



CPRB ACCREDITATION SURVEY REQUIRED DOCUMENTS

for In-Person (Year 1) Surveys

When a survey date is set, the CPRB Coordinator will provide the residency director / coordinator / administrative assistant with a copy of this document. 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.).

Please ensure that document access has been provided through the file hosting site or that you send a password or other credentials required to open the documents 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)

Parent folder (folder in which all other documents are stored)

1. Accreditation Canada (or CCAPP) certificate / documentation specifying current award and years of accreditation.

If this is a joint program:

- 1.1. Contractual agreement with primary partner designated organization
 - 1.2. Reports associated with partner accreditation surveys – Accreditation Canada certificate / documentation specifying current award and years of accreditation (or CCAPP report) and provincial or territorial pharmacy regulatory inspection report
 - 1.3. Inspection reports and routine reports association with the jointly operated Year 1 program (2.1.1.2)
2. Provincial or Territorial Pharmacy Regulation Inspection Report
 3. Itinerary – CPRB will provide a template to use as a guide.
Please work with your lead surveyor to customize it for your program

4. CV Residency Program Director
5. CV Residency Program Coordinator
6. Request for Accreditation and related documents:
 - 6.1 Organization and pharmacy department structure. Include any changes to the organizational structure of the organization, organizational structure of the pharmacy department since the last CPRB accreditation in any format (e.g., PowerPoint, Word)
 - 6.2 Mission statement and goals/objectives of the pharmacy department
 - 6.3 Most recent pharmacy services annual report
 - 6.4 Quality improvement plan and strategic plan for the pharmacy department
 - 6.5 Schedule of residency rotations including preceptors for current year and since previous accreditation survey
7. Residency Advisory Committee Terms of Reference and minutes since previous accreditation survey and current year.
8. Residency Program Manual in its entirety – which shall include but not be limited to the following policies and procedures:
 - 8.1
 - Table of Contents
 - Expectations of residents and preceptors
 - The intended educational outcomes of the program
 - Description (learning goals and objectives) for each residency rotation available for each resident(s)
 - Description (learning goals and objectives; schedule) of the formal academic curriculum (e.g., mandatory course work, mandatory academic half-days, or full days)
 - Evaluation / Assessment forms – provide access to online evaluation forms if applicable
 - Residency performance – self-assessment
 - Residency evaluation of preceptor
 - Resident evaluation of rotation
 - Resident evaluation of Coordinator
 - Resident evaluation of Program Director
 - Resident evaluation of Residency program
 - Preceptor assessment of resident
 - Preceptor self-assessment
 - Quarterly or summative assessment process
 - Criteria for successful completion of the program

- Policies for assessing and granting credit for prior learning Policies concerning professional, family and sick leave and the effect such leaves shall have on the residents' ability to complete the program
 - Policies governing scheduling of residency experiences, including duty (service) roster shifts, if applicable
 - Procedures and tools for evaluating training site (rotation) and residency program
 - Procedures for assessment and evaluation of resident(s), preceptor(s), coordinator(s), director
 - Process for remedial action if deficiencies in the progress of the resident(s) are noted
 - Processes that shall be used to address all discrepancies in assessment
 - Policies governing intimidation and harassment and other forms of abuse
- 8.2 Admissions and completion of the program (most recent year(s))
- One sample of the program's letter of offer
 - Process for confirming a resident's acceptance into the program
 - A sample of the confirmation of completion of the program (e.g., copies of letters, transcripts, and/or certificates)
9. Residents (current year and previous accreditation cycle). **The Lead Surveyor will indicate how many and which resident's files to provide. For each resident, please generate a separate folder and include:**
- 9.1 Completed evaluations / assessments of all residency rotations and experiences. To include the following information:
- Credit for prior learning / transfer of credit documents (if applicable)
 - Residency performance – self-assessment
 - Resident evaluation of preceptor
 - Resident evaluation of rotation
 - Preceptor assessment of resident
 - Projects, presentations, reports for publication, assessments / evaluations, etc.
- 9.2 Completed non-rotation-specific evaluations / assessments
- Resident evaluation of coordinator
 - Resident evaluation of program director
 - Resident evaluation of residency program
 - Quarterly or summative assessments (documenting resident's progress throughout the program)
- 9.3 Resident's Learning Portfolio or equivalent (Please refer to Standard 2.2.3)
10. Preceptors (*please provide a master list of all active preceptors, including their practice area and what rotations they offer / precept*)
- 10.1 Self-Assessments

11. Record of successful and unsuccessful resident(s) (for entire history of the program)
12. List of residents whom ACPR was granted (for the entire history of the program)

Additional Documents that will be Consulted On-Site

1. Current pharmacy policies and procedures
2. Examples of documentation in the patient's health record