

**CANADIAN ACCREDITATION STANDARDS FOR
CONTINUING PROFESSIONAL DEVELOPMENT (CPD)
PROVIDER ORGANIZATIONS**



**Committee on Accreditation of
Continuing Medical Education**

Effective July 1st, 2018

TABLE OF CONTENTS

Introduction	3
About the Accreditation Standards	4
DOMAIN 1: INSTITUTIONAL GOVERNANCE	5
Standard 1.1 Organizational CPD Mission	5
Standard 1.2 Operations	6
Standard 1.3 Educational Independence.....	7
Standard 1.4 Professional and Legal Standards.....	8
DOMAIN 2: EDUCATION PROGRAM.....	9
Standard 2.1 Assessing Needs.....	9
Standard 2.2 Development of Learning Objectives.....	10
Standard 2.3 Educational Content Development and Delivery	11
Standard 2.4 Promoting Self-Learning.....	12
Standard 2.5 Scholarly Activities in Health Education	13
DOMAIN 3: PROGRAM ORGANIZATION	15
Standard 3.1 External Program Review	15
DOMAIN 4: CONTINUOUS IMPROVEMENT.....	16
Standard 4.1 Assessing Effectiveness	16
Standard 4.2 Evaluation Strategies.....	17
Appendices list	18
Glossary of Terms	20

INTRODUCTION

The national accreditation system for CPD provider organizations in Canada is designed to enable continuous professional development of individual physicians and inter-professional health teams through periodic self-reflection and external peer review. Accredited CPD provider organizations include the University Offices of Continuing Medical Education (or equivalent) within each Faculty of Medicine, national specialty societies and other national or provincial physician organizations.

The national accreditation standards are based on a common set of values, principles and metrics that have been endorsed by the Committee on Accreditation of Continuing Medical Education (CACME), the CPD Accreditation Committee of the Royal College of Physicians and Surgeons of Canada (Royal College) and the College des médecins du Québec (CMQ).

The national accreditation standards are designed to promote collaboration and partnerships within and between disciplines, be responsive to the health needs of patients and communities, value physician learning across the range of competencies, and promote strategies to improve physician competence and performance; ultimately impacting the health of patients.

Although accredited CPD provider organizations vary in terms of context and roles, they are collectively committed to enhancing lifelong learning across the medical educational continuum through the provision of a broad range of educational initiatives, assessment strategies, and tools.

All accredited CPD Provider organizations are expected to be scholarly in how they integrate and apply new evidence about effectiveness of continuing professional development interventions, knowledge translation strategies or effective evaluation practices. Academic units within the Faculties of Medicine are expected to contribute to the advancement of the discipline of CPD through engagement in education research.

All CPD Provider organizations, regardless of their infrastructure or sources of support are required to ensure their activities are based on an assessment of needs, achieve an appropriate balance of high quality scientific evidence, evaluating achievement of outcomes across a range of competency domains, and identifying and managing external influence of competing (including commercial) interests.

Collectively the standards, criteria, survey questions, documentation requirements and the accreditation process are foundational to establishing a national CPD provider accreditation system that is transparent, accountable and responsive to the profession and the public it is privileged to serve.

ABOUT THE ACCREDITATION STANDARDS

The Canadian Accreditation Standards for CPD Provider Organizations are organized into four domains:

- DOMAIN 1: Institutional governance
- DOMAIN 2: Education program
- DOMAIN 3: Program organization
- DOMAIN 4: Continuous improvement

Each accreditation standard includes the:

- standard
- evaluation criteria
- documentation requirements
- self-study questions

A list of appendices and Glossary of Terms is included within this document.

STANDARD 1.1 ORGANIZATIONAL CPD MISSION

An accredited CPD provider organization must have a formally approved (for example by a board of directors, faculty of medicine) written mission statement for its CPD program that describes the:

- target audience(s);
- overall purpose; and
- measurable goals.

University offices of CME (or equivalent title) must have a formally approved strategic plan for its CPD program that considers societal needs and describes the:

- target audience(s);
- overall purpose; and
- measurable goals.

Evaluation Criteria

Non-compliance:	There is no written mission statement for the CPD provider organization’s CPD program. The university office of CME does not have a strategic plan for its CPD program.
Partial-compliance:	There is a written mission statement that has either not been formally approved or does not include all required elements. The university office of CME’s strategic plan has either not been formally approved or does not include all required elements.
Compliance:	There is a formally approved written mission statement that describes all required elements. The university office of CME’s strategic plan describes all required elements.

Documentation

- A copy of the current CPD program mission statement or strategic plan. If submitting a strategic plan, it must delineate the direction and movement of this plan (*appendix A*).
- Minutes and/or other evidence demonstrating the process by which the CPD program mission statement or strategic plan was formally approved (*appendix B*).
- An organizational chart to show the reporting relationship of the CPD enterprise to the overall organization (*appendix C*).

Questions

1. Provide a brief description (1 or 2 paragraphs) of the CPD program including the scope of the CPD activities developed by the organization.
2. Elaborate on the target audience for the CPD program.
3. Describe the process you used to identify the CPD program goals.
4. Illustrate how the CPD mission statement or strategic plan has influenced the development of specific educational activities.
5. How frequently has the organization reviewed the CPD program mission statement or strategic plan?

STANDARD 1.2 OPERATIONS

An accredited CPD provider organization has implemented an operational plan to support the achievement of the CPD program's purpose and measurable goals or strategic plan including:

- a budget that allocates sufficient financial resources;
- adequate volunteer and paid staff resources supported by a training and support strategy; and
- adequate access to appropriate physical (for example office space etc.) and technical resources (for example databases, media resources etc.) for the development and/or implementation of CPD.

Evaluation Criteria

Non-compliance:	The CPD provider organization has not developed an operational plan to support the achievement of the CPD program's purpose and measurable goals or strategic plan.
Partial-compliance:	An operational plan to support the achievement of the CPD program's purpose and measurable goals or strategic plan is either in development or does not reflect all required elements.
Compliance:	The CPD provider organization has implemented an operational plan to support the achievement of the CPD program's purpose and measurable goals or strategic plan that includes all required elements.

Documentation

- Provide the organization's operational plan that supports the development and implementation of the CPD program's purpose and measurable goals or strategic plan. The operational plan should include budget summaries for the most recent past and current fiscal year (*appendix D*).

Questions

1. Describe the process by which the organization identifies and applies the financial resources required to achieve the CPD program's purpose and measurable goals or strategic plan.
2. Describe any current and/or future challenges with respect to funding the organization's work.
3. Describe how the organization's human resources (volunteers and staff) support the achievement of the CPD program's purpose and measurable goals. (Examples include an organizational chart of paid staff, volunteers, and applicable committees).
4. Describe the retention strategy/succession planning developed to ensure the organization has access to the expertise required to design, develop and implement its CPD program.
5. Describe the organization's access to physical and technical resources that enable the achievement of the CPD program's purpose and measurable goals or strategic plan. For example, does the organization have access to space for education? Where are records stored and how are they accessed? Does the organization have access to information technology staff?

STANDARD 1.3 EDUCATIONAL INDEPENDENCE

An accredited CPD provider organization has implemented written policies and procedures based on the *National Standard for Support of Accredited CPD Activities* that addresses:

- how relationships with other organizations are managed to ensure independence of the planning process from commercial influence;
- the process(es) by which individuals who contribute to or develop the content for learning activities disclose all real or potential conflicts of interest; and
- the process(es) used to manage identified conflicts of interest.

Evaluation Criteria

Non-compliance:	There are no written policies and procedures that describe how the CPD provider organization ensures the independence of the planning process from commercial influence including how conflicts of interest are identified, disclosed and managed.
Partial-compliance:	The written policies and procedures describing how the CPD provider organization ensures the independence of the planning process from commercial influence, including how conflicts of interest are identified, disclosed and managed, are either in development, do not address all required elements, or are not based on established standards.
Compliance:	There are implemented written policies and procedures that are based on current established standards describing how the CPD provider organization ensures the independence of the planning process from commercial influence, including how conflicts of interest are identified, disclosed and managed.

Documentation

- Provide the policies and procedures that define how the CPD provider organization has implemented the *National Standard for Support of Accredited CPD Activities (appendix E)*. This must include:
 - The process by which funding can be solicited, how funds are managed and how sponsors are to be acknowledged in program materials.
 - Sample correspondence with potential/confirmed sponsors from one recent CPD activity. This should include any letters of invitation to sponsor/exhibit, sponsorship/exhibitor prospectus, letters of confirmation of sponsorship or contracts established between the CPD provider organization and the sponsor.
 - The policies and procedures used to collect, review and manage conflicts of interest including the CPD provider's conflict of interest declaration form, procedures for how potential conflicts of interest are managed by the scientific planning committee (or other) and how CPD program participants are made aware of an individual's conflict of interest disclosure.
 - Sample correspondence with faculty, authors, and scientific planning committee member that demonstrates how the CPD provider's conflict of interest policies and procedures have been implemented.

Questions

1. Describe how the development of policies and procedures governing sponsorship has:
 - a) Enabled the organization to ensure the independence of the planning process from commercial influence.
 - b) Contributed to the development of content that is scientifically balanced.
2. What impact have the policies and procedures governing the identification, disclosure and management of conflict of interest had on the overall CPD program?
3. How does the organization ensure adherence to the policies and procedures included as appendix E?
4. How often are these policies and procedures reviewed and updated?
5. How does the organization identify, disclose and manage conflicts of interest?
6. What challenges (if any) does the office or organization have in translating the Standard when developing activities or programs?

STANDARD 1.4 PROFESSIONAL AND LEGAL STANDARDS

The accredited CPD provider organization has implemented policies and procedures to ensure its governance, operations, planning processes and records management comply with applicable professional and legal standards including the protection of privacy, confidentiality and copyright.

Evaluation Criteria

Non-compliance	The CPD provider organization has no policies and procedures to ensure that its governance, operations, planning processes, and records management comply with applicable professional and legal standards.
Partial-compliance:	The CPD provider organization's policies and procedures to ensure governance, operations, planning processes and records management comply with applicable professional and legal standards are either in development or do not meet all required elements.
Compliance:	The CPD provider organization has implemented policies and procedures that demonstrate how its governance, operations, planning processes and records management comply with applicable professional and legal standards for all required elements.

Documentation

- Provide policies and procedures governing how the organization protects the privacy and confidentiality of individuals and groups that participate in their CPD program's activities (*appendix F*).
- Provide policies and procedures governing how the organization respects copyright (*appendix G*).

Questions

1. Describe how the organization ensures adherence to the relevant provincial and national professional legal standards related to privacy and confidentiality.
2. Describe how the organization or office ensures adherence to copyright standards.

STANDARD 2.1 ASSESSING NEEDS

An accredited CPD provider organization uses various methods to identify perceived and unperceived professional practice needs of members of its target audience(s) across the CanMEDS (or CanMEDS FM) Physician Competency Framework, to plan and select the format of educational initiatives.

Evaluation Criteria

Non-compliance:	The CPD provider organization assesses perceived professional practice needs relevant only to the Medical Expert Role of the CanMEDS Physician Competency Framework to plan and select the format for educational initiatives.
Partial-compliance:	The CPD provider organization assesses perceived professional practice needs across multiple Roles within the CanMEDS Physician Competency Framework to plan and select the format for educational initiatives.
Compliance:	The CPD provider organization assesses perceived and unperceived needs of its target audience, across multiple Roles the CanMEDS Physician Competency Framework (at least one outside of the Medical Expert Role) to plan and select the format for educational initiatives.

Documentation

- Provide three examples of different methods used to assess perceived professional practice needs (*appendix H*).
- Provide one example of a method used to assess unperceived professional practice needs (*appendix I*).

Questions

1. Describe the methods used to identify perceived and unperceived professional practice needs of the identified target audience(s).
2. For each perceived needs assessment strategy provided in appendix H, describe what specific Roles within the CanMEDS Physician Competency Framework were assessed and how the results were used to plan an educational activity including the format selected.
3. For the unperceived needs assessment strategy provided in appendix I, describe what specific Roles within the CanMEDS Physician Competency Framework were assessed and how the results were used to plan an educational activity including the format selected.
4. How has the organization or office used the CanMEDS Physician Competency Framework (s) to facilitate the identification of professional practice needs for the CPD program?
5. Describe how identified needs are used to develop activities planned by the organization or office, including the selection of educational formats.

STANDARD 2.2 DEVELOPMENT OF LEARNING OBJECTIVES

An accredited CPD provider organization develops learning objectives for each activity to address identified professional practice needs. The learning objectives for the overall activity and individual sessions (where applicable) are;

- written from the learner’s perspective;
- consistent with the chosen educational format; and
- provided prior to the activity for review by potential participants.

Evaluation Criteria

Non-compliance:	The CPD provider organization does not use identified needs to develop overall or session-specific learning objectives.
Partial-compliance:	The CPD provider organization uses identified needs to develop overall and session-specific learning objectives; that are either not written from the learner’s perspective, consistent with the educational format or provided prior to the activity.
Compliance:	The CPD provider organization demonstrates how identified needs are used to create overall and session-specific learning objectives that are written from the learner’s perspective, consistent with the chosen educational format and provided prior to the activity for review by potential participants.

Documentation

- Provide documentation from three activities/sessions that demonstrate how identified needs were used to develop learning objectives (*appendix J*).
- Provide any guidelines or tools the organization provided to faculty to assist them to create learning objectives (*appendix K*).
- Provide final copies of brochures/programs or handout materials from three activities that describe the overall and session specific learning objectives (*appendix L*).

Questions

1. Describe the process used to create overall and session-specific learning objectives based on identified professional practice needs.
2. Describe who is responsible to ensure the learning objectives meet established standards.
3. Describe the process used to disseminate learning objectives to potential participants prior to the activity.

STANDARD 2.3 EDUCATIONAL CONTENT DEVELOPMENT AND DELIVERY

An accredited CPD provider organization has an effective process to support the development of content that is:

- distributed across the CanMEDS Physician Competency Framework;
- responsive to various practice needs; and
- informed by scientific evidence.

Methods used to deliver programming are evidence-based and aligned with the nature of the subject matter.

Evaluation Criteria

Non-compliance:	There is no process established to support the development of content that is distributed across the CanMEDS Physician Competency Framework, responsive to various practice needs, and/or informed by scientific evidence. Methods used to deliver programming are not evidence-based and/or aligned with the nature of the subject matter.
Partial-compliance:	The process to support the development of content that is distributed across the CanMEDS Physician Competency Framework, responsive to various practice needs, and/or informed by scientific evidence has not been implemented. Methods used to deliver programming are evidence-based and aligned with the nature of the subject matter have not been implemented.
Compliance:	There is an effective process to support the development of content that is distributed across the CanMEDS Physician Competency Framework, responsive to various practice needs, and informed by scientific evidence. Methods used to deliver programming are evidence-based and aligned with the nature of the subject matter.

Documentation

- Provide three examples that demonstrate how the content developed for activities was distributed across the CanMEDS Physician Competency Framework, responsive to various practice needs, and informed by scientific evidence. The documentation provided should demonstrate that the methods used to delivery programming were evidence-based and aligned with the nature of the subject matter (*appendix M*).

Question

1. What strategies has the organization or office used to support the development of content that is distributed across the CanMEDS Physician Competency Framework, responsive to various practice needs, and informed by scientific evidence?

STANDARD 2.4 PROMOTING SELF-LEARNING

An accredited CPD provider organization has implemented strategies, services or tools to promote self-learning that encourages participants to (for example):

- Raise and answer questions stimulated by practice or from participation in group learning activities
- Identify areas for future learning based on assessments (including self-assessments) of knowledge, competence or performance
- Develop a continuing professional development plan
- Document practice outcomes from participation in learning activities
- Reflect on learning outcomes from participation in learning activities
- Participate in self-assessment

Evaluation Criteria

Non-compliance	The CPD provider organization has not developed strategies, services or tools to promote self-learning.
Partial-compliance	The strategies, services or tools to promote self-learning are in development.
Compliance:	The CPD provider organization has implemented strategies or services or tools to promote self-learning.

Documentation

- Provide three examples of strategy, service or tool that promotes self-learning (*appendix N*).

Question

1. What strategies has the organization implemented to promote self-learning?

STANDARD 2.5 SCHOLARLY ACTIVITIES IN HEALTH EDUCATION

An accredited CPD provider organization approaches its work in a scholarly manner by using evidence of the effectiveness of educational interventions or new innovations to inform the design, development and implementation of its activities.

University offices of CME (or equivalent title) must participate independently or collaboratively in scholarship (sharing projects or innovations through presentations or publications) or original research in medical education, continuing professional development, or healthcare professional education.

Evaluation Criteria

Non-compliance:	The CPD provider organization is not able to demonstrate how it uses evidence of effective educational interventions or new innovations to inform the design, development, or implementation of its activities. University offices of CME have not participated in scholarship or original research in medical education, continuing professional development or healthcare professional education.
Partial-compliance:	The CPD provider organization is planning to use evidence of educational interventions or new innovations to inform the design, development, or implementation of its activities. University offices of CME have developed a plan to participate in scholarship or the development of original research.
Compliance:	The CPD provider organization is able to demonstrate how evidence of the effectiveness of educational interventions or new innovations informs the design, development and implementation of its activities. University offices of CME demonstrate ongoing participation in scholarship including original research.

Documentation

- Provide two examples of activities designed and implemented in the CPD program based on a review and evaluation of the medical education or continuing professional development literature. (For example: a new approach to needs assessment, faculty development, education, or assessment) (*appendix O*).

Please provide the following documentation ONLY if the organization has been participating in scholarship or research:

- Provide a list of any presentations related to the CPD program since the last accreditation review or from the past three years (*appendix P*).
- Provide a list of peer reviewed grants (research, faculty development etc.) that the organization has applied for or obtained since the last accreditation review or from the past three years (*appendix Q*).
- Provide a list of peer reviewed publications in continuing professional development/medical education or faculty development published since the last accreditation review or from the past three years (*appendix R*).

Questions

1. Describe at least two activities, initiatives or innovations the organization or office has designed or implemented based on a review of the medical education or continuing professional development research literature.
2. What strategies, resources or infrastructure has the organization developed to promote a scholarly approach to the development of the CPD program?
3. What challenges (if any) does the organization face in using evidence of the effectiveness of educational interventions or new innovations to inform the design, development and implementation of its activities? How has the organization attempted to address these challenges?

Please answer the following questions ONLY if the organization has been participating in scholarship or research:

4. How have the organization's contributions to scholarship (presentations or publications) or research contributed to improving the impact of the CPD program on physician learning, enhancing competence, or improving performance or health care outcomes?
5. If the organization or office has developed an identified research program, what challenges does it face in sustaining research in the future?

STANDARD 3.1 EXTERNAL PROGRAM REVIEW

An accredited CPD provider organization has implemented written policies and procedures (including quality control measures) for reviewing individual educational activities developed by other organizations for CPD credits. Where applicable, the policies and procedures support consistent adherence to educational and ethical standards established by:

- the Conseil québécois de développement professionnel continu des médecins (CQDPCM);
- the College of Family Physicians of Canada (CFPC); and/or
- the Royal College.

Evaluation Criteria

Non-compliance:	There are no written policies and procedures to review the educational activities developed by other organizations.
Partial-compliance:	The policies and procedures to assess adherence to educational and ethical standards of educational activities developed by other organizations are in development or do not include quality control measures.
Compliance:	There are implemented written policies and procedures, including quality control measures to assess adherence to educational and ethical standards of educational activities developed by other organizations.

Documentation

Group learning activities

- Provide the policies and procedures the organization or office has developed to assess adherence of group learning activities developed by other organizations (*appendix S*).
- Provide all documentation related to the review and approval of one group learning activity approved by the organization or office (*appendix T*).
- Provide a list of all group learning activity applications the organization or office has reviewed since the last accreditation review. This list should include the name of the applicant, the name of the activity and whether the application was approved or not-approved (*appendix U*).

Self-assessment

- Provide policies and procedures the organization or office has developed to assess adherence to the standards established for self-assessment programs developed by other organizations (*appendix V*).
- Provide all documentation from one self-assessment program reviewed and approved by the organization or office (*appendix W*).
- Provide a list of all self-assessment programs applications the organization or office has reviewed since the last accreditation review. This list should include the name of the applicant, the name of the assessment activity and whether the application was approved or not-approved (*appendix X*).

Simulation-based activities

- Provide policies and procedures the organization or office has developed to assess adherence to the standards established for simulation-based activities developed by other organizations (*appendix Y*).
- Provide all documentation from one simulation-based activity reviewed and approved by the organization or office (*appendix Z*).
- Provide a list of all simulation applications the organization or office has reviewed since the last accreditation review. This list should include the name of the applicant, the name of the assessment activity and whether the application was approved or not-approved (*appendix AA*).

Questions

1. What support does the organization or office provide to individuals responsible to assess adherence to educational and ethical standards of educational activities developed by other organizations?
2. How is feedback provided to organizations after the completion of a review by the organization?

STANDARD 4.1 ASSESSING EFFECTIVENESS

An accredited CPD provider organization has implemented a process, at least once every accreditation cycle, to:

- assess the degree to which the CPD program’s purpose and measurable goals or strategic plan have been achieved; and
- identified opportunities and plans for improvement.

Evaluation Criteria

Non-compliance:	There is no process established to assess the degree to which the CPD program’s purpose and measurable goals or strategic plan have been achieved.
Partial-compliance:	The process to assess the degree to which the CPD program’s purpose and measurable goals or strategic plan have been achieved is either in development; has not been executed during this accreditation cycle; or does not enable the identification of opportunities and plans for improvement.
Compliance:	The process to assess the degree to which the CPD program’s purpose and measurable goals or strategic plan have been achieved has been implemented at least once during the current accreditation cycle and has enabled the organization to identify opportunities and plans for improvement.

Documentation

- Provide at least two (to a maximum of four) examples of tools, processes, or measures the organization used to evaluate the degree to which the CPD program’s purpose and measurable goals or strategic plan have been achieved (*appendix BB*).

Note: These examples must go beyond assessing effectiveness of an individual event. These examples must demonstrate how the combined CPD curriculum and structure aligns to effect the CPD program’s mission statement.

- A document that describes the area(s) identified for improvement (*appendix CC*).
- At least one example of how the organization developed a plan to address an area identified for improvement (*appendix DD*).

Questions

1. How does the organization ensure members of the organization and faculty who participate in the CPD program are aware of the CPD program mission or strategic plan?
2. What method(s) has the organization used to assess the degree to which the CPD program’s purpose, measurable goals and expected results or strategic plan are being achieved?
3. Describe how the results from this evaluation have influenced the strategic directions for the CPD program.
4. Describe how the results of this evaluation have resulted in the development and implementation of plans for improvement.

STANDARD 4.2 EVALUATION STRATEGIES

An accredited CPD provider organization has implemented an evaluation process for individual educational activities that uses various methods other than self-report to measure the degree to which the intended outcomes were achieved.

For example, the organization uses strategies to assess gains in knowledge, skills, attitudes, improved performance of physicians, or enhanced patient care outcomes.

Evaluation Criteria

Non-compliance:	The CPD provider organization's evaluation process for individual educational activities is limited to self-report to measure the degree to which the intended outcomes were achieved.
Partial-compliance:	The CPD provider organization has demonstrated through evidence that it is developing an evaluation process for individual educational activities that includes measures other than self-report to assess the degree to which the intended outcomes were achieved.
Compliance:	The CPD provider organization has developed and implemented an evaluation process for individual educational activities that includes various methods other than self-report to measure the degree to which the intended outcomes were achieved.

Documentation

- Provide three examples of evaluation tools or strategies used by the organization to assess the intended outcomes of CPD activities (*appendix EE*).
- Provide evidence that the CPD program works at developing an evaluation process for individual educational activities that includes measures other than self-report to assess the degree to which the intended outcomes were achieved (*appendix FF*).
- Provide the compilation/summary of evaluation responses for one educational activity (*appendix GG*).

Questions

1. Describe the organization's overall approach(es) to the evaluation of individual activities.
2. Describe the type of evidence used to demonstrate the achievement of the intended outcomes for specific activities.
3. Describe how evaluation data from activities are used to plan future learning activities.

APPENDICES LIST

Standard	Appendix	Details
1.1	A	A copy of the current CPD program mission statement or strategic plan. If submitting a strategic plan, it must delineate the direction and movement of this plan.
1.1	B	Minutes and/or other evidence demonstrating the process by which the CPD program mission statement or strategic plan was formally approved.
1.1	C	An organizational chart to show the reporting relationship of the CPD enterprise to the overall organization.
1.2	D	The organization's operational plan that supports the development and implementation of the CPD program's purpose and measurable goals or strategic plan. The operational plan should include budget summaries for the most recent past and current fiscal year.
1.3	E	The policies and procedures that define how the CPD provider organization has implemented the <i>National Standard for Support of Accredited CPD Activities</i> .
1.4	F	Policies and procedures governing how the organization protects the privacy and confidentiality of individuals and groups that participate in its CPD program's activities.
1.4	G	Policies and procedures governing how the organization respects copyright.
2.1	H	Three examples of different methods used to assess perceived professional practice needs.
2.1	I	One example of a method used to assess unperceived needs.
2.2	J	Documentation from three activities/sessions that demonstrate how identified needs were used to develop learning objectives.
2.2	K	Guidelines or tools the organization provided to faculty to assist them to create learning objectives.
2.2	L	Final copies of brochures/programs or handout materials from three activities that describe the overall and session specific learning objectives.
2.3	M	Three examples that demonstrate how the content developed for activities was distributed across the CanMEDS Physician Competency Framework, responsive to various practice needs, and informed by scientific evidence. The documentation provided should demonstrate that the methods used to delivery programming were evidence-based and aligned with the nature of the subject matter.
2.4	N	Three examples of strategy, service or tool that promotes self-learning.
2.5	O	Two examples of activities designed and implemented in the CPD program based on a review and evaluation of the medical education or continuing professional development literature. (For example: a new approach to needs assessment, faculty development, education, or assessment).
2.5	P	A list of any presentations related to the CPD program since the last accreditation review or from the past three years.
2.5	Q	A list of peer reviewed grants (research, faculty development etc.) that the organization has applied for or obtained since the last accreditation review or from the past three years.

2.5	R	A list of peer reviewed publications in continuing professional development/medical education or faculty development published since the last accreditation review or from the past three years.
3.1	S	The policies and procedures the organization or office has developed to assess adherence of group learning activities developed by other organizations.
3.1	T	All documentation related to the review and approval of one group learning activity approved by the organization or office.
3.1	U	A list of all group learning activity applications the organization or office has reviewed since the last accreditation review. This list should include the name of the applicant, the name of the activity and whether the application was approved or not-approved.
3.1	V	Policies and procedures the organization or office has developed to assess adherence to the standards established for self-assessment programs developed by other organizations.
3.1	W	All documentation from one self-assessment program reviewed and approved by the organization or office.
3.1	X	A list of all self-assessment programs applications the organization or office has reviewed since the last accreditation review. This list should include the name of the applicant, the name of the assessment activity and whether the application was approved or not-approved.
3.1	Y	Policies and procedures the organization or office has developed to assess adherence to the standards established for simulation-based activities developed by other organizations.
3.1	Z	Provide all documentation from one simulation-based activity reviewed and approved by the organization or office.
3.1	AA	A list of all simulation applications the organization or office has reviewed since the last accreditation review. This list should include the name of the applicant, the name of the assessment activity and whether the application was approved or not-approved.
4.1	BB	At least two (to a maximum of four) examples of tools, processes, or measures the organization used to evaluate the degree to which the CPD program's purpose and measurable goals or strategic plan have been achieved.
4.1	CC	A document that describes the area(s) identified for improvement.
4.1	DD	At least one example of how the organization developed a plan to address an area identified for improvement.
4.2	EE	Three examples of evaluation tools or strategies used by the organization to assess the intended outcomes of CPD activities.
4.2	FF	Evidence that the CPD program works at developing an evaluation process for individual educational activities that includes measures other than self-report to assess the degree to which the intended outcomes were achieved.
4.2	GG	The compilation/summary of evaluation responses for one educational activity.

GLOSSARY OF TERMS

Term	Definition
Accredited learning activity	An educational event that meets the administrative, educational and ethical standards of the Royal College of Physicians and Surgeons of Canada or College of Family Physicians of Canada. Accredited learning activities include group learning, self-learning and assessment, in a live or web-based format.
Accredited CPD Provider	A national physician organization aligned with Royal College recognized specialties, sub-specialties and the new Royal College areas of Focused Competencies; Diploma Programs which has successfully applied to the Royal College and has been deemed to have met established accreditation standards OR a university office of continuing medical education within one of the 17 Canadian medical schools which has successfully applied to the Committee on Accreditation of Continuing Medical Education (CACME) and has been deemed to have met established accreditation standards.
Adult Education	A form of teaching and learning dedicated/directed towards the mature learner.
CanMEDS	CanMEDS Physician Competency Framework describes the knowledge, skills and abilities that specialist physicians need for better patient outcomes. The framework is based on the seven roles that all physicians need to have, to be better doctors: Medical Expert, Communicator, Collaborator, Manager, Health Advocate, Scholar, and Professional.
CanMEDS-FM	CanMEDS-Family Medicine (CanMEDS-FM) is an adaptation of CanMEDS 2005, the competency framework for medical education developed by the Royal College of Physicians and Surgeons of Canada. In keeping with CanMEDS 2005, CanMEDS Family Medicine's purpose is to guide curriculum and to form the basis for the design and accreditation of residency programs. Its ultimate goal is to improve patient care and to ensure that postgraduate training programs in family medicine are responsive to societal needs.
CME (Continuing Medical Education)	Teaching and learning that meets an identifiable need and designed to enhance medical/clinical knowledge, skills, attitudes, performance or health outcomes.
CME/CPD Activity	Individual educational activities that support an organization's CME/CPD program.
CME/CPD program	The overall educational plan of an organization, including all educational initiatives, that addresses the needs of an organization's members or identified target audience(s).
CME/CPD Session	A component within a larger educational event. An example would be a workshop contained within an annual conference.

Co-Development	The process by which two or more organizations, at least one of whom must be a physician organization, prospectively collaborate to develop and implement an accredited educational activity, learning resource or tool.
Conflict of interest	<p>A set of conditions in which judgement or decisions concerning a primary interest (example a patients' welfare, the validity of research and/or quality of medical education) is unduly influenced by a secondary interest (personal or organizational benefit including financial gain, academic or career advancement, or other benefits to family, friends, or colleagues).</p> <p>Real conflicts of interests are when two or more interests are indisputably in conflict.</p> <p>Perceived conflicts of interest is the appearance of a conflict of interest as judged by outside observers regardless of whether an actual conflict of interest exists</p>
CPD (Continuing Professional Development)	This extends beyond the scope of traditional CME (defined above), and includes learning activities that incorporate competencies other than the Medical Expert role.
Educational Grant	The mechanism by which a sponsor provides financial support to an organization for the development of a specific educational activity, learning resource or tool.
Educational Method and Delivery	The format in which educational activities are delivered/relayed to learners.
Evaluation	An assessment conducted to determine the effectiveness of the event in meeting the stated learning objectives.
Interactive Learning	A portion(s) of the educational method that incorporates and fosters opportunities for dialogue or communication among participants and faculty members to enhance knowledge transfer and acquisition.
Learning Objectives	Statements that are based on the identified needs of the target audience, and indicate what a participant will be able to know or do following an educational event.
Maintenance of Certification (MOC) program	The Maintenance of Certification (MOC) Program is the Royal College's continuing professional development program for Fellows and Health Care Professionals. Participation in the MOC Program is a requirement for admission and renewal of Fellowship in the Royal College — although health care professionals who are not Fellows may also participate in MOC. The MOC Program promotes excellence in all aspects of professional practice while putting participants at the centre of their professional development.
National Specialty Society (NSS)	Professional group of physicians organized around a particular medical, surgical, or laboratory specialty or subspecialty. They provide a forum for the exchange of ideas, the promotion of education and research, and discussion of issues of interest to its members and others.

Needs Assessment	Method(s) used to identify the perceived and unperceived needs of an identified target audience.
Non-Physician Organization	A group that does not meet the definition of a physician organization (see <i>Physician Organization</i>). These can include disease-oriented organizations, pharmaceutical companies or their advisory groups, medical supply and surgical supply companies, communication companies or other for profit organizations.
Off-Label Use of Drugs	The use of a drug to treat a condition for which it has not received approval by a regulatory agency (Health Canada, for example). Off-label is also called non-approved or unapproved use of a drug.
Perceived Needs	Gaps in knowledge or performance that individuals or groups have identified about themselves. Learners therefore “know what I need to know”. Perceived needs are frequently identified by: perspectives of planning committees, topics proposed on evaluation forms, areas identified from focus groups or structured interviews, surveys of learners etc.
Physician Organization	<p>A not-for-profit group of health professionals with a formal governance structure, accountable to and serving, among others, its specialist physician members through:</p> <ul style="list-style-type: none"> • Continuing professional development • Provision of health care and/or • Research. <p>This definition includes (but is not limited to) the following groups:</p> <ul style="list-style-type: none"> • Faculties of medicine • Hospital departments or divisions • Medical societies • Medical associations • Medical academies • Physician research organizations • Health authorities not linked to government agencies <p>This definition excludes pharmaceutical companies or their advisory groups, medical supply and surgical supply companies, communication companies or other for-profit organizations and ventures/activities.</p> <p>Types of organizations that are not considered physician organizations:</p> <ul style="list-style-type: none"> • Disease-oriented patient advocacy organizations (e.g. Canadian Diabetes Association) • Government departments or agencies (e.g. Health Canada, Public Health Agency of Canada) • Industry (e.g. pharmaceutical companies, medical device companies, etc.) • Medical education or communications (MEC) companies (e.g. CME Inc.) • 'For-profit' on-line educators, publishing companies or simulation companies (e.g. Medscape, CAE) <p>Small number of physicians working together to develop educational programming</p>
Royal College of Physicians and Surgeons of Canada	A national, private, nonprofit organization established in 1929 by a special Act of Parliament to oversee the medical education of specialists in Canada.

Satellite Symposium	Satellite Symposia are unaccredited group learning events developed independently by non-physician organizations.
Sponsors	A sponsor is an individual, group, corporation or organization who contributes funds, goods or services to support accredited educational activities, learning resources, or tools (such as accredited group learning, self-assessment programs, simulation, and performance assessment tools).
Sponsorship	Sponsorship is the process by which individuals, groups, corporations or organizations provide support (financial or in-kind contributions) to a CPD organizer to support an accredited educational activity, learning resource, or tool.
Tagging	The linking or alignment of a sponsor's name to a specific educational session within an accredited group learning activity.
Transparency	To clearly disclose, divulge, or make known [antonym is ambiguity]
Unperceived Needs	Unperceived needs are gaps in knowledge or performance, identified by external measures and are often based on external (to the individual or group) data. Unperceived needs could be identified through: tests of knowledge, chart audit (paper or electronic), simulation (across the range of fidelity), multi-source feedback – including patient surveys, critical incident reports etc.