

 جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY <b>POLICY AND PROCEDURES</b>		<b>Institutional Policy</b>
<b>Classification:</b> Training	<b>Title:</b> Training Site Review	
<b>Approval Authority:</b> Programs Administration Committee (PAC)	<b>Implementation Authority:</b> Vice Dean for Scientific Research and innovation	
<b>Effective Date:</b> April, 2025	<b>Supersedes:</b> New	
<b>Latest Revision:</b> New	<b>Code:</b>	
<b>Review Date:</b> April, 2027	<b>No. of Pages:</b> 5	

### 1. Purpose

- 1.1 To ensure all training sites affiliated with Imam Abdulrahman bin Faisal University (IAU) meet the requirements of the residency program and contribute effectively to resident education.
- 1.2 To maintain alignment with the accreditation requirements of the Royal College of Physicians and Surgeons of Canada (RCPSC) and promote high standards of safety, quality, and educational effectiveness.

### 2. Scope

- 2.1 This policy applies to all IAU residency programs and all affiliated training sites, including hospitals, clinics, and external health facilities.
- 2.2 It includes all stakeholders involved in postgraduate training: senior leadership (Vice Dean for Scientific Research and Innovation), program directors, site coordinators, administrative staff, and residents.

### 3. Policy Statement

- 3.1 IAU is committed to formalizing its relationships with training sites through legally binding affiliation agreements.
- 3.2 All sites will be subject to a structured and regular review process to ensure educational quality and safety.
- 3.3 Reviews will assess compliance with IAU regulations and procedures for medical residency programs and RCPSC accreditation standards, resident experience, faculty supervision, available resources, and the overall learning environment.

### 4. Definitions

- 4.1 Learning Site: Any location where clinical training occurs.
- 4.2 Affiliation Agreement: Legal contract outlining mutual responsibilities in residency education.
- 4.3 Vice Dean for Scientific Research and Innovation (VDSRI): Senior leader responsible for

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oversight of residency education.

4.4 Programs Administration Committee (PAC): Committee responsible for governance of the residency programs and training site oversight.

4.5 Program Director: Faculty member overseeing the conduct and quality of a residency program.

4.6 Training Site Coordinator: Local lead responsible for managing resident activities and supervision at a clinical training site.

4.7 Training Site Review: Comprehensive assessment of a training site's compliance with standards.

## 5. Responsibilities

### 5.1 Vice Dean for Scientific Research and Innovation

- Approves and renews affiliation agreements.
- Oversees scheduling and execution of site reviews.
- Ensures follow-up on deficiencies and reports outcomes to university leadership.

### 5.2 Programs Administration Committee (PAC)

- Ensures implementation and periodic review of this policy.
- Reviews site reports and monitors action plans.
- Facilitates communication and data collection for continuous quality improvement.

### 5.3 Program Directors

- Evaluate training quality through direct feedback and resident assessments.
- Act as liaisons with Training site coordinators.
- Escalate significant site concerns the PAC.

### 5.4 Training Site Coordinators

- Provide on-site orientation, supervision, and learning resources.
- Monitor site conditions for compliance with safety and educational policies.
- Cooperate with reviews and implement corrective actions when needed.

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## 6. Procedures

### 6.1 Affiliation Agreements

- Must be in place for all training sites.
- Define roles, educational expectations, resources, and safety obligations.
- Reviewed periodically to ensure ongoing relevance and compliance.

### 6.2 Training Site Review Process

- Conducted every two years or as concerns arise.
- Includes self-assessments, resident/faculty feedback, and site visits.
- Team composition includes PAC members, program directors, and resident representatives.

### 6.3 Review Criteria

- Learning environment and case variety.
- Adequacy of supervision and faculty qualifications.
- Physical infrastructure, on-call facilities, and access to support services.
- Patient and resident safety, including duty hours and wellness.
- Adherence to IAU affiliation terms and RCPSC standards.

### 6.4 Reporting and Improvement

- Review teams prepare structured reports including strengths, deficiencies, and recommendations.
- Reports shared with training site leadership, program directors, and the PAC.
- Corrective action plans are obtained and monitored through follow-up.

## 7. Enforcement

7.1 Sites failing to meet expectations will be given timelines for improvement.

7.2 Persistent non-compliance may result in the withdrawal of resident placements.

7.3 The Vice Dean for Scientific Research and Innovation will provide annual compliance reports to university leadership.

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Sources:

- Royal College of Physicians and Surgeons of Canada, General Standards for International Institutions Standards 3 and 9 (learning sites and continuous improvement)
- IAU regulations and procedures for medical residency programs.

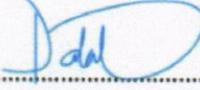
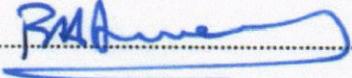


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<b>Prepared by:</b>  ..... <b>Dr. Radwa Bakr</b> Director of quality and Accreditation Unit	<b>Date Signed:</b>  <b>6 July 2025</b>
<b>Reviewed by:</b>  ..... <b>Dr. Ghada Al Yousif</b> Vice Dean for Quality and Development	<b>Date Signed:</b>  <b>6 July 2025</b>
<b>Approved by:</b>  ..... <b>Dr. Dalal A. Bubshait</b> Vice Dean for Scientific Research and Innovation	<b>Date Signed:</b>  <b>9 July 2025</b>
<b>Approved by:</b>  ..... <b>Dr. Bassam H. Awary</b> Dean for College of Medicine	<b>Date Signed:</b>  <b>10 July 2025</b>