

COUNCIL OF POSTDOCTORAL EDUCATION

SUBJECT: Internal Review of Residency Programs

EFFECTIVE DATE: July 2006

POLICY

Institutions sponsoring American Osteopathic Association (AOA) approved intern, residency and fellowship programs will conduct internal reviews of all approved programs to assess their compliance with the Institutional Requirements described in the AOA's "Basic Document for Postdoctoral Training Programs" and the program requirements of the AOA Specialty Colleges. This policy applies to program approvals on or after July 2006.

PURPOSE

It is the responsibility of each institution through its Graduate Medical Education Committee to ensure that each program fully meets the AOA's Institutional Requirements, the program requirements of the AOA and Specialty Colleges. The specifications set forth in Section II of the AOA's Basic Standards, make necessary an institutional system to assess whether each program has defined, in accordance with the relevant program requirements, the specific knowledge, skills, and attitudes required and provides educational experiences and evaluations for their interns, residents or fellows to demonstrate competency in the areas of patient care skill, medical knowledge, interpersonal and communication skills, professionalism, practice-based learning and improvement, systems-based practice, and osteopathic philosophy and osteopathic manipulative medicine; in addition to involving the teaching staff for the allocation of educational resources and maintenance of the quality of all programs be implemented.

In order to comply with the AOA's requirements, the COPT requires the following process for internal reviews be implemented July 1, 2006. Programs approved prior to July 2006 will not be required to conduct an Internal Review until their next inspection and continuing approval.

1. The institution's Medical Education Committee (MEC) is responsible for the development, implementation and oversight of the internal review process. The internal review process must comply with the following:
 - a. The MEC must designate an internal review committee(s) to review each AOA-approved program in the Institution. The internal review committee must include faculty, residents or fellows, from within the institution but from programs other than the one that is being reviewed and a representative of the institution's accredited Osteopathic Postdoctoral Training Institution (OPTI) "when possible". Other reviewers may also be included on the committee as determined by the MEC.
 - b. The review must follow a written protocol approved by the MEC that incorporates, at a minimum, the requirements in this Policy.

- c. The written report of each internal review must be presented to and reviewed by the MEC to monitor the areas of noncompliance and recommend appropriate action.
- d. Reviews must be conducted at approximately the midpoint between the AOA program surveys. (Although departmental annual reports are often important sources of information about a program, they do not meet the requirement for a periodic internal review).
- e. In all training institutions which sponsor dually accredited (AOA and ACGME) programs in the same specialty, the internal review process for that program may be conducted simultaneously utilizing both the AOA and ACGME standards and be acceptable to meet the AOA mid-cycle review requirements if conducted within 12 months of the required date. In such cases the full completion and documentation of the internal review by the MEC is required. If the dual program review period exceeds the time of the AOA required mid-cycle review by more than 12 months, a complete and separate AOA program internal review is required.
- f. The internal review shall not be shared at the time of the AOA on-site review. Only documentation of the internal review completion and review by the MEC shall be available to the AOA on-site reviewer.

2. REVIEW GUIDELINES

While assessing the intern, residency or subspecialty program's compliance with each of the program standards, the review should also appraise

- a. the educational objectives of each program;
- b. the effectiveness of each program in meeting its objectives;
- c. the adequacy of available educational and financial resources to support the program;
- d. the effectiveness of each program in addressing areas of noncompliance and concerns in previous AOA-approval letters and previous internal reviews;
- e. the effectiveness of each program in defining, in accordance with the Basic Standards (Section II) and Specialty College's requirements, the specific knowledge, skills, attitudes, and educational experiences required for the interns, residents or fellows to achieve competence in the following: patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, systems-based practice, and osteopathic philosophy and osteopathic manipulative medicine;

- f. the effectiveness of each program in using evaluation tools developed to assess an intern's, resident's or fellow's level of competence in each of the seven general areas listed above;
 - g. the effectiveness of each program in using dependable outcome measures developed for each of the seven competencies listed above; and,
 - h. the effectiveness of each program in implementing a process that links educational outcomes with program improvement.
3. Materials and data to be used in the review process must include
 - a. Institutional and Program Requirements for the program of the AOA's Basic Standards and the appropriate AOA Specialty College Inspection Workbook;
 - b. accreditation letters from previous AOA reviews, corrective action plans and progress reports approved by the MEC and sent to the AOA; and,
 - c. reports from previous internal reviews of the program.
4. The internal review committee must conduct interviews with the program director; representatives from the faculty; intern, residents or fellows training in the program (no less than fifty percent) and other individuals deemed appropriate by the committee.
5. There must be a written report of the internal review for each AOA-approved program that contains, at a minimum, the following:
 - a. the name of the program or subspecialty program reviewed and the date of the review;
 - b. the names and titles of the internal review committee members to include the resident(s) and an OPTI representative;
 - c. a brief description of how the internal review process was carried out, including the list of the groups/individuals who were interviewed;
 - d. sufficient documentation or discussion of the program's requirements and the AOA's Institutional Requirements to demonstrate that a comprehensive review was conducted and was based on the MEC's internal review protocol;
 - e. a list of the areas of noncompliance or any concerns or comments from the previous AOA-approval letter with a summary of how the program and /or institution addressed each one.

6. The written report of each internal review must be presented to and reviewed by the MEC to monitor the areas of noncompliance and recommend appropriate action. The Institution's accredited OPTI must receive a copy of the written report.
7. During the AOA's review of individual programs, these reports should not be shown to the AOA site visitor, who will only ascertain that an internal review was completed in the interval since the program's previous site visit.