

CPRB PROGRAM REQUIRED DOCUMENTS IN-PERSON ACCREDITATION SURVEYS

Advanced (YEAR 2) Pharmacy Residencies

When a survey date is set, the CPRB Coordinator will provide the residency director / coordinator / administrative assistant with a copy of this template. The residency director, coordinator, or administrative assistant are to send the CPRB surveyors the survey documents in an electronic format through a file hosting site (e.g., SharePoint, DropBox, OneDrive, etc.) using this form. Documents should be hyperlinked as per the list below.

Please ensure that links provide document access to anyone who clicks them **or** that you send a password or other credentials required to open the links to the CPRB surveyors and the CPRB Coordinator.

Please create a parent folder as well as separate sub-folders for each numeric grouping below, numbering documents as per the list below.

Please note that all documents are required no later than 30 days prior to the first day of the accreditation survey visit and must remain available to CPRB surveyors until 30 days after your program has received its accreditation award. If you have any questions, please contact the CPRB Coordinator.

Document(s)	Link(s)
Link to parent folder (folder in which all other documents are stored)	
1. Accreditation Canada (or CCAPP) certificate / documentation specifying current award and years of accreditation	
2. Provincial or Territorial Pharmacy Regulation Report	
3. Contractual agreement with primary partner designated organization (if this is a shared program)	
3.1. Reports associated with partner accreditation surveys - Accreditation Canada (or CCAPP) certificate / documentation specifying current award and years of accreditation and provincial and territory regulatory reports	
3.2. Inspection reports associated with partner accreditation surveys	
4. Itinerary – a template is provided as a guide. Contact lead surveyor for assistance if geography is complex, dual surveys, etc. The itinerary must include meetings with: <ul style="list-style-type: none"> • The CEO (Administrative person to whom pharmacy reports) • The Pharmacy Administrative Team* • Residency Program Director(s) • Residency Program Coordinator(s) 	

<ul style="list-style-type: none"> • Residency Preceptors (from all campuses) • Residents • Interdisciplinary Patient Care Team with whom resident(s) provided service for an extended duration or on a recurrent basis <p>*The Pharmacy Administrative Team is requested to provide (in any format – Word, PowerPoint, etc.) a document that summarizes the department’s strategic plan and any major changes to the organization or to the pharmacy department since the last CPRB accreditation survey visit.</p>	
5. CV Residency Program Director	
6. CV Residency Program Coordinator	
7. CV Residency Program Preceptors	
8. CV of residents	
9. Request for Accreditation and related documents	
9.1 Organization and pharmacy department structure. Include any changes to the organizational structure of the organization, and pharmacy department since the last CPRB accreditation in any format, i.e., ppt or word format	
9.2 Mission statement and goals/objectives of the pharmacy department	
9.3 Most recent pharmacy services annual report	
9.4 Quality improvement plan and strategic plan for the pharmacy department	
9.5 Quality improvement plan and strategic plan for the residency program	
9.6 Schedule of residency rotations including preceptors since previous accreditation survey and current year	
10. Residency Advisory Committee Terms of Reference and minutes since previous accreditation survey and current year	
11. Residency Program Manual in its entirety and Residency-related policies and procedures. This should include minimally:	
11.1 Table of contents	
11.2 Expectations of residents and preceptors	
11.3 The intended educational outcomes of the program	
11.4 Description (learning goals and objectives) for each residency rotation available for each resident(s)	
11.5 Description (learning goals and objectives; schedule) of the formal academic curriculum (e.g. mandatory course work, mandatory academic half-days or full days)	

11.6 Evaluation/Assessment forms – provide access to online evaluation forms if applicable	
11.6.1 Resident performance – self-assessment	
11.6.2 Resident evaluation of preceptor	
11.6.3 Resident evaluation of rotation	
11.6. 4 Resident evaluation of Coordinator	
11.6.5 Resident evaluation of Program Director	
11.6.6 Resident evaluation of Residency Program	
11.6.7 Preceptor assessment of resident	
11.6.8 Preceptor self-assessment	
11.6.9 Quarterly or summative assessment process	
11.7 Criteria for successful completion of the program	
11.8 Policies concerning professional, family, and sick leave and the effect such leaves shall have on the residents' ability to complete the program	
11.9 Policies governing scheduling of residency experiences, including duty (service) roster shifts, if applicable	
11.10 Procedures and tools for evaluating training site (rotation) and residency program	
11.11 Procedures for assessment and evaluation of resident(s), preceptor(s), coordinator(s), director	
11.12 Processes for remedial action if deficiencies in the progress of the resident(s) are noted	
11.13 Processes that shall be used to address all discrepancies in assessment	
11.14 Policies governing intimidation and harassment and other forms of abuse	
12. Residents (for previous accreditation cycle and current year) Please number and label folders <u>for each resident to include</u>:	
12.1 Program's letter of offer	
12.2 Resident's confirmation of acceptance letter	
12.3 Prior learning assessment	
12.4 Granting credit for prior learning / transfer of credit documents (if applicable)	
12.5 Documented competencies or education outcomes – Evidence of achievement for <u>all rotations, projects, assignments, academic sessions (e.g., journal club, academic half day)</u>	
12.5.1 Completed Evaluations/Assessments (organized by rotation)	
12.5.1.1 Resident performance – self-assessment	
12.5.1.2 Preceptor assessment of resident	
12.5.1.3 Resident assessment of preceptor	
12.5.1.4 Resident evaluation of rotation	

12.5.1.5 Projects, presentations, and reports for publication	
12.5.2 Completed non rotation specific evaluations / assessments	
12.5.2.1 Resident evaluation of Coordinator	
12.5.2.2. Resident evaluation of Program Director	
12.5.2.3 Resident evaluation of Residency program	
12.5.2.4 Quarterly or summative assessments (documenting resident's progress throughout the program)	
12.6 Confirmation of completion of the program (e.g., copies of letters, transcripts and/or certificates).	
12.7 Resident's Learning Portfolio <ul style="list-style-type: none"> • Presentations, journal club, written material, etc. including self-assessments of all activities • Written learning plan • Awards 	
13. Preceptors	
13.1 Preceptor self-assessments	
14. Record of successful and unsuccessful resident(s) (for entire history of the program)	
15. List of resident(s) to whom ACPR2 was granted (for entire history of the program)	
16. List of preceptors that may be participating in preceptor meetings	

NOTE: For programs with greater than 4 residents per year, the surveyors may indicate how many and which residents' records to provide.

Additional Documents that will be Consulted On-Site

1. Current pharmacy policy manual
2. Examples of documentation in the patient's health record