ROYAL COLLEGE
OF PHYSICIANS AND SURGEONS OF CANADA
COLLÈGE ROYAL
DES MÉDECINS ET CHIRURGIENS DU CANADA

Policy on Appointing a Program Director of a Royal College-accredited Program

1. Objective & Scope

This policy clarifies acceptable qualifications for directors of Royal College-accredited residency programs, and the responsibilities of institutions and the Royal College with regard to program directors and their appointments. The policy is applicable to institutions with specialty and subspecialty residency programs[1] accredited by the Royal College in Canada and internationally.

The principles on which this policy is based are:

1.1 *Program director qualifications support high-quality residency education:* The Royal College standards ensure postgraduate medical education (PGME) programs provide high-quality education, preparing residents to meet the health care needs of their patient populations during and upon completion of training. Program director ability is recognized as a key ingredient in a successful residency program and in the competence of program graduates. As such, appointed program directors (PDs) must have appropriate qualifications to: design, coordinate and deliver training that meets the conjoint accreditation standards of the Collège des médecins du Québec (CMQ), College of Family Physicians of Canada and the Royal College; prepare residents for success at the Royal College certification examination; and, facilitate graduate competence for safe independent practice. Although clinical competence in the scope of the discipline is required, program directors must also demonstrate familiarity with the CanMEDS Framework, effective leadership skills, the ability to effectively manage resources, and meet all requirements of the relevant accreditation standards. Furthermore, maintaining contemporary understanding of medical education trends, as well as the evolution of the relevant clinical discipline to meet societal needs, is also required to deliver high-quality PGME.

1.2 *Ensuring program directors are appropriately qualified is a shared responsibility:* The appointment of appropriately-qualified PDs is a shared responsibility between the institution and the Royal College. As stated in the standards of accreditation for institutions, the postgraduate dean / senior education officer and relevant academic head of the discipline are jointly responsible and have authority for the recruitment and selection of PDs who meet the required credentials, and for their performance management. The Royal College, and

[1] This policy is not applicable to the special programs Clinician Investigator Program and Surgical Foundations, or to Areas of Focused Competence (AFCs).

conjointly with the CMQ for programs in Québec, is responsible for confirming the appointment and ensuring all relevant standards are met.

2. Definitions and Acronyms

APOR	Action Plan Outcomes Report
CMQ	Collège des médecins du Québec
CPD	Continuing Professional Development
ESU	Educational Standards Unit
Interim program director	An acting program director for a temporary period until a new PD is appointed
OSA	Royal College Office of Standards and Assessment
PD	Program director
PGME	Postgraduate medical education
Royal College	Royal College of Physicians and Surgeons of Canada

3. Policy

3.1 Directors of Canadian and international specialty and subspecialty residency programs accredited by the Royal College must:

3.1.1 Be a specialist certified[2] by a recognized body[3] in the same discipline as the program of which they are the director.

3.1.2 Maintain active engagement in a Continuing Professional Development program acceptable to the Royal College for the duration of their program director position.

3.2 Upon appointment to the role for the first time, all directors of Canadian and international specialty and subspecialty residency programs accredited by the Royal College must undertake:

- Accepted Royal College or local program director training[4] within 12 months of their appointment to the position of program director; and/or
- One-on-one coaching with a Royal College Fellow / Subspecialist Affiliate who has current or recent experience as a program director of a Royal College-accredited program. Coaching must commence within three months of the appointment to the position of program director, and continue for at least one year.

3.2.1 Program directors who are not certified by the Royal College must undertake both training and coaching with a Royal College Fellow / Subspecialist Affiliate who has current or recent experience as a program director of a Royal College-accredited program.

[2] Certification excludes Certificates of Added Competence, non-accredited clinical fellowship training, and special interests.

[3] A recognized body is a legal entity with acknowledged authority to verify that a physician has met all the requirements necessary for certification in the relevant discipline. Examples include the Royal College of Physicians and Surgeons of Canada, American Board of Medical Specialties (member boards), Collège des médecins du Québec (CMQ), Royal College of Surgeons of England, France's Conseil national de l'Ordre des Médecins, Chile's National Autonomous Corporation of Medical Specialties Certification (CONACEM).

[4] Acceptable Royal College training includes, for example, the New Program Director Workshop (typically run at the International Conference on Residency Education (ICRE)), and the online Program Director Academy. Similarly comprehensive training, developed by a local faculty of medicine will also be considered acceptable.

3.2.2 There are no fees associated with training provided by the Royal College. Travel and other expenses associated with the above requirements are the responsibility of the program director and/or their institution.

3.3 There must be a single designated program director who is accountable for the residency program. Co-director models and/or the appointment of associate or assistant program directors are acceptable; however, one single program director must be identified as being responsible and accountable for the residency program and as the key interlocutor with the Royal College.

3.4 Program directors should not have a real or perceived conflict of interest with the program of which they are the director due to other roles they may play within the institution, such as the chair / head of the academic or clinical department or division. In such cases where there is a real or perceived conflict of interest, that conflict must be managed appropriately, in accordance with the institution's guidelines for managing conflicts of interest.

3.5 Programs must have continuous oversight by a designated program director. Should the program director position become vacant at any time, the position may be filled on an interim basis according to section 3.6 below.

3.6 For a maximum of 12 consecutive months, an interim program director who does not meet the qualifications outlined above in section 3.1 may be appointed[5]. After the 12-month interim directorship, the program director position should be filled by someone who meets the above requirements for at least three years before another interim program director will be accepted by the Royal College[6].

3.7 For a limited time after a new discipline has been recognized, directors of programs in that discipline are not expected to be certified in the discipline.

3.7.1 The timeline will be determined by the Royal College Specialty Committee of the new discipline, and will be based, in part, on the expected length of time for an appropriate number of specialists in the discipline to become certified such that a reasonable pool of potential program directors is established.

3.7.2 The Royal College Specialty Committee of the new discipline will determine the acceptable qualifications of program directors in that discipline and may review and revise those qualifications by informing the Office of Standards and Assessment. These qualifications will apply until such time that a PD who meets the requirements in section 3.1 above would be required, typically not to exceed 10 years from the opening of certification routes (i.e., Royal College exams and/or Practice Eligibility Routes).

3.7.3 The timeline and acceptable qualifications in 3.7.1 and 3.7.2 will be determined at the outset of the discipline's founding, and overseen by the Office of Standards and Assessment.

[5] In exceptional circumstances, such as during the period of recruiting a PD, it is preferable that the PD position be filled on an interim basis by someone who meets the criteria in section 3.1 but who may have a conflict of interest (as in section 3.4), rather than the position being filled by someone without a conflict of interest but who does not meet the criteria in section 3.1.

[6] Exceptions will be considered on a case-by-case basis upon request to the Royal College and, for programs in Québec, the CMQ and the Royal College.

3.8 The appointment of a program director who does not meet the requirements outlined in sections 3.1 and 3.3–3.7 above has implications for the program's accreditation status. Additionally, responsibility for training and faculty development of program directors, as outlined in section 3.2 above, rests with the institution and will be reviewed during the regular cycle of accreditation for each institution. The appended procedures specify the process for verifying acceptable qualifications of program directors and implications for accreditation status.

3.9 This policy does not apply to program directors currently in the position when the policy comes into effect. The policy will be applied when program directors are newly appointed to the position with a notification to the Royal College.

4. Roles and Responsibilities with regard to program directors:

4.1 Institutions are responsible for:

- 4.1.1 Ensuring programs are overseen by appropriately-qualified program directors, and, through the postgraduate dean / senior education officer in collaboration with the academic lead of the discipline, are responsible for, and have authority for the recruitment and selection of program directors with acceptable qualifications.
- 4.1.2 Ensuring programs have continuous oversight with no gaps in the program director position, and that the requirements in section 3.6 above are followed when program directors are appointed on an interim basis.
- 4.1.3 Providing information to the Royal College about the credentials of each program director and for informing the Royal College within two weeks when a new program director is appointed.
- 4.1.4 Ensuring the information submitted for institution and program accreditation-related activities is accurate and complete.
- 4.1.5 Supporting newly-appointed program directors within their institution to undertake the training and/or coaching required in section 3.2 above.
- 4.1.6 Supporting program directors within their institution to participate in the relevant Royal College Specialty Committee.

4.2 The Royal College, through the Office of Standards and Assessment (OSA), is responsible for:

- 4.2.1 Co-appointing program directors through the validation of the qualifications of program directors against the requirements. This occurs when an institution informs the Royal College of the appointment of a new program director. For programs in Québec, this is undertaken conjointly with the CMQ.
  - 4.2.1.1 OSA will verify completion of PD training and/or coaching, and the acceptability of CPD programs.
  - 4.2.1.2 OSA will confirm the appointment of PDs whose qualifications meet the requirements outlined in this policy.
  - 4.2.1.3 In the case of PDs of programs in new disciplines (3.7 above), OSA will approve and oversee the timeline and interim qualifications.
- 4.2.2 Informing the institution if (a) program director(s) does not meet the acceptable qualification requirements, and the required follow-up and implications according to the appended procedures.
- 4.2.3 As part of the accreditation process:

4.2.3.1 Reviewing the institution's process for the appointment and ongoing assessment of all residency program directors (for programs in Québec, this is undertaken conjointly with the CMQ); and

4.2.3.2 Tracking program director participation in Specialty Committee meetings.

4.2.4 Providing program directors with access to CanAMS.

4.2.5 Listing the names and contact information of program directors on the Royal College webpage of accredited programs.

4.2.6 Issuing invitations to program directors to the New Program Directors Workshop and/or other professional development opportunities for program directors organized by the Royal College, as appropriate.

4.2.7 Issuing invitations to program directors to participate in the National Advisory Committee, as appropriate.

4.3 Specialty Committees are responsible for:

4.3.1 Determining the maximum length of time a program in a newly recognized discipline may have a PD who is not certified in the discipline, not to exceed 10 years.

4.3.2 Determining the acceptable qualifications of PDs of programs in newly recognized discipline until such time that a PD with certification in that discipline would be required.

4.3.3 Providing a forum for all program directors to meaningfully participate in the dialogue about the discipline.

4.4 Program directors are responsible for:

4.4.1 Completing the program director training and/or coaching, as required.

4.4.2 Fulfilling the responsibilities of a program director as set out in the general and relevant speciality-specific standards of accreditation, including, but not limited to:

4.4.2.1 Ensuring the design and delivery of accredited programs align with the general and specialty-specific standards of accreditation;

4.4.2.2 Overseeing assessment decisions regarding resident progress through the program, including identification of residents who are not progressing as expected, residents who are examination eligible, and residents who have met the requirements for certification;

4.4.2.3 Providing the required summative documents for exam eligibility and for each resident who has successfully completed the residency program; and

4.4.2.4 Participating in the relevant discipline Specialty Committee, according to the role description for a non-voting member.

5. References

Residency Accreditation Procedure: Missed Deadlines for Royal College Program Reviews

6. Contacts

For information or clarification, please contact:

Director, Standards and Accreditation
Office of Standards and Assessment
The Royal College of Physicians and Surgeons of Canada
accreditation@royalcollege.ca

7. Appendices

Procedures and implications of PDs without acceptable qualifications

8. Policy record

Policy number	
Most recent resolution:	August 2023
Previous resolution(s):	December 2020
Approved by:	Committee on Specialty Education
Approval Date:	August 16, 2023
Approval path:	Committee on Specialty Education
Effective date:	August 16, 2023
Date of next review:	
Royal College Office:	Office of Standards and Assessment
Version status:	Original presented for discussion
Keywords:	policy, residency, program director
Information security classification	

Appendix: Procedures and implications of program directors without acceptable qualifications[7]

1 Validation of program director qualifications

1.1 Upon receipt of notice of appointment of a new program director the Educational Standards Unit (ESU) will validate that the newly-appointed PD is certified in the relevant discipline and registered in a Continuing Professional Development program. The process and implications noted below are applied if the newly-appointed PD does not meet the requirements specified in section 3 of the policy (with the exception of policy section 3.2 which is detailed in 1.2 below).

1.2 As part of the regular accreditation review process of each accredited institution, ESU will validate that newly-appointed PDs have undertaken the required training and/or coaching specified in section 3.2 of the policy. While this information is considered in the accreditation review, the process and implications noted below are not applicable to the requirements specified in section 3.2 of the policy.

1.3 ESU will confirm via a letter to the postgraduate dean / senior education officer if a program director(s) does not meet the acceptable qualifications, the deadline by which an appropriately qualified PD must be in place (in accordance with section 3.6 above), and options to fulfill the acceptable qualifications.

1.4 The institution must provide the ESU with notice of appointment of a new PD, or evidence that that the PD meets the acceptable qualifications defined in section 3.1 or section 3.7 of the policy, as applicable, by the specified deadline.

2 Missed deadline / continuation of program director without acceptable qualifications

2.1 If the Royal College does not receive notice that the PD position is filled by someone who meets the acceptable qualifications one week prior to the deadline, the ESU will follow-up with the postgraduate dean / senior education officer with a reminder of the upcoming deadline and request for an update on the status of the PD position.

2.2 If the Royal College does not receive notice that the PD position is filled by someone who meets the acceptable qualifications by the deadline, within two business days, the ESU will follow-up with the postgraduate dean / senior education officer (copying the Dean of Medicine (or equivalent)), requesting submission by an extended due date of one week from the date of the original deadline.

2.3 If the Royal College does not receive notice that the PD position is filled by someone who meets the acceptable qualifications by the extended deadline, within two business days, the ESU will send correspondence to the postgraduate dean / senior education officer, copying the Dean of Medicine (or equivalent) of the institution, on behalf of the OSA Director of Standards and Accreditation, with the final deadline (two weeks from the original deadline). This letter will also outline the implications for the program's accreditation status as below.

2.3.1 This information will also be noted for the next institution accreditation activity (e.g., onsite review, submission of APOR, data integration), as evidence towards the fulfillment of the institution indicator regarding the institution's responsibility to ensure program directors meet the required credentials.

3 Implications for programs' accreditation status

3.1 If the Royal College does not receive notice that the PD position is filled by someone who meets the acceptable qualifications by the final extended deadline (in 2.3 above), the program's

[7] For programs in Québec, all accreditation-related communications are conjoint with CMQ.

accreditation status will be changed immediately. This change will be brought to the Residency Accreditation Committee (for Canadian programs) / International (residency) Program Review and Accreditation Committee (for international programs), for final ratification of the change in the program's accreditation status.

3.1.1 In cases where the program's pre-existing accreditation status was "Accredited program"[8], the program's accreditation status will change to "Accredited program on notice of intent to withdraw accreditation" with a follow-up by external review. The external review will be arranged by the Royal College at the institution's expense. The program will be formally notified of the due date of the external review which will be conducted by two external surveyors within six months of the final missed deadline date.

3.1.2 In cases where the program's pre-existing accreditation status was "Accredited program on notice of intent to withdraw accreditation", the program's accreditation will be withdrawn.

Summary table of decisions and follow-ups for missed deadline

Accreditation status follow-up	Accreditation status change	Follow-up (to be ratified by Res-AC / IPR-AC at its next meeting)
Regular review	Notice of intent to withdraw accreditation	External review at the institution's expense within six months of the missed deadline
Action Plan Outcomes Report (APOR)	Notice of intent to withdraw accreditation	External review at the institution's expense within six months of the missed deadline
External review	Notice of intent to withdraw accreditation	External review at the institution's expense within six months of the missed deadline
Notice of intent to withdraw accreditation	Withdrawal of accreditation	New application

[8] This status includes all possible associated follow-ups: regular review, APOR, or external review.