

Canadian Society of
Healthcare-Systems
Pharmacy



Société canadienne
de pharmacie dans les
réseaux de la santé

**Canadian Pharmacy Residency Board
Conseil canadien de la résidence en pharmacie**

Accreditation Policies and Procedures

April 2025

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The Canadian Pharmacy Residency Board (CPRB) is organized under the auspices of the Canadian Society of Hospital Pharmacists (CSHP). The development of Accreditation Standards for residency programs and the process of accreditation are undertaken by the CPRB independently of CSHP. The CPRB consists of residency program directors, residency coordinators, and experienced residency preceptors as well as a representative of the Association of Faculties of Pharmacy of Canada (AFPC).

1. Purpose of Accreditation

CPRB establishes national standards for pharmacy residency programs and accredits these programs. Accreditation Standards for pharmacy residencies define training requirements and outcomes for pharmacy residency programs. These standards provide residency programs with an effective method of monitoring and improving their performance on an ongoing basis.

Residency accreditation is a voluntary program of the CPRB for Year 1 and Advanced (Year 2) pharmacy residencies. CPRB conducts a survey visit at each pharmacy residency program at least once in each four or six year accreditation cycle, to provide an opportunity for external peer review and validation. The major focus of the accreditation program is promotion of exemplary patient care through high quality training of pharmacy residents. A healthcare organization awarded CPRB accreditation possesses skilled and knowledgeable managers and preceptors, provides a high-quality pharmacy service, and provides a residency program that is structured to meet all of the CPRB standards.

2. Definitions

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| Pharmacy residency: | For the purpose of accreditation, a pharmacy residency program is a defined curriculum delivered in accordance with a single set of governing policies and procedures that is intended to meet the CPRB accreditation standards. |
| Curriculum: | Curriculum is the course of study or syllabus. For the purpose of a residency program, a curriculum includes the planned learning experiences of the resident. This includes what the resident must learn, how this learning will occur, and how the learning will be assessed. The expected learning should occur through all program requirements and includes the relevant knowledge, skills and attitude acquired by the resident to meet the expected educational outcomes. |
| Category 1 residency program (single campus)^a: | A residency program in which residency training occurs at a single campus of an organization with greater than 60 residency training days. The accreditation survey can be completed within a two- to three-day survey visit with two surveyors. |
| Category 2 residency program (small multiple campuses)^a: | A residency program in which residency training occurs at two or more campuses of an organization with greater than 60 residency training days. The number of campuses and distance between them is such that the accreditation survey can be completed within a three-day survey visit with three surveyors. |

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| Category 3 residency program (large multiple campuses program)^a: | A residency program in which residency training occurs at multiple campuses of an organization with greater than 60 residency training days. The number of campuses and / or the distance between them is such that the accreditation survey cannot be completed within a three-day survey visit OR requires more than three surveyors (e.g., Alberta Health Services, Lower Mainland Pharmacy Services, Université de Montréal, Université Laval). |
| Year 1 residency programs | The Year 1 residency builds upon competencies of an accredited entry-to-practice professional degree program in pharmacy. It includes experiences in the areas of patient care, management and improvement of medication-use systems, leadership, management of one's own practice, provision of medication- and practice-related education, and project management. |
| Advanced (Year 2) residency programs | <p>The Advanced (Year 2) residency builds on competencies developed through the successful completion of an accredited graduate clinical pharmacy degree or an accredited Year 1 pharmacy residency. It focuses on direct patient care, teaching and research in a defined area of practice. It may focus on a specific therapeutic area (e.g. cardiology, oncology, infectious diseases), on a specific patient population (e.g. pediatrics, geriatrics) or on specific type of practice (e.g. primary/ambulatory care, critical care).</p> <p>If an organization has an Advanced (Year 2) residency program in more than one defined area of practice (i.e., different options), each area of practice is considered a separate residency program. At the CPRB's discretion, the accreditation survey visit of multiple or all options may be conducted sequentially. A separate survey report and accreditation award certificate are produced for each defined area of practice and each must pay Accreditation Fees.</p> |
| Joint program between two healthcare organizations | When two or more healthcare organizations work in cooperation to provide a pharmacy residency program. There is a contractual arrangement or signed agreement that defines their respective responsibilities. This may apply to a Year 1 or Advanced (Year 2) residency program. |
| Joint program between one or more healthcare organizations and an academic institution | When one or more healthcare organizations work in cooperation with an academic institution to provide a pharmacy residency program. The resident pays tuition to the academic institution and follows the policies of the academic institution. There is a contractual arrangement or signed agreement that defines their respective responsibilities. This may apply to a Year 1 or Advanced (Year 2) residency program. |
| University affiliated residency program | When a residency program in a healthcare organization has an agreement with an academic institution to provide library support, faculty advisor, etc. The healthcare organization has complete control of the residency program and its outcomes. Any appeals are managed by the residency program. Residents may pay a nominal fee to be registered with the academic institution in order to access resources. An affiliation agreement clearly delineates the respective responsibilities of each organization. This may apply to a Year 1 or Advanced (Year 2) residency program. |

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| Notification of Intent | An initial request by a Year 1 or Advanced (Year 2) residency program to be accredited by the CPRB. The program must complete the <i>Notification of Intent</i> document (Appendix 1) and submit it by e-mail to the CPRB Chair and CPRB Coordinator. The residency program must specify the type of program (i.e., Year 1 or Advanced (Year 2)) and the anticipated start and end dates of the residency year. If the program is an Advanced (Year 2) residency, the defined area of practice or the type of practice must also be specified. |
| Request for accreditation document | Self-assessment document completed by the residency program when submitting the pre-survey documents 30 days before the start of the accreditation survey visit. This is distinct from the <i>Notification of Intent</i> a residency program sends the CPRB Chair and CPRB Coordinator when requesting accreditation for the first time. |
| Full Accreditation | Type of accreditation award where programs are free to operate for six years until the next accreditation survey visit. |
| Accreditation with Review | Type of accreditation award where a program must submit a Progress Report at one and/or two years (and additional progress or status reports as requested by the CPRB) and provide detailed information and relevant supporting documentation regarding progress made with recommendations and consultative recommendations. The CPRB may withdraw an accreditation award from a residency program if a progress report is not submitted. |

^aThe CPRB determines the category of the residency program based on the number of campuses that offer greater than 60 residency training days and the travel requirements related to the distance between campuses.

3. Policies

The following policies apply to the accreditation program for both Year 1 and Advanced (Year 2) residency programs:

- 3.1 The accreditation program is conducted as a service of CPRB to any hospital or other organized healthcare setting (hereinafter referred to as the organization) voluntarily requesting evaluation of the residency program. When submitting a *Notification of Intent* (Appendix 1) to request accreditation of a pharmacy residency program for an initial evaluation or a *Request for Accreditation* for a renewal of accreditation status of a pharmacy residency program, the organization accepts the principles, processes and requirements contained herein, except as modified through the *Memorandum of Agreement for Québec Clinical Pharmacy Graduate Programs* to which CPRB and the Québec organizations (or its representatives) are signatory.
- 3.2 All information obtained through the survey of any pharmacy residency program remains confidential with the CPRB and with the surveyors.
- 3.3 CPRB members and surveyors that are scheduled to conduct a survey declare their conflict of interest with the *Conflict of Interest Disclosure Form*, and the CPRB shall establish alternate survey arrangements when one or more of the following circumstances arises:

- a) Within the preceding ten-year period, the surveyor has completed a pharmacy residency or fellowship at the organization that is being reviewed and there are still some of the same practitioners in a residency leadership role at the organization.
 - b) Within the preceding ten-year period, the surveyor was a residency program director, residency program coordinator, director of pharmacy, faculty liaison, or preceptor for the residency program that is being reviewed.
 - c) Within the preceding ten-year period, the surveyor trained the residency program director, residency program coordinator, or director of pharmacy of the residency program that is being reviewed.
 - d) Within the preceding ten-year period, the surveyor has provided onsite consultation services or has been employed by the department of pharmacy, health system, or university that operates the residency program that is being reviewed.
 - e) The surveyor practices or resides within the same city.
 - f) The surveyor has any business or close personal relationship with the residency program director, residency program coordinator or director of pharmacy.
 - g) Within the preceding ten-year period, the surveyor has been precepted by the pharmacy residency director, coordinator, or a preceptor.
- 3.4 In submitting a *Request for Accreditation* the organization agrees that the survey team has authorization to review pertinent documents relating to pharmacy services and the pharmacy residency program. Contents of the survey report are provided only to the CPRB, surveyors and the organization that owns, offers, or sponsors the residency program.
- 3.5 The CPRB makes public the list of accredited residency programs and programs seeking accreditation status through the CSHP website.
- 3.6 Any reference by an organization to CPRB accreditation of a Year 1 residency program in certificates, catalogs, bulletins, communications, or other form of publicity should state only the following: *“(Name of organization) is accredited for pharmacy residency (Year 1) training by the Canadian Pharmacy Residency Board.”*
- 3.7 Any reference by an organization to CPRB accreditation of an Advanced (Year 2) residency program in certificates, catalogs, bulletins, communications, or other form of publicity should state only the following: *“(Name of the organization) is accredited for pharmacy Advanced (Year 2) residency training in (specify the defined area of practice) by the Canadian Pharmacy Residency Board.”*
- 3.8 Residency programs that meet accreditation standards are awarded a certificate of accreditation for a period not to exceed 6 years; however, the certificate remains the property of the CPRB and shall be returned to the CPRB at any time accreditation is withdrawn.
- 3.9 After successful completion of a pharmacy residency program, an organization may elect to confer a credential such as “Accredited Canadian Pharmacy Resident/ACPR” or “Accredited Canadian Pharmacy Resident - Advanced Year 2/ACPR2” upon an individual who graduates from a CPRB Accredited Residency Program. Such credential is valid for the life of the individual, provided they graduated from the program when the program held CPRB ‘Full Accreditation’ or ‘Accreditation with Review’ status.
- 3.10 Accreditation Fees and applicant PRAMS Fees are established by the CSHP, after recommendation from the CPRB. These fees allow the CPRB to operate, provide services for the residency programs and maintain

a balanced budget. The costs of CPRB operations, including coordination, travel, correspondence, translation services, site visits and other ancillary costs are covered by these fees.

4. Fee Structure

- 4.1 Upon receipt of the *Notification of Intent*, residency programs start being invoiced by CSHP the annual Accreditation Fees. The Accreditation Fee cycle runs from July 1st to June 30th.
- 4.2 Annual Accreditation Fees are invoiced to the organization. In a joint residency program, the annual Accreditation Fee is invoiced to the primary partner, unless requested otherwise by the program.
- 4.3 In the period between accreditation surveys, CPRB reserves the right to request additional information in accordance with CPRB policies. Based on the information obtained, CPRB reserves the right to carry out an additional survey prior to the end of the accreditation cycle. Costs associated with this survey may be the responsibility of the organization.

5. First Time Evaluation of Residency Programs

- 5.1 To be eligible for accreditation,
 - a) a new residency program must advise the CPRB of its intent to seek accreditation by submitting the *Notification of Intent* (Appendix 1) to apply for CPRB accreditation. It shall specify the type of program (Year 1 or Advanced (Year 2)) and the anticipated start and end dates of the residency year. If the program is an Advanced (Year 2) residency, the defined area of practice is to be specified. Upon receipt of such notice, the CPRB Coordinator provides the applicant with an Accreditation Information Package and the applicant organization is added to the CPRB roster with “Accreditation Pending” status. An Accreditation Information Package consists of:
 - (i) *CPRB Accreditation Standards for Year 1 Residency Programs or CPRB Accreditation Standards for Advanced (Year 2) Residency Programs*, as applicable
 - (ii) *Conflict of Interest Disclosure Form*
 - (iii) *Request for Accreditation Form Year 1 Pharmacy Residency or Request for Accreditation Form Year 2 Pharmacy Residency* (self-assessment), as applicable
 - (iv) *Year 1 - Sample Itinerary or Year 2 – Sample Itinerary*, as applicable
 - (v) *CPRB Accreditation Survey Required Documents for Year 1 Residency Programs or CPRB Accreditation Survey Required Documents for Year 2 Residency Programs*, as applicable
 - (vi) *Program Interviews - What to Expect - Year 1 or Program Interviews – What to Expect – Year 2*, as applicable
 - b) residency programs must participate in and comply with requirements of PRAMS (Québec, international and Advanced (Year 2) Residency Programs do not need to participate in PRAMS).

- c) residency programs must submit a *Request for Accreditation* and all supporting documents at least 30 days before the accreditation survey visit. At the time of the accreditation survey visit:
 - (i) the residency program will have been in operation for at least one full year;
 - (ii) the residency program will have graduated at least one resident (i.e., research manuscript and all other residency requirements completed and certificate provided to the resident);
 - (iii) one or more resident(s) who graduated will be available to participate in the survey visit.

For example, for a new residency program starting in September 2023, the first survey visit will be scheduled for the end of 2024 or the Winter-Spring of 2025 to allow the resident time to complete all the residency requirements.

- 5.2 If accreditation is granted, it shall be retroactive to the date on which a *Notification of Intent* is received by the CPRB. For example, if the *Notification of Intent* was sent in September 2023 for a residency program starting in the Fall 2023, upon the award of accreditation of the program, the date of accreditation would be retroactive to September 2023.
- 5.3 Program evaluation is generally by on-site survey, and the duration is determined by the CPRB. The CPRB may choose to conduct an accreditation survey visit virtually (e.g., if travel restrictions mandated by public health) or in a hybrid fashion (i.e., some meetings done virtually prior or after the onsite survey or to reduce travel across a large geographic area).
- 5.4 Programs granted a survey are reviewed by an accreditation survey team consisting of at least two qualified individuals. On occasion, the CPRB may send observers or surveyors-in-training to attend the accreditation survey visit.
- 5.5 The CPRB, in consultation with the applicant, may elect to defer conducting the first accreditation survey visit if the program is determined to be premature. The program is then required to submit a new *Notification of Intent*.

6. Continuing Evaluation of Accredited Programs

- 6.1 CPRB regards evaluation of accredited residency programs as a continuous process; accordingly, the CPRB requests residency program directors to submit periodic written *Status Reports* or *Progress Reports* to assist the CPRB in evaluating the continued conformance of individual programs to the Accreditation Standards.
 - a) Residency programs receiving a *Full Accreditation Award* are required to submit a *Status Report* every 2 years.
 - b) Residency programs that receive an *Accreditation with Review Award* are required to submit a *Progress Report* as requested by CPRB (e.g., at one and/or two years). The residency program's description of progress in fulfilling the recommendations (with supporting documentation) must be sufficient such that the CPRB can determine whether outstanding recommendations and Standards have been met. After an initial *Progress Report* the CPRB determines if an additional *Progress Report* is needed or if the program must submit a *Status Report* before the next accreditation survey visit.
- 6.2 Residency programs shall be surveyed at least every 6 years. In the period between accreditation survey visits, the CPRB reserves the right to request additional information in accordance with CPRB policies.

Based on the information obtained, the Board reserves the right to carry out an additional survey visit prior to the end of the accreditation cycle. Costs associated with this visit may be the responsibility of the organization.

- 6.3 The CPRB reserves the right to grant an accreditation survey for the purpose of continued evaluation of the program. A program must have graduated at least one resident since the last accreditation survey visit, have a resident enrolled in the program at the time of requesting accreditation renewal or the year prior, and participate in and comply with requirements of the CPRB PRAMS (except for Québec, international and Advanced (Year 2) residency programs).
- 6.4 Accreditation Standards are revised on a yearly basis. Accredited programs are expected to implement the revised standards one year after the publication date. The updated standards will be published on the CSHP website.
- 6.5 An organization offering an accredited program that temporarily ceases (i.e., resident not enrolled in program) must so notify the Board by May 1st. Accredited status is retained in the absence of a resident for the duration of the accreditation award if Accreditation Fees continue to be paid, the required *Status or Progress Reports* are submitted and the program actively recruits a resident within the accreditation cycle.
- 6.6 Any change in the organization of a residency program, including reorganization of the corporate entity that owns, offers, or sponsors the residency program, may be considered justification for re-evaluation. A *Status Report* must be submitted within 90 days of a change in the organization. The Board will determine the need for re-survey at an earlier date or submission of a *Progress Report*.

7. Withdrawal of Accreditation

- 7.1 Accreditation of a pharmacy residency program may be withdrawn by the CPRB for any of the reasons stated below:
 - a) If a residency program is non-compliant with the PRAMS policies listed on the CSHP website, as applicable;
 - b) If a residency program does not have at least one resident in training for their accreditation cycle;
 - c) If the organization makes false or misleading statements about the status, condition, or category of accreditation;
 - d) If a residency program does not pay the annual Accreditation Fees after a period of ninety (90) days;
 - e) If the residency program ceases to operate;
 - f) If the residency program fails to submit progress or status reports to the CPRB within 90 days of the due date.
- 7.2 If accreditation is withdrawn, the residency program shall submit a new *Notification of Intent* and must undergo re-evaluation to regain accreditation, according to the policies described in section 5.

8. Postponement of an Accreditation Survey

8.1 Generalities

- a) Programs are contacted approximately 160 days prior to their accreditation survey visit by the lead surveyor to confirm a survey date. Four months (120 days) prior to the scheduled survey, a notice is sent to the residency program director with a copy of the letter to the CEO, residency program coordinator(s) and surveyors to advise of the scheduled survey. A program that is requesting a postponement should do so in writing to the CPRB chair between 6 and 12 months prior to the expiration of their accreditation award. The request is brought to a CPRB meeting for consideration and the program will be advised of the CPRB's decision to accept or refuse the postponement.
- b) The rescheduling of the survey visit will be subject to the same scheduling process as the previous survey visit with a 160-day notice to confirm a new survey date.
- c) When an accreditation survey visit is postponed, the timing of the next survey visit will be four or six years, depending on the accreditation award, after the postponed accreditation survey visit.

8.2 Postponement by an accreditation pending residency program

- a) A new residency program may request a postponement up to 12 months from the scheduled accreditation visit. During this period, they must continue to pay their annual Accreditation Fees. The ability of the program to confer the ACPR status will still be retroactive to the date of the *Notification of Intent*. If a new program requires greater than a 12-month postponement, they must withdraw their original *Notification of Intent* and submit a new *Notification of Intent* when they are prepared for an accreditation survey visit. The ability of the program to confer the ACPR status will be retroactive to the date of the most recent *Notification of Intent* received by CPRB.

8.3 Postponement by an accredited residency program

- a) An accredited residency program may request a postponement up to 12 months from expiration of their accreditation award due to extenuating circumstances.
- b) The accreditation status will automatically be extended if the request for the postponement is granted by the CPRB and correspondence will be sent by the CPRB to the residency program confirming the approval of the postponement and extension of their accreditation award status.
- c) CPRB receives, at a minimum, updates from residency programs every 2 years. At CPRB's discretion, a *Status Report* or *Progress Report* may be requested from the program prior to their rescheduled accreditation survey visit.

8.4 Postponement by CPRB

- a) CPRB may notify a residency program that they are postponing an accreditation survey visit. Accreditation status will be automatically extended.
- b) A CPRB postponement will not impact a postponement request from a program, nor will it be included in the time frame requested by a program. A total postponement of up to two years is considered acceptable.
- c) An additional *Status Report* or *Progress Report* will not be requested following a CPRB requested postponement. Correspondence will be sent to the program confirming an extension of their accreditation status.

9. Accreditation Procedures

9.1 Programs Seeking Evaluation for the First Time

- a) Residency programs seeking initial evaluation submit a *Notification of Intent* (Appendix 1) to the CPRB Chair and CPRB coordinator.
- b) The CPRB chair or CPRB coordinator acknowledges receipt of the *Notification of Intent*.
- c) The residency program completes the *Program Information Template* to be posted on the CSHP website.
- d) The annual (July 1 – June 30) Accreditation Fee invoice is sent within the first year of receipt of the *Notification of Intent*.
- e) The Surveyors Group is notified of the new program by the CPRB coordinator to determine the survey schedule.

***Follow procedures below under renewal of accreditation status

9.2 Programs Seeking Renewal of Accreditation Status

- a) Approximately 160 days in advance of the planned accreditation survey visit, the lead surveyor contacts the residency program to identify accreditation survey dates. For category 3 programs, the lead surveyor also informs the residency program which campuses will be visited and whether some will be visited virtually. For residency programs with more than 4 residents per year, the lead surveyor requests the list of residents since the last accreditation survey visit. Approximately four months (120 days) prior to the survey visit, the lead surveyor specifies to the residency program for which residents they must submit documents. A minimum of four residents per year or 25% of the residents per year (the highest of the two) will be chosen randomly by the lead surveyor. Unsuccessful residents and residents who withdrew from the residency program will be added to the list.
- b) Four months (120 days) in advance of the scheduled accreditation survey visit, a notification of accreditation survey visit letter is sent to the healthcare organization and residency program director by e-mail confirming the date of the survey visit. The letter provides hyperlinks to access the following documents:
 - i. *CPRB Accreditation Standards for Year 1 Residency Programs* or *CPRB Accreditation Standards for Advanced (Year 2) Residency Programs*, as applicable
 - ii. *CPRB Accreditation Policies and Procedures*
 - iii. *Conflict of Interest Disclosure Form*
 - iv. *Request for Accreditation Form Year 1 Pharmacy Residency* or *Request for Accreditation Form Year 2 Pharmacy Residency* (self-assessment), as applicable
 - v. *Year 1 – Sample Itinerary* or *Year 2 – Sample Itinerary*, as applicable
 - vi. *CPRB Accreditation Survey Required Documents for Year 1 Residency Programs* or *CPRB Accreditation Survey Required Documents for Year 2 Residency Programs*, as applicable
 - vii. *Program Interviews - What to Expect - Year 1* or *Program Interviews – What to Expect – Year 2*, as applicable
 - viii. *CPRB Board Member Biographies*
 - ix. *CPRB Surveyor Biographies*
- c) Thirty (30) days in advance of the scheduled accreditation survey visit the residency program must submit a completed *Request for Accreditation* (self-assessment) form, a survey itinerary and all supporting documents outlined by CPRB via cloud-based software (e.g., SharePoint, DropBox,

OneDrive). If assessment forms are available via an electronic assessment management system (e.g., One45/Acuity Insights), the residency program may elect to give access to the surveyors if the surveyors agree to this.

- d) The residency program makes available to the surveyors certain documents on-site (i.e., examples of resident documentation, pharmacy manual). These documents are not requested for virtual surveys.

9.3 Survey Visit

- a) The survey consists of a review of the residency program and the pharmacy services. The survey includes:
 - i. review of pertinent documents;
 - ii. tours of the pharmacy department(s) (on-site survey visits of Year 1 residency programs only);
 - iii. tours of one or multiple patient care areas where residents have recently completed a rotation (on-site survey visits only);
 - iv. interviews with the organization CEO or other senior administrator, the pharmacy team, the residency director, the residency coordinator(s), the preceptors, the current resident(s) and resident(s) from the previous year, and an interdisciplinary care team.
- b) At least two surveyors visit each program. The CPRB determines the surveyors and survey duration. The survey duration and number of surveyors depend on the program structure and size. For category 1 and category 2 programs the survey team may spend two or three days at the organization. Category 3 programs may require an extended survey period. On occasion, the CPRB may send observers or surveyors-in-training to attend the survey visit.
- c) Accreditation surveyors endeavor to visit all campuses of an organization that deliver greater than or equal to 60 residency training days of an academic year. The lead surveyor may determine in advance that certain visits will be virtual.
- d) For organizations offering a program on multiple campuses, the accreditation process may be sequential (rolling) by campus groupings in each accreditation cycle or all campus groupings within the same program may be surveyed simultaneously at the discretion of the CPRB in consultation with the residency program.
- e) Upon completion of the survey visit, a wrap up discussion to highlight the program strengths and opportunities is held with the surveyors, the residency director and coordinator(s), and other invited participants. There is an opportunity for the exchange of additional information following the closing remarks.

9.4 Survey Report and Accreditation Award

- a) The survey team prepares a report that includes *Findings*, *Recommendations*, and *Consultative Recommendations*.
 - i. *Findings* describe the observations made by the survey team. *Findings* form the basis for the *Recommendations* and *Consultative Recommendations*.
 - ii. *Recommendations* indicate actions required in order for the program to achieve compliance with the Accreditation Standards; therefore, these *Recommendations* influence the accreditation award decision.
 - iii. *Consultative Recommendations* are suggestions to strengthen the residency program and pharmacy services – they do not influence the accreditation award decision.
- b) The survey report is reviewed by the CPRB during a board meeting.

- c) A copy of the survey report is sent to the residency program director and coordinator(s) within 90 days of the accreditation survey visit, for review of factual accuracy and comment. The residency program director and coordinator(s) are invited to submit written clarifications to the CPRB within 30 days of receipt of the survey report, using the *Survey Report Response Template Form*. Any clarifications should address factual accuracy of the report, specifically set forth the facts contested, and the reasons for the disagreement with the recommendations and consultative recommendations, if applicable. The program is not expected to respond to the recommendations with respect to their action plan to address the recommendations and consultative recommendations.
- d) The program's response to the survey report is reviewed by the CPRB at a board meeting. The CPRB resolves any factual issues at that time, and then modifies the *Findings, Recommendations* and *Consultative Recommendations*, as needed, with a focus on areas of compliance and non-compliance with the CPRB Accreditation Standards. The updated survey report is provided to the residency program.
- e) The accreditation award for the residency program is determined by majority vote of the Board. Refer to Appendix 2 for the Accreditation Award Definitions.
- f) The results of accreditation status are forwarded to the organization's chief executive officer and residency program director and coordinator(s).
 - i. For programs with a Full Accreditation Award status, submission of a *Status Report* is required every two years at the call of the CPRB.
 - ii. For programs with an Accreditation with Review Award status, submission of a *Progress Report* is required at 1 and/or 2 years at the call of the CPRB. Additional *Progress Reports* or *Status Reports* may be needed thereafter at the discretion of the CPRB.

9.5 Status Reports

- a) Residency programs with a Full Accreditation, 6-Year Term Award must complete a *Status Report* every 2 years.
 - i. For programs surveyed between January to June, the *Status Report* is due September 15th every 2 years. For example, a program with a Full Accreditation 6-Year Term Award surveyed in May 2023 must complete their *Status Reports* for September 15th 2025 and September 15th 2027.
 - ii. For programs surveyed between September to December, the *Status Report* is due February 15th every 2 years. For example, a program with a Full Accreditation 6-Year Term Award surveyed in October 2023 must complete their *Status Reports* for February 15th 2026 and February 15th 2028.
- b) The Board reviews all *Status Reports* submitted by the programs. The *Status Report* must:
 - i. provide the CPRB with an update regarding changes to the organization, pharmacy, and residency program since the last accreditation survey visit;
 - ii. include a summary of admissions to the program, certificate conferrals, and withdrawals from the program since the last accreditation survey visit; and
 - iii. describe progress on the residency program's action plan to address the changes to the Accreditation Standards since the last accreditation survey visit.

9.6 Progress Reports

- a) Residency programs with an Accreditation with Review, 4-Year Term Award or Accreditation with Review, 6-Year Term Award must complete one or more *Progress Reports*.

- i. For programs surveyed between January to June, the *Progress Report* is due September 15th one to two years after the accreditation survey visit as outlined in the award. For example, a program with an Accreditation with Review Award surveyed in May 2023 must complete their one-year *Progress Report* for September 15th 2024 or their two-year *Progress Report* for September 15th 2025.
 - ii. For programs surveyed between September to December, the *Progress Report* is due February 15th one to two years after the accreditation survey visit as outlined in the award. For example, a program with an Accreditation with Review Award surveyed in October 2023 must complete their one-year *Progress Report* for February 15th 2025 or their two-year *Progress Report* for February 15th 2026.
 - iii. After reviewing the *Progress Report* the CPRB may decide to request another *Progress Report* or a *Status Report* one or two years later.
- b) The CPRB reviews all *Progress Reports* from organizations seeking continued accreditation of their residency programs. Continuing accreditation of the program is dependent on the progress that has been made. The *Progress Report* must:
- i. provide the CPRB with an update regarding changes to the organization, pharmacy, and residency program since the last accreditation survey visit;
 - ii. include a summary of admissions to the program, certificate conferrals, and withdrawals from the program since the last accreditation survey visit;
 - iii. provide detailed information and relevant supporting documentation regarding progress made with recommendations and consultative recommendations from the last accreditation survey visit; and
 - iv. describe progress on the residency program's action plan to address the changes to the Accreditation Standards since the last accreditation survey visit.
- c) After review of the *Progress Report*, the CPRB can request additional information and supplementary supporting documentation if deemed necessary.
- d) The results of accreditation status deliberations arising from the CPRB's review of *Progress Reports* are forwarded to the residency program director and coordinator(s).

9.7 Appeal of Accreditation Award Decision

- a) In the event that the organization disagrees with the accreditation award, the organization may appeal the decision on the grounds that the CPRB's decision was arbitrary, prejudiced, capricious, or based on incorrect application of the Accreditation Standards to the organization.
- i. The residency program director notifies the CPRB Chair, in writing, by registered mail or e-mail, of the appeal to the accreditation award within 30 days of receipt of the CPRB's decision. The grounds on which the appeal is being made must be clearly stated.
 - ii. The CSHP executive committee will determine if these grounds for the appeal are justified, seeking input from the CPRB if needed.
 - iii. The appellant shall bear the total costs involved in conducting the appeal.
- b) If the request for appeal is accepted, the CSHP executive committee constitutes an *ad hoc* Appeal Panel.
- i. The Appeal Panel consists of one member of the CSHP Board who serves as Chair of the appeal panel, and two individuals involved in CPRB accredited programs, one to be named by the appellant and one by the CPRB Chair. The members of the Appeal Panel complete a *Conflict of Interest Disclosure Form*.

- ii. The CPRB coordinator serves as the corresponding secretary of the Appeal Panel. Immediately following the appointments to the Appeal Panel, the CPRB Coordinator forwards to all Appeal Panel members copies of all written documentation considered by the CPRB in rendering its original decision. Upon appointment, panel members do not contact, directly or indirectly, the appellant or members of the CPRB, except through the corresponding secretary.
- iii. Each member of the Appeal Panel reviews all written documentation forwarded to them by the corresponding secretary. The members vote on the appeal no more than 90 days from the date of receipt of an appeal by the CPRB Chair.
- iv. The Appeal Panel's decision is based on one of three possible outcomes: change of accreditation survey award, re-survey by CPRB, or dismissal of the appeal. The Appeal Panel Chair informs the CPRB coordinator, the CPRB Chair and the appellant of the panel's decision in writing, within 10 days of the receipt of the final ballot. The decision of the Appeal Panel is final and binding on both the appellant and the CPRB.
- v. Should the Appeal Panel decision determine a re-survey by the CPRB is to be carried out, the costs of the re-survey are borne by the CPRB. Different surveyors to those who initially surveyed the residency program will take part in this new accreditation survey visit. At least one member of the survey team will be a member of the CPRB executive and one member will be a non-Board surveyor.

Appendix 1 - Notification of Intent

Canadian Pharmacy Residency Board
Conseil canadien de la résidence en pharmacie

Notification of Intent / Avis d'intention

Pharmacy residency programs not accredited by the Canadian Pharmacy Residency Board (CPRB) who wish to ask for accreditation must complete this form and return it to cprb@cshp.ca

Les programmes de résidence en pharmacie qui ne sont pas agréés par le Conseil canadien de la résidence en pharmacie (CCRP) et qui souhaitent demander l'agrément doivent compléter ce formulaire et le retourner à cprb@cshp.ca

☐ Request is hereby made for accreditation of our pharmacy residency program. We accept and understand the principles and requirements expressed in the residency accreditation process of the CPRB.

Une demande est ici faite pour l'agrément de notre programme de résidence en pharmacie. Nous acceptons et comprenons les principes et les exigences exprimés dans le processus d'agrément des résidences du CCRP.

Organisation/Organisme : _____

Name of residency program/Nom du programme de résidence : _____

Type of residency program/Type de programme de résidence :

☐ Year 1/Année 1 ☐ Advanced (Year 2)/Avancée (Année 2)

If Advanced (Year 2), specify the area of practice/

Si Avancée (Année 2), précisez le domaine de pratique : _____

Name and address of campuses offering more than 60 residency days/Nom et adresse des sites offrant plus de 60 jours de résidence : _____

Start date of residency year/Date de début de l'année de résidence: _____

End date of residency year/Date de fin de l'année de résidence : _____

Number of residents per year/Nombre de résidents par année: _____

| | Name / Nom | Telephone number / Numéro de téléphone | E-mail / courriel |
|---|---------------|---|----------------------|
| Residency program director(s) / Directeur(s) du programme de résidence | | | |
| Residency program coordinator(s) / Coordonnateur(s) du programme de résidence | | | |

Submitted by/Soumis par : _____

Name/Nom

Signature

Date

Appendix 2 - CPRB Year 1 and Year 2 Accreditation Award Definitions

| Accreditation Award ^a | Definition | Focus of Recommendations | Reporting Requirement |
|--|---|--|--|
| <u>Full Accreditation, 6-Year Term</u> | Compliance with the majority of the CPRB Accreditation Standards. | Recommendations, if any, focus on continual improvement to assist programs in further improving the quality of residency training and/or the pharmacy department. | Status reports required at 2 and 4 years |
| <u>Accreditation with Review, 6-Year Term (Progress Report^b at 2 Years)</u> | Compliance with the majority of CPRB Accreditation Standards. | Recommendations focus primarily on gaps in process implementation, or lack of documented evidence to support program processes. | Progress report required at 2 years, then additional progress report or status report at 4 years as determined by CPRB |
| <u>Accreditation with Review, 4-Year Term (Progress Report^b at 1 Year)</u> | Compliance with the majority of CPRB Accreditation Standards. | Recommendations focus primarily on gaps in processes or unmet competencies requiring substantial, immediate action to ensure quality of residency training. Major recommendations are made related to educational approach, assessment and evaluation and / or the educational outcomes. | Progress report required at 1 year, then additional progress report or status report at 2 years, as determined by CPRB |
| <u>Not Accredited</u> | Non-compliance with the majority of CPRB Accreditation Standards. | Recommendations focus primarily on the lack of basic structures and processes required for an effective residency program. | The organization reapplies for accreditation when the program achieves greater maturity |

^a**Deferral of an accreditation award:** In consultation with the residency program, the CPRB can elect to defer a decision on an accreditation award. A decision may then be rendered at any time, pending receipt of satisfactory progress reports or other information obtained from a supplemental survey visit that add strength to the initial evaluation. Deferral of the initial award decision may be extended for a period up to two years following the first survey visit. If a decision is not made during this two-year period, the program must file a new *Request for Accreditation Form* if it desires to proceed with accreditation.

^b**Virtual progress meetings:** at the CPRB's discretion, a residency program could be asked to meet with the CPRB virtually in addition to submitting a progress report.

Application of Accreditation Awards

| Previous Accreditation Award | Potential Awards to be Granted |
|--|---|
| Full Accreditation, 6-Year Term | <ul style="list-style-type: none"> • Full Accreditation, 6-Year Term (Status Report at 2 and 4 years) • Accreditation with Review, 6-Year Term (Progress Report at 2 years) • Accreditation with Review, 4-Year Term (Progress Report at 1 year) • Not Accredited |
| Accreditation with Review, 6-Year Term (Progress Report at 2 years) | <ul style="list-style-type: none"> • Full Accreditation, 6-Year Term (Status Report at 2 and 4 years) • Accreditation with Review, 6-Year Term (Progress Report at 2 years) • Accreditation with Review, 4-Year Term (Progress Report at 1 year) • Not Accredited |
| Accreditation with Review, 4-Year Term (Progress Report at 1 year) | <ul style="list-style-type: none"> • Full Accreditation, 6-Year Term (Status Report at 2 and 4 years) • Accreditation with Review, 6-Year Term (Progress Report at 2 years) • Accreditation with Review, 4-Year Term (Progress Report at 1 year) • Not Accredited |
| Not accredited | <ul style="list-style-type: none"> • Accreditation with Review, 4-Year Term (Progress Report at 1 year) • Not Accredited |

Appendix 3 – List of CPRB documents

Conflict of Interest Disclosure Form
CPRB Accreditation Policies and Procedures
CPRB Accreditation Standards for Advanced (Year 2) Residency Programs
CPRB Accreditation Standards for Year 1 Residency Programs
CPRB Accreditation Survey Required Documents for Year 1 Residency Programs
CPRB Accreditation Survey Required Documents for Year 2 Residency Programs
CPRB Board Members Biographies
CPRB Surveyor Biographies
Notification of Intent
Program Interviews - What to Expect - Year 1
Program Interviews – What to Expect – Year 2
Progress Report Template
Request for Accreditation Form Year 1 Pharmacy Residency
Request for Accreditation Form Year 2 Pharmacy Residency
Status Report Template
Survey Report Response Template Form
Year 1 – Sample Itinerary
Year 2 – Sample Itinerary