



CACME RULES OF PROCEDURE

COMMITTEE ON THE ACCREDITATION OF
CONTINUING MEDICAL EDUCATION

RULES OF PROCEDURE

Committee on the Accreditation of Continuing Medical Education

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INTRODUCTION

The Committee on Accreditation of Continuing Medical Education (CACME) was established in 1996 to serve as the accreditation body for Canadian university offices of Continuing Medical Education (CME) / Continuing Professional Development (CPD). For the purposes of this document, only the term CPD will be used.

Until 2016, university CPD offices were accredited on a five-year accreditation cycle with potential requests for status reports, limited visits, shortened accreditation cycles, probation and removal of accreditation. As part of the efforts to align accreditation processes along the continuum of medical education, the accreditation cycle was lengthened to eight years in 2016 and includes monitoring activities over the duration of the cycle.

The Canadian university CPD offices are accredited by the CACME and for the Québec university CPD offices, jointly with the Collège des médecins du Québec (CMQ). The CACME is a pan-Canadian committee supported through a partnership of Canadian medical organizations:

AFMC	The Association of Faculties of Medicine of Canada L'Association des facultés de médecine du Canada
CFPC/CMFC	College of Family Physicians of Canada Le Collège des médecins de famille du Canada
CMQ	Collège des médecins du Québec
FMRAC/FOMC	Federation of Medical Regulatory Authorities of Canada La Fédération des ordres des médecins du Canada
Royal College /CRMCC	Royal College of Physicians and Surgeons of Canada Collège royal des médecins et chirurgiens du Canada

This document describes the rules of procedure governing the roles, responsibilities and decision processes of the CACME.

I. CACME MEMBERSHIP AND ORGANIZATION

A. Composition of the CACME

1) Appointment of Voting Members

The CACME is comprised of individuals with accreditation expertise appointed as follows by its partner organizations:

1. The Association of Faculties of Medicine of Canada (AFMC): 3 voting members
2. The College of Family Physicians of Canada (CFPC): 2 voting members
3. The Collège des médecins du Québec (CMQ) : 1 voting member
4. The Federation of Medical Regulatory Authorities of Canada (FMRAC): 1 voting members
5. The Royal College of Physicians and Surgeons of Canada (Royal College): 2 voting members.

Members serve indeterminate terms subject to termination by their appointing organization, the CACME and/or by themselves.

B. CACME Chair

Role

The Chair oversees Committee functions and leads all Committee meetings.

Qualifications

The Chair has at least one year's experience on the CACME as a voting member and is an AFMC appointee.

Appointment

Upon notification that the Chair's term is ending there will be a call for nominations within the membership. Members may self-nominate. The CACME will review the list of nominees and will vote to elect its new Chair.

Term

The term for the position of the Chair is of three years, renewable twice. The CACME Chair may have their term extended by an additional renewal so their maximum term on CACME would be 9 years.

C. CACME Deputy Chair

Role

The CACME Deputy-Chair assumes the role of the CACME Chair when the Chair cannot undertake chair responsibilities temporarily due to extenuating personal or professional circumstances or when the Chair must be recused from a portion of a CACME meeting due to a conflict of interest. The Deputy-Chair is not Chair-Elect and therefore does not automatically become the next CACME Chair. The Deputy-Chair shall not have the same conflict of interest as the Chair.

Term

The term for the position of Deputy Chair is two years, renewal once.

Nomination Process

Members of the CACME can nominate a CACME voting member as CACME Deputy-Chair. CACME members interested in the position of Deputy-Chair can self-nominate.

The Chair will issue a call for nominations six months before the term of the current Deputy-Chair is due to end. If no name is put forward, the Chair will nominate a CACME voting member as Deputy-Chair. Nominations of eligible candidates will be brought forward for a vote at the CACME meeting preceding the end of the term of the sitting Deputy-Chair.

D. Grounds for Non-reappointment of Members

The Chair with the support of the Secretariat will discuss appropriate actions with a member's respective partner organization when the member has: a) repeatedly neglected or acted in dereliction of duty; b) failed to comply with CACME policy (e.g., conflict of interest or confidentiality); or c) been the subject of documented allegations of unethical conduct or unprofessional behavior.

E. CACME Secretariat

AFMC acts as the Secretariat for CACME. As such, AFMC hires the staff and carries the legal risks of supporting the CACME. The CACME Secretariat has formal responsibility for managing all activities and documentation related to the accreditation of Canadian university CPD offices and supports the operations of the CACME. The CACME Secretariat usually consists of a Secretary, an Assistant Secretary, and Administrative Support staff. The CACME Secretariat attends all CACME meetings.

1) Functions of the CACME Secretariat

The CACME Secretariat communicates with Canadian university CPD offices on all accreditation matters on behalf of the CACME. The CACME Secretariat manages the accreditation process, including development of all documentation related to accreditation, selection of visit teams, and ongoing training for accreditation visit team members, observers, appeal panel members, and CACME members as needed.

2) Information on CACME Members and Secretariat Personnel

The CACME Secretariat maintains the names of current CACME members and Secretariat personnel on the website.

II. ACCREDITATION OF UNIVERSITY OFFICES OF CPD

A. Term of Accreditation

University CPD offices are accredited for a maximum of eight years.

A university CPD office, once accredited, remains accredited until the office voluntarily terminates its accreditation status or the CACME withdraws the accreditation through a formal accreditation action. Established CPD offices may be accredited (with regular cycle, with limited visit, with full visit) or accredited with notice of intent to withdraw. A new CPD office may be granted the status of Accredited new university CPD office after an initial accreditation visit. (See page 14 for additional details).

B. Entities Eligible for CACME Accreditation

The CACME accredits only university CPD offices that are directly affiliated with a Canadian faculty of medicine, or equivalent.

C. Fees for Accreditation

All fees related to CACME accreditation visits and Secretariat Consultations are borne by the faculty of medicine, or equivalent of the CPD office being accredited.

D. The Accreditation Process

1) New Applications for CACME Accreditation

In order for a university CPD office to be considered for CACME accreditation, the following conditions apply:

- The CPD office must be part of a Canadian faculty of medicine, or equivalent.
 1. The dean of the faculty of medicine, or equivalent, must submit a statement indicating the intent to create a university CPD office that is part of the faculty. Upon receipt of the letter of intent, all CACME sponsors will be notified of the applicant status and the CPD Office will be granted Applicant Status.
 2. The initial application is reviewed by the CACME and if the initial plans satisfactorily address the accreditation standards, Preliminary Accreditation status is granted.
 3. In the Preliminary Accreditation phase, the applicant CPD office may wish to consider liaising with an established CACME-accredited university CPD Office in a mentorship relationship for a period of up to 24 months. During the Preliminary Accreditation phase, a new CPD office may grant credits.
 4. A full accreditation visit must take place before the end of the 24-month period. This would include an activity audit as part of the process.
 5. After review of the full accreditation visit report, the CACME will determine the accreditation status along with any related follow-up actions.
 6. When full accreditation status is awarded, credits for CPD activities may be granted by the newly accredited office and the office would enter the 8-year accreditation cycle.

2) Accreditation of Established CPD Offices

University CPD offices are reviewed on an eight-year cycle (see Figure 1). The accreditation process includes:

- a full accreditation visit at year 0 (usually virtual)
- an activity audit at the 48- and 96-month mark, as is required from all university-based CPD offices, and, if applicable, at the 24- and 72- month marks, if they are found to be PC or NC for standard 3.2.
- an Internal Quality Review at the 48-month mark
- the next full accreditation visit at the 96-month mark

CACME can also require:

- status reports at the 24-, 48-, and 72-month marks for standards that remain PC or NC. The activity audit is carried out by both the College of Family Physicians of Canada (CFPC) and the Royal College of Physicians and Surgeons of Canada (Royal College);
- an action plan, for all partially (PC) or noncompliant (NC) standards, within 12 months of the full accreditation visit; and/or
- a Secretariat consultation.

The CACME may require additional follow-up activities subsequent to the review of material submitted as part of the regular accreditation process. This may entail a limited or full accreditation visit if CACME determines that the office is not in compliance with all accreditation standards.

Figure 1: 8-YEAR ACCREDITATION CYCLE



3) Compliance with Royal College, CFPC and CMQ Credit Granting Requirements

CACME requires that accredited university CPD offices provide information about programs accredited/certified for credits from the Royal College and the CFPC in a manner specified by these two certifying Colleges. In addition, CACME requires that accredited university CPD offices in Québec provide information about programs accredited/certified for hours from the CMQ in a manner specified by this certifying College.

4) *The Accreditation Visit Process*

The evaluation process consists of a self-study, an accreditation visit by visit team members, CACME's review of the report of the accreditation visit team, and, if appropriate, review of other relevant documentation.

The CACME Secretariat will contact the university CPD office approximately 12-18 months before the next accreditation visit to establish specific dates.

The CACME Secretariat will provide the university CPD office with access to resources needed to produce the required material. The CACME accreditation process is described in the publication entitled *The Guide for CACME Accreditation Visits*, available on the CACME website. The CACME Secretariat staff are available to answer questions about the conduct of the self-study or completion of the accreditation visit material.

At 12 weeks before the dates of the accreditation visit, the Secretariat will provide information to the CPD office being reviewed and accreditation visit team members regarding the office's recent accreditation history, composition of the visit team, and background materials regarding conduct of the visit and preparation of the report. The Secretariat will also include information about how the CPD office should submit its material to the team and to the CACME Secretariat.

The *Data Collection Instrument* (DCI) completed (in English or French) by the CPD office must be submitted to the CACME Secretariat 8 weeks prior to the scheduled visit.

Once the team has been formed, the CACME Secretariat will inform the Dean of Medicine (or equivalent) of team member names. If the dean of a faculty of medicine, or equivalent, whose CPD office is being reviewed has reason to believe that any accreditation visit team member has a conflict of interest that should disqualify the person from evaluating the office, the Secretariat must be contacted immediately to appoint another visit team member, if required. Final decisions about accreditation visit team composition will be made by the Secretariat.

A full accreditation visit typically begins with an entrance conference with the dean and concludes with an exit conference with the dean and associate dean CPD (or equivalent). At the exit conference, visit team members share their positive observations about the structure and functioning of the CPD office, the areas where, in the opinion of the team, improvement is required and, if asked, may provide constructive feedback to the office leadership. Visit team members will not provide their recommended ratings of compliance with individual standards during the exit conference. Final ratings of compliance with individual standards are determined by CACME upon review of the team's recommendations at a regularly scheduled meeting.

Within two weeks of the conclusion of the accreditation visit, visit team members submit a written report of their findings with recommended ratings to the CACME Secretariat for verification of completeness and adequate documentation. A draft version of the report is reviewed by the Secretariat to verify that the report is complete and adequately documents the team's findings.

The final draft of the report is then prepared by the team and submitted to the Secretariat who forwards it to the dean with the team's recommended rating for each standard. The CACME is responsible for making decisions regarding the rating for each standard and for the office's overall accreditation status.

The dean has 10 business days to provide written (in French or English) comments noting errors of fact and/or omission or concerns about the tone of the report. Information provided as part of the dean's response must be based on information available to the team in the visit materials or at the time of the accreditation visit. Events occurring, or actions taken by the office after the visit will not be considered in mitigation of the findings of partial compliance or noncompliance identified in the visit report. The dean's comments will be forwarded by the Secretariat to the visit team who will finalize the report as they deem appropriate. The team will also have an opportunity to make further changes to the recommendations documented in their report at this time. The team will submit the final report to the CACME Secretariat who will forward it to the dean.

Following receipt of the final report, if the dean has remaining concerns about the process of the visit, errors of fact and/or omission, or the tone of the report, the dean may write a letter (in French or English) to the CACME within 10 business days detailing these concerns. Comments on errors of fact or omission must be limited to information provided to the accreditation visit team either before or during the visit. The letter may not include any new information regarding events or actions taken by the office after the visit. Any such information may be redacted by the CACME Secretariat. No attachment(s) will be accepted.

The decision-making process is outlined in section III A of this document.

The CACME Secretariat communicates the outcome of the CACME deliberations, including the CPD office's accreditation status and any follow-up actions in a letter of accreditation to the dean with a copy to the associate dean, CPD (or equivalent).

5) Accreditation Visit Teams

Selection and Training of Visit Team

The CACME Secretariat is responsible for recruitment and training of visit team members who are knowledgeable about CPD accreditation standards and processes. Observer members of the team must sign a confidentiality agreement with the CACME prior to the visit.

Accreditation Visit Team Size and Composition

For Full and Limited Accreditation Visits

For offices undergoing a full or limited accreditation visit, the visit team will normally consist of two members. For visits of the university CPD offices situated in Québec, one visit team member will be appointed by the CMQ. One visit team member is designated as the team lead by the CACME Secretariat. The team lead functions as the official voice of the team during the visit and leads its deliberations. All visit team members contribute to the written visit report. All visit team members appointed for a visit in a francophone university in Québec will be fluent (oral and written) in French.

The CACME Secretariat may include an additional visit team member with leadership responsibilities from another Canadian university CPD office or from a CACME partner organization to participate in a visit. The purpose of this additional member is to increase the CACME pool of future visit team members and to help potential visit team members gain experience in the accreditation process. This additional visit team member will be identified as a faculty fellow and participates fully in all meetings and team discussions, contributes to the decision-making process, and to the writing of the report. If the accreditation visit is in person, the expenses for this additional visit team member are usually covered by this individual's home institution or organization.

Observers on Accreditation Visits

Individuals from appropriate organizations with an interest in the CACME process who wish to participate in a visit must contact the CACME Secretariat in writing. The request must include the reason for participating and the individual's role in CME or CPD evaluation.

The Secretariat will identify an upcoming visit where the observer may be included on the visit team. Permission for the observer to participate must be obtained from the dean of the faculty of medicine, or equivalent. The observer does not speak during the meetings with the CPD office's faculty or staff, nor do they participate in making rating recommendations or in preparing the report. Agreement of who will cover any costs for the observer will be determined prior to the inclusion of the observer on a team.

Responsibility for Visit Expenses

The university CPD office being accredited covers all expenses incurred by the two regular visit team members.

Social Activities and Gifts

Throughout the accreditation process and visit, members and observers must refrain from engaging in social activities with faculty and staff members affiliated with the faculty of medicine, or equivalent, and the CPD office undergoing accreditation. Visit team members and observers cannot accept gifts of any type from the university or office being reviewed.

Confidentiality and Conflict of Interest Declarations

Each visit team member and observer must agree in writing to hold confidential all information obtained during the visit and must sign a COI form prior to taking part in a visit or receiving documentation.

6) Accreditation Visit Reports

The reports of accreditation visit teams constitute the formal record of the visit and are the source of information used by the CACME in making decisions regarding a provider's accreditation status.

The CACME will review the final report of a visit at its next regularly scheduled meeting, provided that its members have had at least two weeks to review the report prior to the meeting.

Accreditation visit report should be written in French for Francophone universities CPD unit visits.

7) Francophone CPD Offices

Reports from francophone CPD offices may be written in English or in French. Translations are reviewed for accuracy by the authors. CACME will provide bilingual (English and French) standards, terms and procedures, and translate reports and decision letters for Quebec schools, either from English to French or French to English; translation costs will be borne by CACME.

III. CONDUCT AND OUTCOMES OF CACME MEETINGS

A. Organization, Timing, and Conduct of Meetings

1) *Regular Meetings*

The CACME meets twice a year (or more frequently as needed) unless the Chair and Secretariat agree to a different schedule or meeting format.

During the review of full and/or limited accreditation visit reports, a visit team member will be available to provide factual clarifications if asked by the Chair. If the visit team member is not a CACME member, this person will be invited to participate in the CACME meeting during the review of the report. If no visit team member is available to attend the CACME meeting where the report is reviewed, the CACME Chair will determine the next steps.

Members must comply with the CACME Confidentiality and Conflict of Interest policies and must sign forms to that effect. Some members of the CACME should be bilingual to be available to review French documentation from Francophone universities.

2) *Special Meetings*

The Chair, in consultation with the Secretariat, may call a special meeting to deal with any urgent issue(s).

Voting may occur synchronously or asynchronously with the meeting.

3) *Procedures and Quorum*

All meetings of the CACME are conducted using the current edition of Robert's Rules as a framework. A quorum shall consist of a majority of the voting members of the CACME not including any vacancies.

4) *Electronic voting*

a) General Principle

The CACME may take action by electronic vote without a formal meeting. Electronic voting is intended for routine, time-sensitive, or uncontroversial matters that do not require extensive deliberation in a meeting format.

b) Procedure for electronic vote

- Initiation: A motion proposed for action by written consent shall be circulated to all CACME members by the Secretary (the “vote administrator”) via the official CACME email list.
- Clear wording: The motion must be clearly and concisely stated, providing all necessary background information or documentation.
- Vote administrator duties: The Vote administrator shall:
 - Clearly state the deadline for response (e.g. a 48-hour period)
 - Maintain accurate record of all votes, non-responses, or withdrawals of consent.
 - Announce the outcome (Pass or Fail) to CACME promptly upon reaching the deadline.

c) Record-Keeping

The CACME Secretariat shall retain all electronic records of the vote (e.g. email threads, signed electronic consent forms) as part of the official records, filed with the minutes of the next regular CACME meeting.

5) *Decision-making Process Regarding Compliance Status with Standards*

Following a full or limited visit, CACME will base its decisions regarding compliance status with each accreditation standard solely on the information included in the visit report, the dean's letter, if available, and factual clarifications provided by visit team members (when requested by the Chair as noted above).

Between visits, the CACME will reassess compliance with accreditation standards based on the information submitted by the university CPD offices as part of interim accreditation activities.

6) *Decision-making Process Regarding Accreditation Status of CPD Offices*

Pertinent documents are reviewed by the CACME. Based on the extent of the CPD office's compliance with accreditation standards, the CACME will determine the accreditation status and any required follow-up.

Between visits, the CACME will reassess the overall accreditation status of CPD offices based on the information submitted as part of interim accreditation activities.

7) *Accreditation Actions*

Accreditation of New CPD Offices

Refer to Section II D 1 above.

Accreditation of Established CPD Offices

Upon the granting of full accreditation, the CPD office enters an eight (8) year accreditation cycle.

Following the review of a university CPD office, the CACME will take one of the following actions:

1. Accredited
 - 1.a with regular cycle
 - 1.b with limited visit
 - 1.c with full visit within a specific time less than 8 years
2. Accredited with notice of intent to withdraw
3. Withdrawal of accreditation

1. Accredited

1.a with Regular Cycle

Internal Quality Reviews and an Audit will be required for all offices at 48 months. Other follow-up activities may be required and the extent of which will be determined by the level of compliance with individual standards.

1.b with Limited Visit

Limited visits may be conducted to assess the extent of an office's progress in achieving full compliance with accreditation standards. This visit will focus only on areas of partial or non-compliance.

1.c with Full Visit

The CACME may mandate a full visit at a date earlier than the next regularly scheduled full visit when it has

substantial concerns about compliance with standards or about the sustainability of the office.

2. Accredited with Notice of Intent to Withdraw

Such a determination may be based on the CACME's judgment that there are multiple areas of noncompliance that seriously compromise the quality of the CPD office services or that the office has failed to make satisfactory progress in achieving compliance. Offices retain their accredited status with all the rights and privileges conveyed by such status, but are subject to withdrawal of accreditation if noncompliance issues are not satisfactorily addressed within the timeline determined by the CACME.

3. Withdrawal of Accreditation

Withdrawal of accreditation is an action based on the determination of the CACME that an accredited CPD office exhibits substantial non-compliance with standards. Under normal circumstances, an office will have an opportunity to correct non-compliance within a reasonable timeframe before the CACME takes action to withdraw accreditation. This opportunity is provided during the status "accredited with notice of intent to withdraw". CACME decisions to withdraw accreditation without notice would be exceptional.

This action is a decision that is subject to appeal (See Appendix A). Costs incurred to CACME as a result of the appeal will be covered by the CPD office.

8) Additional Follow-up Activities

Secretariat Consultation

The CACME may mandate a Secretariat consultation, to assist a CPD office in its understanding of the areas of noncompliance and partial compliance requiring monitoring and/or further explaining concerns raised by the CACME. The Secretariat may assist the CPD office in preparing its Action Plan. A Secretariat consultation is a purely consultative activity between Secretariat staff and representatives of the university CPD office and faculty and does not result in a written report.

Status Report

The CACME may request a status report on areas of partial compliance and noncompliance. The date for submission of a status report is determined by CACME and will be reviewed at the next CACME meeting.

Action Plan

The CACME may request an action plan from the CPD office on areas of partial compliance and noncompliance. The date for submission of an Action Plan is determined by CACME and will be reviewed at the next CACME meeting.

9) Reporting of CACME Accreditation Actions

To Faculties of Medicine and Affiliated CPD Offices

Following CACME's review of reports of full or limited visits, activity audits, internal quality reviews, or status reports, the Secretariat will send the dean and copy the associate dean CPD (or equivalent):

- a Letter of Accreditation written in French or English, conveying the CACME decision including its findings regarding the CPD office's strengths (for full visits only) and areas of compliance, partial compliance, and/or noncompliance with accreditation standards;
- a copy of the final accreditation visit team report, if applicable.

The Letter of Accreditation and final team report are held in confidence by the CACME. The dean may choose to disclose the content of the Letter at the dean's own discretion.

To External Groups and the Public

The final decision on the accreditation status of all CPD offices is posted on the CACME website after the dean and associate dean for CPD (or equivalent) have been informed of the final accreditation status. The accreditation information made available to the general public includes the current accreditation status (Specifically: accredited, accredited with notice of intent to withdraw, or withdrawal of accreditation) of any CPD office and the date of its next regularly scheduled full accreditation visit.

IV. CIRCUMSTANCES THAT MAY LEAD TO AN UNPLANNED ACCREDITATION REVIEW OR VISIT

A. Complaints

Complaints about the CACME accreditation standards, policies, procedures, or operations are reviewed by the CACME. Such complaints must be submitted in writing, in French or in English, to the Secretariat and will not be considered if they are submitted anonymously. The individual(s) submitting the complaint will be required to sign a consent to move forward with the complaint.

The Secretariat will conduct an initial evaluation of any complaint or concern about a CPD office. If the Secretariat finds merit in the complaint, the dean will be sent a copy of the complaint and will be given an opportunity to respond in writing. The CACME Chair will be advised of complaints or concerns that require CACME consideration. Complaints may also be received directly by the CFPC, Royal College, and/or CMQ regarding educational programs provided by accredited university CPD offices. These organizations will investigate such complaints according to their own procedures. They will share the results of such investigations in writing with the CACME Secretariat in a timely manner if it is determined that the CPD office is at risk of noncompliance with accreditation standards.

If the CACME Secretariat, the CFPC, the Royal College, or the CMQ find merit in a complaint, the matter will be brought to the CACME at its next regularly scheduled meeting. Following the review of a complaint, if the CACME determines that an office is deemed to be in noncompliance or at risk of not being in compliance with relevant accreditation standards, it may request a status report, conduct a limited visit, or direct a visit team to review the issue(s) as part of an upcoming full visit. The complainant will not be informed of the result of any review. The dean will be informed of the CACME accreditation action including no action needed following the review of the complaint.

B. Willful Deception

If, as part of the accreditation process, a university CPD office or its faculty or staff purposefully supplies false or misleading information to the CACME or to visit teams (including information provided in the self-study), the CACME will reconsider the office's accreditation status and related term, and determine any appropriate follow-up action, which may include a change in the office's accreditation status or term. Similar action may be taken if a CPD office knowingly fails to provide material information to the CACME or to visit teams or makes misleading or incorrect public statements or disclosures regarding its accreditation status.

V. OTHER POLICIES AND PROCEDURES

A. Development and Review of Accreditation Standards / Policies and Procedures

1) Creation, Review, and Modification of Accreditation Standards

Suggestions for new standards or for modifications of existing standards may come from any source. Anyone who wishes to propose a new or revised standard should contact in writing either the CACME Secretariat, the Royal College, the CFPC, or the CMQ. The CACME, the Royal College, the CFPC, and the CMQ will collaboratively review requests for joint inclusion of new standards in the *Canadian Accreditation Standards for Continuing Professional Development (CPD) Provider Organizations*.

New standards and substantive changes to existing standards (which impose new or additional requirements on offices to achieve compliance) must undergo review and approval by the CACME sponsoring organizations before being adopted. Minor or technical modifications to existing standards (i.e., changes to clarify the intent or focus of the standard by rewording it or adding an annotation) may be approved by the CACME and do not require sponsor approval.

New or revised standards that have been finally approved will be published in the document *Canadian Accreditation Standards for Continuing Professional Development (CPD) Provider Organizations*.

2) Review and Modification of Policies and Procedures

Substantive changes to existing policies and procedures must undergo review and approval by the CACME sponsoring organizations before being adopted. Minor or technical modifications to existing documents (i.e., changes to clarify the intent or focus of the policy or procedure) do not require sponsor approval.

B. Conflicts of Interest

Conflict of interest statements are collected from CACME members, accreditation visit team members, observers, appeal panel members, and Secretariat personnel. To avoid actual or perceived conflicts of interest, CACME members, Secretariat personnel, visit team members, observers, and appeal panel members must agree in writing to abide by the following:

1) Participation in Visits, Accreditation Decisions, or Appeals

No CACME representative (defined as a member of the CACME, the Secretariat, a visit team, an appeal panel, or an observer) will participate in a visit, discuss, or vote at CACME meetings, or participate in an appeal process if:

1. They have recently been (within the past five years) connected as a student, faculty member, administrative officer, staff member, or agent; or is considering applying for a faculty member position or dismissed from the university.
2. Cooperative or contractual arrangements are held between the CPD office under review and the representative's own faculty.
3. They have been engaged to act as a consultant on behalf of the faculty of medicine (or equivalent)/program within the past five years.
4. They have any personal, financial, political, professional, or other interests that may conflict with the interests of the organization/committee.

2) *Consultations*

No CACME member will act as a paid or unpaid formal external consultant on CACME accreditation matters to any program or institution subject to CACME accreditation, unless such consultation is authorized by the CACME Secretariat and Chair. CACME members and Secretariat will not provide formal consultation on CACME accreditation matters to any program or university subject to CACME accreditation for a period of two years after completion of their service with the CACME. Provision of short-term educational services (such as guest lectures) is not considered consulting that poses a conflict of interest.

C. Confidentiality of Information Collected During the Accreditation Process

All information collected in preparation for accreditation visits or collected at the time of the visit is held in strict confidence by the Secretariat, the CACME, accreditation visit teams and observers (where applicable).

Each visit team member and observer(s) must sign a confidentiality statement agreeing to abide by the CACME confidentiality requirements as a condition for participating in the visit. All information received by the CACME that relates to a CPD office's accreditation status (including visit reports and status reports) is treated as confidential. Each CACME member and the members of the Secretariat must also sign a confidentiality statement as a condition for participating in CACME meetings and related activities. Confidentiality obligations also apply to each member of an Appeals Panel. The confidentiality obligation includes a requirement related to the confidential disposal of materials after visits, CACME meetings or appeal hearings.

D. Other Usage of Information Collected During the Accreditation Process

1) *CQI*

CACME Secretariat staff may conduct CQI activities based on confidential information contained in accreditation material submitted by CPD offices. The source documents used for such analyses must not be shared or made available to other individuals or organizations (including staff of the CACME sponsoring organizations). Only aggregated results may be shared. Such activities must be conducted respecting privacy, confidentiality and ethical principles.

2) *Scholarly Activities*

Those wishing to conduct research or other scholarly activities based on information held by the CACME Secretariat require approval by the CACME and its sponsor organizations as well as the appropriate research ethics board(s). Only aggregated results may be shared or published. Such activities must be conducted respecting privacy, confidentiality and research ethics principles.

APPENDIX A

CACME APPEAL PROCESS FOR ACTION TO WITHDRAW OR DENY ACCREDITATION

The appeal shall be limited to the time and circumstances (e.g., an accreditation visit, status report, etc.) that triggered the CACME action and shall be based solely on the information contained in the report(s). Descriptions of changes made since that time will not be considered, except as expressly provided herein.

Notice of CACME Action

Following the CACME action to withdraw or deny accreditation, the Secretariat shall promptly notify in writing, in French or in English, the dean and the associate dean, CPD (or equivalent), of the action and, if appropriate, the specific areas of noncompliance that support this action. The CACME Secretariat also shall inform them of the right to appeal.

CACME Appeal Process for Actions to Withdraw or Deny Accreditation

The CACME appeal process consists of a final appeal to an independent Appeals Panel. No person shall be present for, or participate in, the final appeal by the Appeals Panel if the person has a conflict of interest as determined under the CACME Conflict of Interest Guidelines except as described below.

Notice of Appeal

If the dean of the faculty of medicine, or equivalent, wishes to file an appeal of the CACME's decision, they must notify the CACME Secretariat in writing, in French or in English, within thirty (30) calendar days from the date of receipt of the notice of the CACME action. Such Notice of Appeal must be addressed to the CACME Secretariat and must contain a concise statement of why the dean believes that the CACME action (1) was based on a procedural error that materially affected the outcome of the accreditation review process, or (2) the action imposed by the CACME is arbitrary and capricious.

If a Notice of Appeal is not received by the CACME Secretariat within thirty calendar (30) days, the CACME's initial action shall constitute final action by the CACME.

HEARING BEFORE AN INDEPENDENT APPEALS PANEL

The appeal process consists of a hearing before an Appeals Panel. Both parties may have legal counsel present during the hearing.

Identification and Training of Appeals Panel Members

The Appeals Panel will be appointed by the CACME Secretariat in consultation with the Chair of the CACME and shall include three individuals who are former CACME members or who otherwise meet the qualifications for membership on the CACME including CMQ French or bilingual members. The Appeals Panel will not include current members of the CACME or past members who have taken part in the decision that led to the action under appeal. The Chair of the Appeals Panel will be appointed by the CACME Secretariat. The Secretariat may identify alternate members.

Appeals Panel members are subject to the CACME conflict of interest provisions (see Conflict of Interest Guidelines).

At the beginning of an Appeals hearing, Appeals Panel members will receive orientation to their roles.

Once the Appeals Panel has been established, neither the dean, their representatives nor any representative of the university nor any member of the CACME shall contact any member of the Appeals Panel concerning the matter under appeal.

Information Presented to the Appeals Panel

The CACME Secretariat shall forward to each member of the Appeals Panel the following materials, which shall constitute the Appeal Record: the CPD office's accreditation history; the report(s) available to the CACME and upon which the Committee based its decision; a written summary of the CACME's grounds for the decision; a copy of the letter notifying the faculty of medicine, or equivalent, and CPD office of the decision; and a copy of the dean's Notice of Appeal and supporting documentation. No new information will be presented to or will be considered by the Appeals Panel.

Timing of and Representation at the Appeals Panel Hearing

The CACME Secretariat, on behalf of the Chair of the Appeal's Panel, shall notify the dean of the faculty of medicine, or equivalent, writing of the date, time, and place of the hearing. The notice, in French or English, shall be provided at least forty-five (45) calendar days prior to the hearing. The notice shall advise the institution that:

- (1) it may send representatives to appear before the Appeals Panel;
- (2) either party may be represented by legal counsel;
- (3) it may submit a written response to the CACME limited to the time and circumstances that triggered the decision and shall be based solely on the information in the report(s). Descriptions of actions taken or changes made since that time may not be submitted and will not be considered unless otherwise provided herein.

The dean's written intent to send representatives to appear before the Appeals Panel, the names of the representatives and, if any, the legal counsel who will attend the hearing, must be received by the CACME Secretariat no later than twenty-one (21) calendar days before the scheduled date of the hearing. The Secretariat will forward this information to the Chair of the Appeals Panel.

The dean will be notified that failure to appear without good cause or failure to notify the Secretariat at least ten (10) calendar days before the scheduled date of the hearing that it will not appear may result in the Appeals Panel making its decision based on the information before it with no further opportunity for an appearance by the dean or their representative.

During the hearing, the CACME will be represented by the Chair of CACME or delegate (as appropriate). The CACME Secretariat attends the hearing and is available to either party to respond to questions of fact.

Conduct of the Hearing before the Appeals Panel

While strict adherence to the formal rules of evidence shall not be required, irrelevant or unduly repetitious statements may be ruled out of order. The hearing shall be done in the choice of language from the dean, French or English, and shall follow the following general format:

- a. Introductory statement by the Chair of the Appeals Panel.
- b. Review of procedures by CACME Secretariat.
- c. Oral presentation by the CACME Chair, presenting the grounds for CACME action (30 minutes).
- d. Oral presentation by the dean or their representative (one hour).

- e. Follow-up by CACME Chair if requested (10 minutes)
- f. Questions by the Appeals Panel.
- g. Appeals Panel *in camera* session.
- h. Additional questions by the Appeals Panel.
- i. Closing statement by the CACME Chair (10 minutes)
- j. Closing statement by the dean or their representative (10 minutes).
- k. Adjournment.

Decision of the Appeals Panel

At the conclusion of the hearing, the Appeals Panel shall meet in executive session to review the proceedings and to reach a decision. The Appeals Panel shall consider the Appeal Record and the information presented during the hearing.

The Appeals Panel shall:

- determine by the affirmative vote of a majority of those members present whether substantial evidence supports the contention of the dean that the CACME action was:
 - based on a procedural error that materially affected the outcome of the accreditation review process, or
 - imposed in an arbitrary and capricious manner.
- decide on one of the following:
 - Affirm the CACME decision to withdraw or deny accreditation.
 - Reverse or modify the CACME decision.
 - Remand the matter back to the CACME for further consideration identifying specific issues that the accrediting body must address.

If the Appeals Panel determines that there is no reason to alter the CACME decision, it shall affirm the decision. If the Appeals Panel determines that the decision is not supported by the evidence or was not made in substantial accordance with CACME policies and procedures, it shall reverse the decision, modify the decision or remand the decision back to CACME for reconsideration.

The Appeals Panel decision and the underlying reasons shall be submitted to the CACME in a written report. The Appeals process shall normally be completed within ninety (90) calendar days from the date that the dean filed their Notice of Final Appeal. The decision of the Appeals Panel will be filed with the CACME Secretariat within 5 business days of the Appeals hearing. The dean will then be notified, in French or in English of the Appeals Panel's decision by the CACME Secretariat.

THE DECISION OF THE APPEALS PANEL IS FINAL

NOTIFICATION OF ACCREDITATION STATUS

The prior accreditation status of a CPD office shall remain in effect until a final decision is reached by the Appeals Panel or the CACME in the case of a reconsideration.

If the final action is to withdraw accreditation, the dean shall be required to notify all interested parties. The dean shall provide the CACME Secretariat with a copy of such notification promptly after receiving notice of the final action to withdraw accreditation. The CPD office also shall notify others, on request, of its accreditation status.

RESPONSIBILITY FOR THE COST OF APPEALS

All costs related to appeals procedures are covered by the university and/or its affiliated CPD office.

NOTICE AND FILING WITH THE CACME SECRETARIAT

Whenever, under any of the provisions of this Appendix A, there is a requirement for a written notice or request to the CACME Secretariat, said notice or request shall be sent to either cacme@afmc.ca or mailed to the following address:

CACME Secretariat
The Committee on Accreditation of Continuing Medical Education
FLR / Étage 10, 150 Rue Elgin Street Ottawa, Ontario, Canada, K2P 1L4