Appalachian Osteopathic Postgraduate Training Institute Consortium

Policies & Procedures

Organization and Staffing

Commitment to AOA Standards and Policies and Procedures

A-OPTIC pledges to comply with and observe the standards in this document, as well as the policies and procedures as stipulated in Part Two of the AOA *Basic Document for Osteopathic Postdoctoral Training Institutions* and in the *Administrative Handbook for the Accreditation of Osteopathic Postdoctoral Training Institutions.*

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Strategic Planning Policy

The A-OPTIC Board of Directors will convene Members for the purpose of conducting strategic planning at least every fourth year from the previous session.   The time and place will be determined by the BOD. Professional external facilitation will be engaged for the purpose of ensuring an open dialogue where all members may participate on an equal basis. A-OPTIC will reimburse participants for all expenses related to participation. Each Member institution will be invited to send at least one (1) representative to the meeting. The duties of the institution's representative must be related to its academic endeavors in partnership with A-OPTIC (residency training, research, faculty development, etc.). The A-OPTIC BOD welcomes a diverse group of participants. Other professionals who may or may not be directly affiliated with A-OPTIC or one of its Members may be invited to participate with the approval of the BOD or its Chair. A-OPTIC may from time to time elect to conduct focused interim strategic planning addressing specific aspects of GME such as Research, Faculty Development, Curriculum, etc.

Process

The Executive Director will facilitate the compilation of the ideas expressed during the strategic planning meeting into a written Strategic Plan, which will include:
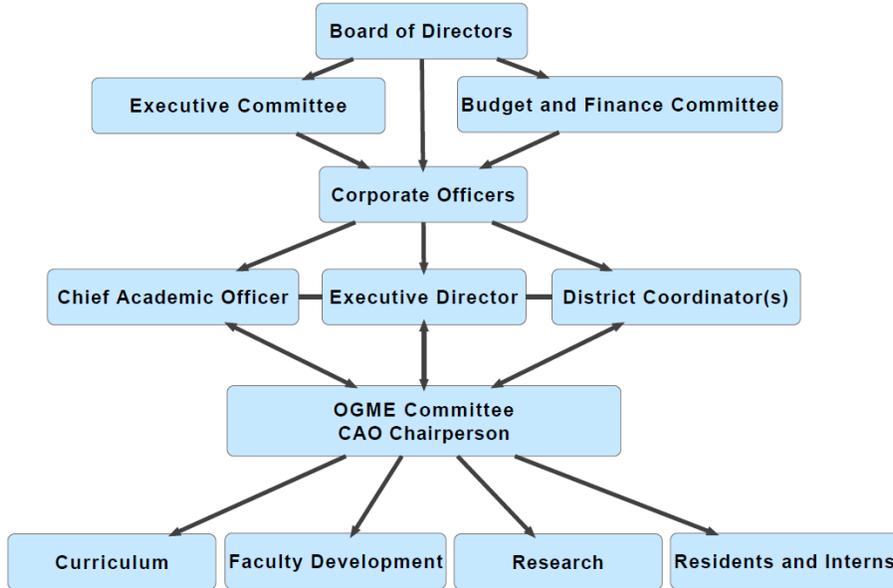
- Recommendations for affirming and/or modifying the guiding statements (mission, vision, goals, etc.) of the A-OPTIC;
- Goals, Objectives, and potential Tactics for the A-OPTIC addressing at least the following areas:
    - New OGME Development;
    - Organizational Structure;
    - Faculty Development;
    - Research;
    - Curriculum;
    - Financial viability of the A-OPTIC;
    - Advocacy.
- Budget Impact
- Timeline for implementation

The Executive Director will present the draft strategic plan to:

- Strategic planning session participants for feedback and additional input;
- A-OPTIC OGME Committee for additional feedback and input;
- Executive Committee, which will revise before final submission to the entire BOD for approval.

After approval by the BOD, the Executive Director will provide a written progress report to the BOD regarding the implementation of the Plan, as well as a verbal overview of specific items of note and in response to questions from BOD members at least annually. If progress is determined to be satisfactory, the BOD will vote to approve the report.

A-OPTIC Organizational Chart

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                          │  Board of Directors  │
                          └──────────────────────┘
        ┌─────────────────────────┐      ┌──────────────────────────────┐
        │  Executive Committee    │      │ Budget and Finance Committee  │
        └─────────────────────────┘      └──────────────────────────────┘
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                          │  Corporate Officers  │
                          └──────────────────────┘
   ┌────────────────────────┐ ┌────────────────────┐ ┌──────────────────────┐
   │ Chief Academic Officer │─│ Executive Director │─│ District Coordinator(s)│
   └────────────────────────┘ └────────────────────┘ └──────────────────────┘
                          ┌──────────────────────┐
                          │    OGME Committee     │
                          │   CAO Chairperson     │
                          └──────────────────────┘
   ┌────────────┐  ┌────────────────────┐  ┌──────────┐  ┌──────────────────────┐
   │ Curriculum │  │Faculty Development │  │ Research │  │ Residents and Interns│
   └────────────┘  └────────────────────┘  └──────────┘  └──────────────────────┘
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Communications Policy

The A-OPTIC OGME Committee is the primary communication and reporting medium of the organization. Reports documenting trainee issues, program needs, and general OGME quality and accreditation issues shall be reviewed and discussed at the A-OPTIC OGME Committee. These meetings shall be conducted using Adobe Connect Pro videoconferencing system.

Site visits shall be conducted by an A-OPTIC Corporate Officer(s) at least annually. At each site visit, an A-OPTIC Corporate Officer shall provide consultation, assess needs, and recommend ways A-OPTIC can assist programs with ensuring educational quality, as well as verify Semi-Annual Report information.

A-OPTIC posts Administrative Documents to its website, A-OPTIC.org. For transferring official documents, A-OPTIC shall use the FileWorks document transfer system provided by the AOA. For day to day communications between the A-OPTIC programs and office, electronic mail, US mail, and Adobe Connect Pro videoconferencing.

Conflict of Interest
Introduction
A-OPTIC and its employees, Corporate Officers, and Board of Directors members, hereafter referred to collectively as Agents, are committed to conducting all A-OPTIC work-related activities in accordance

with the highest integrity standards and in full compliance with all ethical and conflict of interest legal requirements applicable to the A-OPTIC. This policy sets forth principles for identifying such potential conflicts and procedures for reviewing and addressing potential conflicts that might occur.

Policy
The A-OPTIC is committed to fulfilling its mission with integrity and in full compliance with state and federal ethics and conflicts of interest laws and regulations. A conflict of interest exists when an Agent's professional actions or decisions are or have been influenced by considerations of personal or financial gain. Therefore, it is the policy of the A-OPTIC that in all of its activities – the education of trainees; the design, conduct, and reporting of research; the hiring and supervision of staff; the procurement of materials and services; and all other tasks incident to its mission – it shall endeavor to be free of undue influence or bias that may result in conflicts of interest. This Policy is intended to enable Agents to recognize potential conflicting interests and, thus, to protect themselves and the A-OPTIC from such conflicting interests through disclosure, evaluation, and if required, management or elimination of conflicts of interest.
In addition to this Policy, A-OPTIC Agents ethical conduct is governed by:

- Federal regulations governing sponsored research. The National Institutes of Health requires institutions receiving funding to have a conflict of interest policy which complies with its regulations found at http://grants.nih.gov/grants/compliance/42_CFR_50_Subpart_F.htm . This Policy is intended to comply with those regulations.

Process
If an Agent thinks that they may have a conflict of interest as defined in this document, he/she should notify the Executive Director or Chair of the Board of Directors. The Executive Committee will review the situation and determine whether or not there is indeed a conflict of interest. If it is determined that a conflict of interest exists, then the Executive Committee on behalf of the BOD shall make organizational adjustments to remove the conflict of interest. Adjustments may include, but are not limited to, changes in employee reporting structure, removal from project.
If an Agent is aware of a conflict of interest and does not disclose to A-OPTIC disciplinary action may be taken up to and including termination of employment.

Applicability
This policy applies to all A-OPTIC Agents. Agents are expected to review and understand their obligations under this Policy and to be familiar with their obligations under the laws, regulations and policies referenced in Section II of this Policy.

Definitions
1. **Conflict of Interest**. A Conflict of Interest occurs:
    - When an A-OPTIC Agent has a personal interest in a matter that could compromise or impinge on their obligation to the A-OPTIC to exercise the their best judgment in pursuit of the interest of the A-OPTIC and its trainees;

- When a non-A-OPTIC activity unreasonably encroaches on the time an Agent should devote to the affairs of the A-OPTIC; or
- When an Agent's non-A-OPTIC activities unreasonably impinge on or compromise the loyalty or commitment to the their A-OPTIC duties and responsibilities.
- In sponsored research, when an Investigator's Significant Financial Interest could directly and significantly affect the design, conduct, or reporting of such research.
- In determining whether a Conflict of Interest exists, an important consideration is whether an independent observer might reasonably question whether the Agent's professional actions or decisions are influenced by considerations of personal gain, financial or otherwise.

2. **Significant Financial Interest**. A Significant Financial Interest (SFI) consists of one or more of the following interests of the Agent (and those of the Agent's Immediate Family):
   - An equity interest (including stock, stock options, or other ownership interest) of $5,000 or greater in any publicly traded entity as determined through reference to public prices.
   - Any equity interest (including stock, stock options, or other ownership interest) in any non-publicly traded entity.
   - Remuneration for services including annual salary, royalties, consulting fees, honoraria, paid authorship, or anything of monetary value (regardless of whether its value is readily ascertainable) that amount to $5,000 or more over the 12 months preceding the disclosure.
   - Intellectual property rights and interest (e.g., patents and copyrights), upon receipt of income related to such rights.
   - Investigators also must disclose the occurrence of any reimbursed or sponsored travel (i.e., that which is paid on behalf of the Investigator and not reimbursed to the Investigator so that the exact monetary value may not be readily available), related to their institutional responsibilities; provided, however, that this disclosure requirement does not apply to travel that is reimbursed or sponsored by a Federal, state, or local government agency, or an institution of higher education. The Investigator must disclose, at a minimum, the purpose of the trip, the identity of the sponsor/organizer, the destination, and the duration.

Significant Financial Interests **does not** include:
- Salary, royalties, or other remuneration received from or through the A-OPTIC;
- Intellectual property rights assigned to the A-OPTIC and agreements to share in royalties related to such rights;
- Income from seminars, lectures, or teaching engagements sponsored by public or nonprofit entities;
- Income from service on advisory committees or review panels for public or nonprofit entities; or
- Investments in and income from investment vehicles, such as mutual funds, pension or other institutional investment fund over which the Agent does not exercise control.

3. **Immediate Family**. The Agent's spouse or domestic partner and dependent children as determined by the definitions of the Internal Revenue Service and State of Kentucky laws.
4. **Investigator**. Principal Investigators, Project Director **and** all other A-OPTIC Agents who are responsible for the design, conduct, or reporting of sponsored research.
5. **Sponsored Research**. Research, creative activities, scholarship, training and instructional projects involving funds, materials, or other compensation from outside sources under agreement. Research in this context means a systematic investigation designed to develop or contribute to generalizable knowledge, including behavioral and social-science research.
6. **Investigator's Institutional Responsibilities**. An Investigator's professional responsibilities on behalf of the A-OPTIC, including, but not limited to: research, teaching, service, professional practice, and institutional review board or other institutional committee membership.

Dues

Dues are determined by the BOD. Since 2007, the dues rate for Members has not increased. Contact the A-OPTIC Executive Director or Associate Director for the actual amount. The Education Coordinator will send invoices to the Members in May of each year, payable by July 1st.

Staffing Plan

Executive Director

Associate Director

Education Coordinator

Chief Academic Officer
The Chief Academic Officer, in general, shall serve as the academic consultant to the Executive Director of A- OPTIC and the Membership in all matters related to research, trainees, curriculum, program evaluation, and faculty development. He/she will serve as Chair of the A-OPTIC Osteopathic Graduate Medical Education Committee. The Chief Academic Officer reports to the Board of Directors by way of its Chair, for administrative purposes.

District Academic Officer

District Associate Director

Research Director

E. 9.2   **Non-Discrimination Policy**
A-OPTIC shall not discriminate on the basis of race, gender, color, religion, national origin, age, veteran status, or sexual orientation in the selection of faculty and administrative personnel. Selection shall also be in accordance with state and federal government guidelines and in compliance with the Americans with Disabilities Act (ADA).

Academic Sponsorship

Overview of Sponsorship

A-OPTIC is the Academic Sponsor and OPTI of Record for all Associate Member programs. A-OPTIC will assist each Associate Member program to comply with AOA, Specialty College, OPTI, and training program requirements and shares a portion of the responsibility with the program for the quality and compliance status of the institution with AOA accreditation requirements. The nature of assistance includes, but is not limited to:

1) Participation in program inspection and internal review;
2) Review, approval, and verification of implementation of Corrective Action Plans;
3) Review, approval, and ongoing monitoring of Institutional Core Competency Plans (ICCP);
4) Facilitation of program evaluation and improvement processes;
5) Monitoring of compliance with trainee welfare and work hours rules;
6) Annual On-site Review according to the Site Visit Policy

A-OPTIC monitors the accreditation status of its member residencies using the *Accreditation Status Summary Report* and participates in their Internal Reviews and Inspections.

Program Administration

A-OPTIC Osteopathic Graduate Medical Education (OGME) Committee
The A-OPTIC OGME Committee oversees the general curriculum, trainee welfare, faculty development, accreditation issues, and research within A-OPTIC. The OGME Committee will review results of evaluations of OPTIC services and provide feedback. Evaluations are tracked on the *Evaluation of Services Tracking Matrix* (Appendix).

The OGME Committee generally meets at least ten (10) times per academic year. From time to time, sub-committees may be formed for purposes related to academic sponsorship or other issues related to the Mission of A-OPTIC and the respective Missions of its Members.

The OGME Committee is a mix of official business, discussion, and sharing of best practices. While voting rights are limited to the DMEs at each institution, District Academic Officer(s), Resident Representative(s), and the Chief Academic Officer, anyone involved with academic medicine at your institution is welcome to attend. Official business and scheduled discussion is generally followed by an "Open Forum" for programs to ask questions of each other, A-OPTIC, or other attendees.

Meetings are generally held on the 2nd Tuesday of each month via Adobe ConnectPro videoconference. Attendees may participate using a webcam or microphone connected to their computer or by telephone. An agenda will be circulated at least two weeks in advance of the meeting. The Committee will evaluate its performance annually.

New Program Development Policy

A-OPTIC provides wraparound support to assist healthcare institutions with attaining accreditation from the AOA. A-OPTIC personnel will guide your institution through the accreditation process with collegiality and congeniality. Support includes, but is not limited to:

- o Template for key documents
- o Filing of documents with accreditors
- o Facilitation of consultants
- o Advocacy and communication with the AOA & specialty colleges on behalf of your institution
- o Clinical and administrative evaluation of institution

For the application process, A-OPTIC provides templates for standard operational documents. A-OPTIC Corporate Officer(s) work with a designated administrative person from the proposed program. Documents are tracked using the *New Program Application Checksheet* (Appendix) to ensure a complete and successful application. Once the application is complete, it is sent by the OPTI to the AOA via FileWorks.

After accreditation is achieved, or in anticipation thereof, A-OPTIC provides aspiring programs with a *New Program Start-Up Matrix (Appendix),* a guide to the numerous tasks associated with starting and developing a residency. This document, the aforementioned *Checksheet*, and numerous template documents and policies are available in a folder on Dropbox that programs may access at their convenience. A-OPTIC Corporate Officers meet with aspiring programs on a regular basis, generally for an hour every two weeks, to provide ongoing support. A-OPTIC Corporate Officers are available on an as needed basis, as well.

Site Visit Policy
Overview
Part of A-OPTIC's role as an Academic Sponsor required by AOA OPTI accreditation standards and sound business practice is to visit each of its Associate Member institutions at least yearly. Special circumstances may require additional site visit. Site Visits are scheduled to complement the AOA program accreditation timeline, generally five (5) years.

The purpose of a Site Visit is to:

F. 9.6
- Ensure Patient Safety, Educational Quality, and an Appropriate Balance Between Service and Education;
- Prepare programs for on-site accreditation inspections from the AOA;
- Conduct Needs Assessments to assess curriculum, faculty development, and research and scholarly activity resources to inform both the Program and OPTI processes;
- Verify Program information provided through self-reporting mechanisms, such as the Semi-Annual Report.

For Programs not under special accreditation circumstances, there are three (3) types of Site Visits:
- Annual Site Visit (years 1,2, and 4 of the accreditation cycle)
- Internal Review (year 3 of the accreditation cycle)

- Accreditation Inspection (year 5 of the accreditation cycle)

Year 1 –Annual Site Visit

- Review results from previous inspection; monitoring of implementation of Corrective Action Plan, if applicable;
- G. 9.2 Meet with Residents, Faculty, DME, Program Director, and Administration to determine the program's areas of needs and identify resources to meet them;
- Meet with Residents without the presence of faculty or program administration to discuss work hours compliance, program quality, and the balance between service and education.
- Program and A-OPTIC will identify specific "Opportunities for Improvement", along with an implementation plan.

Year 2 –Annual Site Visit

- Review Institutional and Program-Specific Crosswalks with DME, Program Director, and Program Administrators and discuss any changes to the standards and their effect on the program's ability to comply;
- Review results from previous inspection; monitoring of implementation of Corrective Action Plan, if applicable;
- G. 9.2 Meet with Residents, Faculty, DME, Program Director, and Administration to determine the program's areas of needs and identify resources to meet them;
- Meet with Residents without the presence of faculty or program administration to discuss work hours compliance, program quality, and the balance between service and education.
- Program and A-OPTIC will identify specific "Opportunities for Improvement", along with an implementation plan.

G. 9.5 **Year 3 -Internal Review**

- Program will complete both Institutional Crosswalk and Program-Specific Crosswalk. A-OPTIC will provide ongoing support to the program as needed. It is recommended that the Program begin completing these documents at least three (3) months prior to the site visit.
- A-OPTIC Corporate Officers and Program Leadership will meet by teleconference at least one month prior to the Site Visit to discuss content and process.
- A-OPTIC Corporate Officer will conduct a "mock inspection" using the Institutional Crosswalk;
- Program and A-OPTIC will identify specific "Opportunities for Improvement", along with an implementation plan.

Year 4 –Annual Site Visit

- Review results from Internal Review; monitoring of program adjustments to comply with accreditation standards, if applicable;
- G. 9.2 Meet with Residents, Faculty, DME, Program Director, and Administration to determine the program's areas of needs and identify resources to meet them;

- Meet with Residents without the presence of faculty or program administration to discuss work hours compliance, program quality, and the balance between service and education.
- Program and A-OPTIC will identify specific "Opportunities for Improvement", along with an implementation plan.

Year 5 –Inspection

- Program will complete both Institutional Crosswalk and Program-Specific Crosswalk. A-OPTIC will provide ongoing support to the program as needed.
- A-OPTIC Corporate Officer(s) will participate in AOA Inspection, either by phone, videoconference, or in-person, according to the needs and preference of the Program and AOA Site Inspection Team.

G. 9.6

Policy for Assisting Programs Receiving Less than 71% on Site Review
The process for assisting Member programs receiving less than 71% on AOA Site Review is as follows:
- Deficiencies are reported to A-OPTIC;
- Program representatives and A-OPTIC Corporate Officers collaborate to resolve deficiencies and develop a Corrective Action Plan, by meeting in-person, conference call, and/or email, by pre-determined schedule or as needed.
- Corrective Action Plans are reviewed by the OGME committee which makes further recommendations, if necessary.
- Corrective Action Plans are approved with signature by Chief Academic Officer, and then sent to the AOA.

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Semi-Annual Reports
The A-OPTIC Semi-Annual Report (SAR) is an instrument for monitoring program compliance and evaluating academic needs (Appendix A). The SAR is submitted to the A-OPTIC by its Associate Member programs two (2) times per year for review and approval by the A-OPTIC OGME Committee. The SAR achieves the following functions:
- Monitoring the progress of trainees towards program completion;
- Monitoring of program and trainee compliance with rules regarding work hours (Appendix B);
- Monitoring of program balance between service and education and other trainee welfare related issues;

C. 9.8
G. 9.2

- Provides a mechanism through which Members may report needs of their program, for which AOPTIC may be able to provide supplemental support.

A-OPTIC Corporate Officers will work with Members to develop or otherwise obtain resources aligned with Needs articulated on the SAR. As resources become available, Members will be notified through the OPTI OGME Committee, as well as periodic announcements.

Certificates of Completion
Accreditation standards require that A-OPTIC and the program member issue a joint certificate signifying resident completion of the program. The Education Coordinator is the primary communication point for

all matters pertaining to certificates. Completed copy is retained at A-OPTIC according to records keeping policies. Certificates of Completion can be completed one of two ways:

1. *A-OPTIC generates certificates* with the necessary signature lines, training dates, name, and any other required information. A-OPTIC sends draft to Program for verification. Once verified, A-OPTIC acquires the needed signatures from COMs and A-OPTIC and sends to Program. Program leadership signs the certificate and sends copy of completed document to A-OPTIC.
2. *Program generates certificate*, mails or otherwise transfers certificates to A-OPTIC. A-OPTIC verifies that all of the required information is included on the certificate, provides the necessary signatures, and sends to A-OPTIC. This process should result in both A-OPTIC and the Program having completed copies of all Certificates of Completion.

Record-Keeping Policy (Description of data backup, etc.)
In order to ensure compliance with OPTI accreditation standard which reads, "The OPTI shall develop and maintain a permanent and safe system for keeping of records." The following policy is approved:

1. A-OPTIC shall maintain a de-centralized system of record keeping and will be maintained on-site by the respective residency programs. The owner of such documentation will be the Program Director of the respective residency program or his/her designee.
2. The Program Director or their designee shall transmit reports to the OGME of the institution as well as of A-OPTIC, the DME, specialty colleges, and the AOA as required.
3. It shall be incumbent upon the Program Director as trustee of these records to maintain these files in such a fashion in both paper as well as electronic supporting copies so that they may be reviewed from time-to-time as requested during evaluation by the DME, OGME, OPTI, or an external evaluator at any time.

Corrective Action Plan Policy
The A-OPTIC OGME Committee reviews the Corrective Action Plans of all programs who incur deficiencies as a result of an accreditation review by an AOA accrediting agency. The process for correcting program deficiencies is as follows:
1. Report deficiencies to A-OPTIC Executive Director;
2. Program representatives and A-OPTIC Corporate Officers collaborate to resolve deficiencies and formulate a corrective action plan;
3. Corrective Action plan is reviewed by OGME committee, which makes further recommendations if necessary;
4. Corrective action plan is approved with signature by Chief Academic Officer, and then sent to the AOA.

Timeline for Compliance
1. Program has **45 days** to submit corrective action plan to OPTI OGME Committee.
2. OPTI has **30 days** to submit to PTRC.
3. AOA will forward to Specialty College within **10 days**.
4. Specialty College will review within **45 days**.

5. Program submits documentation that plan is being followed within **6 months**.
6. OPTI OGME approves validation of documentation within **3 months**.

Program and OPTI Quality Improvement

A-OPTIC is required by accreditation standards to monitor or provide various systems of program quality improvement, both for individual programs and OPTI-wide. In order to ensure the existence of processes that serve the purposes of Associate Member programs, Associate Member representatives will assist in their development, implementation, and evaluation.

G. 9.7

Administrative Process Concerning Submission of Residency Training Applications

The application process for new residency training may take 1-2 years depending upon specialty. It is strongly recommended that the Executive Director or Associate Director be involved at the earliest possible point in the process so as to allow at least one (1) year to complete the residency application. The Executive Director shall conduct a face-to-face site visit with the healthcare provider's leadership and individuals representing the Academic Member. The A-OPTIC Executive Director or Associate Director shall directly assist healthcare providers with the drafting and assembly of documents related to residency training applications. Academic members shall provide consultation.

As the legal signatory of the A-OPTIC, the Executive Director shall sign all residency training applications when complete. The A-OPTIC Executive Director shall ensure the submission of all applications and supporting documents to the AOA.

A-OPTIC provides wraparound support to assist healthcare institutions with attaining accreditation from the AOA or expanding their existing program. A-OPTIC personnel will guide your institution through the accreditation process with collegiality and congeniality. Support includes, but is not limited to:

- Template for key documents
- Timelines to ensure timely submission of accreditation documents
- Filing of documents with accreditors
- Facilitation of consultants
- Advocacy and communication with the AOA & specialty colleges on behalf of your institution
- On-site Clinical and administrative evaluation of institution

A-OPTIC provides new programs with a Start-Up Matrix to guide them through the processes of starting a new program. In addition, a DropBox is created with templates for various documents that must be completed for the initial application process. A-OPTIC staff will also conduct on-site visits and set-up bi-weekly video conferences as the program is starting up to guide the process.

Trainee Status and Services

F. 9.1

Policy for Ensuring Appropriate Trainee Selection Processes

All A-OPTIC Associate Member programs must adopt selection policies and criteria for trainees in accordance with the specific policies and procedures for the *AOA Basic Documents for Postdoctoral Training*. Associate Member programs send a copy of their selection policies and criteria for trainees. Each year thereafter, the A-OPTIC Education Coordinator will send the most current selection policy on

file with A-OPTIC to the program for confirmation or updating. Programs also report substantive changes to selection policies as they occur.

F. 9.2 **Transfers and Advance Standing Policy**

The AOA and osteopathic specialty colleges have policies and procedures for OGME programs regarding advanced standing and accepting trainees who have been enrolled previously in a different postdoctoral training program (Transferring Trainee). These policies and procedures can be found on the websites of the AOA and relevant specialty colleges. A-OPTIC Associate Members (residencies) are required to adhere to these policies and procedures.

A-OPTIC's role in this process is to meaningfully assist and monitor adherence to AOA/SPEC policies and procedures. To achieve this Associate Members are required to follow this process:

1. If an Associate Member intends to enroll a Transferring Trainee into its AOA accredited postdoctoral training program, the Associate Member should notify and consult with A-OPTIC Corporate Officer(s) beforehand. Corporate Officers will assist with maintaining compliance with AOA/SPEC processes, including conveying documentation to AOA via FileWorks.
2. The DME must obtain written verification of training and send to A-OPTIC for review and consultation before submitting to the AOA/SPEC. Information verifying training must include, but is not necessarily limited to the following:
   - Dates, location, specialty of training for each completed rotation;
   - Contact information for prior DME and Program Director.
3. Once this information has been reviewed by A-OPTIC it will be sent to AOA/SPEC via FileWorks.

F. 9.4
F. 9.6 **Resident and Intern Subcommittee**
G. 9.2 This committee meets at least two (2) times annually and functions as a free and open forum for trainees to discuss issues related to their welfare and work hours. Each A-OPTIC Associate Member institution must have a participating representative on this committee, who speaks for the residents of all programs at the institution. The Chairperson of this committee will be selected from its Members. The Chairperson is the representative on the A-OPTIC OGME Committee.

F. 9.5
F. 9.6 **A-OPTIC Policy Regarding Reporting of Work Hours Issues**
A-OPTIC will review reports of inconsistencies between published work hour policies and program practice, without reprisal visited on the alleging trainee. Reports shall be brought to the OGME committee by the Chairperson of the Residents and Interns Committee or an A-OPTIC Corporate Officer. Each submission of purported inconsistency must contain:
1. Name of the Training program;
2. Name of the intern or resident (trainee in question will be excused during the meeting);
3. Date of the incident;
4. Nature of the inconsistencies in published work hour policies, with documentation of published work hours and the variation.

The A-OPTIC will address all reported inconsistencies by gathering data and documenting if and when the inconsistencies occurred. If the report is felt to be a serious violation of AOA, A-OPTIC, and training

site work hour policies, the DME of the institution will be notified and a plan of action to correct the situation will be submitted to the OGME, both at the institution and A-OPTIC. The A-OPTIC OGME will then track any additional inconsistencies in published work hours and watch for trends. Reports of a minor in nature will be tracked to see if there is a pattern. Reports that are deemed to be invalid will be noted and tracked.

G. 9.1 Curriculum

Overview

Each A-OPTIC Associate Member program will implement a curriculum specified by the Specialty College or Internship Evaluating Committee (IEC) that includes all seven AOA Core Competencies. Member programs will send a copy of program curriculum to A-OPTIC. The curriculum will include:

- Institutional Core Competency Plan (ICCP)
- Rotations Schedule
- Didactic Schedule

G. 9.4 **Institutional Core Competency Plan Policy**

A-OPTIC Associate Member programs are required to have an Institutional Core Competency Plan (ICCP. The ICCP delineates the program teaching and evaluation methodologies. Member programs should send a copy of their ICCP to A-OPTIC for review and approval by the OPTI OGME Committee. A template ICCP is available (Appendix).

Each year thereafter, programs should send the Core Competency Report Form (Appendix). The Core Competency Form is the same one that programs must complete each year for the AOA.

Description of Curriculum Resources

OMM/OPP Conferences

On the 3rd Thursday of each month at 12:00 Noon EDT, A-OPTIC broadcasts via the internet a one hour long educational conference addressing the appropriate integration of OMM/OPP. These conferences are live and interactive. Each conference has opportunities live follow-up demonstrations of topic-specific OMM techniques. Continuing Medical Education (CME) credit is typically available to attendees of these live sessions. Attendance is taken within the virtual meeting room to monitor participation in each event and at the conclusion of the session, attendees are encouraged to complete a satisfaction survey designed to help each presenter shape their future lectures and topic choices. A-OPTIC currently uses Adobe Connect Meeting software for Grand Rounds, which offers a chat function, a file sharing function for those wishing to download CME documents or PowerPoint presentations, and many other capabilities that encourage/facilitate attendee interaction. Adobe Connect also allows participants to dial in with a toll free number and passcode or use their computer speakers and a microphone.

Video Curriculum

The A-OPTIC website offers an extensive list of video lectures and demonstrations which can be accessed at any time. This video curriculum is organized by topic and gives users the option of searching for videos based on keywords. For the videos involving PowerPoint presentations or quizzes, all of the ancillary materials are available for download, as is the video itself. Users can be tested at the

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conclusion of videos where tests are available and, subsequently, request CME credit. Upon completion of testing, a Certificate of Participation is generated and can either be printed or e-mailed to any email address the user selects. In this way, instructors and preceptors are able to easily incorporate the A-OPTIC content into their standard curriculum and test trainees as they choose. The offering of CME credit encourages the utilization of A-OPTIC's video curriculum by more established and long practicing physicians as well. A-OPTIC has the ability to track which users view each video, as the video curriculum section of the website is only accessible after obtaining a username and password.

G. 9.3
G. 9.4

Policy Concerning the Appropriate Integration of OMM/OPP
Appropriate Integration of OMM/OPP Defined:
A resident/faculty member will have integrated OMM/OPP into the clinical regimen appropriately if:
- Structural Exam is not called for by the chief complaint and resident does not do one
- Where called for by the chief complaint, resident does a structural exam and either:
  - Treats patient with OMT
  - Refers patient for OMT
  - Offers to refer or treat, but patient declines

ICCP Guidelines for OMM/OPP Didactic Programs (teaching methodologies)
At least Ten (10) hours, twelve (12) recommended, of OMM & OPP didactics be included as part of the standard curriculum. Ways to meet this requirement include, but are not limited to:
- Local didactic programming counted on a hour for hour basis
  - Faculty conducts lecture/workshop, etc.
- A-OPTIC didactics counted on an hour for hour basis and documented either by:
  - Written response following A-OPTIC written response guidelines and scored with A-OPTIC rubric
  - Test results reported to A-OPTIC via testing system
- Resident Teaching counted on a basis of 1 hour of face time leading a workshop or lecturing equals 3.5 hours towards meeting the requirement.
  - 1 hour of teaching
  - 2.5 hours of preparation time
  - Equals a total of 3.5 hours counted towards requirement
  - Teaching hours will have a multiplier, takeoff effect. Other residents can count the didactic time towards meeting their requirement. This will help develop faculty in respect to OMM as well.

ICCP Guidelines for OMM/OPP Evaluation Methodologies include, but are not limited to, the following:
Any one (1) or combination thereof to equal a review of at least ten (10) charts per quarter:
- 10 random charts per quarter reviewed by PD;
- Resident flags 10 charts per quarter for review by PD;
- Residents peer review at least 5 charts per month, and has 5 of their charts peer reviewed per month;
- Resident picks 6 charts per quarter for PD to review; PD pulls 4 at random;

- 10% of charts should have evidence of OPP
  - Review 100 charts in 2 months;
  - If satisfactory, 50 charts the next 2 months;
  - If satisfactory, 20 charts ";
  - If satisfactory, 10 charts ";
  - Once 10% is met, raise compliance to 15 then 20%.
- PD reviews 20% of all charts;
- Residents keep an OMM/OPP log;
- Residents turn in weekly OMM exam and treatment, or
- PD evaluates per quarter:
  - 3-5 clinic charts
  - 3-5 inpatient charts

Description of Library Services

D. 9.2
H. 9.1
H. 9.2

A-OPTIC is committed to ensuring that its Member programs have adequate access to learning resources. Academic Members have agreed to make their libraries available to trainees and faculty in A-OPTIC Member residencies. This understanding is articulated in the Academic Member Affiliation Agreement.

The Kentucky College of Osteopathic Medicine Medical (KYCOM) Library provides interns, residents and preceptors with timely access to medical literature and literature search capabilities. The KYCOM Library is committed to A-OPTIC faculty, interns, and residents with library services comparable to services available to KYCOM undergraduates at the Medical Library. Specific services include facilitating document delivery, reference assistance, literature searches and database training. The KYCOM Library will also assist health facilities with collection management. Remote access to some resources is available to eligible health professionals.

To access these resources, contact:

> Melinda Robertson, Master of Science in Library Science
> Medical Library
> University of Pikeville –Kentucky College of Osteopathic Medicine
> 147 Sycamore Street
> Pikeville, KY 41501
> Phone: 606-218-5157
> Fax: 606-218-5170
> MelindaRobertson@Upike.edu

Normal Hours of Operation (All times EDT):
> Sunday -3:00 PM - 10:00 PM
> Monday-Thursday -11:30 AM – 8:00 PM
> Friday -11:30 PM – 5:00 PM
> Saturday 9:00 AM – 5:00 PM

Literature Search requests -Literature searches may be requested by phone, fax, or email. Each request should contain the following information:

1. Name of requestor
2. Requestor's institutional affiliation
3. Requestor's status (i.e. intern, 1st year resident, 2nd year resident, preceptor)
4. Contact information for requestor, **including** a follow-up number and email address in case a question or problem arises. Be sure to include the mailing address that information should be sent to.
5. Information requested, be specific, give alternate spelling, names, etc., if applicable.
6. Limiting features such as number of years to be searched, languages, human, age groups, type of article (i.e. review, research, clinical trials, etc.)

E. 9.1 Faculty and Instruction

Academic Appointments of Core Faculty

All core faculty members at A-OPTIC Associate Member programs must be credentialed or appointed at one or more colleges accredited by the Commission on Osteopathic College Accreditation (COCA) or the Liaison Committee on Medical Education (LCME).

Core Faculty Policy

All A-OPTIC Associate Member programs will designate "core" faculty. Member programs will submit a list of core faculty, along with other information, to A-OPTIC using the Core Faculty Report Form (Appendix).

E. 9.5
G. 9.3
Osteopathic Principles and Practice Faculty Policy

Each Member program must designate at least one (1) faculty member to ensure the implementation of curricula and faculty development addressing Osteopathic Principles and Practice (OPP). OPP faculty will ensure the implementation of the ICCP methodologies and the A-OPTIC *Policy Concerning the Appropriate Integration of OMM/OPP.*

E. 9.4 **Faculty Development and Evaluation**

Each A-OPTIC Associate Member program must have a process for evaluating individual faculty members that utilizes anonymous input from trainees.

Research and Scholarly Activity

D. 9.1 **Overview of OPTI Role in Research**

A-OPTIC's role regarding research at Member institutions involving trainees and faculty is to ensure that it is conducted in accordance with local, state, and federal guidelines; and provide supplementary resources as needed and communicated to A-OPTIC.

D. 9.1 **Protection of Human Subjects**

Each A-OPTIC Member institution must have policies and guidelines that govern scientific research activities in accordance with local, state, and federal guidelines.

A-OPTIC Member Research Resources

A-OPTIC provides resources directly to its Members to encourage personal and public health research by trainees and faculty. The nature of these resources include, but are not necessarily limited to:

- Assistance with Research
    - A-OPTIC employs qualified personnel to assist trainees and faculty with research as needed.
    - A-OPTIC provides a Research Curriculum to support scientific inquiry.
    - Assistance with the peer-review publication process.
    - Access to an Institutional Review Board (IRB).
- Access to A-OPTIC PBRN Resources
    - Patient-Centered Outcomes Practice-Based Research Proposal Tree and Collaboration Platform.
    - Knowledge Web Journal Club
    - Research and Journal Club White Paper Archives
- Internal Budget Allocation for Research
    - A-OPTIC accepts requests for funding from trainees and faculty of Associate Member programs on a rolling basis. Requests should meet the requirements set forth in the "AOPTIC Policy Concerning the Allocation of Internal Research Funds".
    - A-OPTIC also provides a set amount directly to residents to offset some of the costs associated with presenting original research at a state, regional, or national conference.

Policy Concerning the Allocation of Internal Research Funds

In order to be considered for A-OPTIC internal research funds, a Principal Investigator (PI) shall follow the following procedure:

1. A proposal shall be submitted to the A-OPTIC Research Committee for review that consists of the following elements:
    a. Abstract/Executive Summary -This section provides a capsule description of the entire project. It should include a brief statement of the needs or problem being addressed, the methodology(s) to be employed in accomplishing the tasks outlined, project goals or expected outcomes, the time duration, the approximate cost, and the amount requested from A-OPTIC. [2-3 paragraphs, 300 words maximum]
    b. Background/existing base of knowledge –This section should reflect your scholarship and show evidence of a thorough research of the topic, including relevant literature search, and reference to external benchmarks and related measures.
    c. Statement of Need –This is the "why" of the project. One needs to convince the reader that the problem is real and that the proposer's rationale and methods will actually enhance the field, provide the service, or accomplish the stated objectives.
    d. Project Description –It should include a reasonably extensive explanation of the problem, with sufficient technical background, as appropriate, a statement of objectives, detailed explanation of the methodology or techniques to be utilized, and evaluation measures.

e. <u>Budget</u> –Budget should include line-item budget for all direct costs. The extent of individual cost items should match the scope of the project, reflect real or estimated cost burdens, and not be padded. Each major cost item should be accompanied by a narrative explanation of the basis of costs, and avoid jargon terms. If a multiple year project, a detailed budget sheet should be provided for each year, plus a consolidated or summary budget page totaling all cost categories.

f. <u>Organizational Information</u> –This is required for most institutional or program applications; this material may be optional or deleted for some grant requests for individuals or fellowship-type applications. It should include a brief history and profile of major institutional characteristics, including its primary mission, operating activities, audiences, services, etc. [1-2 pages]

g. Documentation of project review by Institutional Research Board (IRB) and/or Institutional Animal Care and Use Committee (IACUC), all applicable, or Letter of Support from same.

h. <u>Conclusion-Statement of Outcomes</u> –This includes a summary of the main points of your project narrative, and a restatement or final reinforcement of the intended project goals or outcomes. [1 page]

2. A recommendation shall be made to the A-OPTIC Osteopathic Graduate Medical Education (OGME) Committee by the Research Committee

3. A-OPTIC OGME Committee shall determine the funding level, if any, in accord with the research funding resources of A-OPTIC.

D. 9.5

Support for Resident Presentations of Original Research Policy
A-OPTIC will provide a $250 stipend to residents who present original research, podium or poster, at a state, regional, or national conference. Other types of presentations to comparable audiences will be considered by the A-OPTIC OGME Committee and subject to its approval.

D. 9.2
D. 9.3

Research Mentorship and Assistance Policy
Academic Members provide access to basic science and clinical research mentorship and assistance for A-OPTIC Associate Members (residencies) as needed by faculty and trainees. Generally, Academic Members will provide mentorship and assistance for those Associate Members that under former AOA accreditation standards would have been "sponsored" by a particular Academic Member Institution, but for which now A-OPTIC performs all the functions of sponsorship. However, nothing precludes an Academic Member from providing research mentorship and assistance to any A-OPTIC Associate, Academic, or Curriculum/Research Member. Mentorship will include:

- Assistance with research question development;
- Statistical support;
- Education;
- Facilitation of publication in peer-reviewed journals and other venues; and
- Poster presentation assistance.

Residents and faculty who wish to contact a research mentor for consultation should contact the A-OPTIC Executive Director:

> John E. Rehmeyer, MA
> A-OPTIC Executive Director
> 147 Sycamore Street
> Pikeville, KY 41501
> 606-218-5162
> johnrehmeyer@a-optic.org

The Executive Director will direct your request to the appropriate individual.

D. 9.2
D. 9.3
D. 9.5

Medical Scholarship Roundtable
Medical Scholarship Roundtables are opportunities for trainees and faculty to participate in facilitated discussions of scholarly priorities. A facilitator with appropriate credentials and expertise in medical scholarship will lead the meeting and provide technical assistance as needed. The Roundtables are opportunities for trainees and faculty to learn about what their counterparts in other programs are doing and/or thinking about with respect to scholarly activity. The Roundtable will be a mix of discussion and education. A-OPTIC will host at least two (2) Roundtable sessions per year.

D. 9.4

Policy Concerning the Recognition of Trainees who Conduct Research Activities
Trainees who conduct research activities will be recognized on the A-OPTIC Current Research page. The purpose of this page is to provide recognition of effort and accomplishment and encourage collaboration and the exchange of ideas across residencies. Resident research activities are also recognized at the OPTI OGME Committee meeting.

D. 9.2

Frontier Rural Innovations Network
The Frontier Rural Innovations Network (Innovations Network) is a national Practice-Based Research Network (PBRN) focusing on the improvement of the frontier and rural healthcare delivery process to meet the Triple Aim: Better Outcomes, Better Healthcare, Better Healthcare Value. A PBRN is a group of primary care practices and clinicians who conduct research collaboratively by informing each other's questions with data and critique. Clinicians can participate by contributing data relative to their practice or community as evidence for a study or developing a research proposal for inquiry across the network.

Residents of frontier and rural areas of the United States are not as healthy as their urban and suburban counterparts. While there are many variables, a dearth of practical scholarly understanding and more limited access to primary care are significant contributing factors. The predominant clinical research model does not lend itself well to the inclusion of frontier and rural providers and communities as active participants. The Innovations Network utilizes a paradigm to tap into these valuable insights.

Institutional Review Board