Academic Program Enhancement Committee
Postgraduate Medical Education
College of Medicine
University of Saskatchewan

Approved by PGME: May 30, 2007
Composition Update Approved through PGME: May 2, 2012
Changes added February, 2017 for approval
Academic Program Enhancement Committee

Status
- Subcommittee of PGME
- Meets at least quarterly, more frequently as need requires

Composition
- Associate Dean of PGME
- 5-6 Faculty (UB or CB) distributed over sites and programs, preference for individuals who have served as RC or CCFP surveyors
- 1-2 resident members with a demonstrated interest in education
- Administrator, PGME

Appointment Process
- Prospective candidates will be individuals who may or may not sit on the PGME committee. Suggestions for members may be sought from Department Heads, Program Directors, resident body etc.
- Associate Dean of Medical Education will make recommendation to PGME for confirmation
- Each Program Director must serve on the committee for at least one year
- Appointment term will be 3 years, renewable
- Initial terms will be variable and staggered to provide continuity

Reporting structure
- Reports to PGME committee, Vice Dean of Education and Dean of Medicine
- Will provide more in-depth reports and analysis to Program Directors at workshops and other forums as appropriate

Terms of Reference

Overall Objective:
1. To ensure all aspects of Post Graduate Medical Education at University of Saskatchewan successfully meet required standards of accreditation.
   a. PGME structure, policies and procedures: A standards
   b. Family Medicine programs: CCFP standards
   c. Royal College programs: B standards

Roles and Responsibilities:
1. **Educating about the accreditation process, standards**
   a. Ensure that appropriate individuals and groups are aware of the relevant standards of accreditation
   b. Ensure that all involved in the accreditation understand the process

2. **Facilitating a robust Internal Review Process**
   a. Assist in planning internal reviews
b. Participate in the Internal review process as reviewers
c. Serve as reviewers for mandated Internal Reviews
d. Assist new reviewers in understanding their role and responsibilities as internal reviewers
e. Conduct review of PGME to assess compliance with A standards

3. Translation of Internal Review to Program Improvement
   a. Careful review of each internal review report
      i. Accuracy of information and interpretation
      ii. Issues requiring further exploration
      iii. Changes needed
      iv. Excellence to identify, reward and export to other programs
   b. Identify common themes across programs for which a multidisciplinary / cross program approach would be appropriate and desirable
   c. Promote needed change within programs
      i. What needs to be changed?
      ii. Develop priorities
      iii. Establish timelines for review
   d. Identify resources required to support needed change
      i. Financial
      ii. Personnel
      iii. Mentoring
      iv. Tools and programs

4. Monitoring
   a. Monitor the progress of programs in resolving weaknesses
   b. Monitor progress of PGME in resolving weaknesses

5. Advising
   a. Where appropriate, provide support and guidance to programs, program committees and program director in the process of resolving weakness or increasing strengths
   b. Facilitate dissemination of strengths across programs

6. Reporting
   a. Standing Report to PGME on quarterly basis

7. On-site Survey
   a. Planning and preparation
      i. Educate faculty and residents, Department Chairs, Program directors about the process
   b. Training and mentoring
      i. Provide assistance to programs in completing PSQ (answering questions etc)
   c. Document review
      i. Review Pre-survey questionnaire documents before submission to Royal College
      ii. Approve PSQ for submission
   d. Follow-up post survey: as per #3-7 above