

Registration

**ACCREDITATION STANDARDS**

Associate Physician  
Program – Ongoing  
Accreditation

## Introduction

The purpose of this standard is to articulate the accreditation requirements for the associate physician program. Health authorities that employ physicians in the associate class of registration and licensure must be accredited in accordance with this standard. Each unique program area within a health authority requires separate accreditation.

### Objectives of the accreditation process

The College of Physicians and Surgeons of British Columbia (the College) evaluates and accredits all associate physician programs in British Columbia and has the following major objectives:

- a. to ensure the quality of associate physician programs is consistent with the College requirements for such programs;
- b. to provide a means for objective assessment of associate physician programs; and
- c. to provide guidance to institutions in the development and implementation of associate physician programs.

### College responsibilities

The College is responsible for oversight of the process of the accreditation of associate physician programs. In this regard the College

- a. determines the requirements and process relating to the accreditation of associate physician programs;
- b. determines the accreditation status of each associate physician program;
- c. arranges periodic reviews of associate physician programs through required documentation and on-site surveys;
- d. reviews the findings of documentation and surveys;
- e. reports at least annually to the College Board on its accreditation activities and brings forward, as necessary, any recommendations for changes to accreditation policies and procedures; and
- f. will maintain a current list of all accredited associate physician programs.

### The accreditation process

The accreditation process is based upon the provision of required documentation and periodic on-site assessments to provide the College with the information necessary to inform its decision about the accreditation status of an associate physician program.

Upon completion of a satisfactory accreditation assessment, the College will provide formal accreditation via written communication.

Where outstanding requirements are identified in the accreditation assessment, the health authority must address the outstanding requirements by a deadline determined by the College. If the outstanding requirements are not addressed by the deadline, the program will not be able to continue to employ the associate physician(s) for that program.

Upon receiving ongoing accreditation, the health authority may continue employ associate physicians.

### **Standard format**

The accreditation standard consists of three components:

1. Standard - The subject or topic of the standard. A standard is identified by the first level whole number ending in ".0" such as 1.0, 2.0, etc.
2. Criterion - Activities or components of the standard that once implemented lead to the overall attainment of the standard. A criterion is identified by the first level number indicating the standard to which it is associated, and a second level number such as X.1, X.2, X.3, etc.
3. Criterion descriptors - Specific actions for each criterion. Criterion descriptors are identified by the first level standards number, the second level criterion number and a third level number such as X.Y.1, X.Y.2, X.Y.3, etc. An **M** indicates that the criterion descriptor is mandatory and therefore must be met. In addition, some criterion descriptors include guidance for how to meet the criterion.

No.	Description	
<b>APP1.0</b>	<b>LEADERSHIP AND OVERSIGHT</b>	
<b>APP1.1</b>	<b>Institutional oversight is required for associate physician programs.</b>	
APP1.1.1	<b>M</b>	There is a health authority oversight structure.
APP1.1.2	<b>M</b>	There is a reporting structure.
APP1.1.3	<b>M</b>	There is a supervision structure.
APP1.1.4	<b>M</b>	There are services and/or duties that will be assigned to the associate physician(s) in the program.
APP1.1.5	<b>M</b>	There is a feedback and evaluation process from clinical supervisors, co-workers, nursing and allied professional staff.
APP1.1.6	<b>M</b>	There is training for the associate physician for the procedures required to perform their role.
APP1.1.7	<b>M</b>	There is a health authority liaison with the College for evaluations and reports on the performance of an associate physician.
APP1.1.8	<b>M</b>	There is a health authority contact for the College accreditation process/program.
<b>APP2.0</b>	<b>OPPORTUNITIES, EVALUATIONS, ACCOUNTABILITY RECORDS</b>	
<b>APP2.1</b>	<b>Administrative oversight is required for associate physician programs.</b>	
APP2.1.1	<b>M</b>	There is a description of each proposed associate physician position which includes roles and responsibilities.
APP2.1.2	<b>M</b>	There is evidence that associate physician(s) have been provide with job description for their role.
APP2.1.3	<b>M</b>	There are guidelines for sign-off on the associate physician having the competencies to perform the clinical duties set out in the associate physician's job description, including any procedures that may be assigned.
APP2.1.4	<b>M</b>	There is evidence of sign-off for the associate physician competencies to perform the clinical duties set out in the associate physician job description.
APP2.1.5	<b>M</b>	There is evidence of new procedures and the training that was provided to associate physician to add those procedures to their practice.
APP2.1.6	<b>M</b>	There is a process for procedures not specified in the associate physician's approved job description that will require evidence of training, demonstration, and maintenance of competence by the clinical program and approval by the health authority.
APP2.1.7	<b>M</b>	There is evidence of training, demonstration, and maintenance of competence by the clinical program and approval by the health authority for procedures not specified in the associate physician's approved job description.

No.	Description
APP2.1.8	<b>M</b> There is an evaluation process for ongoing six-month, 12-month and subsequent annual evaluations that include: basic clinical communication skills, communication skills, ability and willingness to function as a member of the clinical team, special knowledge and skills applicable to the intended clinical placement, clinical decision-making and the appropriate use of clinical and diagnostic resources, clinical documentation, procedures required to function effectively within the team environment, and other skills as needed.
APP2.1.9	<b>M</b> An evaluation review occurred with the associate physician(s).
APP2.1.10	<b>M</b> There is evidence that an evaluation was provided to the associate physician(s).
APP2.1.11	<b>M</b> There is a process for associate physician engagement in continuing professional development. <i>Guidance: 50 hours per year, 25 hours of which must be accredited. Minimum 50% must be in associate physician's scope of practice for their position with the health authority.</i>
APP2.1.12	<b>M</b> There is evidence of continuing professional development that meets the policy requirements.
APP2.1.13	<b>M</b> There is a process for tracking continuing professional development.
APP2.1.14	<b>M</b> There is evidence that continuing professional development has been tracked.
APP2.1.15	<b>M</b> There is evidence of satisfaction surveys that have been provided to associate physicians.
APP2.1.16	<b>M</b> There is evidence of follow up on data obtained from the satisfaction surveys.
APP2.1.17	<b>M</b> There is a process for storage of documentation related to associate physician. <i>Guidance: Continuing professional development, satisfaction surveys, etc.</i>