

Osteopathic postdoctoral training institutions

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To enhance, protect, and expand osteopathic graduate medical education, the American Osteopathic Association (AOA) Board of Trustees in July 1995 adopted the policies and procedures governing osteopathic graduate medical education consortia known as osteopathic postdoctoral training institutions (OPTIs).

Enhancements

In part, OPTIs were developed in response to the changing needs for delivery of postgraduate medical education and to provide assurance that institutions are committed to and capable of delivering uniquely osteopathic postdoctoral training.

The Council on Postdoctoral Training (COPT) approves internship and residency training programs in hospitals either accredited by the AOA or affiliated with such hospitals, or hospitals with postdoctoral training programs sponsored by colleges of osteopathic medicine.

The method now includes accreditation of the OPTIs. Such accreditation provides the public, appropriate governmental jurisdictions, the osteopathic medical profession, and interns and residents added assurance that accredited OPTIs have met or exceeded basic established levels of quality for postdoctoral education in osteopathic medicine. The

accreditation process involves systematic evaluation and peer review of all aspects of the graduate medical education process and overall effectiveness of an OPTI, as measured by the AOA-approved standards.

The AOA's Bureau of Professional Education ("Bureau") accredits OPTIs. The OPTI's governing body is responsible for defining the mission and objectives of the OPTI. Each OPTI must provide for instruction and training in the art, science, and practice of osteopathic medicine and contribute to the community by providing distinctive osteopathic healthcare.

At a minimum, an OPTI comprises at least one hospital accredited by the AOA's Bureau of Healthcare Facilities Accreditation and one college of osteopathic medicine accredited by the Bureau of Professional Education. Each OPTI must offer at least one internship and two residency training programs. One residency training program must be in primary care (that is, family medicine, internal medicine, obstetrics/gynecology, or pediatrics). The minimum number of approved and funded training positions in each internship program is four. The minimum number of approved and funded training positions in each residency program is three.

The COPT Subcommittee on OPTI Evaluation and Oversight was appointed in July 1999. The subcommittee is responsible for developing a program to evaluate the educational effectiveness of OPTIs. As its charge, the subcommittee functions as an evaluative body in overall global review of OPTIs as a program structure and as an accreditation mechanism. To maintain a distance from

accreditation decisions pertaining to individual OPTIs, the subcommittee reports to the full COPT regarding business purposes, and to the Executive Committee of COPT for informational purposes.

Protection of training

Osteopathic postdoctoral training institutions have responded to the immediate concerns of trainees in a world where a hospital may close overnight. Throughout the 2000-2001 training year, on receipt of information to the AOA of a hospital closure, OPTIs have immediately stepped in to assist interns and residents in locating and transferring to a new program to ensure minimal interruptions in training. Often these changes have necessitated temporary increases in programs that later result in the hospital requesting a permanent increase in number of AOA-approved positions.

Most recently, the AOA was informed of a hospital that closed all graduate medical education programs 3 days into the new academic year. The OPTI in that region contacted other OPTIs, the state osteopathic medical association, and the Association of Osteopathic Directors and Medical Educators in efforts to relocate trainees. In less than 1 week, the trainees (including podiatry residents) had found other training sites.

Another avenue of protecting positions when a hospital closes is to aggregate numbers of positions with Centers for Medicaid and Medicare Services (CMS), formerly the Health Care Financing Administration (HCFA). At least three OPTIs have begun this lengthy and technical process. At this time, it is premature to indicate a success rate of the OPTIs regarding aggregation approval.

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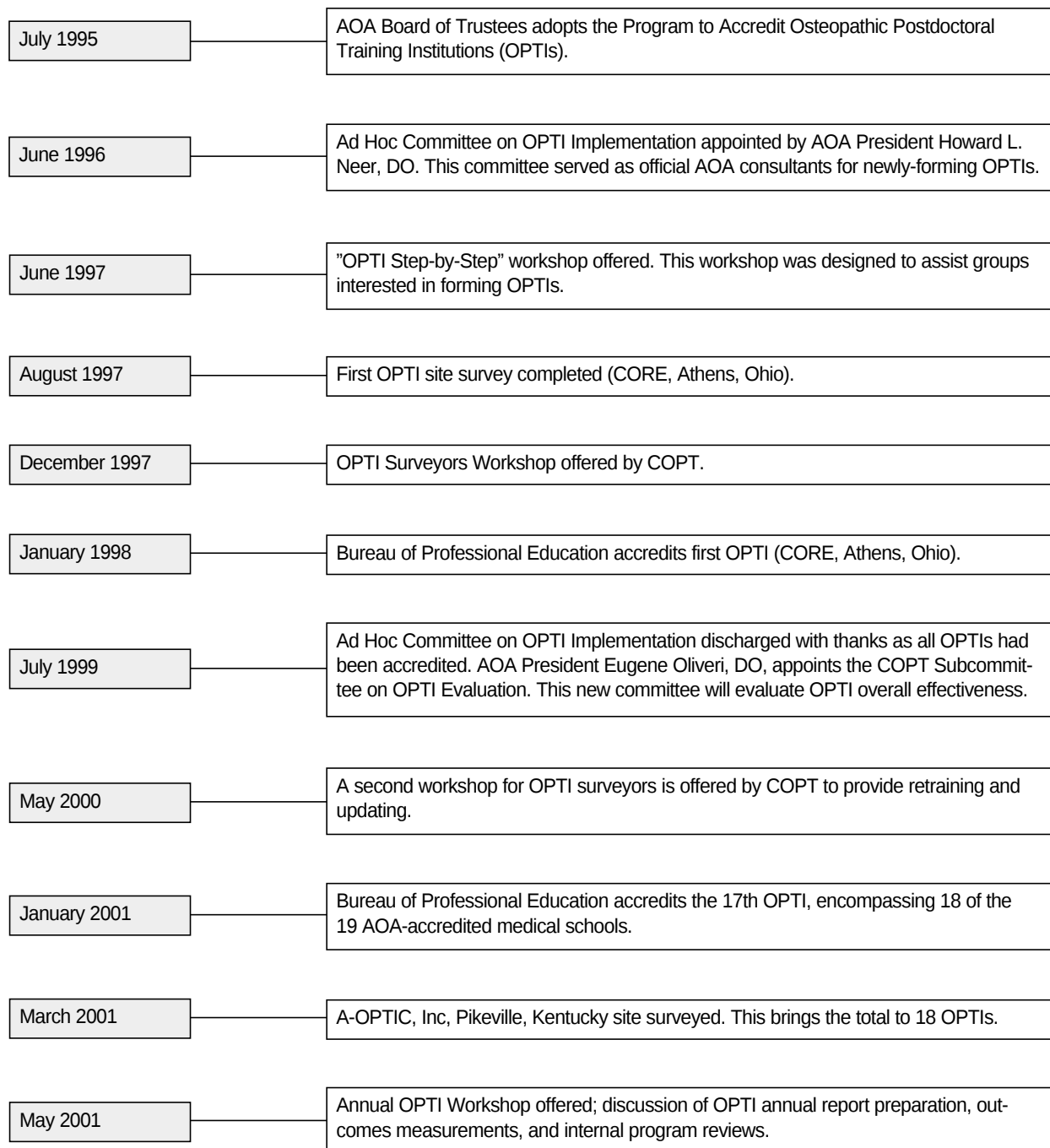


Figure. Significant dates and American Osteopathic Association activities in development of osteopathic postdoctoral training institutions.

Expansion

Osteopathic postdoctoral training institutions have played a part in the growth of osteopathic training and continue to remain active in developing new pro-

grams. During 2000, twenty new internship programs and thirteen new residency training programs received approval by COPT.

The AOA's Osteopathic Graduate

Medical Education State Development Initiative reports success in assisting OPTIs with new program development.