WHEREAS, the American Osteopathic Association (AOA) Board of Trustees and American Association of Colleges of Osteopathic Medicine (AACOM) Board of Deans have voted at their respective board meetings to approve a Memorandum of Understanding (MOU) with the Accreditation Council for Graduate Medical Education (ACGME) that outlines the process, format and timeline for transition to a single graduate medical education accreditation system; and

WHEREAS, the transformation of healthcare is placing demands on all sectors of the healthcare delivery system, including graduate medical education, to operate more efficiently and effectively and demonstrate the quality of their services; and

WHEREAS, the opportunity to partner with the ACGME in developing a single accreditation system provides the AOA and AACOM with a platform to promote the quality and importance of osteopathic medicine as a key driver of the healthcare delivery system in the United States; and

WHEREAS, the decision to enter into the agreement was reached after two years of extensive and ongoing evaluation of the internal and external environments, and examination of the risks and benefits of creating the new system; and

WHEREAS, the AOA Board of Trustees is satisfied that, through the MOU and accompanying letter of clarification, the AOA's core negotiating principles have been appropriately addressed; and

WHEREAS, there are currently more than 1,000 postdoctoral training programs accredited by the AOA in the United States, 162 of which are dually accredited by the AOA and ACGME; and

WHEREAS, osteopathic graduate medical education (OGME) and ACGME training share six core competencies, which must be integrated into the curriculum (patient care, medical knowledge, practice based learning and improvement, systems based practice, professionalism, and interpersonal skills and communication); and

WHEREAS, OGME and AOA-accreditation is distinct from ACGME in that it incorporates an additional competency in osteopathic principles and practice, which is interwoven within the other six competencies; and

WHEREAS, the AOA is committed to maintaining and preserving OGME; and
WHEREAS, the AOA and ACGME have coordinated meetings of many of the ACGME residency review committees and the AOA Specialty College evaluating committees at which there was an opportunity to compare the current AOA and ACGME accreditation standards and which found that AOA and ACGME standards are similar on most points; and

WHEREAS, the MOU provides for member organization status within the ACGME for AOA and AACOM to successfully complete the transition to ACGME accreditation, and the ability for both organizations to nominate members to the ACGME Board of Directors; and

WHEREAS, the MOU provides AOA with an ability to nominate voting members of the ACGME residency review committees (RRCs) for all specialties where AOA currently accredits training programs; and

WHEREAS, the ACGME advises that the osteopathic profession will have representation on the ACGME Board of Directors’ Monitoring Committee, which will have responsibility for overseeing the fair and equal application of accreditation standards by the RRCs; and

WHEREAS, the ACGME has indicated its intent to create a senior staff position to be hired from within the osteopathic postdoctoral training community to help oversee the transition to a single accreditation system; and

WHEREAS, the MOU provides that current AOA-accredited residency programs will have up to five years (beginning on July 1, 2015) and the potential for multiple reviews by ACGME as they prepare to transition to ACGME accreditation; and

WHEREAS, during the five-year transition, AOA-accredited residency programs will pay only one application fee even if multiple reviews are necessary; and

WHEREAS, the ACGME evaluates programs to determine if they are in “substantial compliance” with accreditation standards and, therefore has flexibility in evaluating programs seeking ACGME accreditation; and

WHEREAS, the MOU provides for continuation of OGME by creating an Osteopathic Principles Committee that will have the authority to approve standards for the osteopathic elements of residency training and, in effect, codify osteopathic principles within the ACGME standards resulting in osteopathically-focused ACGME training programs; and

WHEREAS, osteopathic medical students value and are proud of the osteopathic tenets and philosophy and understand that there is a distinctiveness in osteopathic medical practice; and

WHEREAS, the Osteopathic Principles Committee will be able to recommend specific outcomes measures to be used in evaluating progress of residents, such as successful completion of osteopathic board certification examinations; and
WHEREAS, the number of graduating osteopathic medical students far exceeds the number of first-year osteopathic graduate medical education positions and the majority of osteopathic medical graduates now complete training in residency programs accredited by the ACGME; and

WHEREAS, the ACGME will, beginning in July 2016, limit access to positions in fellowship programs and advanced residency programs to physicians who completed prior clinical training in ACGME accredited programs; and

WHEREAS, osteopathic medical students believe that the pursuing OGME should not limit the ability of osteopathic medical students and residents to pursue advanced training in residencies and fellowships of their choice; and

WHEREAS, osteopathic medical students believe that the ability to advance into fellowships and advanced residency programs is a top priority in selecting residency programs and, therefore, have expressed their overwhelming support for the single system; and

WHEREAS, results from the AACOM and ACOM Council of Osteopathic Student Government Presidents (COSGP) student survey administered online in March 2014 showed that of 5,307 student responses (22.9% of 2014 fall enrollment), 55.1% of students strongly supported, 27.4% supported, 11.9% expressed neutrality, 3.7% opposed, and 1.9% strongly opposed the “unified GME accreditation system agreement undertaken by AACOM, AOA and ACGME”; and

WHEREAS, osteopathic medical students understand that the pursuit of a single accreditation system will create periods of uncertainty within National Match Service (NMS), the National Resident Matching Program (NRMP), the NRMP Supplemental Offer and Acceptance Program (SOAP), the osteopathic “scramble” and other matching mechanisms, including but not limited to the details of when and how the match will change; and

WHEREAS, osteopathic medical students understand that there will be uncertainty as to the osteopathically focused GME options during the transition process, and desire that current OGME will maintain their osteopathic distinctiveness as defined by the new Osteopathic Principles Committee; and

WHEREAS, osteopathic medical students are invested in their profession and desire to increasingly participate in future discussion regarding the challenges and opportunities of the single accreditation system; and

WHEREAS, osteopathic student groups such as the Student Osteopathic Medical Association (SOMA), the Council of Osteopathic Student Government Presidents (COSGP), and the Council of Student Affairs (CSA), have collectively discussed this decision and believe that this resolution reflects students’ opinions; and

WHEREAS, osteopathic medical students trust that AOA and AACOM leadership have considered a variety of issues in their attempt to make decisions that are in the best interest of maintaining and sharing the osteopathic philosophy in the short- and long-
term and are aware of the shared responsibility all parties have in shaping the future of our profession; and

WHEREAS, the development of ACGME-accredited osteopathic GME programs will enhance the ability of the AOA and osteopathic state and specialty affiliates to attract members who are currently training in ACGME residency programs; now therefore be it

RESOLVED, that the AOA will monitor and evaluate the transition process with respect to:

1) The ability of AOA-trained and certified physicians to serve as program directors in ACGME osteopathic residency programs;
2) The maintenance of smaller, rural and community-based training programs; and
3) Recognition of the importance of osteopathic board certification exams as a valid outcome measure of the quality of residency programs with osteopathic recognition; and
4) Ensuring the implementation, maintenance and continual growth of osteopathically focused ACGME training programs in the evolving health care system;
5) The continual evaluation of a combined Match system alongside the single accreditation system and be it further

RESOLVED, that the AOA House of Delegates expresses its support for the AOA’s entry into a single accreditation system that perpetuates unique osteopathic graduate medical education programs.

Explanatory Statement:
The AOA will continue to monitor the progress of the transition to a single GME accreditation system and the emergence of any unintended consequences of the implementation of the new system.


ACTION TAKEN _____________________

DATE ______________________________