



AMERICAN OSTEOPATHIC ASSOCIATION

Osteopathic Postdoctoral Training Institution (OPTI) Accreditation Handbook

American Osteopathic Association
Department of Education
Division of Postdoctoral Training
142 E. Ontario Street
Chicago, Illinois 60611
800-621-1773

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**OPTI Accreditation Handbook
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Introduction

At its July 1995, meeting, the AOA Board of Trustees adopted a new method for accrediting osteopathic postdoctoral training programs. OPTI, as it is known, provides a standard for that accreditation process and is designed to strengthen current programs and unify new programs in postdoctoral training. The American Osteopathic Association (AOA), Bureau of Osteopathic Education (BOE), Council on Osteopathic Postdoctoral Training Institutions (COPTI) and each OPTI are required to adhere to the accreditation standards, policies, and procedures contained in the *AOA Basic Documents for Postdoctoral Training*.

The COPTI evolved from the former COPT Subcommittee on OPTI Evaluation and Oversight established in 1999. Its predecessor was the original Ad Hoc Committee on OPTI Implementation. The initial structure and role of the COPTI was created by action of the AOA Board of Trustees at its February 2003 meeting (see Resolution 53(M/2003) “*Task Force to Study the Structure of the Department of Educational Affairs*”) as a functional successor to the former subcommittee.

The current structure of the COPTI was established in 2011 by action of the AOA Board of Trustees at its January 2011 meeting (M/11) “*Education Policy and Procedure Committee III Report.*”

The *OPTI Accreditation Handbook* is a procedural guide established for the use of the COPTI, other AOA officers, and OPTI administrators. This is an official document adopted by action of the AOA Board of Trustees and may be amended from time to time.

The Handbook includes a description of the COPTI’s purpose, function, structure, operating procedures and pertinent attached appendices. The COPTI serves as a standing, subordinated committee of the Council on Postdoctoral Training (COPT) of the in specified, selective areas of osteopathic graduate medical education (OGME). Additionally, the handbook is designed to provide, in a user-friendly format, information to assist applicants in starting an OPTI. The handbook also describes the administrative process utilized in the accreditation of OPTI. It provides suggested models and documents the process used by the COPTI in accrediting OPTIs. This handbook does **not** include accreditation standards [see *AOA Basic Documents for Postdoctoral Training, Part Two: Basic Document for OPTIs*].

PART ONE: COPTI POLICIES AND PROCEDURES

A. Statement of Purpose

The COPTI is a representative body composed of members from AOA affiliate organizations created to assure the COPT, AOA Board, osteopathic medical professional and general public that postdoctoral training programs are operating within approved standards, rules and regulations, and are providing educational training satisfactory to the public interest. The COPTI also has the obligation to recommend policy revisions for consideration to the COPT for improvements in postdoctoral education.

B. Responsibilities and Functions

1. COPTI reviews and takes final action on OPTIs accreditation based on OPTI site visits.
2. The COPTI has the responsibility for assuring compliance with the accreditation standards and overseeing the accreditation process.
3. The COPTI has the responsibility for interpreting the standards of accreditation, but has no authority to waive compliance with any standards by any OPTI.
4. The COPTI must be responsible for developing programs that evaluate OPTI educational effectiveness. As its charge, COPTI must function as an evaluative body in overall global review of OPTI as a program structure and as an accreditation mechanism.
5. The COPTI shall serve as the advisory body on OPTI policy to the COPT.
6. Review on-site evaluation reports as part of the evaluation of applications for new OPTIs, or evaluations for continuing recognition of accredited OPTIs.
7. The COPTI shall conduct periodic review of OPTI standards on three-year basis, starting January 2010.
8. The COPTI must develop and maintain a procedural and policy handbook pertaining to the committee's area of responsibility and operations within the procedures approved by the AOA Board of Trustees.

C. Confidentiality of Accreditation Process

1. Accreditation reports are confidential between the COPTI and the OPTI. Premature and/or unauthorized disclosure of information reflecting visiting team or the COPTI views or recommendations concerning the accreditation status of an OPTI is not permitted.
2. The administrative officers of each OPTI are encouraged to make accreditation reports available to faculty members and others directly concerned. AOA officials, members of the BOE, and COPTI and visiting team members are not authorized under any circumstances to disclose any information obtained during site visits.
3. The AOA is obligated to maintain the confidentiality of its relationships with its OPTIs and not to announce publicly any action with respect to an OPTI other than its accreditation status, including public probationary status, or its removal from the accredited list.
4. If an OPTI releases part or all of an accreditation report in such a manner as to misrepresent or distort the report, the BOE or COPTI may release appropriate parts of, or the full report, to correct the misinformation. The AOA shall inform the OPTI in advance of the release and the substance of the release of any such information.
5. See Appendix E for the Conflict of Interest Policy.

D. COPTI Structure

1. COPTI Composition

- a. The COPTI shall be composed of ten (10) council members
- b. The COPTI shall have a chairperson
- c. The COPTI shall have a vice-chairperson
- d. The COPTI shall have ten (10) voting members
- e. The COPTI shall have a secretary

2. COPTI Term Limits and Criteria

- a. Appointment of representative and at-large members to the COPTI must be staggered and limited to no more than three consecutive three-year terms for nine (9) years cumulative. The exception to this term limit is the osteopathic student representative.
- b. Membership and chairperson appointments would be limited to a maximum of nine consecutive years and six years respectively in any one bureau, council or committee.
- c. All osteopathic physicians on the COPTI must be members in good standing of the AOA and shall conform to its constitution, bylaws and code of ethics.
- d. No member of the AOA Board of Trustees shall simultaneously hold a position on the COPTI.
- e. The term limit for a student representative shall be no more than one-year term.

E. Description of Council Positions

1. Chairperson:

- a. The AOA President shall appoint a chairperson for a two-year term of office. The Chair may serve a maximum of three (3) two-year terms within the limit of three three-year terms of membership.

2. Vice-Chairperson:

- a. The AOA President from among the membership of the COPTI must appoint the vice-chairperson for a one-year term of office.
- b. Any voting member of the COPTI is eligible to be appointed to the position of vice-chairperson.
- c. The vice-chairperson may not be from the same specialty college as the chairperson.

3. Secretary:

- a. The AOA Department of Education must appoint a non-voting Secretary.
- b. The Secretary shall be responsible for both recording and corresponding secretarial activities of the COPTI.
- c. The Secretary shall be the administrator for the COPTI.
- d. The Secretary shall maintain technical expertise in the areas of responsibility of the COPTI and make the COPTI aware of trends in these areas.
- e. Develop and implement an orientation for COPTI members.

F. Representation of the COPTI

Representation on the COPTI is set forth by the AOA-President Elect Appointment book each year and is subject to change.

1. AOA member-at-large (OPTI Administrator)
2. AOA member-at-large (OPTI Educator)
3. AOA member-at-large (OPTI Educator)
4. Representative nominated by the American Association of Colleges of Osteopathic Medicine (AACOM)
5. Representative nominated by the Association of Osteopathic Directors and Medical Educators (AODME)
6. Representative from within the AOA Bureau of Hospitals (BOH)
7. Representative who is a student at a COCA accredited COM.
8. Representative who is an Intern/Resident
9. AOA member-at-large (OPTI Educator)
10. AOA member-at-large (OPTI Educator)

G. Procedures for COPTI Meetings

1. General Meeting Procedures
 - a. The COPTI shall meet three times in a calendar year.
 - b. The COPTI operates on *Robert's Rules of Order*, newly revised.
 - c. With respect to the areas for which the COPTI has responsibilities, the COPTI may approve, deny, or defer action or remand an item back to the entity submitting that item.
 - d. The Chair of the COPTI, must present the COPTI's report to the COPT, including resolutions for action on policy and standards matters.
 - e. The COPTI must conduct appropriate orientation activities for its members.
 - f. The COPTI must be responsible for the expenses incurred by attendance of such persons invited at the specific request of the chair or secretary.
 - g. The COPTI shall not be responsible for expenses incurred by persons appearing before the COPTI at the request of, or in the interest of, other organizations or individuals.
 - h. A staff member from the Department of Education, in his/her capacity as Secretary to the AOA COPTI, shall be permitted to attend all meetings, including the Executive Sessions. In addition, AOA resource staff is permitted to stay at the discretion of the chair.
 - i. In the absence of an appointed member of the COPTI, the affiliate organization, with the concurrence of the chair, shall appoint an alternate representative to attend the COPTI meeting with full voting rights.
2. OPTI Accreditation and Effectiveness Activities
 - a. The COPTI must review applications for new OPTIs, on-site evaluation/accreditation reports and other supporting documentation and make final accreditation action during Executive Session.

- b. The COPTI, in cooperation with the AOA Department of Education, shall compose a list of qualified, experienced on-site evaluators that is reviewed and updated annually.
 - c. The COPTI must conduct training workshops for on-site reviewers every other year.
 - d. The COPTI must conduct annual workshops for the benefit of the entire OPTI community on topics that are identified by needs analysis.
 - e. The COPTI must make recommendations on policy issues pertaining to OPTIs and transmit them to the COPT for their review.
3. Advisors and Observers
- a. The AOA president, president-elect, executive director, chair of the Department of Educational Affairs, and vice-chair of the Department of Educational Affairs meet with the COPTI as non-voting advisors on policies and procedures of the AOA as applicable to the COPTI.
 - b. By precedence, all meetings of the AOA COPTI are open to the public .with the exception of executive sessions.

H. Review of OPTI Corrective Action Plans and Evidence of Implementation

- 1. The COPTI shall review all corrective action plans submitted by OPTIs. An inspected OPTI must submit a corrective action plan to the COPTI if deficiencies are found during the accreditation visit.
- 2. The corrective action plan must be submitted in 75 days from date of the accreditation letter.
- 3. The COPTI can approve, deny, or request additional information for any corrective action plan.
- 4. OPTIs shall be notified in writing of the status of their corrective action plan.
- 5. OPTIs must submit evidence of implementation 6 months after approval of the corrective action plan by COPTI.
- 6. COPTI must approve all evidence of implementation reports
- 7. Failure to comply with corrective action plan request can result in reevaluation of the accreditation award by COPTI

PART TWO: OPTI ADMINISTRATIVE POLICES AND PROCEDURES

A. OPTI Responsibilities

1. OPTIs must pay an annual accreditation fee set by the AOA. Failure of payment may result in withdrawal of accreditation.
 - a. If a new OPTI is formed in the calendar year, the OPTI must pay the annual accreditation fee.
2. An accredited OPTI is obligated to report to the COPTI substantive changes in its governance, membership, structure, and/or function together with written report as to the impact of such change(s). Such report shall be considered by the COPTI and, may be acknowledged and filed, or, if deemed of sufficient significance, may result in an on-site visit. Substantive change may include, but not be limited to, any of the following: (a) any change in the established mission, objectives or location of the OPTI; (b) any change in the legal status or form of control of the OPTI, including the addition or loss of governing partners; (c) addition of instruction which represents a significant departure in terms of curriculum content, training program options, or method of delivery of the curriculum and training; (d) any increase in the number of training positions available within the OPTI as approved by the AOA.
 - a. When a change in an OPTI membership occurs, the new partner OPTI must send a copy of the affiliation agreement to the AOA Department of Education within 30 working days.
3. An institution belonging to more than one OPTI must designate to the AOA which OPTI will be the academic sponsor for each program.
4. The designated OPTI academic sponsor must provide primary administrative oversight and be named on program completion certificates.

B. New OPTI Application Process

1. Proposed new OPTI shall submit a signed application form (See Appendix A) by the administrative officer of the proposed OPTI to the AOA Division of Postdoctoral Training,
2. The non-refundable fee for examining credentials submitted in application for accreditation status is \$500 U.S. dollars.
3. A self-study must be prepared and submitted as part of the application and address the following:
 - a. Sections A and B of the OPTI standards with proposed mechanisms to address all remaining OPTI standards
 - b. Demonstrate the clear commitment of each member institution to the OPTI's mission, operation, development, and financial support
 - c. The self-study report must demonstrate that the new OPTI has obtained appropriate support for approval to grant postdoctoral certificates to DOs.
 - d. A statement attested to by all governing boards of the members of the proposed OPTI demonstrating a commitment to a shared mission and an organization chart, which illustrates the structure and administration.
4. A statement of the OPTI's governance, which includes a copy of bylaws or equivalent documents.

5. A three-year projection of financial resources available to support the OPTI's operations.
6. Demonstrate and document the availability of inpatient and ambulatory clinical training sites, including patient volumes, scope and variety for the internship program(s) and the applied-for residency programs.

C. Evaluation of Application

1. After receipt of a completed application and review by AOA staff, the COPTI must evaluate the application at its next regular meeting and either request further information or authorize staff to schedule a site visit.
2. All costs of the AOA site visit shall be the responsibility of the OPTI.
3. After reviewing the site visit report and other pertinent materials, the COPTI must take action and recommend a term of provisional approval until the next site visit is required, or recommend denial of provisional accreditation.

D. Definition of Accreditation Status

1. Applicant Status

- a. Applicant status is the initial step in seeking accreditation. This is offered without rights or privileges of accreditation, and does not establish or imply recognition by the AOA.
- b. Applicant status is granted upon formal request for evaluation submitted to the COPTI by the official representative of the applicant OPTI.

2. Provisional Accreditation

- a. To be considered for provisional accreditation, proposed new OPTIs must demonstrate evidence of the capacity to comply with the requirements for accreditation.
- b. Provisional Accreditation is conferred for one year to a new OPTI that, at the time of the site visit demonstrates its preparedness to initiate requirements for an OPTI in accordance with the Basic Standards. Provisional Accreditation starts as dated by the approval letter from the COPTI.
- c. COPTI may approve a one-year renewable extension if there is reasonable rationale for the decision. A Provisional Accreditation status cannot exceed a total of two years.
- d. A Provisional Accreditation visit is conducted after all requirements for applicant status have been met. The accreditation application, the site visit report, and the evaluation by the COPTI must determine whether to award Provisional Accreditation. Provisional Accreditation does not ensure any subsequent accreditation status.

3. Full Accreditation

- a. Accreditation status confers all rights and privileges of accreditation
- b. Accreditation status is reviewed within a maximum five year survey cycle or sooner if warranted. Once accreditation status is attained, the OPTI shall retain that status until the COPTI may withdraw it.
- c. Accreditation actions and renewal of accreditation are based upon an on-site evaluation.

E. OPTI Annual Report

1. The COPTI shall require all OPTIs to submit, each academic year, an annual report.
2. The annual report shall be submitted to the AOA no later than the published **October**

deadline. If annual reports are not received by the published **October** deadline, COPTI may review the accreditation status of the OPTI for reconsideration or request a focused site visit.

3. The COPTI may require an OPTI to undergo an on-site evaluation (full or focused) when, in the judgment of the COPTI, such an evaluation is warranted.

F. Self-Study Report

1. A self-study report is a critical and integral part of the OPTI accreditation process, designed to examine the structure and operational policy of a proposed or existing OPTI.
2. The self-study report will address, at a minimum, the following:

- a. Section 1--Introduction:

- i. Historical overview of the OPTI
- ii. Organization of the self-study process
- iii. Mission/objectives of the OPTI; organization of the OPTI; facilities
- iv. Training; academic resources
- v. Recent accomplishments and current concerns
- vi. Discussion about the OPTI's efforts and activities in establishing collaboration between the partner COM and hospitals in promoting a continuum of education from Pre-doctoral through Postdoctoral Training.
- vii. OPTI Financial reports, including the audited financial statements, or the appropriate financial reports for state institutions, for at least the last four years.

- b. Section 2- Self-Study Organized By Standard.

The OPTI shall describe how it meets each standard by following the sequencing of the OPTI accreditation Standards currently in effect at the time of the scheduled inspection. The self-study should delineate any current deficiencies found and articulate a proposed corrective action plan with a proposed timeline for completion. Formatting of this section of the self-study should follow the OPTI Standards sequencing in either the AOA basic documents or the OPTI Inspectors Crosswalk document.

3. The following documents shall accompany each self-study report submitted to the AOA.
 - a. OPTI Bylaws
 - b. OPTI Budget
 - c. OPTI OGME Committee Minutes for the past three years
 - d. All OPTI Policy and Procedure Documents
 - e. Examples of Affiliation Agreements and Sponsorship Agreements

G. OPTI Feasibility Study

1. An applicant OPTI must file a letter of intent. An introductory packet of information will be mailed to assist the organization in filing necessary documentation.
2. An OPTI applying for provisional accreditation status must submit a feasibility study with the application. The feasibility study must address the following:

- a. Section 1 – Overview and History of the OPTI Formation Concept and Process
- b. Section 2 –Self-Study Organized by the Following OPTI Standards:
 - i. Section A: Prerequisites for Accreditation (all standards)
 - ii. Section B: Organization and Governance.

H. OPTI On-Site Evaluations

1. There are three types of on-site evaluations: full surveys, focused visits, and provisional accreditation visits.
2. Procedures for each site visit, including a suggested schedule, responsibilities of the chairperson and secretary, manner of conducting the visit and the nature of the report required shall be developed by COPTI, and made available to the team and the OPTI in advance of the visit.
3. If the COPTI directs an on-site evaluation and the OPTI refuses to permit the on-site evaluation, the following results may occur:
 - a. If the OPTI is not on probation, the COPTI shall reduce that OPTI's status to accreditation with probation. This action is subject to appeal.
 - b. If the OPTI is on probation, the COPTI shall withdraw accreditation for reasons of noncompliance with the policies and procedures for accreditation. This action is subject to appeal.
 - c. If an applicant OPTI refuses to permit the on-site evaluation, the applicant OPTI is automatically denied accreditation status.
4. Site visits must be scheduled during the normal periods that the OPTI is in session. Official holidays, examination periods and days immediately adjacent to them must be avoided. The official representative or CAO, as appropriate, shall be consulted in establishing mutually suitable dates.
5. The personnel for site visits shall be appointed by the COPTI, from an approved list of persons qualified for the type of visit scheduled. The COPTI shall only use competent and knowledgeable persons, qualified by experience and training, and selected in accordance with non-discriminatory practices developed and articulated in writing by the Bureau. See Appendix C for a list of criteria.
6. The COPTI shall include on each full survey team at least one person who is not a member of the COPTI or AOA staff.
7. A team appointed to undertake a full survey shall consist of not more than four persons to address all of the standards and may include such consultants from outside the profession as the COPTI finds appropriate. Selection of members of the full survey team shall be made pursuant to procedures established by the COPTI and must be transmitted to each OPTI. The COPTI shall seek and receive the concurrence of the official representative or chief administrative officer of the OPTI as to the composition of the team. In the event of an objection to a team member, a mutually approved substitution shall be made.
8. The visiting team's recommendations shall be agreed upon by the team before the team leaves the OPTI, and before the final oral report is made at the exit conference.

I. Full On-Site Evaluation

1. Full surveys are scheduled by the COPTI to examine compliance with all areas of the standards for accreditation as described in the *AOA Basic Documents for Postdoctoral Training*.
2. The AOA Department of Education must notify OPTIs in writing 12 months before a full-on site evaluation.
3. The duration of the OPTI on-site visit must be agreed upon in advance (no later than 45 days) by the CAO OPTI and AOA team leader allowing sufficient time for completion of the draft report by the on-site team prior to the exit conference.
4. The surveyors must examine both the OPTIs overall ability to academically sponsor postdoctoral training programs as well as the approval status and documentation of all AOA-approved postdoctoral training programs. Such accreditation on-site surveys are separate from inspections of individual residency training programs.
5. Loss or denial of approval of a residency program at an OPTI does not affect the OPTI's accreditation status unless the action causes the OPTI to be no longer in compliance with the standards (i.e. leaving the OPTI with only one residency program).
6. At the option of the OPTI, a currently-matriculated intern or resident from another OPTI may be invited to serve as an observer on the team.
7. The AOA shall be reimbursed by an OPTI for the direct costs of an on-site evaluation prior to the meeting at which the COPTI is scheduled to take action on that survey evaluation.
8. The COPTI shall designate a chair for each visit. The chair is responsible for the organization of the visit and the preparation of the final report and recommendations.
9. At the conclusion of the site visit, there shall be an exit conference between the team and representatives of the OPTI designated by the official representative or CAO, as appropriate. The exit conference shall include an oral report by the team. This report must provide the OPTI with an accurate preview of the final report.
10. A copy of the draft report, including the final recommendations, shall be sent to each team member for review, correction, and/or editing, and to the OPTI's official representative, or CAO as appropriate, for review and correction of factual errors only. Additional material may be submitted by the OPTI to document factual errors in the draft report. This must not be confused with the OPTI's formal response to the report.
11. The visiting team's final report shall be forwarded to the OPTI for review and comment.
12. The visiting team's final report shall reflect consideration of the OPTI's comments, as appropriate, and shall be forwarded to the COPTI.
13. The official representative of an OPTI shall receive notification of an on-site evaluation and a copy of the visiting team report as approved by the COPTI. If the OPTI is organized within a university, the above referenced officers of that university shall also receive the materials specified above.

J. On-Site Evaluation-Focused Visit

1. A focused visit may be required by the COPTI based on problems noted in a full survey and judged not addressed following a full survey. A focused visit may also be required when deemed necessary by the Bureau or COPTI. Such focused visits are for concerns regarding compliance with accreditation standards.

- a. The COPTI has the authority to call for an on-site inspection outside of the 5 year accreditation cycle when it is necessary to preserve the quality of training for an individual OPTI and may also consider requests for off-cycle site visits by a member institution or other stakeholder. COPTI has the authority to call for on-site inspection or other monitoring for an OPTI which undergoes substantive change(s) such as:
 - i. Any change in the legal status or control of the OPTI.
 - ii. Mergers between OPTIs or dissolution of OPTI relationships resulting in multiple OPTIs
 - iii. Program change in academic sponsorship from one OPTI to another without notification of the AOA department of education PTRC and COPTI.
2. No more than two evaluators appointed to examine the particular problem identified by the COPTI shall undertake the focused visit. Selection of evaluators shall be made pursuant to procedures established by the COPTI and must be transmitted to each OPTI. The COPTI shall seek and receive the concurrence of the official representative of the OPTI as to the composition of the team. In the event of an objection to an evaluator, a mutually-approved substitution shall be made.
3. The focused visit ordinarily must require one day and must focus on the particular area(s) identified by the COPTI.
4. Thirty days prior to the focused visit, an OPTI shall supply the AOA Division of Postdoctoral Training with such information as shall be specified by the COPTI concerning the problems, which are the subject of the visit.
5. The AOA shall be reimbursed by an OPTI for the direct costs of a focused site visit prior to the meeting at which the COPTI is scheduled to initiate any action(s) resulting from the visit.

K. Provisional Accreditation Site Visits

1. Provisional accreditation site visits must be conducted for OPTIs seeking accreditation.
2. Dates of the visit must only be set after the applicant OPTI has submitted all paperwork to the COPTI.
3. The provisional accreditation site visits ordinarily must require one day and must focus on the particular area(s) identified by the COPTI.
4. OPTI reviews must examine Sections A and B of the OPTI standards only.
5. The COPTI shall designate a chair for each visit. The chair is responsible for the organization of the visit and the preparation of the final report and recommendations.
6. At the conclusion of the site visit, there shall be an exit conference between the team and representatives of the OPTI designated by the official representative or CAO, as appropriate. The exit conference shall include an oral report by the team. This report must provide the OPTI with an accurate preview of the final report.
7. A copy of the draft report, including the final recommendations, shall be sent to each team member for review, correction, and/or editing, and to the OPTI's official representative, or CAO as appropriate, for review and correction of factual errors only. Additional material may be submitted by the OPTI to document factual errors in the draft report. This must not be confused with the OPTI's formal response to the report.

8. The visiting team's final report shall be forwarded to the OPTI for review and comment.
9. The visiting team's final report shall reflect consideration of the OPTI's comments, as appropriate, and shall be forwarded to the COPTI.
10. The official representative of an OPTI shall receive notification of an on-site evaluation and a copy of the visiting team report as approved by the COPTI. If the OPTI is organized within a university, the above referenced officers of that university shall also receive the materials specified above.
11. The AOA shall be reimbursed by an OPTI for the direct costs of an on-site evaluation prior to the meeting at which the COPTI is scheduled to take action on that survey evaluation.

L. Review of Accreditation Reports

1. Consideration of the Visiting Team Report

- a. The site visit team may request additional documents or information be submitted with the report to support the work of the team.
- b. The visiting team's report shall be forwarded to the OPTI for review and comment.
- c. The OPTI must have fifteen (15) business days to respond to the report. OPTI may request correction of factual errors by the team chair.
- d. The visiting team's final report shall reflect consideration of the OPTI's comments, as appropriate, and shall be forwarded together to the COPTI for review.

2. Consideration by the COPTI

- a. A member of the team, preferably the chair, must be available for consultation at the time of COPTI review.
- b. If the OPTI has concerns that the errors in the actions, findings or recommendations of the visiting team have not been resolved; the OPTI may submit, to the COPTI, additional written information relevant to the questions of accuracy of the report.
- c. The COPTI shall review the final draft report of the visiting team and any written submissions made by the OPTI. The COPTI may accept or modify the recommendations made by the visiting team and shall specify the reasons for any modifications.

3. Reconsideration of the COPTI Recommendations

- a. Requests for reconsideration of a recommendation of the COPTI regarding the OPTI accreditation status shall be filed in writing with the secretary of the COPTI, accompanied by supporting documents, data and other information, not more than 30 days following receipt of notice to the OPTI of the accreditation given by the COPTI.
- b. A request for reconsideration may be filed only with the approval of the OPTI's governing body or other appropriate authority.

M. Accreditation Actions

1. Approve Accreditation

- a. The OPTI clearly meets the standards of accreditation.
- b. The OPTI has a sound total program, but is found to exhibit a weakness, in that certain limited Standards of accreditation have not been met. The COPTI shall specify the Standard(s) not being met and clearly note deficiencies. The COPTI shall

specify procedures for monitoring compliance, which may include another on-site evaluation. Each OPTI must file a corrective action plan within 75 days of notice of accreditation award outlining plans for correction of deficiencies. Each OPTI must file progress reports with COPTI at 6 months following notice of accreditation and every 6 months thereafter for a maximum of 24 months until all deficiencies are corrected. Any OPTI not demonstrating full correction of all deficiencies at 24 months post notice of accreditation award must undergo a focused site review to demonstrate why continued accreditation should exist.

2. Deny Accreditation

- a. The OPTI fails to meet the requirements for accreditation or fails to make a complete application. The COPTI shall clearly specify which requirements were not attained.

3. Accreditation with Notice

- a. Accreditation with notice is granted when the OPTI is found to exhibit weaknesses that threaten the quality of the total program.
- b. The COPTI shall specify the standard(s) not being met, clearly note deficiencies, and specify the procedures for monitoring compliance.
- c. A COPTI action of “accreditation with notice” shall be reported to the PTRC, COPT, BOE, and the commission on osteopathic college accreditation for information and record. The AOA and the OPTI shall continue to publicly describe the OPTI’s status as accredited.
- d. OPTIs having accreditation with notice shall submit to the COPTI within 75 days of receipt of the accreditation letter. A progress report demonstrating full compliance and shall undergo a required focused re-inspection 12 months. If, on the basis of required focused re-inspection continued deficiencies exist, COPTI must declare ‘accreditation with probation (public)’ followed by re-inspection in 12 months.
- e. At any time during the period an OPTI has accreditation with notice status, the COPTI may require that OPTI to show cause why accreditation must not be withdrawn.

4. Accreditation with Probation

- a. Accreditation with Probation is granted when the OPTI is found to exhibit serious weaknesses in meeting the standards of accreditation such that the quality of the total program is in jeopardy.
- b. The COPTI shall specify the standard(s) not being met, clearly note deficiencies, and specify the procedures for monitoring compliance.
- c. “Accreditation with Probation” status is public and notice shall be provided to all interested parties. A COPTI action of “accreditation with probation” shall be reported to the PTRC, COPT, BOE, and the commission on osteopathic college accreditation for information and record. The AOA and OPTI shall publicly describe the OPTI’s status as Accreditation with Probation.
- d. OPTIs having “accreditation with probation” shall submit to the COPTI within 75 days of receipt of the accreditation letter, a progress report demonstrating full compliance. and shall undergo a required focused re-inspection within 12 months, if, on the basis of the required focused re-inspection, continued deficiencies exist, COPTI must declare ‘withdrawal of accreditation’.

- e. At any time during the period an OPTI has accreditation with probation status, the COPTI may require that OPTI to show cause why accreditation must not be withdrawn.

5. Withdrawal of Accreditation

- a. Withdrawal of accreditation may occur at any time that the OPTI is found to exhibit weaknesses in meeting the standards of accreditation.
- b. Withdrawal of accreditation is usually preceded by either accreditation with notice or accreditation with probation.
- c. If the OPTI's accreditation is withdrawn, the academic sponsorship of its internship and residency programs is withdrawn as well. Residents COPTI actions of 'withdrawal of accreditation' shall be reported to the PTRC with advice that programs academically sponsored by the affected OPTI must obtain another academic sponsor. Programs may transfer to another OPTI for academic sponsorship with appropriate notice to the AOA department of education and the program training and review committee.
- d. COPTI actions of 'withdrawal of accreditation' shall be reported to the commission on osteopathic college accreditation with advice that another OPTI membership should be obtained (consistent with COCA Standards requiring each COM to hold an OPTI membership).
- e. If the OPTI or its partner institution(s) is delinquent in payment of annual fees to the AOA, withdrawal of accreditation can occur. OPTIs judged to be delinquent in the payment of fees 90 days after the invoice date shall not be eligible for any continuing review. OPTI-participating institutions shall not be eligible for any continuing review. OPTI-participating institutions shall not be eligible to contract with interns and residents for the subsequent academic year within that OPTI. The OPTI shall be notified by certified mail of the effective date of withdrawal of accreditation. Arrangements must be addressed by the COPTI regarding placement of interns and residents affected by such actions.

N. Appeal of Accreditation Action

- 1. An OPTI may appeal an accreditation action to the BOE Appeal Committee. The OPTI's current accreditation status must be maintained throughout the appeal process. The OPTI shall file a written notice of such appeal with the secretary of the BOE within 60 days of receipt of notice of final disposition of the request for consideration. See the BOE handbook for additional information.

O. OPTI Review Site Visit and Reviewer Crosswalk

1. Procedures for a Site Visit

- a. Site visits must be scheduled on normal business days and must be mutually arranged between the AOA Division of Postdoctoral Education, the OPTI administrative officer and the site reviewers. The site visit duration must vary depending on OPTI composition.
- b. The AOA must send out pre-site visit information to both the OPTI and the site visitors, including a schedule; responsibilities of the chair; and organization and preparation of the final report and recommendations.
- c. See Appendix E for a sample of a site visit schedule.
- d. OPTI documents must be arranged in a clear and organized manner. For example, each

OPTI standard must be separated and include supporting documentation. See Appendix D for a full list of all documents that must be available.

2. Reviewer Crosswalk

- a. The COPTI shall develop and maintain a Reviewer Crosswalk for OPTI full-evaluation visits.
- b. The crosswalk shall be developed from the AOA OPTI Standards and clearly identify met and not met standards.
- c. OPTI accreditation status must be recommended to the COPTI based on the approved BOT OPTI accreditation model (Appendix F).

Appendix A- Application for a New OPTI

**APPLICATION FOR NEW OSTEOPATHIC POSTDOCTORAL TRAINING
INSTITUTE (OPTI)**

Please submit \$500 application fee

Name of OPTI:

Street Address:

City:

State:

Zip:

Telephone: ()

Fax: ()

Name and title of person completing this form:

Telephone # of person completing this form: ()

Email address (if applicable):

Internet site (if applicable):

OPTI PERSONNEL INFORMATION

OPTI Administrator's Name:

Telephone: ()

Street Address:

City:	State:	Zip:
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OPTI Chief Academic Officer's Name / DME:
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Telephone: ()

Street Address:

City:	State:	Zip:
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PLEASE ATTACH ADDITIONAL SHEETS LISTING ALL OPTI MEMBERS. INCLUDING: (COLLEGES, HOSPITALS, AMBULATORY CARE SETTINGS, ETC.), AOA APPROVED INTERNSHIPS AND RESIDENCIES, NAMES OF PROGRAM DIRECTORS AND DIRECTORS OF MEDICAL EDUCATION FOR EACH PARTNER SITE.

Appendix B – Site Reviewer Criteria

Site reviewer must be selected from lists of nominees from specialty colleges and affiliated organizations. These nominees must be approved by the COPTI and must consist of osteopathic physicians, educators and health care administrators. To be considered a site reviewer, a nominee must have attended at least one OPTI Reviewer Training session in the past three years.

The nominees must have experience in the following or be employed from one of these areas:

- Competency in the field of administration. Knowledge of institutional governance, student affairs and learning resources.
- Clinical evaluators who are osteopathic physicians with AOA approved internships and postdoctoral training. Directors of Medical Education may also serve as clinical evaluators. Clinical evaluators must be able to evaluate the curriculum and overall education program, especially in the area of clinical training.
- Higher education administrators from Colleges of Osteopathic Medicine including the chief academic officer or chief executive officer.
- Faculty members from COMs.
- Chief financial officers of COMs or health care organizations.

Appendix C – Document List

The following required documents must be available for site reviewers to review:

- Statement of governance and organizational chart
- OPTI/institutional catalog
- Current affiliation agreements
- Budget for current year
- Most recent OPTI financial report
- Minutes of all standing OPTI committees (at least one prior year)
- OPTI sponsored education schedules
- OPTI faculty development schedule
- OPTI internal evaluation program
- Curriculum structure and development

Appendix D – Sample Site Visit Schedule

American Osteopathic Association

Osteopathic Postdoctoral Training Institution (OPTI)

OPTI Site Review Schedule

Day One			
Time	Administration/Finance	Academic Affairs	Clinical Affairs
8:00	DOCUMENT REVIEW - Survey Team Only		
10:00	Entrance Conference: Board Members - Governance & Organization Overview		
11:00	OGME Committee		
12:00	WORKING LUNCH - Survey Team Only		
1:00	Chief Financial Officer/Finance Committee	Directors of Medical Education	
2:00 - 2:30		Student Clinical Education	
2:30 - 3:00	Faculty Development	Curriculum Development & OPP	
3:00 - 3:30	Research	Library & Learning Resources	
3:30 - 5:00	FINAL REVIEW - DOCUMENTS & OTHER QUESTIONS - Survey Team Only		
Day Two			
Time	Administration/Finance	Academic Affairs	Clinical Affairs
	Site Visit to Hospital		
8:00	Hospital CEO/CFO	Program Directors (Multiple Locations)	
9:00	Interns and Residents (Multiple Locations)		
10:00	Complete Documentation and Write Report		
12:00	WORKING LUNCH / Exit Conference		

Appendix E – Conflict of Interest Policy

CONFLICT OF INTEREST POLICY

This policy statement governs matters of conflicts of interest and appearances of impropriety as they may occur in the respective evaluations, deliberations, recommendations, and actions of the Bureau of Osteopathic Education (BOE) and its subordinated Councils. These policies are applicable to members of the AOA Board of Trustees, the BOE and its subordinated councils, and also to members of the administrative staff, appeals panels and evaluation teams, and to consultants.

It is intended that these policies establish a mechanism whereby all individuals make known situations of clear conflict and also those that may give rise to the appearance of impropriety. The goal is to make sure those discussions and actions are participated in only by those who have no conflict and, to the extent possible, that such discussions and actions avoid the appearance of conflicts.

It is stated that elected officers and trustees of the AOA cannot serve on the Bureau and Council. However, there is the further question of whether such individuals must be free to participate in discussions of matters such as accreditation. As an accreditation agency recognized by the U.S. Secretary of Education for both institutional and programmatic purposes, the AOA Bureau must exclude members of the AOA Board of Trustees from decision making in both of the areas of accreditation action and accreditation policy of colleges of osteopathic medicine.

The chair of the BOE must be able to direct an AOA board member to exclude himself/herself from those specific discussions in which a conflict may exist. If there is any question of undue influence arising from anything but purely disinterested motives, then discussion must simply be limited to members of the respective bodies.

Matters such as decisions on accreditation status of an Osteopathic Postdoctoral Training Institution (OPTI) and the particular findings leading to such status can have an enormous impact on institutions, so there must be no reluctance to employ executive session whenever a chair feels that discussion may involve sensitive matters. Executive sessions of the AOA BOE shall be limited to voting members of the AOA BOE, the AOA Executive Director, Secretary to the Bureau, and by invitation, to those participants deemed appropriate to the discussion.

Individuals asked to serve on the BOE and its councils and other bodies must honestly examine their individual circumstances and determine whether they can render fair and unbiased service in general. Before the body sits down to serve, all of the members must have gone through this self-examination. This is also true for staff and team and panel members. Full disclosure of any doubtful situation to the other members of the body must be made. This is particularly true of situations where the individual may honestly feel that he or she can be fair, but the situation gives rise to, or may give rise to, an appearance of impropriety.

The decision to withdraw from discussions and/or not to vote must initially come from the individual, but the final decision must come from the chair or the majority of the other members. If the chair rules, such ruling must be subject to a call for a vote by other members. The chair may feel that he or she must not substitute his or her judgment for that of a majority and may want to call for a vote at the outset. It may be that one member may bring to the attention of the body a possible conflict situation involving another member. Needless to say, this can give rise to a certain amount of acrimony in some cases. Consequently, each member must keep in mind that he or she must disclose his own possible conflict, so as not to put that sort of burden on a fellow member. It may be that the very presence of a member with a conflict would inhibit the discussions and actions of a body, so it is not unwarranted to ask a member to absent himself or herself from the deliberations in

some circumstances. In some cases, it may not be clear as to what particular body must be informed and make rulings. In case of doubt, matters must be brought to the Bureau.

It is often difficult to define matters involving conflicts. Clearly, a financial interest creates a conflict. However, some financial interests are indirect and it is here that a member must search his or her conscience, because such interest may not appear to the others. Anyone serving on a board or committee brings to the body the sum total of his or her experience and personal opinions. The key question is whether a particular opinion or belief can stand in the way of rendering a fair and unbiased discussion or decision based on the facts and the rules. This may be a highly subjective determination and it underscores that individuals must be required to make disclosure to the other members whenever there is a question.

In the accreditation area, examples of situations, which may or may not create conflicts are:

- A. being an alumnus or alumna of an OPTI under consideration;
- B. being an employee or board member of the OPTI (this would most likely create a conflict);
- C. being involved with a competitor of the OPTI (competition is often difficult to ascertain -- there is a question of direct or remote competition);
and
- D. having a family or business relationship with others affiliated with the OPTI under consideration.

This is not an inclusive list, but is intended to give some guidance.

It must be kept in mind that the integrity of the respective body is always at risk, so that each member must be constantly aware of creating an appearance of improper conduct even where there may not be such in fact. Connections with affected individuals and institutions cannot always be avoided. Such connections often bring a measure of experience and expertise to the process. However, when such connections exist, it is prudent to err on the side of greater caution and make full disclosure.

APPENDIX F
COPTI ACCREDITATION AWARD SYSTEM FOR
OPTI ACCREDITATION SITE VISITS

(Based on AOA Basic Documents and OPTI Standards effective July 2012)

Introduction

OPTI accreditation has evolved over the past three years as a result of revised standards and a scoring ‘rubric’ established in 2008 in a manner that has prompted improved performance of individual OPTIs and an upward trend in the total number of ‘accreditation years’. While this change is admirable and generally acknowledged as ‘progress’, there is significant feedback that further enhancements in the accreditation processes are needed (M Hamm and Associates, 2011).

The current methodology assigns one ‘point’ for each element within each of eight standards. The cumulative points accrued are additive and the percentage of points ‘scored’ are compared to the total available for an overall ratio. A ‘scoring rubric’ assigns variable ‘accreditation years’ based on ranges of points scored against the total available. As Standards have been removed in the past three years the scoring tool has been modified to accommodate the changed total points available. Using this methodology, a significant number of OPTIs have achieved a full ‘five year accreditation’ and some have been awarded a ‘blue ribbon’ status for commendations above a ‘perfect five year score’.

One significant issue (among several) with the above method has been identified by OPTI executives and chief academic officers over the past months and reported either through OPTI workshops, OPTI forums, or through the Michael Hamm study on OPTI effectiveness completed in early 2011. The issue of ‘chasing’ points rather than focusing on quality improvement has caused several to suggest an alternate method of accreditation award.

Under the AOA uniform standards review work group guidelines adopted by the AOA Board of Trustees, The OPTI Standards and Processes are to be reviewed on a periodic basis. The current revision cycle for the OPTI Standards, the recent authorization of the AOA BOT for OPTIs to sponsor OGME programs, and the insights gained from the Hamm study provides the opportunity to apply a new concept for accreditation awards for OPTIs.

The following accreditation award concept has been widely adopted by other accrediting units, both in the osteopathic profession (commission on osteopathic college accreditation) and in other higher education accrediting entities.

General Policies (Also See Table Of Explanation Which Follows):

- 1) Each OPTI will receive a 5 year accreditation award if it meets at least 70% of all Standards as written and all ‘must meet’ Standards are met.
- 2) Any OPTI which fails to demonstrate compliance with two ‘must meet’ Standards shall receive a 5 year “accreditation with notice (private)” and a required focused re-inspection in 12 months.
 - a. If any ‘must meet’ Standards remain unmet at the focused 12 month visit, the OPTI will receive the designation of ‘accredited with probation (public)’ and have an additional required focused re-inspection in 1 year.
- 3) Each OPTI must file a Corrective Action Plan within 75 days of notice of accreditation award outlining plans for correction of deficiencies.

- 4) Each OPTI must file progress reports with COPTI at 180 days (6 months) following notice of accreditation and every 6 months thereafter for a maximum of 24 months until all deficiencies are corrected. Any OPTI not demonstrating full correction of all deficiencies at 24 months post notice of accreditation award must undergo a focused site review to demonstrate why continued accreditation should exist.
- 5) On the basis of results of such focused site reviews for regular standards remaining unmet, COPTI must declare one of the following:
 - a. Continued 5 year accreditation with noted correction of all current deficiencies
 - b. Continued 5 year “accreditation with notice (private)”—required focused re-inspection in 12 months.
 - c. If, on the basis of required focused re-inspection as required in 5)b., continued deficiencies exist, COPTI must declare:
 - i. ‘Accreditation with probation (public)’ followed by re-inspection in 12 months.
 - d. If, on the basis of required focused re-inspection as required in 5)c.1, continued deficiencies exist, COPTI must declare:
 - i. ‘Withdrawal of Accreditation’
- 6) A COPTI action of “withdrawal of accreditation” shall require an OPTI to make full reapplication for accreditation status and meet 70% of all accreditation Standards including all ‘must meet’ Standards.
- 7) A COPTI action of “accreditation with notice”, “accreditation with probation” and “withdrawal of accreditation” shall be reported to the PTRC, COPT, BOE and the commission on osteopathic college accreditation for information and record.
 - a. COPTI actions of “accreditation with probation” shall be reported to PTRC.
 - b. COPTI actions of “withdrawal of accreditation” shall be reported to PTRC with advice that programs academically sponsored by the OPTI must obtain another academic sponsor or close.
 - c. COPTI actions of ‘accreditation with probation’ or ‘withdrawal of accreditation’ shall be reported to the COCA with advice that another OPTI membership should be obtained (consistent with COCA Standards requiring each COM to hold an OPTI membership).
- 8) The COPTI has the authority to call for an on-site inspection outside of the 5 year accreditation cycle when it is necessary to preserve the quality of training for an individual OPTI and may also consider requests for off-cycle site visits by a member institution or other stakeholder.
- 9) COPTI has the authority to call for on-site inspection or other monitoring for an OPTI which undergoes substantive change(s) such as:
 - a. Any change in the legal status or control of the OPTI.
 - b. Mergers between OPTIS or dissolution of OPTI relationships resulting in multiple OPTIS.
 - c. Program change in academic sponsorship from one OPTI to another without notification of the AOA Department of Education PTRC and COPTI.

Initial Provisional Accreditation	‘Must Meet’ Standards (6)	‘Regular Standards’ Found in Sections A and B	Action/Process
1 Year	All ‘MM’ Met	All Standards In sections A and B must be met	Re-inspection in 1 year. <u>All</u> ‘MM’ must be met and conditions for full 5 year accreditation described below must be met (70% of all Standards). One additional year of provisional accreditation can be awarded by COPTI if necessary to facilitate/accommodate new OPTI formation issues.
Accreditation action (5 year term)	‘Must Meet’ Standards (6/56)	‘Regular Standards’ (50/56)	Action/Process
5 Year Accreditation 70% of all Standards met	All ‘MM’ met	<11/ 50 unmet (at least 39 met= 70% of 56 total Standards)	Cap with PR every 6 mos. <u>All</u> Standards must be corrected within 24 months.
Continuing 5 year	1 ‘MM’ unmet	< 11/50 unmet	Cap with PR every 6 mos. <u>All</u> Standards must be corrected within 24 months – ‘MM’ Standard must be corrected in 12 months.
5 year Accreditation with notice (private)	2 ‘MM’ unmet on initial Inspection	<11/50 unmet	Cap with PR every 6 mos. Focused re-inspection in 12 months. If any ‘mm’ Standards remain unmet at 12 months, COPTI will assign the designation of ‘accreditation with probation (public)’
	All met	<u>Any</u> unmet at 24 months	Required focused site visit with revisit in 12 months. if <u>any</u> standards remain unmet at 36 months, COPTI will assign the designation of ‘accreditation with probation (public)’
5 year Accreditation with probation (public)	<u>Any</u> unmet at 12 month focused visit	<u>Any</u> unmet AT 36 month focused visit.	Required focused site visit in 12 months. If there are any remaining deficiencies, COPTI will take the action to ‘withdraw accreditation’.

Summary:

The goal of OPTI accreditation is to assure the OGME trainee and the concerned public that osteopathic graduate medical education meets accepted standards of OGME quality. Likewise, such accreditation assures that programs sponsored by an accredited OPTI are producing OGME graduates that meet the AOA core competencies.

The above describes a method envisioned to streamline OPTI accreditation awards and to allow OPTIs to focus on quality measures rather than individual 'points' in a scoring rubric. The concept of 'term accreditation' allows freedom to focus on a OPTIs strategic plan, quality initiatives and matters of pedagogy in service to its members.

The concept of 'term accreditation' however must be accompanied by realization that certain standards are 'must meet' in character and as such form the basis of concern when deficiencies are identified. The above set of policies attempt to address this concern in a way that allows correction in a timely way and serious consequences for an OPTI that does not come into compliance.

Under a 'term accreditation' concept there is the parallel concern with an OPTI that meets 70% of all Standards and also all 'must meet' Standards. Such an OPTI needs an appropriate time and plan to correct all deficiencies, but must do so in a reasonable timeframe. The proposed maximum 24 month timeframe assures the public that quality is both monitored and expected.