

References

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OSTEOPATHIC RECOGNITION: WHEN, WHAT, HOW AND WHY?

On February 26, 2014, the Accreditation Council for Graduate Medical Education (ACGME) and the American Osteopathic Association (AOA) announced the formation of a Single Accreditation System. After June 30, 2020, the AOA will no longer accredit residency or fellowship programs in any specialty. Residency programs that demonstrate a commitment to teach and assess Osteopathic Principles and Practices (OPP) at the residency level, however, may apply for and be awarded Osteopathic Recognition (OR) by the ACGME.

OR requires that a program create an osteopathic learning environment that spans the length of the educational program. The program may utilize longitudinal and rotational components, focused or integrated rotations, osteopathic rounds, or patient care conferences. Either all the residents or a portion of the residents in a specific track can participate in OR. OR requires at least 2 faculty who develop curriculum and promote OPP and the use of osteopathic manipulative treatments. The faculty and designated residents have specific scholarly activity requirements and the residents are evaluated based on designated Osteopathic Principles and Practice Milestones. Every program with OR must have an osteopathic-focused track director and the program must maintain an average of at least 1 resident per year of the program. Programs may share osteopathic-focused faculty and track directors. Prior to beginning osteopathic-focused residency training in a program with OR, non-DO physician applicants must demonstrate some interest and understanding of OPP either by completing

an elective OPP rotation, completing courses at an osteopathic medical school, or having other training or experience to demonstrate entry-level competency. Consistent with current policy, residents graduating from an osteopathic-focused program need to take and pass only 1 board certification exam (ABMS or AOA).

ACGME-accredited residencies or AOA programs that are, at a minimum, pre-accredited after June 2015 can apply to receive designation for OR. Each program at an institution must submit a separate OR application. No fees or site visits are required to apply. Since the online application is housed in the ACGME Accreditation Data System (ADS), programs can use information already provided in ADS. In addition, the program must provide details on OPP integration in the competencies and curriculum, eligibility of non-DO applicants, availability of necessary equipment and faculty resources, and identification of the leader of the osteopathic-focused education program.

The Designated Institutional Official reviews and approves an application before it is submitted to the ACGME. The Osteopathic Principles Committee (OPC) of the ACGME will review the application and make the decision for "initial recognition" or "recognition withheld" status. Areas for improvement and citations will be outlined. Programs with initial OR will complete annual ADS updates, OR Milestones, and OR-specific questions on the resident survey. The OPC may confer "continued recognition" if the program is ACGME accredited, has a site visit within 2 years of the effective date of initial recognition, and demonstrates substantial compliance with OR requirements. Continued recognition requires that programs participate in OR-specific annual data collection, be monitored for major changes, and be reviewed by the OPC every 5 years. A paper review occurs after 5 years and an OR-specific site visit accompanies the written review at 10 years.

Family medicine residencies possessing the necessary resources, or the ability to obtain them, can benefit from an Osteopathic Recognition designation. Osteopathic Recognition creates an opportunity for all physicians to learn Osteopathic Principles and Practices, to understand osteopathic philosophy, to practice various approaches to patient care. OR also creates program distinctiveness. Patient care that is delivered within the context of Osteopathic Principles and Practices is aligned to patient-centered, high-value care and to the needs of our nation's health care system.

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