

History of osteopathic medical education accreditation

W. DOUGLAS WARD, PhD
Project Adviser, Education Affairs

KONRAD C. RETZ, PhD
Director, AOA Department of Education

Since its inception, the osteopathic medical profession has been concerned about the quality of osteopathic medical education and the training of well-prepared, qualified physicians.

A number of colleges of osteopathic medicine (COMs) were established in the last decade of the 19th century. As with many other medical colleges of their time, they shared a lack of uniformity in admission and graduation requirements. In these early years, osteopathic medical educators and leaders recognized the fact that the attainment and maintenance of high educational standards were essential to produce high-quality, competent osteopathic physicians.

In 1897, the American Association for the Advancement of Osteopathy (AAAO) was formed. Its constitution provided for a number of committees, among which was the Committee on Education.

The concept of inspection and approval of osteopathic medical colleges was introduced in 1901 when the AAAO reorganized and became the American Osteopathic Association. Its new constitution provided that the Committee on Education, together with the Executive Committee of the associated Colleges of Osteopathy (ACO), should constitute a joint committee. This group would investigate schools applying for membership in the ACO, make annual investigations of the conditions in the schools that were already members, and prepare an annual report for the AOA Board of Trustees.

To encourage more uniform quality in educational standards among its members, the AOA also restricted eligibility for membership to graduates of approved schools.

The first osteopathic medical college inspection was made in 1903, and the members of the ACO were approved.

With these actions, the AOA established itself as the body responsible for accreditation standards for the profession. Its authority and expertise were recognized by other medical organizations at the time, as well as by state legislators. Many years were to pass, however, before the AOA received full recognition on a federal level.

In 1923, the AOA Department of Education became the Bureau of Professional Education; 2 years later, the Bureau on Colleges was added. These committees later joined to become the Bureau of Professional Education and Colleges. This group was charged with the responsibility for inspection of osteopathic medical colleges.

Initially, the colleges were inspected every 2 years, and then—when the number of colleges began to grow—every 3 years. Today, the COMs undergo a full survey every 7 years by a team representing all major preclinical and clinical science disciplines. An annual report is required for each approved COM during the nonsurvey years.

In 1960, the education structure of the AOA was reorganized. In order to bring all facets of osteopathic medical education under one body, a new Bureau

of Professional Education was created. The restructured group then became responsible for postdoctoral and continuing osteopathic medical education as well as undergraduate osteopathic medical education.

By developing progressively rigorous standards and methods of documentation, the AOA effectively became the watchdog of the osteopathic medical profession. These activities did much to convince both the public and legislators of the improved quality of osteopathic medical education and the high standard of healthcare that the osteopathic medical profession was able to provide.

In the mid-1960s, the concern for quality in accrediting procedures that had been shown by the AOA and the Bureau of Professional Education made an impact on the National Commission on Accrediting, now known as the Council for Higher Education Accreditation (CHEA), and on other national agencies concerned with education in the healthcare professions.

The CHEA is the nongovernmental agency recognized by higher education institutions to approve and recognize national agencies for accreditation purposes. In 1967, one of CHEA's predecessors, the Council on Postsecondary Accreditation (COPA), for the first time recognized the AOA as the official agency for accreditation of osteopathic medical education. Although the association had, in effect, been acting in this capacity since its inception, this was the first time its actions were sanctioned by a higher educational authority.

Following this action, the AOA Board of Trustees, through its Department of Professional Affairs, delegated the responsibility for accreditation in a number of areas of osteopathic medical education to the Bureau of Professional Education. A subunit of this bureau, the Committee on Colleges was charged with the responsibility of inspecting those institutions awarding the DO degree for accreditation of their educational programs.

Recognition by COPA was a first—but significant—step forward for educational programs within the osteopathic medical profession. Recognition has been continual since 1967 and in 1997 was once again renewed for 5 years, through 2002. Another even greater step quickly followed.

The federal government was expressing interest at that time in education at all levels, especially professional medical education. In 1969, the US Office of Education (USOE) examined the organizational structure and implementing documents of the Bureau. It then granted this body official status as the accrediting agency for osteopathic medical education.

The USOE (now the US Department of Education, USDE) does not grant accreditation status in perpetuity, but reviews organizations every 5 years. Those that do not meet USDE requirements are reviewed more frequently. The AOA has successfully completed each of its subsequent 5-year renewal cycles. In July 1995, the AOA once again received approval as the accrediting body for osteopathic medical education for another 5-year term.

Presently, the Bureau coordinates the activities of five committees that deal with various phases of osteopathic medical education (See Appendix I for committee membership):

- Council on Predoctoral Education, the evaluating unit of undergraduate education;

- Council on Postdoctoral Training, the evaluating unit of internships, residencies, preceptorships, and other postgraduate programs;

- Council on Continuing Medical Edu-

cation, the unit that evaluates programs and recommends approval of CME credits;

- Council on International Osteopathic Medical Education and Affairs (CIOMEA) was authorized by the Board of Trustees in July 1997 to serve as a focal point for responding to the increasing demand for osteopathic medical education outside the United States, and the

- Committee on the Osteopathic Medical Education Conference was authorized by the Board of Trustees in July 1997 to assist in administration of the Osteopathic Medical Education Conference.

During the more than 100 years of the profession's existence, an extensive system of medical education has grown and developed. This system includes undergraduate and graduate medical education, continuing medical education, specialty certification, and a National Board of Osteopathic Medical Examiners.

Playing a leading role in the establishment of this system, the AOA is the central focus of national standards, rules, and regulations that govern the accreditation and approval process of osteopathic medical education.

The education resources of the osteopathic medical profession have evolved into an impressive, effective nationwide teaching network based on 19 COMs offering instruction and more than 130 AOA-approved teaching hospitals. The network includes more than 8,000 predoctoral students and more than 5,000 postgraduate interns and residents.

What the future holds is not certain, but based on previous trends, we can anticipate an increase in the number of COMs as well as a 20% increase in the number of students attending COMs. With programs currently located in 28 states, the next century should see the creation of osteopathic medical education sites in all 50 states.

Although more osteopathic physicians are expected to pursue careers in a wider variety of medical specialties, primary care will continue to remain the profession's central focus. At the same time, a renewed interest in and support for osteopathic principles and practices and osteopathic manipulative treatment will re-emerge. Federal and state government support for osteopathic medical training programs should expand as should osteopathic medical education opportunities in international settings. ♦