

Accreditation of Clinical Postgraduate PA Programs



Presented by the ARC-PA
New Orleans, Louisiana
November 2011

Our Goals: Three Areas to Update

- Accreditation Application – Process and Timeline
- VA (Veterans Administration) – PA Resident Pilot Initiative
- Upcoming Revision of the *Standards*

Accreditation Application Timeline



Accreditation Application Timeline

- 3 year maximum from letter of interest to scheduling of visit
- Visit occurs during the 3rd year
- Programs not completing all steps within 3 years must begin process and timeline from beginning

Accreditation Application Timeline

- After being determined to be eligible to apply for accreditation, the program has 1.5 years to complete the curriculum review process.



Accreditation Application Timeline

- The program has two years from the date of submission of the institutional letter of support to complete its application materials (to include the curriculum review) for administrative review, and receive notification that it has successfully completed its administrative review and is ready for a site visit.

Graphic Overview of Timeline

Year 1		Year 2		Year 3	
Letter from Institution starts time		Curriculum review completed by 1.5 years	Administrative review completed successfully by 2 years	Site visit scheduled and program considered at ARC-PA meeting by end of year 3	
0	6 M	1 Y	1.5 Y	2 Y	3 Y

Letter of Interest

- Initiate Process with letter of interest
- Submitted from senior most institutional official responsible for program
- 3 year time line begins with acknowledgement of letter

Application and Self Assessment

- Very detailed application and appendices
- Review ALL components and **complete those needed for the curriculum review panel...**
- **FIRST**



Curriculum Review

- Panel of PAs and MDs/DOs
- Avoid conflict of interest
- **Must be pre-approved by ARC-PA**
- ARC-PA adds one person to panel
- Panel reviews specified materials from application
- ARC-PA staff serves as curriculum review coordinator

Curriculum Review

- Must be completed by halfway mark of the 3-year period (by 1.5 years after letter of interest acknowledged)



Administrative Review

- Must be done before final application accepted by ARC-PA
- Completed application and curriculum review results reviewed by ARC-PA for completeness
- Not a review of the quality of the content submitted
- Does not predict the accreditation outcome for the program.

Administrative Review

- Most programs have to resubmit "something" for the administrative review.
- Or, in other words, it is very rare that a program will have only one administrative review.

Site Visit

- The program has two years from the date of submission of the institutional letter of support to complete its application materials (to include the curriculum review) for administrative review, and to receive notification that it has successfully completed its administrative review and is ready for a site visit.

Site Visit

- Only scheduled after the program has successfully passed the administrative review of the application.
- All materials reviewed by 2 site visitors
- One visitor on campus 1 day or 2 half-days

After Visit

- Site Visitors complete report to ARC-PA
- ARC-PA sends 'observations' to program
- Program may choose to respond

Program Review

- All program application materials, site visitor report, program response thoroughly reviewed by 2 ARC-PA commissioners
- Site visit report and program response reviewed by all commissioners
- Commissioners discuss and vote on accreditation action

Program Review

- Letters on commission decision are sent to the program and institution approximately 2-3 weeks after ARC-PA meeting



Program Review

- Not everyone who applies... gets accredited
- Just as in the entry level process
- If you are not successful the first time, you are welcome to re-apply.

Accreditation Time Limit

- Initial accreditation is limited to three years
- Eligible for additional 3 years without additional visit
- After a 6 year period of accreditation, another site visit may be a required component of the accreditation process

Change in Program Director

- Change in program director at any time after the institution submits the letter of interest up until the time the program achieves accreditation or decides to withdraw from the process, the institution must submit a letter of ongoing support for the program as it pursues accreditation.

Withdrawal from Process

- Program pursuing ARC-PA accreditation may withdraw from the process at anytime by submitting a letter to the ARC-PA
- Programs not meeting the timeline deadlines as noted in the letter of acknowledgment from the ARC-PA in response to their letter of interest will be considered withdrawn from the process

Withdrawal from Process

- Programs that have withdrawn from the process seeking to again pursue accreditation must do so by reentering the process from the beginning.



Costs

○ Technical Assistance	\$ 100
○ Administrative Review (each time)	\$ 350
○ Initial application fee (includes visit cost)	\$3,500
○ <u>Yearly</u> accreditation fee	\$ 750
○ Continuing fee in year 3 (no visit)	\$1,200

Ten Year Overview of Costs

- Is on our website at:
- <http://arc-pa.org/documents/Postgradsample10yearcostestimateJan2012.pdf>
- The web address is also on your handout.



What Should Interested Programs Do to Prepare?

- Review ARC-PA web site for postgraduate programs and FAQs
- Look at the Process and Timeline
- Contact ARC-PA
- Use *Standards* as a guide

Preparation continued

- Review application CAREFULLY
- Develop syllabi for courses
- Talk with peers from Accredited Programs

What Will be the Most Critical?

- All components are important
- Describe your processes in detail
- How well the program prepares in some areas will impact on other areas, for example, **course syllabi** or **student manuals**

Resources

- Postgraduate section of web site has documents on **syllabi, objectives** and **competencies**
- Accredited Programs section has page on Accreditation Resources. Included information on preparing and organizing materials for a site visit.
- Email or Call - Karen Lemon
- Manager – Accreditation Services

Questions regarding the Process and Timeline



VA Physician Assistant Residency Pilot Initiative



Overview

- This is a pilot program with funding planned for up to 12 resident positions to be located in 3-6 sites.
- Continuation beyond 3 years will be dependent on **accreditation**, availability of funding, and demonstrated success of the program.

Program Emphasis

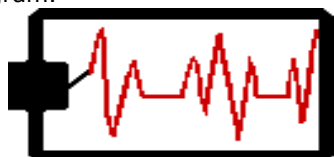
- The program emphasis will be for provision of care within the VA primary care clinics known as the Patient Aligned Care Teams (PACTs).
- Proposed residency programs must be within the Geriatric/Disease/Complex Care specialty based on the complexity of the average patient in a VA primary care clinic.

Pilot Policy and Accreditation

- All positions requested through this Request for Proposal (RFP) must be in programs accredited by the appropriate discipline or in programs that are in the process of seeking such accreditation.

Pilot Policy and Accreditation

- Continuation of funding will depend on availability of funds as well as successful implementation and accreditation of the proposed program.



Eligibility and Accreditation

- **The program itself will need to become accredited and will need to be working towards that goal during the pilot phase.**
- Any costs associated with obtaining accreditation will be paid by the facility.

Application and Accreditation

- Must have current accreditation status or specific timeline for receiving accreditation from the ARC-PA.



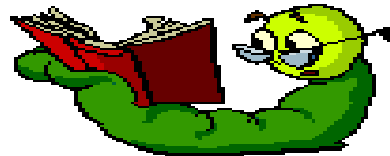
National Program Review at Conclusion of Pilot

- Since this is a national pilot program, its continuation beyond three years is not guaranteed, but rather is dependent on availability of funding and measurable outcomes, including resident completion, hiring of residents into VA, resident and program satisfaction, and growth of non-VA PA residencies nationally.

Questions regarding VA Pilot Initiative



Standards Review



Standards Review

- Programs had an opportunity to provide input
- ARC-PA Postgraduate Committee met in September to discuss
- The following are the results of that meeting

Three Areas of Review

- Additions
- *A Standards*
- *B Standards*



Definitions

- Specific terms will be defined within the Glossary at the end of the *Standards* document
- These terms will be printed in *italics* within the *Standards* for easy reference to the Glossary

Postgraduate Manual

- With the updated *Standards* there will be a Manual for postgraduate programs to use as a further reference
- The ARC-PA has a timeline to complete the Manual in the next 6 months

Use of Annotations

- Annotations are considered an integral component of the *Standards* to which they refer.
- They clarify the operational meaning of the *Standards* to which they refer and may be changed over time to reflect current educational or clinical practices.

Annotations continued

- Annotations are not suggestions for methods of compliance. Such suggestions may be found in the Accreditation Manual.



Standard Comments Received

- **The A Standards:** A2.01e, A3.06, A3.07, A3.14, A3.08, A3.16, A3.18, A3.19, A3.20, A3.21, A4.02, A4.09, A4.16
- **The B Standards:** B1.02, B1.07, B1.08, B1.09

The A Standards



Standard A2.01e

- A2.01 The sponsoring institution assumes primary responsibility for:
 - permanent maintenance of grades or credits for all components of the program.



Change to Standard A2.01e

- Change wording from "grades" to "evaluations"
- More appropriate terminology for postgraduate programs

Standard A3.06

- A3.06 Program faculty must be sufficient in number to meet the academic needs of enrolled PA residents.



Change to Standard A3.06

- Extend further to include:
 - Program faculty **and institutional resources** must be sufficient in number **and availability** to meet the academic **and professional** needs of enrolled PA residents.
 - Parallel with entry level in focus

Standard A3.07

- Program faculty are responsible for:
 - a) developing the mission statement of the program.
 - b) selecting applicants for entry into the program.
 - c) providing instruction.
 - d) evaluating PA resident performance.
 - e) academic counseling.

Standard A3.07 continued

- f) assuring the availability of remedial instruction.
- g) designing, implementing, coordinating, and evaluating curriculum.
- h) administering and evaluating the program.

Standard A3.07 related to A3.14

- A3.14 – reference to Medical Director responsibilities
- Look at these two standards and further reference responsibilities of the Medical Director



Standard A3.08

- A3.08 The program director **must** be a PA or a physician:
- If the program director is a PA, s/he must hold current NCCPA certification or current PA licensure by the state in which the program exists unless exempted from licensure under state or federal law.

Standard A3.08 continued

- If the program director is a physician, s/he must hold a current, valid, unrestricted, and unqualified license to practice medicine as an allopathic or osteopathic physician in the state in which the program exists, and s/he may not hold any license that is restricted or qualified in any manner.

Standard A3.08 continued

- In addition, s/he must be currently certified by an ABMS- or AOA- approved specialty board.



Standard A3.08 Additional Clarification

- No Co-Directors
- One person is to be in charge
- The position is to remain filled by a PA or MD
- No NP as a Program Director since they are under a different practice act.

Standard A3.16

- A3.16 The program must provide the opportunity for continuing professional development of the program faculty by supporting the development of the clinical, teaching, scholarly, and administrative skills/abilities required for their role in the program.

Standard 3.16 clarification

- Professional Development is an institutional prerogative
- Annotations in the updated *Standards* will provide a further defining of terminology

Standard A3.18

- A3.18 In addition to the program and medical director, there must be sufficient additional program faculty to provide PA residents with the attention, instruction, and supervised practice experiences necessary to acquire the knowledge and competencies required to meet the objectives of the program.

Standard A3.18 change

- Change faculty to adjunct faculty
- Adjunct faculty will be added to the definitions within the Glossary



Standard A3.19

- A3.19 Program faculty and instructors must be:
- qualified through academic preparation and experience to teach assigned subjects.
- knowledgeable in course content and effective in teaching assigned subjects.

Standard A3.19 clarification

- Definitions to be used in order to narrow meanings of key words within the Standard (such as: course content)



Standard A3.20

- A.3.20 All program faculty and instructors assigned to teach PA residents should be responsible for evaluating PA resident performance and identifying PA residents who are not meeting expected competencies.

Standard A3.20 change/clarification

- Replace instructor with instructional faculty and define further within the Glossary



Standard A3.21

- A3.21 In each location to which a PA resident is assigned for instruction, there must be an individual designated to facilitate the supervision and assessment of the PA resident's progress in achieving program requirements.

Standard A3.21 clarification

- It was suggested that clinical duties be included after instruction; however, that is part of employment.
- The ARC-PA cannot comment on employment, only if employment is directly related to education

Standard A4.02

- A4.02 The program must adhere to the current Accreditation Council for Graduate Medical Education (ACGME) policy of appropriate limits to duty hours to allow for adequate time for PA resident rest. (see Appendix A).

Standard A4.02

- Will change wording and annotation so it is not a limiting factor, but a guide
- Show how the schedule of activities facilitates the educational experience

Standard A4.09

- Programs granting advanced placement must document that PA residents receiving advanced placement have:
 - a) met program defined criteria for such placement.
 - b) met institution defined criteria for such placement.

Standard A4.09 continued

- o c) demonstrated appropriate competencies for the curricular components in which advanced placement is given.



Standard A4.09 clarification

- o There was a suggestion to have this removed; however, although there are no programs providing advanced placement, there may be in the future
- o The standard will remain for the future possibility with programs.

Standard A4.16

- o A4.16 The program must have a current CV for each course director, with emphasis on their qualifications for teaching that segment of the curriculum.



Standard A4.16 clarification

- o Program must have a CV for each instructional faculty member
- o Whether maintained by the institution or the program, there must be continual access to CVs
- o Maintain access without adding "busy work"

The B Standards



Standard B1.02

- o B1.02 The curriculum must be of sufficient breadth and depth to prepare the PA resident for clinical practice in the specialty of the program.



Standard B1.07

- B1.07 The program must provide each PA resident, upon program entry, with written criteria for successful progression to and completion of each segment of the curriculum and for completion of the program.

Standard B1.08

- B1.08 For each didactic course and clinical rotation, the program must provide each PA resident with a written document that
 - a) defines expectations.
 - b) guides PA resident acquisition of expected competencies.

Standard B1.08 continued

- c) includes measurable expected PA resident competencies.
- d) details how each PA resident will be evaluated in relation to expected competencies.

Standard B1.09

- B1.09 The program must orient instructional personnel and preceptors to the specific educational competencies expected of PA residents.



Clarification

- After defining the term curriculum in the Glossary, it will help the wording in the B section of the Standards



Discussion and Questions





Who you gonna call? Ghostbusters... NOT!

- Karen Lemon
- Manager – Accreditation Services

- Email: karen@arc-pa.org
- Phone: 770.476.1224
- Carrier Pigeon
- (Prefers emailing)

