

Quality Assurance Policy

Supersedes: none

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Effective Date: March 7, 2022

Section 1: Office Procedures for Developing Rigorous Programs

1. All programs begin with a needs assessment
 - Needs Assessments can include literature review, stakeholder consultation, aggregated and de-identified referral and health metadata, trending health issues based in evidence, and other information aggregated from trustworthy sources.
 - The strongest needs assessments triangulate evidence from multiple sources considering perceived and unperceived needs and are interpreted by an interprofessional appraisal team (typically a robust, multi-discipline scientific planning committee with actively mitigated biases)
2. Planning committees are made up of members of the healthcare community that represent the intended audience
 - All the major groups of attendees should be involved or consulted by the program planning committee
 - This commonly includes Family Medicine Specialists, Nurses, Nurse Practitioners, Royal College Specialists and other health professionals whenever possible alongside educationalists and program coordinator staff members.
3. No industry personnel are on the planning committees nor are they permitted to have any oversight over the educational process
 - Their grants and support are only solicited after the education topic selection is set and the learning design complete

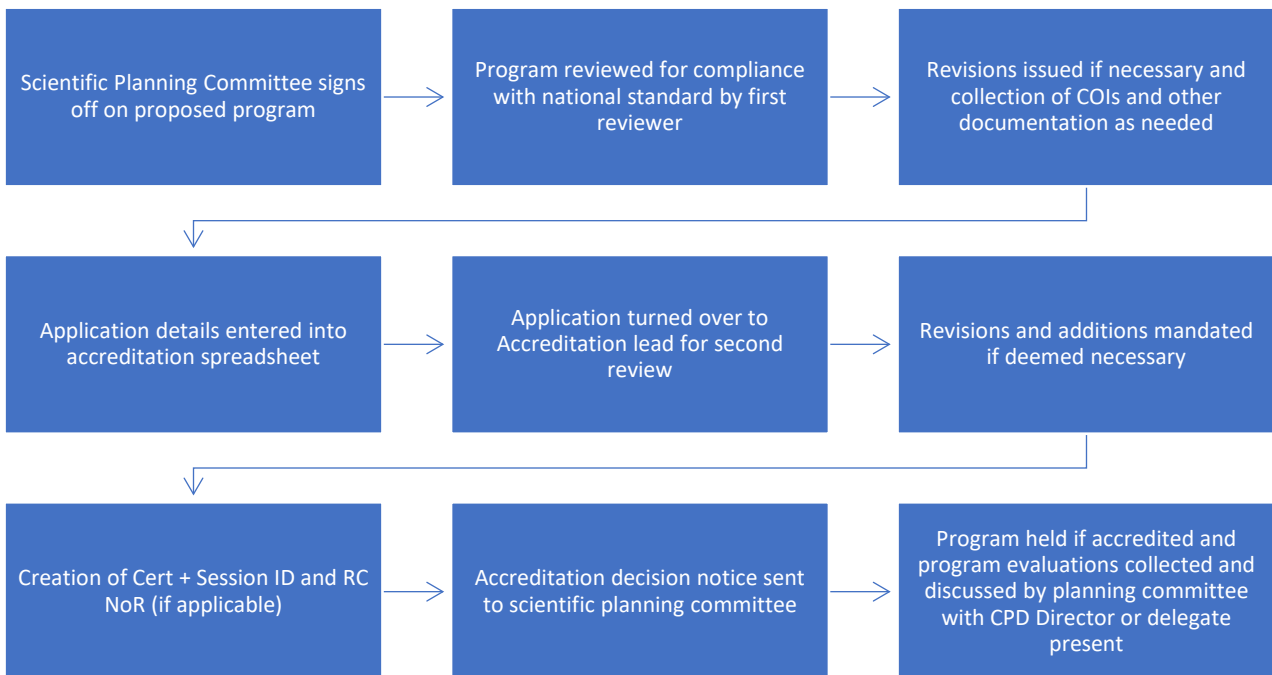


- Grants must be in the form of an unconditional educational grant that is declared in writing during program registration, in writing on the chair's slides during the program and the marketing materials, and read verbatim verbally during the opening remarks
4. Presenters, scientific planning committee members, and support staff are required to disclose any/all relationships with industry and not for profit partners in writing and verbally at their earliest opportunity to the committee and included on the slides at the program as well as read aloud
 - The slide should be detailed enough and displayed long enough that a reader has ample opportunity to read, process, and digest the information
 5. In compliance with the national standard a question asking "Did you detect any bias in this program" with at minimum a yes or no checkbox, and preferably a likert scale with a text entry option is included in the post-program evaluation.

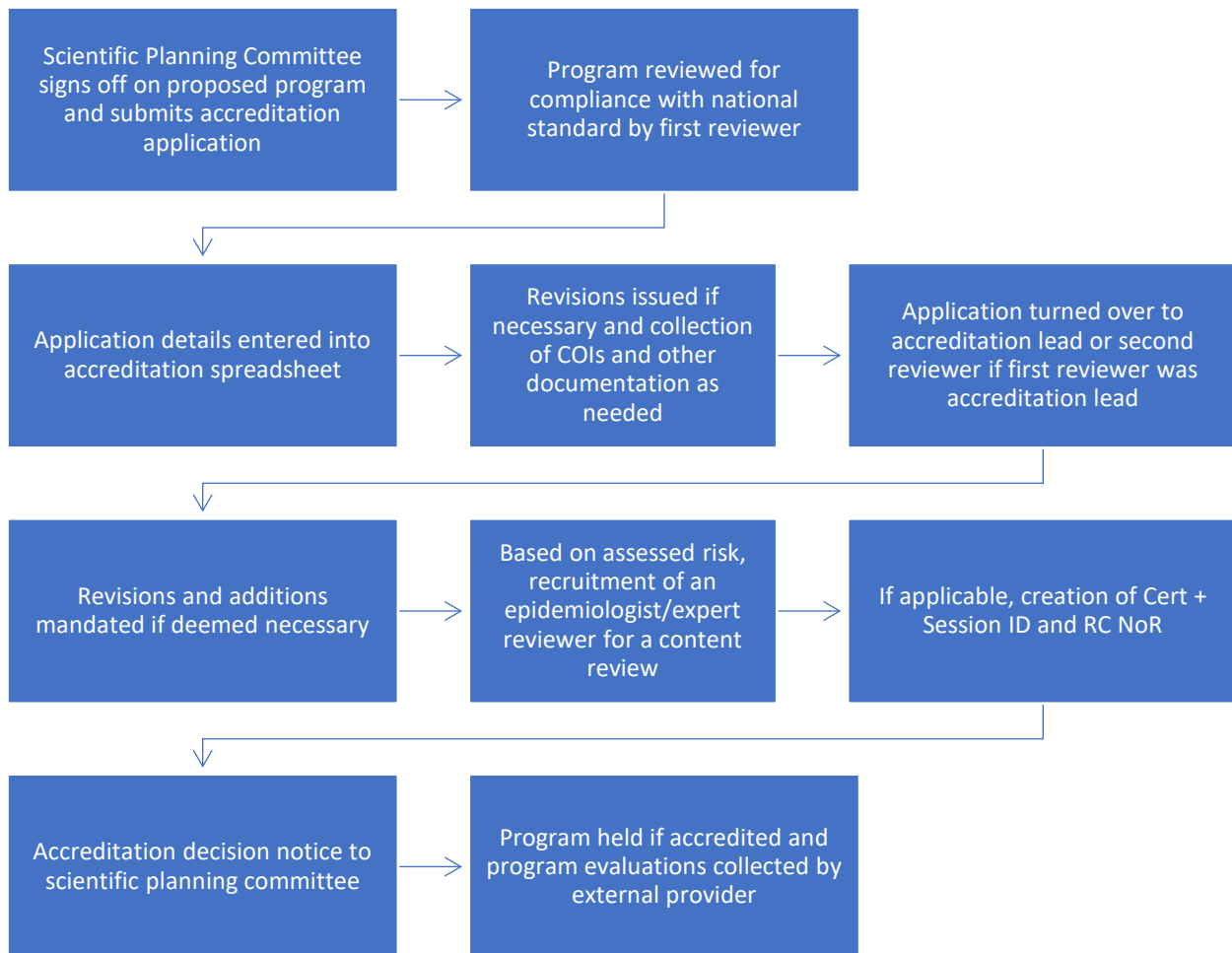
Section 2: Accreditation Audit Process for Internal and External Programs

- Every tenth accreditation file or program deemed high-risk by any stakeholder is automatically reviewed by a second educationalist-accreditor

For Internal Programs

**For CPD/Faculty Development External Programs or Co-developed programs**

- Every tenth accreditation file or program deemed high-risk by any stakeholder is automatically reviewed by a second educationalist-accreditor



Draft Date: July 24th, 2021

Approved by Faculty Board Executive: March 7, 2022