



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 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	
<i>If this is a joint program:</i>	
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 associated 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. 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 • Residency Program Coordinator(s) • Residency Preceptors (from all campuses) • Residents • Interdisciplinary Patient Care Team 	
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 Quality improvement plan and strategic plan for the residency program	
6.6 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 and Residency in its entirety- which shall include but not be limited to the following policies and procedures: <ul style="list-style-type: none"> • 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 • Resident performance – self-assessment • Resident 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 concerning professional, family, and sick leave and the effect such leaves shall have on the residents' ability to complete the program 	



<ul style="list-style-type: none"> • 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 • Processes 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 	
<p>9. Residents (current year and previous accreditation cycle). For each resident*, please generate a separate folder and include:</p>	<p>Please provide one folder link per resident. (Each folder can include subfolders for 9.1, 9.2, 9.3, and 9.4).</p>
<p>9.1 Admissions and completion of the program</p> <ul style="list-style-type: none"> • Program's letter of offer • Resident's confirmation of acceptance letter • Prior learning assessment • Granting credit for prior learning / transfer of credit documents (if applicable) • Confirmation of completion of the program (e.g., copies of letters, transcripts, and/or certificates) 	
<p>9.2 Completed evaluations / assessments (organized by rotation). To include the following information:</p> <ul style="list-style-type: none"> • Resident performance – self-assessment • Resident evaluation of preceptor • Resident evaluation of rotation • Preceptor assessment of resident • Projects, presentations, reports for publication, assessments/evaluations, etc. 	
<p>9.3 Completed non-rotation-specific evaluations / assessments</p> <ul style="list-style-type: none"> ○ 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) 	
<p>9.4 Resident's Learning Portfolio</p> <ul style="list-style-type: none"> ○ Written learning plan ○ All presentations, journal club, written material, clinical activities, etc. including self-assessments of all activities ○ Awards 	
<p>10. Preceptors (<i>please provide a master list of all active preceptors, including their practice area and what rotations they offer/precept</i>)</p>	
<p>10.1 Self-Assessment</p>	



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

**Note - For programs with greater than 4 residents per year, the surveyors shall 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