

Osteopathic Recognition Update

Session: SES115

Presented: March 9, 2024

Conflict of Interest Disclosure

Speaker(s):

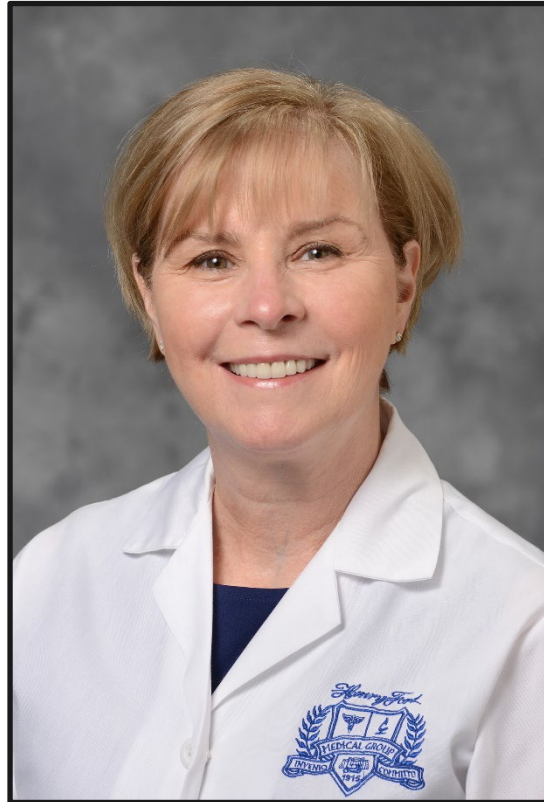
Eileen Hug, DO – Chair, Osteopathic Recognition Committee

Tiffany Moss, MBA – ACGME Executive Director

Disclosure

None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing health care products used by or on patients.

Introductions



Eileen Hug, DO
*Chair, Osteopathic
Recognition Committee*



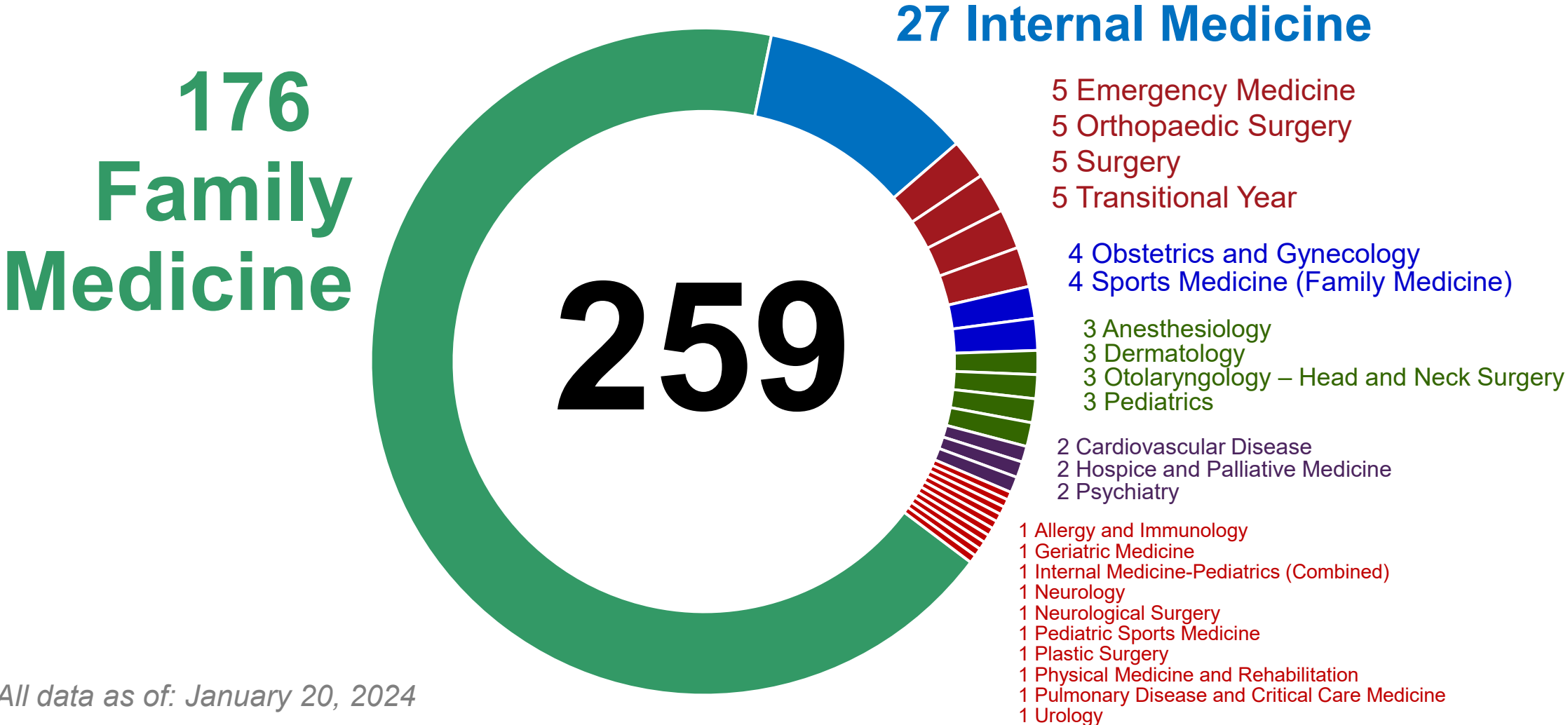
Tiffany Moss, MBA
ACGME Executive Director

Objectives

- Review Osteopathic Recognition program statistics.
- Discuss committee announcements and updates.
- Identify the top five areas of citations/areas for improvement (AFIs).
- Review the Osteopathic Recognition resources.

Program Statistics


Number of Programs with Osteopathic Recognition (by Specialty)




All data as of: January 20, 2024


Committee Composition Updates


Osteopathic Recognition Committee Members


 Eileen Hug, DO, FAAP, FACOP
Chair

 James J. Arnold, DO, FACOFP, FAAFP
Vice Chair


 Christie Richardson, DO
Resident Member

 Ken R. Coelho, DHSc, MSc, FRSPH
Public Member

 Joanne Baker, DO, FACOI, FACP,
FAODME, FHM

 John Casey, DO, MA, FACOEP, FACEP


 Kristen Conrad-Schnetzer, DO


 J. Michael Finley, DO

 Dominique Fons, MD, MEd, FAAFP


 Laura E. Griffin, DO, FAAO


 Yvette M. Gross, DO

 Jodie Hermann, DO, MBA, FACOI, FACP

 Sarah James, DO, FACOFP

 Jacklyn D. Kiefer, DO, FAMSSM

 Albert J. Kozar, DO, FAOASM, R-MSK

 Erin Westfall, DO, FACOFP

 Kathleen Sweeney, DO, FAAFP,
FACOFP

Departing Members

Thank you to the following Osteopathic Recognition Committee members with a term ending June 30, 2024:

Laura Griffin, DO

Jodie Hermann, DO

Eileen Hug, DO

Sarah James, DO

Christie Richardson, DO (Resident Member)

New Members

The following new Osteopathic Recognition Committee members will start their term July 1, 2024:

Sarah Carroll, DO

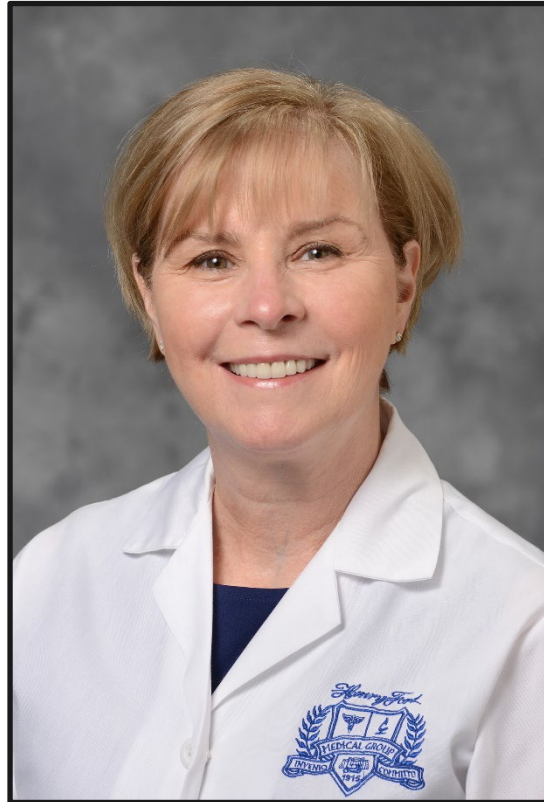
Jeremy Fischer, DO

Katheryn Norris, DO

Kyle Sherwin, DO (Resident Member)

Ryan Zimmerman, DO

Current Osteopathic Recognition Committee Leadership (July 2023 – June 2024)



Eileen Hug, DO
Chair



James Arnold, DO
Vice Chair

New Osteopathic Recognition Committee Leadership (July 2024 – June 2025)



Joanne Baker, DO
Chair



James Arnold, DO
Vice Chair

Frequent Areas of Citations/AFIs

Top Five Areas of Citations and AFIs

- Appointment policy
- Faculty development
- Osteopathic manipulative medicine (OMM) learning activities
- Assessment of skill proficiency in osteopathic manipulative treatment (OMT)
- Final evaluation

Appointment Policy

Question	Answer
<p>What does a program with Osteopathic Recognition need to include in its eligibility policy?</p> <p><i>[Recognition Requirement: II.C.-II.C.1.]</i></p>	<p>The committee expects that programs with Osteopathic Recognition will specify in an eligibility policy the minimum prerequisite requirements to be completed prior to entry into a designated position. Prerequisite requirements for each of the following types of applicants must be individually delineated within the policy, including:</p> <ul style="list-style-type: none">• graduate of a Commission on Osteopathic College Accreditation (COCA)-accredited college of osteopathic medicine (COM) who holds a DO degree• graduate of a medical school in the United States or Canada, accredited by the Liaison Committee on Medical Education (LCME)• graduate from a medical school outside of the United States or Canada <p>Though it is expected that graduates of a COCA-accredited COM (with a DO degree) demonstrate sufficient background and/or instruction to enter a designated osteopathic resident position, physicians who have not graduated from a COCA-accredited COM must be expected to demonstrate some level of preparation prior to entry into a designated osteopathic resident position. It is through the program's eligibility policy that a program will demonstrate it requires an adequate level of preparation of all applicants prior to entry into a designated osteopathic resident position.</p> <p>Additionally, the policy should:</p> <ul style="list-style-type: none">• use terminology consistent with the Osteopathic Recognition Requirements (i.e. designated osteopathic resident)• clearly state when a resident may be designated (i.e., upon matriculation into the program, six months after matriculation into the program, etc.)• identify what is required prior to designation (i.e., prerequisite requirements)• include all medical school types, including graduates of COCA-accredited COMs

Appointment Policy

Key parts:

- Specify medical school graduates that accepted
- Clearly identify what is required of a resident (based on medical school) prior to matriculation
- State when residents matriculate into designated positions in the program (e.g., at matriculation into the program, within the first six months of the program)

Faculty Development

I.B.4. Osteopathic faculty members must:

I.B.4.a) annually participate in a structured faculty development program that includes OPP; ^(Core)

I.B.4.a).(1) This program must include ongoing education addressing evaluation and assessment in competency-based medical education. ^(Core)

Faculty Development

IV.B.2. The program must:

IV.B.2.c) ensure the annual availability of structured faculty development for osteopathic faculty members that includes OPP and ongoing education addressing evaluation and assessment in competency-based medical education. ^(Core)

Faculty Development

<p>What does the committee consider “faculty development”?</p> <p><i>[Recognition Requirements: I.B.4.-I.B.4.a).(1)]</i></p>	<p>The Committee views faculty development as a structured program of regularly scheduled development activities designed to enhance the effectiveness of teaching, administration, leadership, scholarship, and the clinical and behavioral components of the osteopathic faculty members’ performance. It is important to note that the faculty development program should include an integration of OPP throughout the scheduled activities.</p> <p>A faculty development program may be offered using local resources.</p>
<p>How frequently should faculty development that integrates OPP occur?</p> <p><i>[Recognition Requirements: I.B.4.-I.B.4.a).(1), IV.B.2.c]</i></p>	<p>It is suggested that faculty development integrating OPP occur at least annually and should incorporate evaluation and assessment of competence in medical education.</p>
<p>Does attendance at a conference or meeting where AOA CME credit is earned qualify as faculty development?</p> <p><i>[Recognition Requirements: I.B.4.-</i></p>	<p>Conferences and meetings where AOA CME credit or ACCME CME credit are earned do not <i>necessarily</i> qualify as faculty development; the conference or meeting must meet the definition of osteopathic faculty development as previously specified to qualify.</p>

Faculty Development

- Must be provided to all osteopathic faculty members and not just core osteopathic faculty members
- Must incorporate Osteopathic Principles and Practice (OPP) and occur annually
- Faculty members must attend an actual session that incorporates OPP and not just a meeting coordinated by an osteopathic organization
- Does not need to be a session that is CME eligible

Faculty Development

- A session that is eligible for American Osteopathic Association (AOA) CME does not automatically satisfy the requirement
- Program and Sponsoring Institution are responsible for providing and ensuring completion

OMM Learning Activities

IV.A. Experiences

Programs must:

- IV.A.4. provide learning activities to advance the procedural skills acquisition in OMM for both designated osteopathic residents and osteopathic faculty members; ^(Core)

OMM Learning Activities

- Programs and Sponsoring Institutions are responsible for providing and ensuring completion
- Must be a live, in-person, and hands-on activity
- Watching a video does not satisfy this requirement
- Must occur annually

Assessment of Skill Proficiency in OMT

<p>What are examples of acceptable formats for the assessment of skill proficiency in OMT?</p> <p><i>[Recognition Requirements: V.A.2.h) and V.A.2.h).(2)]</i></p>	<p>An acceptable assessment of skill proficiency in OMT would consist of an assessment process that includes direct observation of patient encounters with feedback through a standardized evaluation form. The following assessment formats are examples that are acceptable to the Committee, so long as they are accompanied by feedback through a standardized evaluation form:</p> <ul style="list-style-type: none">• Mock Practical Board Examination• Objective Structured Clinical Evaluation (OSCE)• Standardized OMT Skill Observation and Evaluation• Mini-Clinical Evaluation Exercise (CEX) <p>The assessment of skill proficiency in OMT should cover a range of OMT techniques, as applicable to the specialty/subspecialty.</p>
<p>How frequently does the Committee expect programs to administer an assessment of skill proficiency in OMT?</p> <p><i>[Recognition Requirements: V.A.2.h) and V.A.2.h).(2)]</i></p>	<p>The frequency of administration of an assessment of skill proficiency in OMT will be dependent on the assessment process defined by the program. If the program utilizes a single comprehensive assessment of skill proficiency in OMT, such as a mock practical board examination, it would be acceptable for the assessment to occur once during the program. If the program utilizes an assessment that is comprised of a series of longitudinal assessments (e.g., standardized OMT skill observation and evaluation) that equate to a comprehensive assessment of skill proficiency, then the assessment will need to occur multiple times during the program as defined by the program's established assessment process.</p>

Assessment of Skill Proficiency in OMT

- Program must develop an assessment process that includes direct observation of patient encounters with feedback through a standardized evaluation form
- Examples of the acceptable standardized evaluation forms: mock practical board examination, objective structured clinical examination (OSCE), mini-CEX
- Should cover a range of OMT techniques, as applicable to the specialty/subspecialty

Final Evaluation

V.A.3.c)

The final evaluation must:

V.A.3.c).(2)

document the resident's performance related to the application of OPP in each of the ACGME Competencies during the final period of education; and, ^(Core)

V.A.3.c).(3)

verify that the designated osteopathic resident has demonstrated the knowledge, skills, and behaviors necessary to enter autonomous practice and to apply OPP to patient care. ^(Core)

V.A.3.c).(3).(a)

Transitional and preliminary year programs are not required to include verification that designated osteopathic residents have demonstrated sufficient competence to apply OPP to patient care, upon entering practice, without direct supervision. ^(Detail)

Final Evaluation

<p>How can a program's final evaluation be updated to include documentation of a resident's performance related to the application of OPP in each of the ACGME Competencies?</p> <p><i>[Recognition Requirements: V.A.3.c).(2).]</i></p>	<p>A section may be added to the program's existing final evaluation that includes an assessment of the application of OPP in patient care and procedural skills, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. The application of OPP must be assessed for each competency area individually. The format of this evaluation section may vary.</p> <p>Example:</p>			
	Competency	Description	At expected level for graduation	Below expected level for graduation
	Patient Care and Procedural Skills	Resident integrates OPP into patient care and applies OMT as indicated.		
	Medical Knowledge	Resident demonstrates application of OPP in the domain of medical knowledge.		
	Practice-based Learning and Improvement	Resident integrates OPP into practice-based learning and improvement.		
	Interpersonal and Communication Skills	Resident demonstrates appropriate interpersonal and communication skills in the application of OPP.		
	Professionalism	Resident demonstrates professionalism in their application of OPP.		
	Systems-based Practice	Resident integrates OPP into their systems-based practice.		

Final Evaluation

- Must include a concise evaluation of each of the ACGME Competencies
 - Six ACGME Core Competencies: Professionalism, Patient Care and Procedural Skills, Medical Knowledge, Practice-based Learning and Improvement, Interpersonal and Communication Skills, Systems-based Practice.
 - OPP/OMM is not an ACGME Competency. OPP/OMM must be integrated into the Competencies.
- Must not be the Milestones or a Milestones summary report.

Final Evaluation

- Final verification statement must be exactly as it appears in the Osteopathic Recognition Requirements:
“demonstrated the knowledge, skills, and behaviors necessary to enter autonomous practice and to apply OPP to patient care.”
- The old verification language must no longer be used:
~~“verify that the designated osteopathic resident has demonstrated sufficient competence to apply OPP to patient care, upon entering practice, without direct supervision.”~~
- Form must include the signature of the Director of Osteopathic Education

Citation Responses

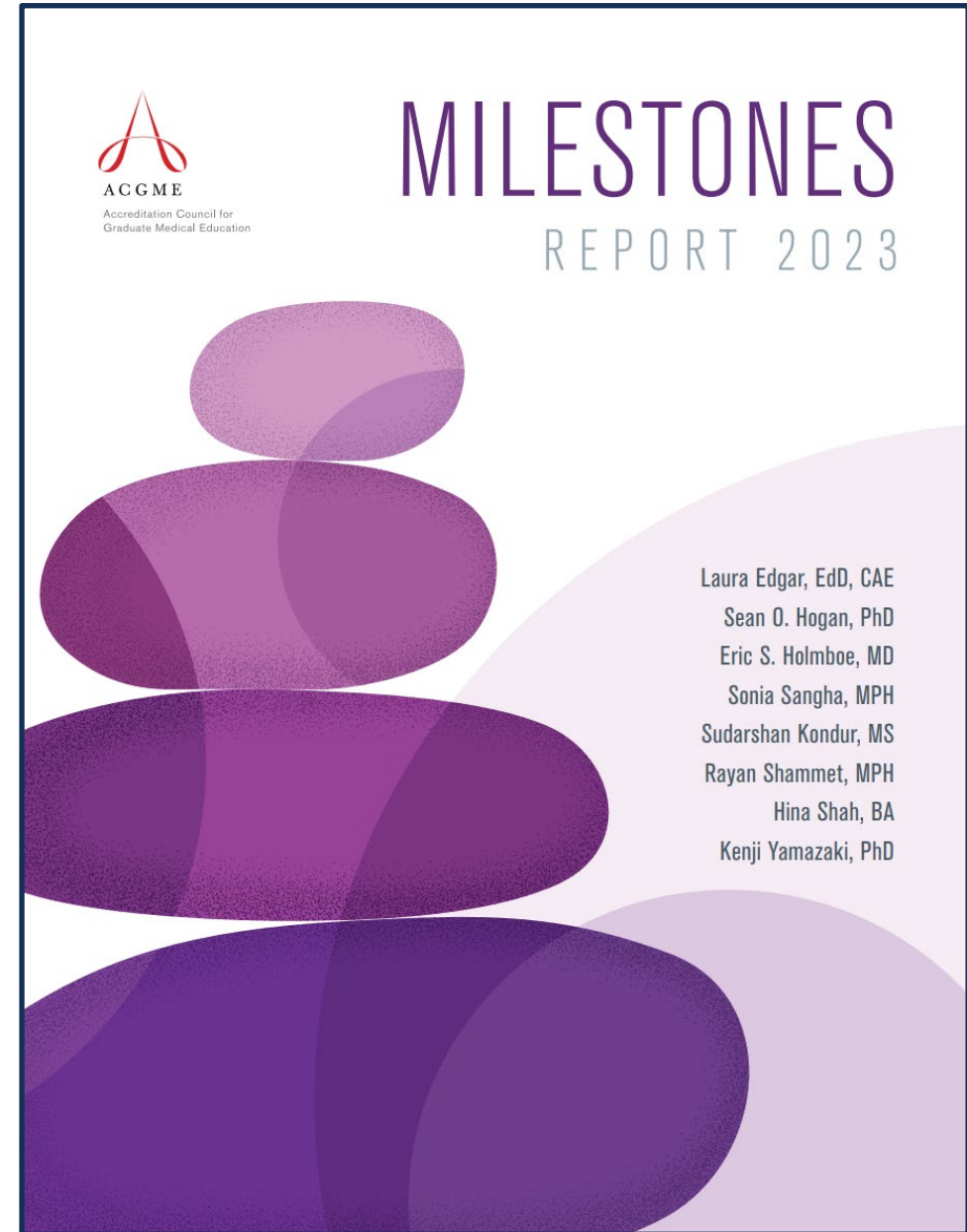
- Responses must address the concern/issue noted in the citation text and note how the program is addressing it. The program must detail what changes have been made and whether the issue has been resolved. If it is not resolved, then the response should detail the steps taken and when it is anticipated to be resolved.
- Citation responses must be provided annually in the Accreditation Data System (ADS).
- Responses will be reviewed by the Osteopathic Recognition Committee at the program's next review. (Note: Programs on Initial Recognition will be asked to provide a response to a citation during several ADS Annual Updates prior to review by the Committee.)

Areas for Improvement (AFIs)

- Identified on the Letter of Notification
- Not currently identified in ADS like citations because they do not require a formal response
- Programs are expected to address the issues noted in the AFIs
- Osteopathic Recognition Letters of Notification must be reviewed as part of the Annual Program Evaluation, which includes citations and AFIs

Updates

2023 National Milestones Report



2023 National Milestones Report

What's New for 2023

This year's report introduces box plots for the programs that use the Osteopathic Recognition Milestones. Osteopathic Recognition emerged from a collaborative agreement among the ACGME, American Osteopathic Association (AOA), and American Association of Colleges of Osteopathic Medicine (AACOM) as part of the transition to a single GME accreditation system. Launched in 2015, Osteopathic Recognition is available to ACGME-accredited programs that integrate Osteopathic Principles and Practice into the program's curriculum and demonstrate substantial compliance with the ACGME Osteopathic Recognition Requirements. The Osteopathic Recognition Milestones were first published in August 2015. The Osteopathic Recognition Committee (previously called the Osteopathic Principles Committee) first conferred Osteopathic Recognition in November 2015, allowing recognized programs to designate osteopathic residents/fellows and report Osteopathic Recognition Milestones in the ACGME Accreditation Data System (ADS). The 2.0 version of these Milestones was published in August 2021, with implementation in July 2022. See the [Osteopathic Recognition](#) section of the ACGME website for more resources.

Specialties that had a program(s) with Osteopathic Recognition during the 2022-2023 academic year:

- Anesthesiology
- Dermatology
- Diagnostic Radiology
- Emergency Medicine
- Family Medicine
- Internal Medicine
- Neurological Surgery
- Neurology
- Obstetrics and Gynecology
- Orthopaedic Surgery
- Otolaryngology – Head and Neck Surgery
- Pediatrics
- Physical Medicine and Rehabilitation
- Plastic Surgery
- Psychiatry
- Surgery
- Urology
- Internal Medicine-Pediatrics

2023 National Milestones Report

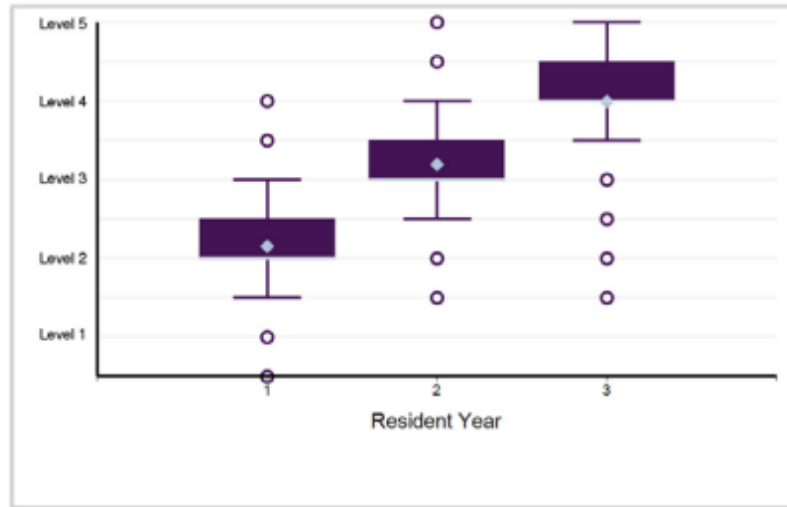
Box Plot Report - Milestone Evaluation by Resident/Fellow Year: Year-End 2022-2023

TABLE 25A: SPECIALTY: Family Medicine (Osteopathic Recognition)

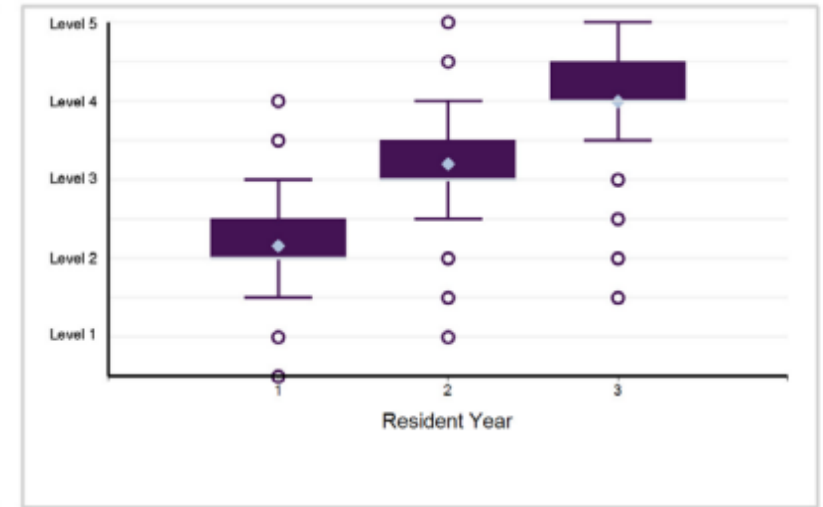
Resident Year	1	2	3	Total Residents
# of Residents	597	570	552	1,719

This specialty has designated osteopathic residents in a program with Osteopathic Recognition, which required reporting of the following Osteopathic Recognition Milestones.

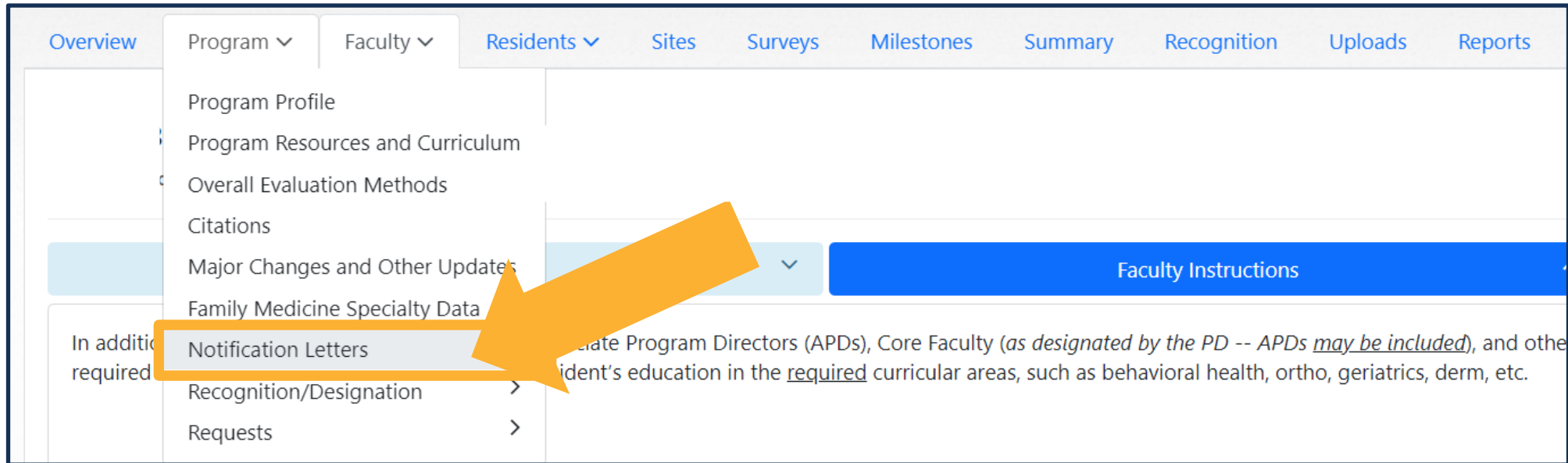
1. Patient Care - Osteopathic Recognition - Patient Care 1: Osteopathic Principles and Practice (OPP) for Patient Care



2. Patient Care - Osteopathic Recognition - Patient Care 2: Osteopathic Evaluation and Treatment



Letters of Notification



The screenshot displays a web application interface with a top navigation bar containing the following tabs: Overview, Program, Faculty, Residents, Sites, Surveys, Milestones, Summary, Recognition, Uploads, and Reports. The 'Residents' dropdown menu is open, showing a list of options: Program Profile, Program Resources and Curriculum, Overall Evaluation Methods, Citations, Major Changes and Other Updates, Family Medicine Specialty Data, Notification Letters, Recognition/Designation, and Requests. The 'Notification Letters' option is highlighted with a yellow border, and a large orange arrow points to it from the right. To the right of the dropdown menu, there is a blue button labeled 'Faculty Instructions'. Below the dropdown menu, there is a text block that reads: 'In addition to the required curriculum, residents must complete Program Directors (APDs), Core Faculty (as designated by the PD -- APDs *may be included*), and other... resident's education in the required curricular areas, such as behavioral health, ortho, geriatrics, dermatology, etc.'

Letters of Notification

[Accreditation Letters](#)
[Osteopathic Recognition Letters](#)

[Back](#)

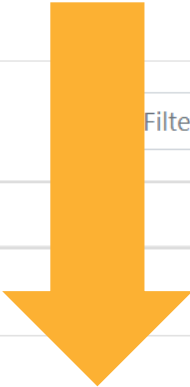
Accreditation Letters ▼

Letters

All Letter Options ▼

Filter Results

Letter Date	Meeting Date	Letter Type
05/30/2023	05/30/2023	Other RC Correspondence
02/07/2023	01/25/2023	Program Notification
02/05/2022	01/26/2022	Program Notification



Letters of Notification

[< Back](#)

Accreditation Letters ▼

Letters


All Letter Options ▼

Filter Results

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05/30/2023	05/30/2023	Other RC Correspondence
02/07/2023	01/25/2023	Program Notification
02/05/2022	01/26/2022	Program Notification

Accreditation Letters

Osteopathic Recognition Letters



Letters of Notification

Osteopathic Recognition Letters

Letters

All Letter Options

Filter Results

Letter Date	Meeting Date	Letter Type
01/30/2023	01/20/2023	Program Notification
01/10/2022	01/07/2022	Program Notification
01/31/2021	01/15/2021	Program Notification

Accreditation Letters

Osteopathic Recognition Letters

Letters of Notification

- No longer attached to the notification emails
- Programs may only obtain notification letters in ADS
- This includes accreditation and recognition letters from Review and Recognition Committees, as well as Field Activities' site visit notification letters







Director of Osteopathic Education ADS Login

#ACGME2024

- Directors of Osteopathic Education must have a login for ADS
- Logins are not automatically provided when a Director of Osteopathic Education is appointed to the role in ADS
- The program director or a program coordinator will click the “grant access” button next to the Director of Osteopathic Education’s name in the ADS Leadership table, which prompts ADS to email the Director of Osteopathic Education login information
- Directions are found in the Application Instructions for Osteopathic Recognition document (p. 5) in the Osteopathic Recognition section of the ACGME website

ADS Login for the Director of Osteopathic Education

Program Leadership				+ Add Personnel	
	Role	◆ Name	◆		
	Program Director	Eric Hunter Sharp, DO			
					
	Program Coordinator	Tiffany Moss, MBA			
	Director of Osteopathic Education	Natasha Bray, DO		Grant Login	Replace Edit





Requirement Formatting Change *(Coming Soon)*

#ACGME2024

- All ACGME Requirements (Institutional, Program, and Recognition) will be re-formatted.
- Requirement references will no longer include Roman numerals.
- Requirement references will more closely resemble the numbering convention used by the Commission on Osteopathic College Accreditation (COCA) and Liaison Committee on Medical Education (LCME), which uses numbers with decimal points (e.g., 1.0, 1.1, 1.2) and bulleted lists.
- The re-numbered and re-formatting documents will not be effective until the 2025-2026 academic year, but they will be posted for review in the next academic year.



Committee Meeting Dates

Meeting Date	Agenda Closing Date
August 15-17, 2024	June 3, 2024
January 24-25, 2025	October 1, 2024
April 25-26, 2025	January 6, 2025
August 22-23, 2025	June 1, 2025



Osteopathic Recognition Resident Survey

2023 National Osteopathic Recognition Survey Results

National

	Hospital/Inpatient Setting			Clinic/Outpatient Setting			Didactic Setting	
	Yes	No	N/A	Yes	No	N/A	Yes	No
Do you receive an adequate education in Osteopathic Principles and Practices?	75.7%	15.8%	8.5%	88.9%	4.6%	6.5%	95.6%	4.4%
Do you receive an adequate education in Osteopathic Manipulative Treatment, as applicable to your specialty/subspecialty?	73.1%	17.6%	9.3%	87.6%	5.6%	6.9%	94.9%	5.1%

To what extent do you feel...	Not at all	A little	A moderate amount	Quite a bit	A lot
Your non-osteopathic faculty members and staff are supportive of osteopathic residency/fellowship education?	0.5%	2.3%	9.2%	27.7%	60.2%
Your osteopathic faculty members role model the integration of Osteopathic Principles and Practice?	0.7%	3.8%	9.8%	26.3%	59.3%
You are supervised by osteopathic faculty members?	0.7%	4.3%	12.2%	25.9%	56.9%
You are evaluated on Osteopathic Principles and Practices?	2.4%	6.9%	16.6%	24.8%	49.3%
Your program supports you to explore scholarly activity that integrates Osteopathic Principles and Practice?	1.0%	4.6%	13.5%	24.3%	56.5%

	Definitely not choose again	Probably not choose again	Might or might not choose again	Probably choose again	Definitely choose again
Thinking specifically about the osteopathic education provided by this program, how likely would you be to choose to be a designated osteopathic resident in this program again?	1.3%	3.0%	13.8%	28.5%	53.4%

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
The osteopathic education provided by this program is preparing me to incorporate OPP in my future practice.	1.2%	2.7%	15.3%	34.7%	46.0%

2023 Survey Administration

- Two new overall experience questions were added to the Osteopathic Recognition portion of the Resident Survey.
- National Osteopathic Recognition survey results were added directly into program survey reports.

2024 Survey Administration

- No changes will be made to the Osteopathic Recognition survey questions.
- Multi-year Osteopathic Recognition survey reports will be available for programs that had fewer than four survey respondents during the prior administration of the survey.

Committee Usage of Survey Report

- The Osteopathic Recognition Resident Survey Report is used as a screening tool to identify if a program may be having problems.
- Programs are strongly encouraged to communicate to the Committee through the osteopathic Major Changes box in ADS any actions taken by the program to address negative survey responses.



Osteopathic Recognition Site Visits

Osteopathic Recognition Field Representatives



Laura Hempstead, DO



Gretta Gross, DO



Pamela Royston, PhD



Osteopathic Recognition Site Visits

#ACGME2024

- Conducted by subset of Field Representatives with expertise in OPP and/or Osteopathic Recognition
- Only covers program's compliance with Osteopathic Recognition Requirements and not the Program Requirements
- May be conducted virtually or in person
- Document review for the site visit will require the program to upload requested documents in ADS on the Uploads tab
- Reports viewable only by the Osteopathic Recognition Committee during a program review when a recognition status is being conferred and compliance with requirements is being determined



Osteopathic Recognition 10-year Site Visit

- Conducted 10 years after a program achieves Continued Recognition
- Full Osteopathic Recognition site visit

Reminders

Osteopathic Role Descriptions

- Maintained for all osteopathic faculty members in ADS
- Reviewed during each ADS Annual Update and any time there is change in the role of Director of Osteopathic Education
- Clearly identify the physician's role in the program – Director of Osteopathic Education, core osteopathic faculty member, or osteopathic faculty member
- State how a faculty member contributes to program (e.g., supervises residents in the continuity clinic, organizes OMT workshops), which should not be a copy/paste of the requirements
- Must not include a faculty member's qualifications for the role

State Medical Licensure

- Osteopathic faculty members must have up-to-date state licensure information maintained in their ADS faculty profiles
- State medical licensure does not auto-populate in ADS
- Programs must annually review faculty members' licensure information during the ADS Annual Update and prior to a site visit to ensure expiration dates are accurate



Osteopathic Faculty Board Certification

#ACGME2024

- AOA and American Board of Medical Specialties (ABMS) board certification auto-populates in each faculty member's ADS profile.
- Newly added faculty members will have their certification populated overnight.
- Programs are required to verify that certification auto-populates.
- Programs should not be concerned with the certification "status" or "duration type" if they have active certification.
- Programs are required to manually enter missing board certification and identify if a faculty member is board eligible. *(Note: Osteopathic faculty members must be board certified. Board eligible is not accepted.)*

ABMS Certification

Last updated: 12/7/2023

The following information was imported from ABMS and is read only.

Board Name	Certification Name	Status	Duration Type	Initial Date	End Date
Family medicine	Family Medicine	Active	MOC	12/7/2009	No Date Present

- Data imported monthly from ABMS. Date of last import listed above.
- Data is matched to each faculty using name, National Provider ID (NPI), date of birth and medical school graduation year.
 - If the information provided by the program is entered incorrectly, no ABMS match will occur or the match may be inaccurate.
- If faculty recently obtained new certification or updated their certification status, the ABMS information may not appear until the next monthly import.
- If a faculty member is new to the ACGME database, ABMS certification data will appear here within 24 hours.

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AOA Certification

Last updated: 1/3/2024

The following information was imported from AOA and is read only.

Board Name	Certification Name	Status	Duration Type	Initial Date	End Date
American Osteopathic Board of Family Physicians	Family Medicine/OMT	Active	Time-Limited	12/2/2013	12/31/2030

- Data is matched to each faculty using name, National Provider ID (NPI).
- If the information provided by the program is entered incorrectly, no AOA match will occur or the match may be inaccurate.
- If a faculty member is new to the ACGME database, AOA certification data will appear here within 24 hours.
- If a faculty member recently updated their certification status (recertified or expired), the AOA information may not appear for up to 7 days.

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Manual Entry of Board Certification

Specialty Certification - Manual Entries

i Only complete this section if the faculty member has additional certifications, is board eligible, is not certified or ABMS/AOA data above is inaccurate or missing.

Certification Type: **Duration Type:** **Initial Year:**

Other Certification:

- ABMS data import is missing/has inaccurate data
- AOA data import is missing/has inaccurate data
- RCPS(C)
- Other Certifying Body
- Not Certified
- ABMS Board Eligible
- AOA Board Eligible

Missing Faculty Member Board Certification

- Programs must investigate why a faculty member's certification is not auto-populating
- Verify through public certification websites that the certification is active (Doc Info: <https://www.docinfo.org/#/search/query>)
- Verify that all information in the faculty member's profile is accurate (NPI number, medical school and residency graduation dates, etc.)
- Ensure the faculty member's name in ADS matches NPI profile and board certification

Resources

Annual Update for Osteopathic Recognition

Announcements



AOA Distinction of Advanced Osteopathic Training



Memo – Temporary Waiver for Board Certification Qualification



ADS Annual Update Guide for Osteopathic Recognition



Memo – Adding Osteopathic Faculty to the Faculty Roster

Annual Update Resource



Accreditation Data System (ADS) Annual Update Guide for Osteopathic Recognition Osteopathic Recognition Committee

This guidance document identifies the information that programs with Osteopathic Recognition must review and update during their assigned ADS Annual Update window each year to ensure it is current and accurate. The Osteopathic Recognition Committee will use the information provided by programs in ADS in making recognition decisions.

Note: The report generated for the Annual Update on the Overview tab in ADS will not include information from ADS that is specific to Osteopathic Recognition. It is critical that programs review the Osteopathic Recognition Summary report discussed at the end of this document to ensure all recognition information is reviewed and updated if necessary.

The following areas of ADS should be reviewed and updated, as appropriate, during a program's Annual Update window:

- **Major Changes – Osteopathic Components**

A dedicated field in the Major Changes section of ADS allows for a brief update on any significant changes to the osteopathic components of the program since the last academic year. Programs are encouraged to comment on such program changes that may include the osteopathic curriculum and osteopathic leadership (Director of Osteopathic Education, osteopathic faculty members, etc.). Programs that received an Osteopathic Resident Survey report that included areas of non-compliance are encouraged to comment on how the program is addressing those areas. If the program was impacted by the COVID-19 pandemic and temporary changes to the osteopathic curriculum were necessary, the program is encouraged to comment on those changes.

- **Response to Osteopathic Recognition Citations (if applicable)**


Programs with active Osteopathic Recognition citations must annually provide a response or an updated response for each in the Citation section of ADS.

- **Block Diagram**

The program should review its block diagram, maintained in ADS, to ensure it accurately indicates where and when the following osteopathic experiences are integrated into the curriculum: osteopathic education/experience in the clinical setting; osteopathic clinic (either osteopathic manipulative treatment (OMT) clinic or integrated specialty clinic); and osteopathic didactics/labs. Programs should refer to the Block Diagram Guide for Programs with Osteopathic Recognition, located in the Block Diagram section of ADS and on the [Osteopathic Recognition page](#) of the ACGME website, for additional instructions. As the program's osteopathic curriculum changes, those changes must be reflected appropriately on the block diagram. Temporary changes to the osteopathic curriculum, such as any resulting from the COVID-19 pandemic, should not be reflected on the block diagram.

ADS Osteopathic Recognition Annual Update Report Review


Annual Update Complete ^


 Print

Osteopathic Recognition Annual Update ∨

Programs with Osteopathic Recognition are responsible for reviewing and updating recognition-related information provided in ADS during the program's assigned ADS Annual Update window to ensure it is up-to-date and accurate. [This guidance document](#) will identify the information that programs with Osteopathic Recognition must review and update during their assigned ADS Annual Update window. view >

Programs may click on the 'Print' button to review the Osteopathic Recognition information currently provided by the program in ADS.

 Print



Osteopathic Recognition Summary Report Review

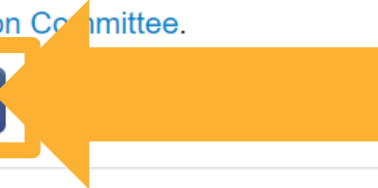
Osteopathic Recognition

Osteopathic Recognition Status: Continued Recognition
Effective Date: January 07, 2022

Osteopathic Recognition Summary

View a current copy of the program's Osteopathic Recognition Summary. This document contains the Osteopathic Recognition information provided by the program in ADS that is utilized by the Osteopathic Recognition Committee during the recognition reviews of the program. Additional information can be found on the ACGME [Osteopathic Recognition Committee](#).

[Osteopathic Recognition Summary](#)



Manage Designation of Residents/Osteopathic Personnel

Manage the designation of residents, faculty, and the Director of Osteopathic Education.

[Manage Residents](#) [Manage Faculty](#) [Director of Osteopathic Education](#)

Clinical Osteopathically Integrated Learning (COILs) Scenarios

Resources



List of Programs Applying for and with Osteopathic Recognition by Specialty



Glossary of Osteopathic Terminology



Clinical Osteopathically Integrated Learning Scenarios (Provided by ECOP/AACOM)

ADS Guidance for Director of Osteopathic Education Changes



ADS Guidance for Appointment of a New Director of Osteopathic Education Osteopathic Recognition Committee

If a program appoints a new physician to the role of Director of Osteopathic Education, the appointment must be reflected in the ACGME's Accreditation Data System (ADS) at the time of appointment. Programs must not wait until the ADS Annual Update to reflect the appointment in the system. If there are concerns about the qualifications of a physician being considered for the role, contact the Executive Director of the Osteopathic Recognition Committee for guidance (contact information can be found on the [Osteopathic Recognition](#) page of the ACGME website).

Prior to appointing a new physician to the role of Director of Osteopathic Education, the program's Faculty Roster physician profile in ADS must be updated for the newly appointed and prior Director of Osteopathic Education. Below is a checklist of updates that must be completed in ADS.

- Review the physician profile of the previous Director of Osteopathic Education, if still a faculty member for the program, to ensure the title entered in the "Program Specific Title" field has been updated and is no longer 'Director of Osteopathic Education' or 'DOE.'
- Ensure the newly appointed physician has been designated as an osteopathic faculty member on the program's Faculty Roster.
- Consider adding 'Director of Osteopathic Education' or 'DOE' to the "Program Specific Title" field in the newly appointed Director of Osteopathic Education's physician profile.
- Review all dates within the faculty member's profile (i.e., date of appointment as faculty member, year started teaching, medical school graduation, residency and fellowship attendance, state licensure).
- Ensure the physician's board certification information is accurately reported in the physician's profile.
- Add/update the description provided for the newly appointed and prior Director of Osteopathic Education's "Role in Program as it Relates to Osteopathic Education." This should describe the physician's actual roles and responsibilities related to formal osteopathic education within the program. The description should be consistent with responsibilities outlined in the Osteopathic Recognition Requirements but must not be a copy and paste of the Requirements.
- Add/update the "Additional Information on Qualifications Related to Osteopathic Education" field. This area should only be used for qualifications not captured elsewhere in the faculty member's profile.

After the newly appointed Director of Osteopathic Education's physician profile has been reviewed and updated, the role change in ADS should be completed next. This is done by clicking "Director of Osteopathic Education" under the "Recognition" tab in the "Manage

ADS Guidance on Director of Osteopathic Education Changes

Documents



ADS Guidance for Appointment of a New Director of Osteopathic Education



Initial Recognition Site Visit and Review



Elements of an Osteopathic Learning Environment



Guide to the Classification of Osteopathic Faculty on the ADS Roster



Osteopathic Recognition Information Brochure



Osteopathic Recognition Application Instructions



Application Instructions for Osteopathic Recognition

This instructional document was created to assist programs applying for Osteopathic Recognition, so they can better prepare for and navigate the ACGME Osteopathic Recognition application process.

APPLICATION PROCESS

ACGME-accredited programs with an accreditation status other than Probationary Accreditation can apply for Osteopathic Recognition. Newly accredited programs can apply as soon as they achieve Initial Accreditation.


There are several parts to the Osteopathic Recognition application, which includes information provided by the program in the Accreditation Data System [ADS], which is a web-based system that is accessed through a web browser), as well as specific documents that must be uploaded into the system as attachments.


Note: The entire program will apply for Osteopathic Recognition and the entire program will receive Osteopathic Recognition. The program must determine if all its residents will receive formal osteopathic education and be in designated osteopathic resident/fellow positions, or if only a portion of the residents/fellows will be in such designated positions.


Osteopathic Recognition Application Instructions

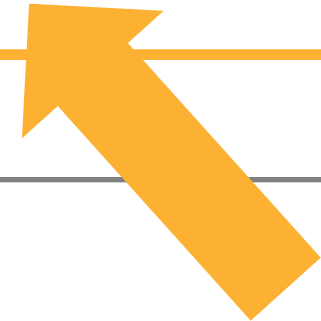
Application for Recognition

New applications for Osteopathic Recognition must use the online application process within the Accreditation Data System (ADS). For further information, review the "Osteopathic Recognition Application Instructions."

 Osteopathic Recognition-Specific Question Document

 Block Diagram Guide for Osteopathic Recognition

 Osteopathic Recognition Application Instructions



Questions?

Thank You!

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www.acgme.org/osteopathicrecognition