General Application Information

• All sponsoring institution and program applications are completed in the ACGME Accreditation Data System (ADS).

• For a program to apply, the sponsoring institution must either be ACGME accredited or have ACGME “pre-accreditation”.

• DIO must initiate the program application in ADS, entering basic information about the program including identifying who will be the program director.
General Application Information

• After the DIO identifies the program director and provides his/her contact information, the program director will be e-mailed login information to ADS.

• The program director will then log into ADS to complete the application, submitting to the DIO (through ADS) for final review and approval.

• The DIO will review the application in ADS and submit the final version of the application to the ONMM RC team.
Pre-Accreditation

If a program was AOA-approved on July 1, 2015 the program should enter their AOA program ID number, when requested, in the application initiation process.

• Will allow program to obtain “pre-accreditation” status upon submission of application.

• An NMM/OMM or NMM/OMM Plus One program ID number will work. If both programs exist at an institution, then one number should be picked to use.
General Program Application Information

Resources and References

- Application Guide
- ADS Faculty Roster Instructions by Specialty
- Eligibility FAQs for Specialties with a Preliminary Year
- Single GME Accreditation System Webinars

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Program Director’s ADS View

2754800001 - PLAZA MEDICAL CENTER OF FORT WORTH PROGRAM
Osteopathic Neuromusculoskeletal Medicine - Fort Worth, TX

Program Application

Program Application Instructions

DIO/Program Director Steps

Step 1: Select the Participating Sites (to be initiated by the DIO and completed by the Program Director):
2 site(s) have been added to this program. Click the "View" button to add more available sites or to edit your existing list of participating sites.

Step 2: Select the Program Director (to be initiated by the DIO and completed by the Program Director):
Thomas Crow DO has been selected as the program director.

Program Director Steps

Step 3: Update Program Details:
Basic program information has been entered.

Step 4: Add Other Program Personnel
You are required to add at least one program coordinator (max 2). You may also add a Co-Program Director and a Department Chair.
The following personnel have been added: Program Coordinator, Department Chair, Co-Program Director.

Step 5: Update ACGME Requested/Filled Resident Positions
The number of resident positions being requested as well as the number of positions currently filled has been entered.

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Application Steps

DIO Initiates & PD Completes:

Step #1: Select the Participating Sites
Step #2: Select the Program Director
Application Steps

Program Director Steps:

Step #3: Program Details
- Be sure to update the basic program information including the address.

Step #4: Add Other Program Personnel
- You are required to add at least one program coordinator (max 2). You may also add a Department Chair.

Step #5: ACGME Requested/Filled Resident Positions
- Enter the number of resident positions being requested by year as well as the number of currently filled positions.
Step #5 – Requested Resident Positions

- Requested complement should include the number of residents you have resources to train AND the max number you will have in the program.
- Request may be higher than the number of current residents in the program.
- Must be broken down by ONMM1 & ONMM2.
Application Steps

Step #6: Duty Hour Info
• Be sure to update the duty hour information for this program.

Step #7: Additional Application Questions
• 6 required questions.

Step #8: Overall Evaluation Methods
• Please complete the questionnaire on the overall evaluation methods used by the program.
Step #9: Faculty Info

- Enter the key faculty within your program. In addition, complete a CV for any physician or non-physician faculty member that requires one (a “View/Edit CV” button will appear next to faculty members requiring a CV). Please review the Physician and Non-Physician Faculty Definition on the ‘Faculty’ tab for further clarification on which faculty members to enter into your roster.
Step #9 Faculty Info

2754800001 - PLAZA MEDICAL CENTER OF FORT WORTH PROGRAM
Osteopathic Neuromusculoskeletal Medicine - Fort Worth, TX

< Back To Application Steps

Faculty Roster Instructions

Physician Faculty Definition

Non-Physician Faculty Definition

Faculty Members

Add Faculty
Reorder

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List alphabetically and by site all physician faculty who have a significant role (teaching or mentoring) in the education of residents/fellows and who have documented qualifications to instruct and supervise. List the Program Director first.

All physician faculty must:
• devote sufficient time to the educational program to fulfill their supervisory and teaching responsibilities and demonstrate a strong interest in resident education;
• administer and maintain an educational environment conducive to educating residents in each of the ACGME competency areas;
• participate in faculty development programs designed to enhance the effectiveness of their teaching and to promote scholarly activity;
• establish and maintain an environment of inquiry and scholarship with an active research component;
• regularly participate in organized clinical discussions, rounds, journal clubs, and conferences;
• encourage and support residents in pursuing scholarly activities

A portion of the faculty must be indicated as core physician faculty. All physicians who devote at least 15 hours per week to resident education and administration are designated as core faculty. All core physician faculty should teach and advise residents as well as participate in at least 1 of the following:

• evaluate the competency domains;
• work closely with and support the program director; and
• assist in developing and implementing evaluation systems.

Program directors will not be designated as core faculty.

Continued Accreditation programs: A CV is only required for the program director.

New Applications and Initial Accreditation programs: A CV is required for the program director and each active physician faculty member that has been designated as a "Core" faculty member on your roster.
General Faculty CV Information

- Name
- Degree
- Title
- E-mail address
- Primary institution (selected from participating sites entered)
- Faculty appointment date (date of appointment in AOA program, not date of ACGME application or accreditation)
- Year stated teaching in specialty
General Faculty CV Information

- Medical school type, name, and graduation year
- Board certification specialty, type, certification year, and status
- Faculty hours

<table>
<thead>
<tr>
<th>Faculty Hours</th>
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<tr>
<td>Number of hours per week faculty member devotes to this program's activities in the following:</td>
</tr>
<tr>
<td>Clinical supervision of residents</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>Research/scholarly activity with residents</td>
</tr>
<tr>
<td>0</td>
</tr>
<tr>
<td>Total hours devoted to this program:</td>
</tr>
</tbody>
</table>
Faculty Hours

Total hours devoted to this program include:

- Clinical supervision of residents
- Administration of the program
- Research/scholarly activity with residents
- Didactics/teaching with residents

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Core Faculty CV Information

- **Personal Information** - Name, title, degrees, medical school, degree date
- **Graduate medical information** - Program name, specialty, dates
- **Licensures**
- **Academic appointments** – Past 10 years
- **Concise summary of role/responsibilities in program**
Core Faculty CV Information

• **Current professional activities/committees** – List up to 10 activities within the past 5 years.

• **Bibliographies** - most representative Peer Reviewed Publications / Journal Articles from the last 5 years, with a limit of 10.

• **Articles** - review articles, chapters and/or textbooks from the past 5 years, with a limit of 10.

• **Participation in local, regional, and national activities/presentations/abstracts/grants** - from the past 5 years, with a limit of 10.
Step #10: View/Update Residents

- List all residents currently training in the program at the time of application, regardless of OGME year. (NMM/OMM and NMM/OMM Plus One).

- The RC will not require residents currently training in the program to meet the ACGME requirements prior to graduation, but they should meet the AOA standards.

- Residents in traditional rotating internships linked to an NMM/OMM program or in an NMM/OMM preliminary internship should not be listed on the roster.
Resident Information Needed

- Name
- Social security number
- Date of birth
- Type of Medical School, name, degree date
- Resident Status
- Type of position – For ONMM will always be “categorical”
- Year in program
- Email address
- Start date of program
Step #11: Download and Complete the Specialty Specific Application

- Download and complete the MS Word specialty specific application document from the ACGME website for your specialty.
- Once completed, convert it to a PDF to be uploaded with the other application attachments in Step 12.
New Applications

New program applications must use the online application process within ADS. For further information, review the “Application Instructions” located under Common Resources.
Specialty Specific Application Questions

- Recently revised, as a result of requirement revisions.
- All future ONMM application submissions must use this updated document.
- Questions were developed by the ONMM Review Committee.
- Questions are directly related to ONMM requirement(s).
Application Steps

Step #12: Upload Application Attachments

- One file must be uploaded for each requested item.
- Uploaded documents must be in pdf format and no larger than 10 MB.
- If multiple documents need to be uploaded for a given item, then they must be combined into a single document prior to uploading.
- Documents should be previewed after uploading to ensure they are of high quality.
Application Uploads Instructions

1. Click the “Choose File” button in the specific section you are trying to upload to and select the file from your computer.
2. After you have chosen the file, click the “Upload” button to upload it to the database.

Uploaded files must be:
- PDF format
- No larger than 10MB

References to Common Program Requirements (CPR) and Institution Requirements (IR) for each requested attachment are indicated within brackets.

Uploads

Attachment: Policy for Supervision of Residents
Policy for supervision of residents (addresses residents’ responsibilities for patient care and progressive responsibility for patient management and faculty responsibilities for supervision). [IR III.B.4]

Uploaded File: 2754800001-PolicyForSupervisionOfResidents_US.pdf

Attachment: Program Policies and Procedures
Program policies and procedures for resident duty hours and work environment including policies on moonlighting. [CPR II A.4 j;
<table>
<thead>
<tr>
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<th>Application Uploads</th>
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<tbody>
<tr>
<td>1.</td>
<td>Policy for Supervision of Residents</td>
</tr>
<tr>
<td>2.</td>
<td>Program Policies and Procedures</td>
</tr>
<tr>
<td>3.</td>
<td>Overall Educational Goals</td>
</tr>
<tr>
<td>4.</td>
<td>Competency Goals and Objectives and Faculty Evaluation of Residents</td>
</tr>
<tr>
<td>5.</td>
<td>Letters of Agreement</td>
</tr>
<tr>
<td>6.</td>
<td>Semiannual and Summative Evaluations</td>
</tr>
<tr>
<td>7.</td>
<td>Program Specific Evaluation Tools</td>
</tr>
<tr>
<td>8.</td>
<td>Forms Used for Faculty and Program Evaluation</td>
</tr>
<tr>
<td>9.</td>
<td>Sample Block Diagram</td>
</tr>
<tr>
<td>10.</td>
<td>Specialty-Specific Application Questions</td>
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</table>
Application Uploads

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2. Program Policies and Procedures
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8. Forms Used for Faculty and Program Evaluation
9. Sample Block Diagram
10. Specialty-Specific Application Questions
Letters of Agreement

Must have a Program Letter of Agreement (PLA) for all required rotations.

From the ACGME Glossary of Terms:

**Program Letter of Agreement (PLA):** A written document that addresses GME responsibilities between an individual accredited program and a site other than the sponsoring institution at which residents receive a required part of their education.

From PLA FAQs:

| What is the minimum experience for which a PLA needs to exist between an accredited program and a site involved in residency/fellowship education? | There must be PLAs between an accredited program and all sites to which residents rotate for required education or assignments. |
# PLA FAQs

## Osteopathic Neuromusculoskeletal Medicine

**Guide to Construction of an Osteopathic Neuromusculoskeletal Medicine Program Block Diagram**

**Program Requirements Currently in Effect**

- Osteopathic Neuromusculoskeletal Medicine
- **2/9/2016**

**Milestones**

- Osteopathic Neuromusculoskeletal Medicine

## Presentations

- Osteopathic Neuromusculoskeletal Medicine (ONMM)

## Key To Standard Notification Letter

- Milestones
- Notables Practices
- Program Directors’ "Virtual Handbook"
- Program Letters of Agreement FAQ
- Resident Duty Hours
- Review and Comment

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Application Uploads

1. Policy for Supervision of Residents
2. Program Policies and Procedures
3. Overall Educational Goals
4. Competency Goals and Objectives and Faculty Evaluation of Residents.
5. Letters of Agreement
6. Semiannual and Summative Evaluations
7. Program Specific Evaluation Tools
8. Forms Used for Faculty and Program Evaluation
9. Sample Block Diagram
10. Specialty-Specific Application Questions
Block Diagram

- Should be constructed using the “ONMM Block Diagram Construction Guide”.
- Separate block diagram suggested for ONMM1 level entry and ONMM2 level entry.

Remember:
- Not a rotation schedule.
- No resident names should be listed.
- Sample schedule for each ONMM year demonstrating compliance with rotation requirements.
Osteopathic Neuromusculoskeletal Medicine

Program Requirements Currently in Effect

Osteopathic Neuromusculoskeletal Medicine

Milestones

Osteopathic Neuromusculoskeletal Medicine

Guide to Construction of an Osteopathic Neuromusculoskeletal Medicine Program Block Diagram
### Sample: ONMM2 Entry Pathway

Note: You only need to include a separate block diagram for residents entering the program at the ONMM2 level if you plan to accept residents into the program through this pathway and IF the ONMM2 year would differ for someone entering at the ONMM1 level.

#### ONMM2

<table>
<thead>
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<th>2</th>
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<th>4</th>
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<td>ONMM Outpt</td>
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<td>ONMM Inpt</td>
<td>ONMM Inpt</td>
<td>Neurology</td>
<td>PM&amp;R</td>
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<td>&lt;Insert #&gt;</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Site 1: XYZ Hospital
Site 2: ABC Clinic
Site 3: LMN Ambulatory Center

Elective Options: diagnostic radiology, family medicine, internal medicine, hospice and palliative medicine, pediatrics, physical medicine and rehabilitation, rheumatology, sports medicine
Step #13: Review Application

- Please review and print a copy of your application for your records. Enter any missing information that has not yet been entered. You will not be able to submit your application if any of the above steps are incomplete or there is information missing on your application.
General Application Information

• Responses to questions should reflect how the program meets or will meet the ACGME ONMM requirements.

• Program must demonstrate resources necessary for a two-year program, even if the program will only take residents at the ONMM2 level.

• Direct questions related to the ADS system and how to use it, to the ADS representatives – ADS@acgme.org.
Application Steps

Step #14: Verify and Submit Application to DIO

- After clicking "Verify Application and Submit to DIO" button in the header, your application will be submitted to your DIO for review and final submission. After verification, the DIO will electronically submit the application to the ACGME. Applications can only be submitted to the DIO by the Program Director. Program Coordinators cannot submit new applications.

- Once the DIO has submitted your application to the ACGME for final review it cannot be changed, altered, or amended.
After Application Submission

- Program immediately gets “pre-accreditation” if it was AOA-approved on July 1, 2015.
- “Pre-accreditation” status will be acknowledged on the ACGME website.
Pre-Accreditation

Programs in Pre-Accreditation will be required to:

• Participate in the annual ADS update.
• Complete the resident and faculty survey.
• Report Milestones.
• Log in the Case Log system.
After Application Submission

- ACGME staff will acknowledge receipt of the application via e-mail.
- The Department of Field Staff Activities will be immediately notified to schedule a site visit.
Site Visit

- All core program applications require a site visit, prior to the application going to the Review Committee.
- Site visits are scheduled and conducted by the Dept. of Field Staff Activities.
- Field Staff (aka site inspectors) are employed (full-time or part-time) by the ACGME and may conduct site visits for any specialty.
- Will be conducted by one member of the field staff and will take a day or less to complete the visit.
Accordingly, a site visit by an accreditation field representative of the Accreditation Council has been scheduled as follows:

Date of Site Visit: 02/04/2016
Approximate Starting Time: 8:30am

Christopher Pack, PhD
(858) 481-5676
cpack@acgme.org

Please read this letter attentively and follow in detail all instructions below to assist you in preparing for your site visit:

Preparing the Site Visit Documents:
- The application describing the program has been filed with the ACGME and will be sent to the field representative prior to the day of the site visit.
- No new application document may be presented prior to or at the time of the site visit. Should the program wish to submit a revised application, it will be considered a new application and will incur a second application fee.
- Any critical new or revised information must be reported to the site visitor at the time of the site visit, for inclusion in the site visit report. On rare occasions, the site visitor may attach added highly pertinent documentation to the site visit report.
- For any questions about this policy or other aspects of the site visit for applications, please contact me at iphilibert@acgme.org or by calling 312/755-5003.
The Site Visit Day

- Prior to the visit, please provide the site visitor with the following documents:
  i. A copy of the site visit schedule with names and titles of all the participants.
  ii. Detailed directions to the institution and the room where the visit will be conducted.
  iii. The contact number of the program director, coordinator or another staff member, ideally with a cell phone or pager number for the site visitor to contact the program if an emergency or other urgent need to contact the program arises.
- Please see the attachment to this letter for a list of documents to have available for review by the site visitor.
- During the site visit the site visitor will meet with you, faculty, a sponsoring institution representative (the DIO or his or her designee) and with a representative group of residents if any are presently being trained in, or rotating through this program.
- If this is a reapplication and residents are currently training in the program, the site visitor will interview all available residents/fellows or a peer-selected group of 12 - 15 residents/fellows.
- If multiple institutions collaborate in this program, the site visitor will need to meet with representatives from each.
- The site visitor will contact you by mail or phone to arrange the site visit schedule. Alternatively, you may contact him/her at the address above. The best day to call is Friday.
Application Review

- Program will be scheduled for review by the Review Committee once the site visit has been conducted and the site visit report is available to the Review Committee.

<table>
<thead>
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<th>Meeting Date</th>
<th>Agenda Closing Date</th>
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<td>June 2, 2016</td>
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<td>October 18, 2016</td>
<td>July 18, 2016</td>
</tr>
<tr>
<td>January 9, 2017</td>
<td>October 16, 2016</td>
</tr>
</tbody>
</table>
Available Decisions for New Program Applications:

- **Initial Accreditation**
- **Continued Pre-Accreditation** — *Only for programs in pre-accreditation.*
- **Accreditation Withheld** — *Only for programs not in pre-accreditation.*

**Requires re-application**
Notification

- Program will be notified via e-mail of the RC’s accreditation decision within 5 days (or less) of the meeting.

- A Letter of Notification (LON) will be sent within 60 days of the meeting, detailing any citations or areas for improvement (AFI).
  - If a program receives “continued pre-accreditation” or “accreditation withheld”, the LON will contain instructions on how to re-apply.
Questions?