



Medical Facility Accreditation Committee

Terms of Reference

Purpose

The Medical Facility Accreditation Committee is a Council appointed committee to oversee the work of the advisory committees and advise Council on matters of policy. Through a broader perspective on matters considered by each discipline, this oversight improves the consistency of standards and their application across all programs and as well, adds to the accountability to the public of Alberta.

Roles and Responsibilities

The Committee considers issues related, but not restricted to the following:

1. Advise Council on accreditation standards for the ownership and operation of diagnostic and treatment facilities in Alberta;
2. Investigate and inspect the ownership and operation of such facilities;
3. Establish, develop and administer a program of review and assessment of such facilities;
4. Confirm that the practice of medicine conducted in such facilities and the financial arrangements pertaining thereto are in accordance with the College's bylaws and Council's policies;
5. Advise Council on matters referred to the Committee regarding standards of practice for the use of new health technology in medical practice;
6. Advise Council on matters referred to the Committee regarding the qualifications of physicians for medical practice in addition to their recognized specialties.

The Committee may do the following in conducting its business and preparing advice for Council:

- receive minutes, reports and recommendations of consultants and accreditation subcommittees
- review scientific literature
- review standards in other jurisdictions
- receive written and oral presentations from stakeholders

Membership and Tenure

The Committee is composed of not more than nine (9) members all of whom are appointed by the Council, in accordance with College by-laws.

Members are appointed for a three-year term renewable once.

Chair

The Chair is selected from the membership and appointed by Council. In the absence of the chair, an alternate will be selected from the members present.

Meetings

Meetings are held three times a year and at the request of the Chair. Additional meetings may be called as required.

Decisions

General decisions are reached by consensus of the members present. Decisions supported by motions require that a minimum of half of the voting members are in attendance in-person or by audio or video-conference. The Chair is included in the quorum count. The Chair does not vote, except in the event of a tie; the Chair will cast the deciding vote.

Accountability

MFAC will consider direction from the Advisory Committees to which it oversees and is accountable to Council.

The College will retain a copy of the minutes of the meeting for a minimum of 10 years.

Confidentiality

All written materials and discussions related to decisions made at the meetings of the Committee are confidential except that information deemed necessary to communicate the decision to stakeholders.

All Committee members are required to sign confidentiality agreements prior to serving on the Committee.

Explanatory Notes

1. *Advise Council on accreditation standards for the ownership and operation of diagnostic and treatment facilities in Alberta.*

Topics for consideration in accreditation standards include:

- Medical procedures
- Qualifications of physicians and paramedical personnel
- Medical equipment
- Safety requirements
- Documentation
- Quality assurance

Note: The types of medical procedures of particular concern to the Committee are listed in Section 46 (2) of Part B of College Bylaws.

2. *Investigate and inspect the ownership and operation of such facilities.*

The Committee delegates this function to consultants appointed ad hoc and to standing accreditation subcommittees.

3. *Establish, develop and administer a program of review and assessment of such facilities.*

The Committee oversees accreditation programs. The College currently operates accreditation programs for the following:

- Diagnostic imaging
- Medical laboratory
- Pulmonary function testing
- Neurophysiologic testing
- Non-hospital surgical facilities
- Non-hospital abortion facilities
- Sleep disorders testing
- Vestibular testing

4. *Confirm that the practice of medicine conducted in such facilities and the financial arrangements pertaining thereto are in accordance with the College's bylaws and Council's policies.*

Policies of particular relevance include:

- Principles of ownership
- Conflict of interest
- Advertising
- Practice in Association

5. *Advise Council on matters referred to the Committee regarding standards of practice for the use of health technology in medical practice.*

The Committee offers a multi-disciplinary perspective on the use of technology in physicians' offices. Examples include:

- laser surgery
- liposuction

6. *Advise Council on matters referred to the Committee regarding the qualifications of physicians for medical practice in addition to their recognized specialties.*

Examples include:

- physician privileges in hospitals of not more than 100 beds (for which a standing committee of the College currently exists)
- recognition of "special interests" of physicians