



AFMC

The Association of Faculties
of Medicine of Canada

The Committee on the Accreditation of Canadian Medical Schools

The Committee on the Accreditation of Canadian Medical Schools (CACMS), working with the Liaison Committee of Medical Education (LCME) in the United States, ensures that Canadian medical faculties' MD programs meet the quality expected when producing tomorrow's doctors. Medical schools demonstrating compliance are afforded accreditation, a necessary condition for a program's graduates to be licensed as physicians.

CACMS came into formal existence in 1979 as a joint effort of the then-Association of Canadian Medical Schools (ACMC) and the Canadian Medical Association. Since 1965 the ACMC had worked with the LCME in the accreditation process for Canadian MD programs.

The LCME is a similar joint effort between the Association of American Medical Colleges and the American Medical Association. Since mid-century it assumed responsibility for accrediting programs leading to the MD degree in the United States and Canada based on a long-standing collaboration extending to the beginning of the 20th century and the famous "Flexner Report." There was active Canadian participation in the LCME until CACMS was formed.

The accreditation standards address items in the following categories:

- Institutional setting
- Educational program for the MD degree
- Medical students
- Faculty
- Educational resources

Each faculty undergoes a full on-site assessment visit at least every eight years by a team of trained surveyors consisting of senior leaders, educators and students. There is an LCME member on the survey team of each Canadian school, and the CACMS chair and secretary are frequent surveyors for American schools. This team prepares a formal survey report, which is given separate consideration by CACMS and the LCME. Each body makes its own determination of the school's state of compliance with the standards and determines the status of accreditation. CACMS and LCME invariably request a follow-up, ranging from a progress report to repeat limited visits or even probation, depending on the seriousness and duration of the areas of non-compliance. Adverse actions such as probation are subject to appeal.

LCME and CACMS develop and approve standards. The CACMS committee chair attends LCME committee meetings and vice-versa. The chair of CACMS sits on the various sub-committees of the LCME and provides a Canadian voice in all of the deliberations relating to the development of methods, policy and performance issues relating to accreditation.

In recent years CACMS has had an increasing influence on the development of new standards (service learning, social accountability, diversity) and the functioning of what remains a mutually beneficial bi-national endeavour to ensure the quality of physician services in the future. It is also increasingly called upon for international consultations.

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