



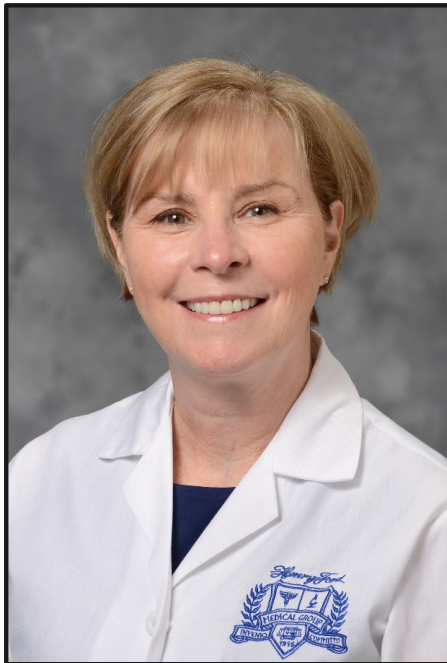
Osteopathic Recognition Update

Session: SES115

Presentation: February 25, 2023



Introductions



Eileen Hug, DO
*Chair, Osteopathic
Recognition Committee*



Tiffany Moss, MBA
ACGME Executive Director



Conflict of Interest Disclosure

Speakers

Eileen Hug, DO – Chair, Osteopathic Recognition Committee

Tiffany Moss, MBA – ACGME Executive Director

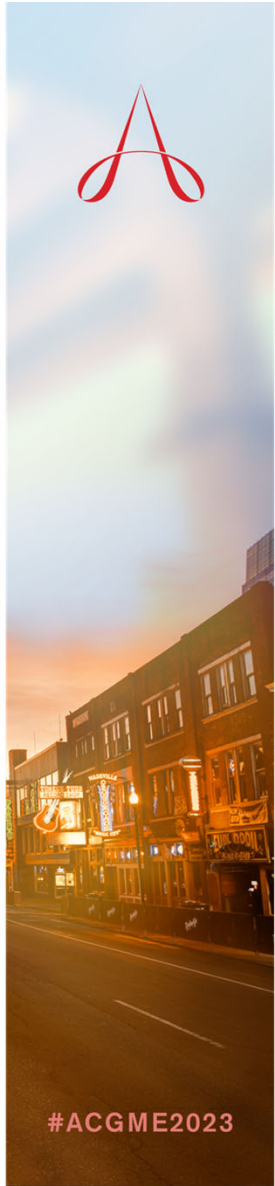
Disclosure

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 healthcare products used by or on patients.



Objectives

- Review Osteopathic Recognition program statistics.
- Discuss committee announcements and updates.
- Identify new and key Osteopathic Recognition FAQs.



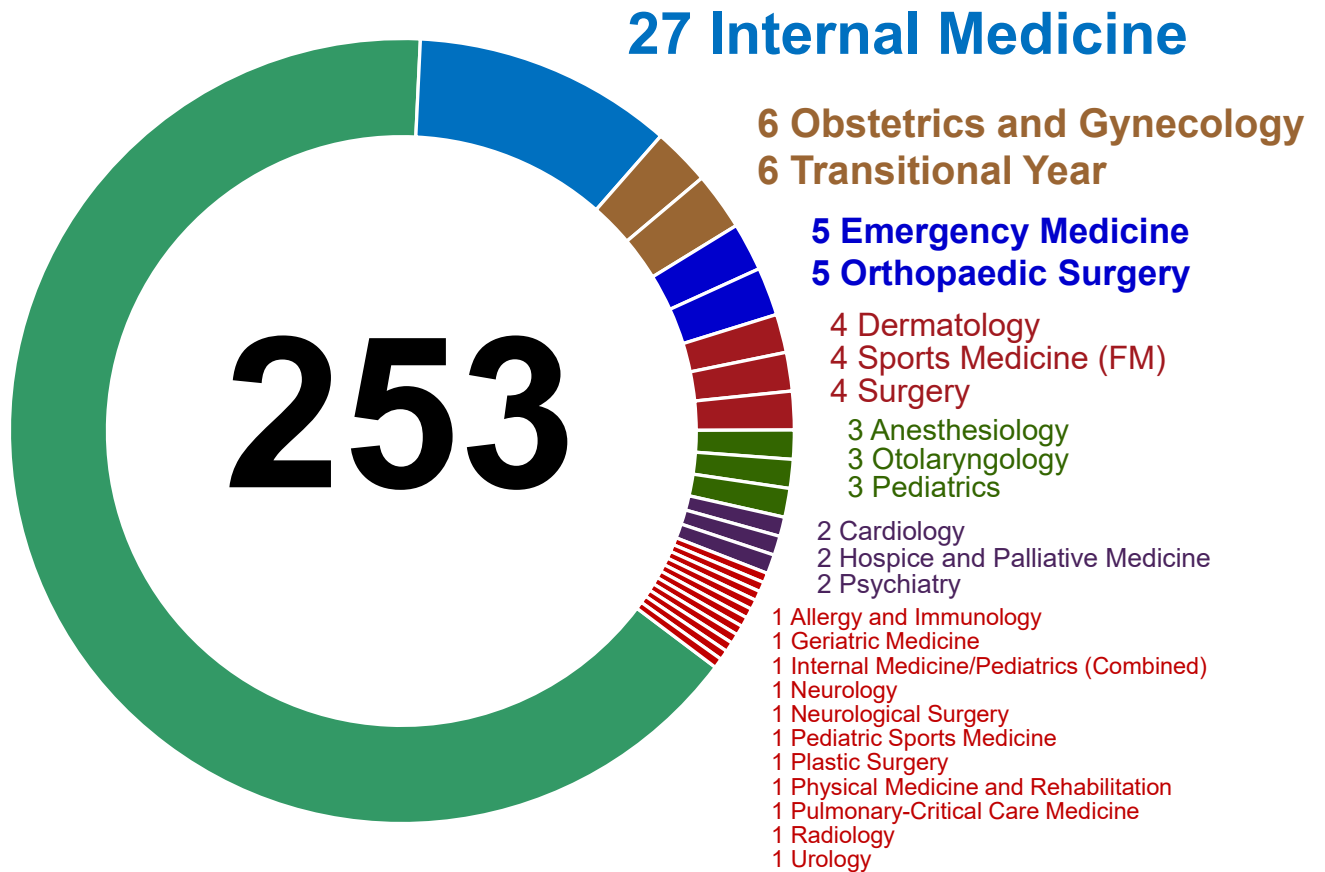


Program Statistics



Number of Programs with Osteopathic Recognition (by Specialty)

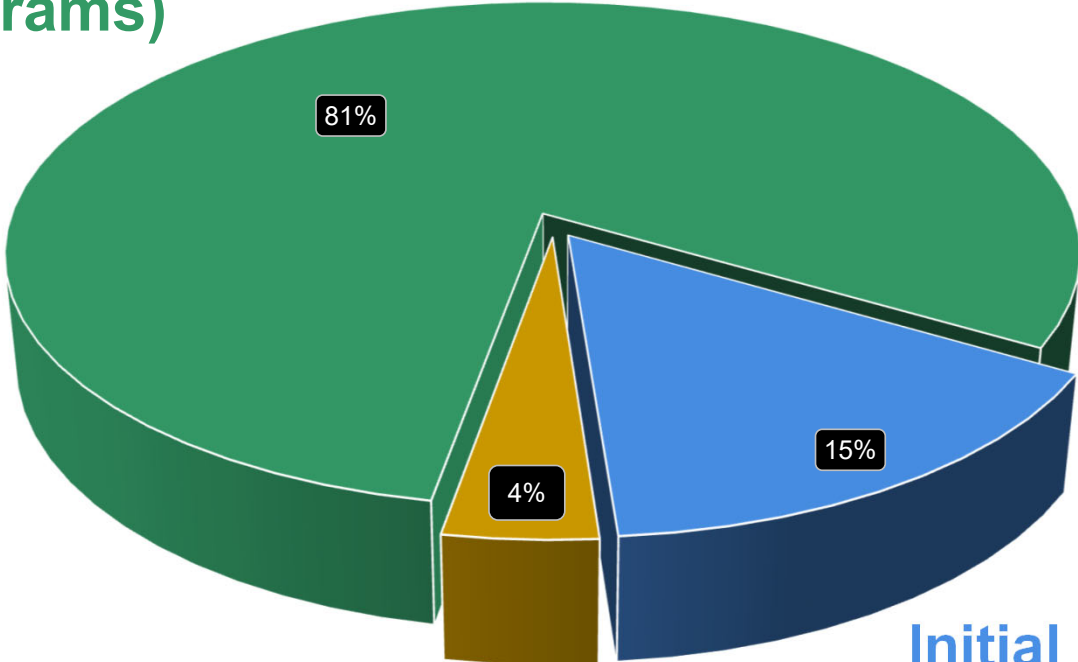
166
Family
Medicine



All data as of: January 25, 2023

Number of Programs with Osteopathic Recognition, (by Status)

**Continued Recognition
(204 programs)**



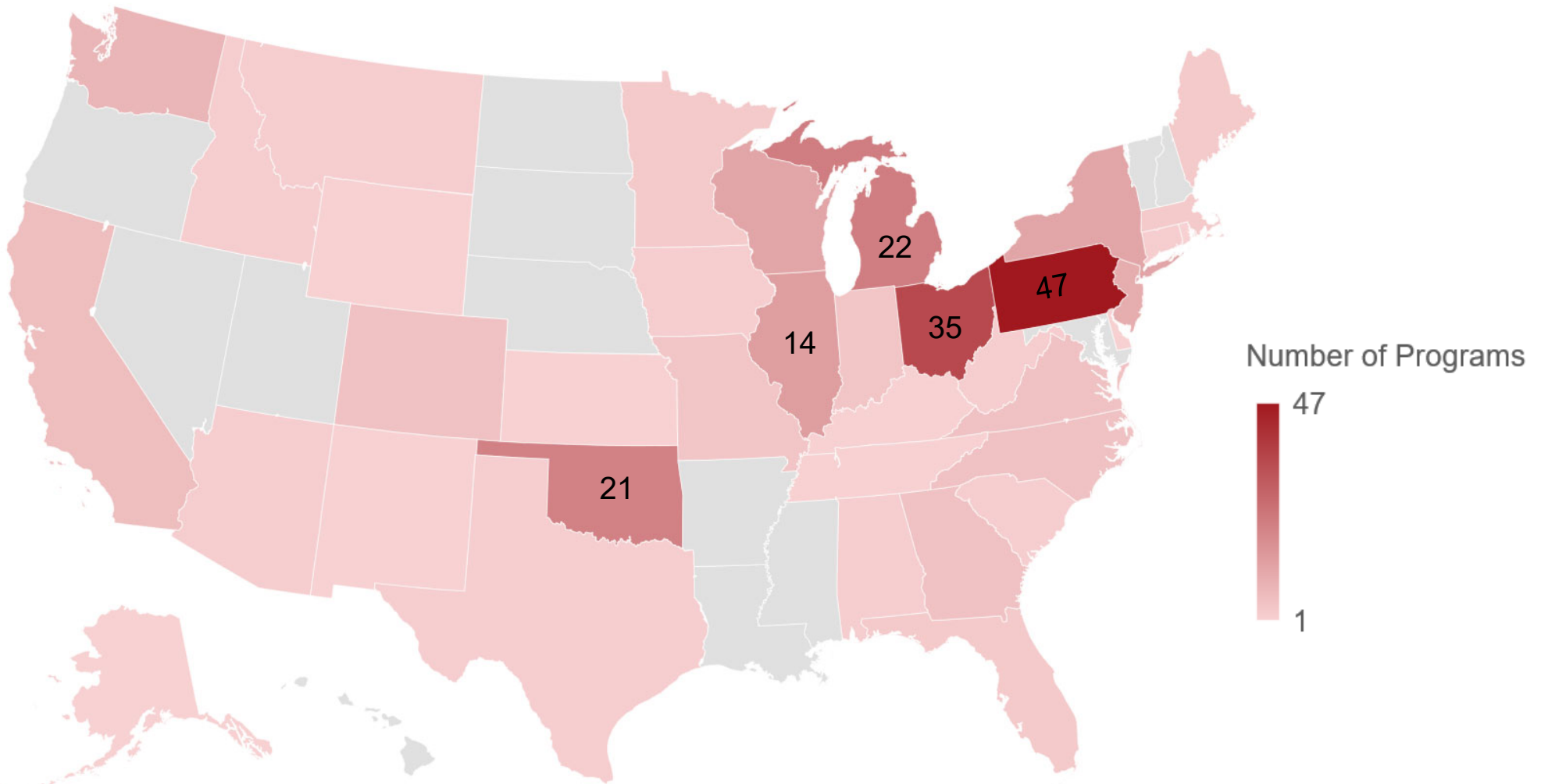
**Initial Recognition
(39 programs)**

**Initial Recognition with Warning
(10 programs)**



All data as of: January 25, 2023

Distribution of Programs with Osteopathic Recognition

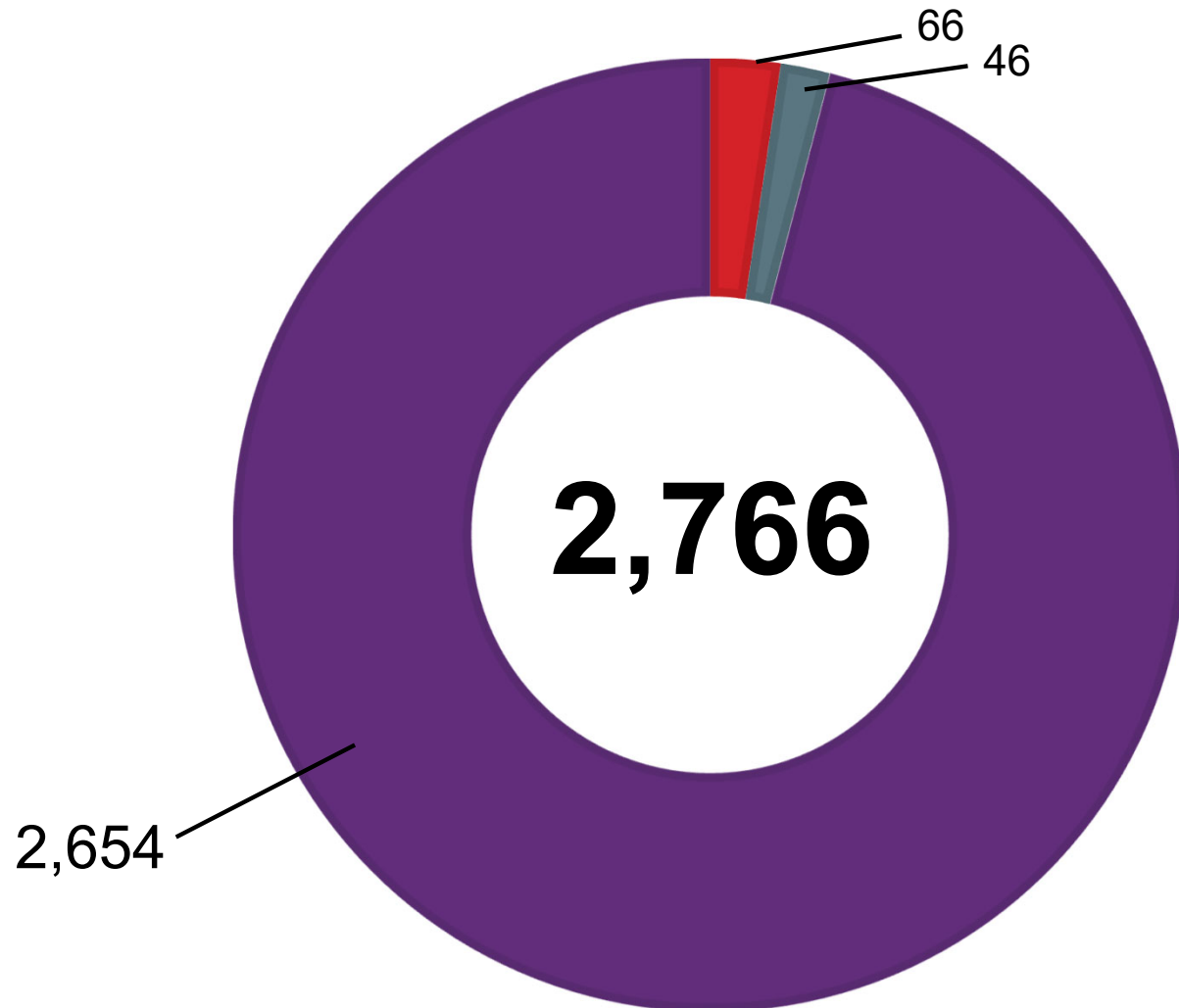


All data as of: January 25, 2023

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■ US LCME-Accredited ■ International ■ US COCA-Accredited

Designated Osteopathic Residents by Medical School Type



All data as of: January 26, 2023

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Committee Member Updates



Current ORC Members

Eileen Hug, DO, FAAP, FACOP

Chair

Christie Richardson, DO

Resident Member

James J. Arnold, DO, FACOFP, FAAFP LT COL,
USAF, MC

John Casey, DO, MA, FACOEP, FACEP

J. Michael Finley, DO

Laura E. Griffin, DO, FAAO

Jacklyn D. Kiefer, DO, FAMSSM

Kathleen Sweeney, DO, FAAFP

Erin Westfall, DO, FACOFP

Sarah James, DO, FACOFP

Vice Chair

Ken R. Coelho, DHSc, MSc, FRSPH

Public Member

Joanne Baker, DO, FACOI, FACP, FACODME,
FHM

Lindsey Faucette, DO, FAAP

Dominique Fons, MD, MEd, FAAFP

Jodie Hermann, DO, MBA, FACOI, FACP

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

Katie L. Westerfield, DO, IBCLC, FAAFP

Departing Members

Thank you to the following Osteopathic Recognition Committee members with a term ending June 30, 2023:

Lindsey Faucette, DO

Katie Westerfield, DO



New Members

The following new Osteopathic Recognition Committee members will start their term July 1, 2023:

Kristen Conrad-Schnetzer, DO

Yvette Gross, DO





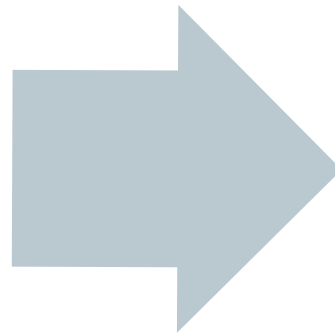
Reminder: Committee Name Change

— 2023 —
ACGME
— ANNUAL —
**EDUCATIONAL
CONFERENCE**

FEBRUARY 23-25, 2023
NASHVILLE
TENNESSEE

Committee Name

Osteopathic
Principles
Committee



Osteopathic
Recognition
Committee

July 1, 2015 to June 30, 2020

Effective July 1, 2021





Frequent Areas of Citations



Shared Faculty Plan

When must a program create and maintain a written plan for its shared faculty members?

[Recognition Requirement: IV.B.1.a)]

A written shared faculty plan is required when a program with Osteopathic Recognition has listed a faculty member on its ADS Faculty Roster as an osteopathic faculty member, and that same faculty member is listed on one or more other programs' ADS Faculty Roster as an osteopathic faculty member. All programs that share an osteopathic faculty member, including the Director of Osteopathic Education, must maintain a shared faculty plan.

Responses to the questions related to the sharing of faculty members in the Recognition-Specific Question Document do not replace a shared faculty plan. The Recognition-Specific Question Document is only maintained by programs through the Initial Recognition period.



Shared Faculty Plan

What information should be provided in a shared faculty plan?

[Recognition Requirement: IV.B.1.a)]

A shared faculty plan should detail the following: name of shared faculty member; list of programs that share the faculty member (including name and ACGME program number); the faculty member's role in each program (Director of Osteopathic Education, core osteopathic faculty member, osteopathic faculty member); and a role description for each program. The role description should briefly describe the experiences or activities the faculty member provides to each program, including the frequency of experiences that occur in the clinical setting.

EXAMPLE:

Shared Faculty Plan for 120390XXX1 Osteopathic Excellence Hospital Program (Family Medicine)

The following faculty members are shared by other programs with Osteopathic Recognition: Drs. William Sutherland and Andrew Still.

**William Sutherland, DO
Core Osteopathic Faculty Member**

Sharing Plan:
Osteopathic Excellence Hospital Program (Emergency Medicine) –
110390XXX1

Shared Faculty Plan

- Required if an osteopathic faculty member is shared between 2 programs with Osteopathic Recognition.
- Must be a document maintained by each program shared by faculty.
- Must contain elements outlined in FAQ.



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 OPP and occur annually.
- 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 AOA CME does not automatically satisfy the requirement.
- Program & 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

- Must occur annually.
- Program & Institution are responsible for providing and ensuring completion.
- Must be a live and in-person activity.



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.



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 includes direct observation of patient encounters with feedback through a standardized evaluation form.
- Examples of the acceptable standardized evaluation forms: Mock practical board 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.
 - ACGME Competencies (6): 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, which also aligns with the Program 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.





New FAQs



Osteopathic Recognition FAQs

Frequently Asked Questions: Osteopathic Recognition ACGME

Question	Answer
Osteopathic Program Personnel	
<p>Are there other qualifications the Recognition Committee is willing to consider if the Director of Osteopathic Education or a core faculty member does not have American Osteopathic Association (AOA) board certification?</p> <p><i>[Recognition Requirements: I.A.1.b).(2) and I.C.2.a)-b)]</i></p>	<p>The Committee will consider other qualifications in lieu of AOA board certification, including for (but not limited to):</p> <ul style="list-style-type: none"> • A physician holding a Doctor of Osteopathic Medicine (DO) degree with active board certification through an American Board of Medical Specialties (ABMS) member board • A physician holding a medical degree other than a DO who has active board certification through an ABMS member board and has completed an ACGME-accredited program with Osteopathic Recognition in a designated osteopathic position <p>Physicians with the above qualifications must be able to teach and assess Osteopathic Principles and Practice (OPP) and must demonstrate, through scholarly activity, CME courses, other formal education, faculty appointments, etc., that they are currently providing osteopathic medicine or have been in the recent past.</p>
<p>Could a physician gain the requisite “expertise and documented educational and administrative experience” needed to be qualified to be a Director of Osteopathic Education during medical school and residency?</p> <p><i>[Recognition Requirements: I.A.1.b).(1)]</i></p>	<p>No, the expertise required to be a Director of Osteopathic Education is not gained during medical school, residency, or fellowship. The focus of a medical student is to gain the knowledge, skills, and behaviors necessary to become a physician. The focus of a resident or fellow is to gain the knowledge, skills, and behaviors necessary to enter autonomous practice in the given specialty or subspecialty. It is not possible for a medical student or resident/fellow to gain the expertise necessary to oversee an osteopathic learning environment, an OPP curriculum and evaluation system, the osteopathic faculty members, and designated osteopathic residents, while focusing on becoming competent to practice medicine.</p>
<p>How can a program demonstrate that it has a sufficient number of osteopathic faculty members?</p> <p><i>[Recognition Requirement: I.B.3.]</i></p>	<p>A program can demonstrate it has a sufficient number of osteopathic faculty members by describing the faculty members’ roles in adequately fulfilling the needs of the osteopathic learning environment for the specialty.</p>



Osteopathic Recognition FAQs

Frequently Asked Questions: Osteopathic Recognition ACGME

Question	Answer
Osteopathic Program Personnel	
<p>Are there other qualifications the Recognition Committee is willing to consider if the Director of Osteopathic Education or a core faculty member does not have American Osteopathic Association (AOA) board certification?</p> <p><i>[Recognition Requirements: I.A.1.b).(2) and I.C.2.a)-b)]</i></p>	<p>The Committee will consider other qualifications in lieu of AOA board certification, including for (but not limited to):</p> <ul style="list-style-type: none"> • A physician holding a Doctor of Osteopathic Medicine (DO) degree with active board certification through an American Board of Medical Specialties (ABMS) member board • A physician holding a medical degree other than a DO who has active board certification through an ABMS member board and has completed an ACGME-accredited program with Osteopathic Recognition in a designated osteopathic position <p>Physicians with the above qualifications must be able to teach and assess Osteopathic Principles and Practice (OPP) and must demonstrate, through scholarly activity, CME courses, other formal education, faculty appointments, etc., that they are currently providing osteopathic medicine or have been in the recent past.</p>
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<p>How can a program demonstrate that it has a sufficient number of osteopathic faculty members?</p> <p><i>[Recognition Requirement: I.B.3.]</i></p>	<p>A program can demonstrate it has a sufficient number of osteopathic faculty members by describing the faculty members’ roles in adequately fulfilling the needs of the osteopathic learning environment for the specialty.</p>





Osteopathic Recognition Resident Survey



2021-2022 ACGME Resident/Fellow Survey

Survey taken: February 2022 - April 2022

Residents Responded 2568

United States - Aggregated Program Data

Total Programs 248

Osteopathic Recognition Survey Questions ADMINISTRATORS ONLY

Answer the following questions based on experience in: Didactic Setting	<u>Hospital/Inpatient Setting</u>			<u>Clinic/Outpatient Setting</u>			<u>Didactic Setting</u>	
	Yes	No	N/A	Yes	No	N/A	Yes	No
Do you receive an adequate education in Osteopathic Manipulative Treatment, as applicable to your specialty/subspecialty?	71.5%	18.0%	10.6%	84.9%	6.9%	8.3%	93.5%	6.5%
Do you receive an adequate education in Osteopathic Principles and Practices?	73.6%	16.9%	9.5%	86.7%	5.5%	7.7%	93.8%	6.2%

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?	0.6%	3.0%	10.3%	26.7%	59.3%
Your osteopathic faculty members role model the integration of Osteopathic Principles and Practice?	1.1%	3.9%	11.8%	25.4%	57.9%
You are supervised by osteopathic faculty members?	1.1%	5.4%	13.4%	24.8%	55.4%
You are evaluated on Osteopathic Principles and Practices?	2.6%	8.5%	16.6%	24.8%	47.5%
Your program supports you to explore scholarly activity that integrates Osteopathic Principles and Practice?	1.7%	5.1%	13.4%	24.3%	55.5%

New in 2023

- Two new overall experience questions.
- *Future Goal: Incorporate national comparison data into the program level survey report.*



Committee Usage of Survey Report

- 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.





Annual ADS Update for Osteopathic Recognition

— 2023 —
ACGME
— ANNUAL —
EDUCATIONAL
CONFERENCE

FEBRUARY 23-25, 2023
NASHVILLE
TENNESSEE





Annual ADS Update

- Scheduled period of time at the beginning of each academic year when programs are required to review, update, and provide newly required information in ADS.
- Programs with Osteopathic Recognition must ensure their recognition information is updated during this period.
- The Director of Osteopathic Education must review the recognition information in ADS before it is submitted to the DIO.



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



Annual Update for Osteopathic Recognition

Osteopathic Recognition

Osteopathic Recognition is a designation conferred by the ACGME's Osteopathic Recognition Committee upon ACGME-accredited programs that demonstrate, through a formal application process, the commitment to teaching and assessing Osteopathic Principles and Practice (OPP) at the graduate medical education level.

The documents and resources housed within this section are provided by the Osteopathic Recognition Committee and its staff at the ACGME.

Announcements

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.

05/2022
Page 1 of 2



ADS OR Annual Update Report Review


Annual Update Complete ^

 Print

Osteopathic Recognition Annual Update v

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



OR Summary Report Review

Osteopathic Recognition

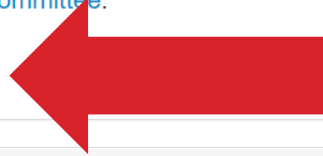
Osteopathic Recognition Status: Continued Recognition

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



Faculty Board Certification

- AOA & ABMS Board Certification data is being provided in ADS from the respective certifying boards.
- Board eligibility is not transmitted by the boards and auto populated.
- Board Certification information must be reviewed for accuracy and missing data.
- Missing information must be added by the program.
- Note: A physician is not board certified until the board sends communication stating they are board certified. Receiving passing scores on all necessary exams does not mean the physician is immediately board certified.



ABMS Certification

Last updated: 12/1/2022

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

Board Name	Certification Name	Status	Duration Type	Initial Date	End Date
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- 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: 5/25/2022

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

[Refresh My Data](#)

Board Name	Certification Name	Status	Duration Type	Initial Date	End Date
American Osteopathic Board of Family Physicians	Family Medicine/OMT	Active	Time-Limited	8/26/2011	12/31/2028
American Osteopathic Board of Neuromusculoskeletal Medicine	Neuromusculoskeletal Med/OMM	Active	Time-Limited	1/1/2013	12/31/2032

- 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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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.

[+ Add](#)

ABMS Certification

Last updated: 12/1/2022

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

Board Name	Certification Name	Status	Duration Type	Initial Date	End Date
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- 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: 5/25/2022

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

[Refresh My Data](#)

Board Name	Certification Name	Status	Duration Type	Initial Date	End Date
American Osteopathic Board of Family Physicians	Family Medicine/OMT	Active	Time-Limited	8/26/2011	12/31/2028
American Osteopathic Board of Neuromusculoskeletal Medicine	Neuromusculoskeletal Med/OMM	Active	Time-Limited	1/1/2013	12/31/2032

- 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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+ Add

Licensure

- State licensure has expiration dates. The dates must be updated in ADS when renewed.
- Licensure does not auto populate like board certification.





Best Practices



Role Descriptions

Role in Program as it Relates to Osteopathic Education

Describe the osteopathic faculty member's role in the program with regard to Osteopathic Recognition. This should include how the faculty member contributes to the program's osteopathic curriculum and overall efforts to meet the Osteopathic Recognition Requirements.

- Explain how the faculty member contributes to the curriculum of the program.
- Identify if faculty member is the Director of Osteopathic Education, a core osteopathic faculty member, or an osteopathic faculty member.



Block Diagram

- Must identify when and where osteopathic experiences occur, consistent with the Guide to the Osteopathic Recognition Block Diagram.
- Osteopathic experiences must remain on the Block Diagram as long as the program maintains Osteopathic Recognition.



Major Changes & Other Updates Box

Provide a brief update explaining any major changes to the Osteopathic components of the program since the last academic year, including changes in leadership and the impact of the COVID-19 pandemic on your program.

This may also include improvements and/or innovations implemented to address potential issues identified during the annual program review. (Last Updated: 8/25/2022)

- Must identify major changes in the osteopathic curriculum, leadership, etc.
- Discuss actions taken to address areas of non-compliance on the Osteopathic Recognition Resident Survey



Impact of COVID

- Programs must identify in the Major Changes and Other Updates section if and how the osteopathic curriculum of the program has been impacted by COVID in the prior academic year.
- Programs are expected to re-incorporate experiences that were paused (due to COVID) as soon as the program is able.



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.



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 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.)





Recognition Site Visits



Osteopathic Recognition Site Visit

- May be conducted virtually (via Zoom) or in-person. Site visit announcement letter will confirm modality.
- Black out dates will be requested in advance of scheduling the visit.
- Programs are now required to upload documents in ADS (in addition to updating application documents) prior to the site visit, in lieu of on-site document review.
- ADS must be updated (including application documents) by the deadline given in the site visit notification letter. Updates made after the deadline will not be considered during the review.





Resources



AOA Distinction of Advanced Osteopathic Training

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](#) 






AOA Distinction of Advanced Osteopathic Training

- The Distinction of Advanced Osteopathic Training is a new designation from the AOA exclusively for designated osteopathic residents/fellows that complete an ACGME program with Osteopathic Recognition.
- The AOA will communicate with DOEs annually to verify designated osteopathic graduates.
- Contact Maura Biszewski at mbiszewski@osteopathic.org for more information.



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 DOE 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 DOE 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 

Initial Recognition Resource



Initial Recognition Site Visit and Review Osteopathic Recognition Committee

What does Initial Recognition mean?

Initial Recognition is conferred upon a program when the Osteopathic Recognition Committee determines that an application for Osteopathic Recognition demonstrates substantial compliance with the Osteopathic Recognition Requirements. Initial Recognition is considered a developmental stage. When a status of Initial Recognition is conferred on a program, the Osteopathic Recognition Committee will apply a retroactive effective date of recognition to the beginning of the academic year of the decision, unless the program requests that recognition be effective the date of the meeting.

How will the program be notified if it achieves Initial Recognition? How should the program respond?

Programs that achieve Initial Recognition will receive a Letter of Notification from the Executive Director of the Osteopathic Recognition Committee that will state the action taken by the Committee and list any citations or areas for improvement (AFIs) that were identified in the review. Programs that receive citations or AFIs should immediately begin to address them upon receipt of the Letter of Notification. Programs will be asked to annually provide a response in the ACGME's Accreditation Data System (ADS) for each citation received, if applicable. This response should communicate to the Osteopathic Recognition Committee how the program has addressed the citation and is now in substantial compliance with the requirement, or the plan the program has put into place and the date the program will be in substantial compliance with the requirement. AFIs do not require a response in ADS. Programs should not respond to citations outside of ADS, unless directed to do so in the Letter of Notification. Correspondence mailed or emailed to the Osteopathic Recognition Committee in response to a Letter of Notification that were not requested in the Letter of Notification will not be accepted.






Does the ACGME Annual Update and regular maintenance of ADS apply to Osteopathic Recognition?

Programs should participate in the ADS Annual Update relative to Osteopathic Recognition and provide any new information as directed. This may include:

- Review of faculty members designated as osteopathic on the Faculty Roster. Programs should ensure that appropriate faculty members are designated. The Faculty Roster profile and requested CV information should be reviewed to ensure they are current.
- Review of residents designated as osteopathic on the Resident Roster. Programs should ensure that appropriate residents are designated.
- Entry and identification of scholarly activity as osteopathic for designated osteopathic residents and osteopathic faculty members.
- Review of the program's block diagram to ensure it represents the program's current osteopathic curriculum, showing where Osteopathic Principles and Practice (OPP) is integrated into the curriculum. The block diagram should specifically identify where and when the following experiences are integrated, if applicable: osteopathic education/experience in the clinical setting; osteopathic clinic (either osteopathic

Initial Recognition Resource

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 Milestones Resources

Milestones, Documents, and Presentations

Milestones

Milestones FAQs



Osteopathic Recognition Milestones



Osteopathic Recognition Supplemental Guide



Osteopathic Recognition Supplemental Guide Template



2022 Osteopathic Recognition Milestones 2.0 Webcast



Milestones

Milestones FAQs



Osteopathic Recognition Milestones



Osteopathic Recognition Supplemental Guide



Osteopathic Recognition Supplemental Guide Template



2022 Osteopathic Recognition Milestones 2.0 Webcast



Application Instruction Guide



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.



Application Instruction Guide

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 D...



Osteopathic Recognition Application Instructions



Block Diagram Guide for Osteopathic Recognition





Thank You!

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312.755.5490

www.acgme.org/osteopathicrecognition

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