Frequently Asked Questions

What is accreditation?

Accreditation is a process of quality assurance for Canadian and American medical schools through assessment of the adherence by the institution to an extensive set of standards. Accreditation is also intended to foster institutional and program improvement.

Who administers accreditation?

In the U.S., accreditation is the responsibility of the Liaison Committee on Medical Education (LCME), jointly sponsored by the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA). Canadian faculties of medicine are accredited by the Committee on Accreditation of Canadian Medical Schools (CACMS), a committee of the Association of Faculties of Medicine of Canada (AFMC), with representation from the Canadian Medical Association (CMA). Accreditation decisions of Canadian Medical Schools are agreed to by a member of the Liaison Committee on Medical Education (LCME).

What is the composition of the visiting team?

The team typically comprises five or six members, a chair (typically a current or former dean of a Canadian medical school), a secretary, responsible for visit preparations and logistics and the compilation of the survey report, a representative of LCME, a team member from another Canadian medical school, a medical student from another Canadian university, and sometimes a faculty fellow who is often a faculty member of a Canadian medical school with an approaching accreditation.

What are they looking for?

They are assessing whether the school meets a set of “elements” under 12 “standards” described in the CACMS document Functions and Structure of a Medical School: Standards for Accreditation of Medical Education Programs Leading to the M.D. Degree.

How is it done?

The school to be visited prepares a very extensive set of documents – a Data Collection Instrument (DCI), student surveys, and a Medical School Self-Study (MSS) carried out with wide participation by administrators, faculty, staff, and students. These documents are submitted to CACMS about three months prior to the visit, and are thoroughly studied by the accreditation team. The ensuing visit usually commences with a Sunday evening meeting with the dean, followed by two and one-half days of meetings with faculty, students, and administrators. The accreditation team delivers an oral report to the dean before departing, outlining their findings of satisfactory, unsatisfactory or satisfactory with monitoring with the elements. A draft report is submitted to the CACMS and to the dean for checking of factual accuracy, and a final report is submitted to the CACMS. CACMS and LCME committees consider the report and issue the final decision to the medical school. This may be
accompanied by a request for progress reports outlining actions taken to correct any perceived deficiencies.

**Are there any benefits?**

The principal benefit is the encouragement to medical schools to assess seriously and in detail the conditions and processes associated with their undergraduate medical program. There are probably few organizations that will not benefit from such a review on a cycle of eight years. While it is not the role of the accreditation team to suggest changes, it is usually instructive to receive the assessment of a group of experienced reviewers.

**How much work is it?**

A great deal! It is likely that well over 100 faculty, administrative staff and students will be significantly involved in preparation for the accreditation visit. The documentation that must be submitted is substantial, and represents a huge effort in time.

**What are the steps, and when do they happen?**

- Construction of a very extensive database according to the CACMS format called the Data Collection Instrument (DCI) must be completed; this includes much numerical data on students, faculty, finances, resources, and descriptions of all courses and academic processes.

- Formation of a Medical School Self-Study Task Force (MSSTF), and several MSS subcommittees takes place 1.5 years prior to the accreditation visit.

- A survey of all undergraduate medical students is carried out by the student body.

- Sub-committees consider the database material, discuss issues within their areas of responsibility and provide a report to the MSSTF.

- A separate student report is written, based on the student survey and analysis by the student committee.

- The MSS report is prepared.

- The database, student report, MSS summary and appendices are submitted to CACMS and the accreditation team three months prior to the visit.

- The accreditation team of five or six members conducts the assessment over a three day period and gives a verbal exit report to the dean and university president.

- The full written report should be submitted by the accreditation team within a few months.

- LCME and CACMS consider the report and notify the Faculty regarding its accreditation status.
Who is involved?

There is extensive involvement. Many faculty and administrators currently involved in the curriculum will be asked to complete parts of the database. Each sub-committee will have about ten members, and these will represent several different areas. Many students and faculty will be asked to meet with the accreditation team, and they should be well aware of the process and the self-study.

Why should I be involved?

Are you interested in learning more about the policies and operations of your medical program? Do you feel there is room for improvement in the way we do things? Would you like the opportunity to influence the directions of our Faculty? Would you like to meet and interact with others who are dedicated to improving our programs?

Is the focus only on the undergraduate medical education program (MD Program)?

The principal focus is on the MD Program, but the study includes many aspects that are only partially related to this. Research, faculty workloads, resources of all kinds (human, financial, library, relaxation areas), administrative organization, and contributions to teaching by graduate students and residents are all considered.

What are the consequences of doing poorly on accreditation?

A school is very unlikely to lose accreditation following a visit. It may be put on probation, and this decision has been given to several Canadian schools recently. A school on probation must send written notification to all its students, and applicants to its program, that it is on probation. A probationary status will undoubtedly influence the reputation of the school, and could affect factors depending on this, such as endowment contributions and national rankings.

Where can I get more information about accreditation?

CACMS maintains a very informative website. In the publications section, very detailed descriptions of all aspects of accreditation may be downloaded. At the University of Alberta, Please see the MD Accreditation webpages at https://www.ualberta.ca/medicine/programs/md/accreditation for more details.

What were the results of our last accreditation visit?

After the 2006 full accreditation the University of Alberta was non-compliant with 12 standards. This was followed by 2 subsequent limited site visits by the LCME/CACMS. The outcome of the late full accreditation in 2014 was very favourable. The MD Program is currently compliant with all accreditation standards.
What changes have occurred regarding issues raised during the last accreditation?

-Dashboards to track delivery of midpoint feedback, return of final grades and observation of history taking and physical examination

- New program level objectives for the MD Program, linked to course/clerkship objectives and assessments

- New Assistant Dean Diversity, to address diversity of faculty, staff and students

- Curricular search tool in MedSIS

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