**TEMPLATE INSTRUCTIONS (Please remove these instructions before publishing)**

YELLOW HIGHLIGHTS: please update with your program’s information and remove the highlights.

RED TEXT: Notes for the program only. Meant to provide context or instruction. Please remove anything in red text prior to publishing.

BLUE TEXT: Reference to applicable AFC general accreditation standards, for your information. Please remove anything in blue text prior to publishing.

*Note that this template can be adapted to suit the needs of the program, as long as the below items are included in the terms of reference at a minimum.*

**PROGRAM NAME**

**Area of Focused Competence (AFC) Committee**

**TERMS OF REFERENCE**

**Approved:** DATE

**Date of next scheduled review:** YEAR (review at least once per accreditation cycle)

**Standard 1.2.2.1:** There are clearly written terms of reference that address the composition, mandate, roles and responsibilities of each member, accountability structures, decision-making processes, appropriate lines of communication and meeting procedures.

**Standard 1.2.2.2:** The terms of reference are reviewed on a regular basis, at least once per accreditation cycle.

**PREAMBLE**

The AFC Committee is responsible for the overall operations of the PROGRAM NAME AFC training program. This includes the overall objective of providing the environment, role modelling, resources, and uniform experience whereby each trainee will have access to the educational experience sufficient to successfully complete their portfolio requirements.

The purpose of the AFC Committee is to assist the AFC Director in planning, organizing, evaluating, supervising, and advancing the AFC program.

**POLICY REFERENCES**

* [General Standards of Accreditation for Area of Focused Competence Programs](https://www.royalcollege.ca/rcsite/documents/ibd/afc-general-standards-e.pdf) (link to standards is hyperlinked)
* PROGRAM SPECIFIC Standards of Accreditation (hyperlink)
* COMPETENCY TRAINING REQUIREMENTS (hyperlink)
* COMPETENCY PORTFOLIO FOR EDUCATORS (hyperlink)

**MEMBERSHIP**

* **1.2.1.1:** Major academic and clinical components and relevant learning sites are represented on the AFC program committee.
* **1.2.1.2:** There is an effective, fair, and transparent process for trainees to select their representatives on the AFC program committee(s).
* AFC Director (Committee Chair) (voting)
* Site Educational Coordinators: (voting)
  + LIST AS REQUIRED (if applicable - not all AFC programs will have multiple learning sites)
* Trainee Member(s): (voting)
  + Outline trainee selection process (I.e. if more than one trainee per year, both will sit on the Committee OR they will decide amongst themselves who will act as the AFC Committee representative, etc.)
* Wellness/Safety Coordinator (voting)
  + **1.2.1.3:** The AFC program committee includes appropriate input from individuals involved in trainee wellness and safety program/plans.
* Department Chair (Ex Officio)
* Program Administrator (Ex Officio)
* Any other program faculty or members as applicable

Committee members will be reviewed every X years for faculty. Trainees will sit on the AFC Committee for the duration of their training.

**MEETINGS**

**Standard 1.2.2.4:** The meeting frequency is sufficient for the committee to fulfill its mandate.

**Standard 1.2.3.2:** Actions and decisions are communicated in a timely manner to the AFC program’s trainees, teachers, and administrative personnel, and with the academic lead(s) of the discipline, or equivalent, as appropriate.

**Standard 1.2.3.5:** There are effective mechanisms to collaborate with the division/department, other programs, and institution.

The AFC Committee will meet X times per year. The agenda and minutes will be circulated to committee members in advance of the meeting. The Committee must meet **at least** 4 times per year.

Minutes will be recorded by the Program Administrator, or delegate, and circulated to all faculty members and trainees. Any sensitive or confidential trainee information (including assessment information) will be collated in a separate document, but not circulated for viewing. Minutes will be stored confidentially for at least eight (8) years.

**QUORUM**

At least one half (50%) of voting members must be present for quorum purposes. This could be higher if the program would like more accountability.

**ATTENDANCE**

Programs must outline in this section how frequently members must attend meetings. Examples below:

*All members are required to be present at all meetings OR*

*Members must attend at least 75% of meetings.*

**RESPONSIBILITIES**

**Standard 1.2.2.3:** The mandate of the AFC program committee includes planning and organizing the AFC program, including selection of candidates into the AFC program, educational design, policy and process development, safety, trainee wellness, assessment of trainee progress, and continuous improvement.

1. Trainee Selection:
   * Requirement 5.1.1: There are effective, clearly defined, transparent, formal processes for the selection and progression of trainees.
   * Design and maintain a transparent and formal process for the selection of candidates for admission to the program.
2. Educational Program Design:
   * Requirement 2.1.1: The AFC program’s design and delivery is based on the standards of training for the AFC discipline.
   * Requirement 2.1.2: The educational design allows trainees to identity and address individual learning objectives.
   * Oversee the development and operation of the educational program that meets the general and discipline-specific standards of accreditation of the Royal College of Physicians and Surgeons of Canada.
   * Provide training with increasing responsibility.
   * Discuss and design training that addresses trainees’ individual learning needs.
3. Trainee Wellness and Safety:
   * Requirement 4.1.1: Trainees are appropriate supervised.
   * Requirement 4.1.2: AFC education occurs in a safety-conscious learning environment.
   * Requirement 4.1.3: AFC education occurs in a positive learning environment that promotes trainee wellness.
   * Ensure there is an established process for the AFC Committee to receive departmental input on: trainee wellness, trainee safety, patient safety and quality of care.
   * Ensure that trainees are aware of policies on safety and wellness.
   * Manage issues of real or perceived lack of trainee safety.
   * Provide a prompt review of any trainee concerns regarding the educational program (i.e. environment, curriculum, resources, etc.)
   * Maintain and environment free of intimidation, harassment, and mistreatment and manage any issues in a timely, efficient, and sensitive manner in accordance with PGME and Schulich policies.
   * Maintain an environment that supports [Schulich’s principles on Diversity, Inclusion & Equity](https://www.schulich.uwo.ca/med_dent_admissions/about_us/diversity_inclusion_equity.html)
   * Review and formulate program support systems for stress-related issues. Establish and maintain mechanisms for trainees to access services to manage stress.
4. Resources:
   * Requirement 3.1.1: The patient population is adequate to ensure that trainees attain required competencies.
   * Requirement 3.1.2: Clinical and consultative services and facilities are effectively organized and adequate to ensure that trainees attain the required competencies.
   * Requirement 3.1.3: The AFC program as the necessary financial, physical, and technical resources.
   * Requirement 3.1.4: There is appropriate liaison with other programs and teaching services to ensure that trainees experience the breadth of the discipline.
   * Element 3.2: The AFC program has the appropriate human resources to provide all trainees with the required educational experiences.
   * Review program resources on an ongoing basis. This includes a review of fellowship programs, and trainees from other services and academic programs (electives), to ensure they do not negatively impact the residency education.
   * Identify, advocate and plan for resources needed by the residency program.
   * Provide an annual budget to the Department/Division.
5. Policy and Procedure Development:
   * Standard 1.2.3.3: Policy and process development, adoption, and dissemination is transparent, effective, and collaborative.
   * Standard 1.2.3.4: There is a mechanism to review and adopt central policies and relevant learning site(s) policies, as well as to develop required AFC program-specific policies or components as appropriate.
   * Review and comply with applicable Schulich PGME and learning site policies. .
   * Develop and regularly review program-specific policies and processes.
6. Continuous improvement:
   * Requirement 6.1.1: Teachers are regularly assessed and supported.
   * Standard 7: There is continuous improvement of the educational experiences to improve the AFC program and ensure trainees are prepared for independent practice in the discipline.
   * Prepare for internal and external accreditation reviews.
   * Establish and maintain an evaluation mechanism for the quality of the educational experience and appropriateness of resources available. This includes:
     1. Evaluating the clinical and academic program and learning environment, including ongoing reviews of program and rotation competencies/objectives to ensure educational objectives are being met.
     2. Evaluating the resource allocation to ensure resources are sufficient to support the education program and trainees to meet their requirements of training.
     3. Assessing the program’s teachers on an ongoing basis and providing feedback to the teachers through the Department/Division Chair. Teachers assessments include trainee input.
     4. Assessing the programs strengths and areas for improvement on an ongoing basis, to implement any improvements in a timely manner.
7. Trainee Assessment (Competence Committee Report):
   * Requirement 2.2.1: The AFC program has a planned, defined and implemented system of assessment.
   * Requirement 2.2.2: There is a mechanism in place to engage trainees in a regular discussion for review of their performance including timely support for trainees not attaining the required competencies as expected.
   * Design and maintain a mechanism for assessment of trainees, in accordance with the Royal College. The RPC will, with input from the Competence Committee (or equivalent), promote trainees. If borderline or unsatisfactory assessments occur, recommendations for remediation and probation will be made in accordance with Schulich PGME policies, including the [AFC Assessment and Appeals Policy](https://www.schulich.uwo.ca/medicine/postgraduate/future_learners/docs/Policies%20for%20Website/2021_AFC%20Appeals%20Policy.pdf).

**SUBCOMMITTEES**

* Competence Committee (CC) (or equivalent)

List additional as required. Note: All subcommittees require their own Terms of Reference.