STANDARD C1: ADMINISTRATIVE STRUCTURE

There must be an appropriate administrative structure for each AFC program.

Interpretation

1. There must be an AFC director who has authority and accountability for the operation of the AFC program.
   1.1. The AFC director must have demonstrated specialty expertise in the area of focused competence.
   1.2. The AFC director is accountable to the Postgraduate Dean and the Head of the Department (or equivalent) sponsoring the AFC program.
   1.3. The AFC director must be assured of sufficient time and support to administer the program.

2. There must be an AFC program committee, to assist the AFC director in the planning, organization, and supervision of the AFC program.
   2.1. The members of this committee must include at least one AFC trainee chosen by the trainees in the program.

3. The AFC director, assisted by the AFC committee, must administer and maintain an educational environment conducive to educating AFC trainees in the area of focused competence.

   The AFC director and committee must:

   3.1. Oversee and ensure the quality of didactic and clinical education in all sites that participate in the AFC program.
   3.2. Approve the selection and teaching assignments of program faculty as appropriate.
   3.3. Select candidates for admission to the program.
   3.4. Develop and monitor an evaluation process that provides documented, regular feedback for AFC trainees and includes an appeal mechanism.
   3.5. Ensure compliance with relevant University policies.
   3.6. Evaluate, on a regular basis, the overall educational environment of the AFC program, and each of its components.
   3.7. Assess, on a regular basis, the teachers participating in the AFC program.

4. There must be an environment of inquiry and scholarship, including an active research component, in the department(s) or division(s) sponsoring the AFC program.
STANDARD C2: RESOURCES

There must be sufficient resources including teaching faculty, the number and variety of patients, physical and technical resources, as well as the supporting facilities and services necessary to provide the opportunity for all trainees in the AFC program to achieve the educational objectives and receive full training as defined by the AFC requirements.

Interpretation

1. There must be a sufficient number of qualified staff to teach, supervise and assess the AFC trainees.

2. There must be a sufficient number and variety of patients or laboratory specimens to meet the educational needs of the AFC trainees.

3. Clinical services and other resources used for teaching and learning must be organized to achieve their educational objectives.

3.1. Learning environments must include experiences that facilitate the acquisition of the competencies in the Competency Training Requirements of the area of focused competence.

4. The physical and technical resources available to the AFC program must be adequate to meet the needs of the AFC program as outlined in the AFC Competency Training Requirements.

5. Supporting facilities and services must be available to allow each AFC trainee opportunity to meet the AFC requirements as outlined in the AFC-specific Competency Training Requirements document.

STANDARD C3: EDUCATIONAL PROGRAM

There must be a defined educational program that includes clinical, academic and scholarly content relevant to the AFC discipline. The program must be designed to ensure that each AFC trainee is able to achieve all the competencies as outlined in the AFC-specific Competency Training Requirements.

Interpretation

1. The goals and objectives of the overall AFC program must be written using the CanMEDS framework and must include all of the AFC-specific Competency Training Requirements.

2. There must be specific educational objectives for each educational experience based on the relevant CanMEDS Roles.

2.1. The educational objectives must be designed to permit attainment of competence and be reflected in the planning and organization of the educational experience.
2.2. At the beginning of each educational experience, individual learning strategies to meet the objectives must be jointly developed by the AFC trainee and the supervising faculty.

3. The AFC program must provide all the components of training outlined in the AFC Competency Training Requirements.

4. There must be an academic program that provides educational opportunity to demonstrate application of the CanMEDS competencies relevant to the area of focused competence. This must be sufficient to permit each AFC trainee to acquire the appropriate expertise and skills to function as a practising physician in the area of focused competence.

5. The AFC program must be organized such that trainees are both appropriately supervised and given appropriate responsibility according to their level of training, ability/competence, and experience.

6. Teaching and learning must take place in environments which promote trainee safety and freedom from intimidation, harassment and abuse.

7. Service demands must not interfere with ability of the AFC trainee to follow the academic program.

STANDARD C4: COMPETENCY BASED ASSESSMENT OF TRAINEE PERFORMANCE

There must be mechanisms in place to ensure the systematic collection and interpretation of assessment data on each trainee enrolled in the AFC program.

Interpretation

1. The in-training assessment system must be based on the goals and objectives of the AFC program and must clearly specify the methods by which AFC trainees will be assessed and the level of performance expected of trainees at each stage in the achievement of these objectives.

   1.1. There must be regular, timely, documented feedback on the progress of the AFC trainee.

   1.2. Feedback sessions to AFC trainees must include face-to-face meetings as an essential part of evaluation.

2. Assessment must collect evidence of achievement of competencies as set out in the AFC Competency Training Requirements and the AFC Competency Portfolio for the Diploma.

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