toward compliance on 13 standards that had been cited as being in partial or substantial non-compliance. The college was required to demonstrate sufficient progress toward compliance with accreditation standards in order for CACMS/LCME to remove the probationary status applied in 2013.

Demonstrated Progress

During the May 2015 accreditation visit, 13 standards were reviewed. The table below summarizes the progress demonstrated between visits conducted in March 2013 and May 2015.

2015: Compliance = 6; Monitoring = 4, Noncompliance = 3
2013: Compliance = 0; Monitoring = 5, Noncompliance = 8

Standard	2015 Review	2013 review
Standard ED-2	X	X
Standard ED-3	X	X
Standard ED-9	X	X
Standard ED-24	X	X
Standard ED-25a	X	X
Standard ED-30	X	X
Standard ED-31	X	X
Standard ED-44	X	X
Standard ER-7	X	X
Standard IS-9	X	X
Standard IS-11	X	X
Standard MS-32	X	X
Standard MS-37	X	X





Standards in Compliance

Indicates as of May 2015, the college is meeting these standards

- **ED-2:** Required clinical experiences and monitoring
- **ED-3:** Dissemination of the educational program objectives to faculty
- **ED-9:** Notifications of CACMS and the LCME of a major curricular modification
- **ED-24:** Resident preparation to teach and awareness of educational objectives
- **ED-25a:** Clinical supervision ensure student and patient safety
- **MS-32:** Student mistreatment policy

Standards in Compliance, with a need for monitoring

Indicates monitoring by CACMS/LCME is required to ensure continued compliance

- **ED-30: Formative and summative assessment**

Finding: The clerkship data provided by the school is starting to show improved compliance for the last three months. A centralized process has been in place for over 2 years in the UGME office. All clerkship directors and coordinators are aware that assessments must be completed within six weeks across all sites. More time is needed to assess continued compliance.

- **ED-44: Equivalence of support services across sites**

Finding: The student affairs office has an acting assistant dean responsible for undergraduate student issues based in Saskatoon and a student affairs physician director in Regina. The Regina director has taken on responsibility for an increasingly large cohort of students with no clear backup and with limited time and administrative supports. It is unclear how student affairs files are maintained confidential and how they can be accessed. This is to be investigated more deeply at the next visit.

- **IS-9: Authority/responsibility for the program**

Finding: Since June, 2014, a highly regarded medical educator and administrator, Dr. Preston Smith, has served as dean for the College of Medicine. Dean Smith has taken charge of implementing *The Way Forward* vision. This plan includes rebuilding college governance, recruiting new executive and senior leadership, proceeding with the “one faculty” model and allocating substantial additional funding to support the new 2+2 MD curriculum. While the university president and provost are interim, Dean Smith is a member of the search committee for the new president. Implementation of the new vision is on schedule; progress on faculty leadership recruitment is well underway; needs monitoring.

- **IS-11: leadership structure necessary to accomplish missions**

Finding: Dean Smith is implementing a new structure which involves two vice deans, seven associate deans, eight assistant deans and a chief operating officer. There has been progress within a relatively short time, however many positions including the two vice deans, several associate and assistant dean positions are filled on an interim basis or are unfilled. The team observed that the full and effective functioning of the deanery is still a work-in-progress until all positions are filled.



Noncompliance with Standards

Indicates one or more of the requirements of the standard are not met

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

Finding: A central process has been put in place for assuring that appropriate formative feedback occurs across all sites. There is a clear pattern of improved process compliance by a number of rotations across sites over the past 12 months. Data collected over the past six months show improvements, with Internal Medicine (Saskatoon) still not meeting internal benchmarks for full compliance. More time is needed to determine the full effectiveness of recent measures.

- **ER-7: Clinical instructional facilities/information resources**

Finding: On-call facilities at the Royal University Hospital in Saskatoon have been inadequate for many years. The on-call facilities in Regina are in temporary space.

- **MS-37: Study space/lounge areas/personal storage space**

Finding: Dedicated lounge spaces in Saskatoon for preclinical and clinical students are inadequate. Storage spaces and changing facilities for clinical students in Saskatoon at the Royal University Hospital are inadequate. This problem has existed for many years.

Next Steps

Preparations are already underway for the next full Undergraduate Medical Education Program accreditation visit in fall, 2017. In the coming weeks and months, the College of Medicine will undergo a process of self-evaluation and self-study. In the course of conducting our self-study, the college will bring together representatives of the medical school administration, faculty, student body, and other stakeholders to accomplish three specific requirements:

- 1) Collect and review data about the medical school and its educational program
- 2) Identify both medical school strengths and areas that require improvement
- 3) Define strategies to ensure that the strengths are maintained and any problems are addressed effectively

Regular updates on the preparations and associated timelines will be available at medicine.usask.ca

Timeline

- Fall 2017: CACMS will return for the next regularly-scheduled full accreditation survey
- October 2015: CACMS/LCME returns full accreditation status for an extended period to March 2018
- May 2015: Limited Survey Visit by CACMS/LCME to assess progress
- October 2013: CACMS/LCME determines status of *Probation*
- March 2013: Limited Survey Visit by CACMS/LCME to assess progress
- July 2011: CACMS/LCME issues *Warning of Probation*

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