LECOMT Operational Policies

Title:	**LECOMT Membership**
Policy #:	**1**

To be considered for Full Active Membership in LECOMT, each institution must be processed according to the following LECOMT Application Procedure:

Policy: The LECOMT Board of Directors will be charged with assuring institutional compliance to the standards, policies, and procedures of LECOMT for all applicants.

Purpose: To establish an effective and equitable system for review of all member applications to LECOMT.

1. Institutions interested in becoming Full Active members of LECOMT must complete the *LECOMT Application for Membership* and submit with this application the requested supporting documentation listed on page 9 of the application.

2. Any institution with AOA postdoctoral programs must apply for Full Active Membership.

3. Any institution not currently having an AOA approved postdoctoral program must apply as a General Active Member.

4. The LECOMT Executive Committee will review each application and supporting information.

5. The Executive Committee will present its findings to the Board for final action. Approval of new applicants shall be the responsibility of the Board and such approval shall cause the applicant to become a member of LECOMT.

6. Institutions must submit with their application the initial fee, which is determined each year by the Board of Directors.

7. Current members must submit the annual fee (amount determined by the Board of Directors) at the beginning of each fiscal year. Failure to do so will result in the termination of Full Active membership.

Title:	**Internship/Residency Inspection Guidelines**
Policy #:	**2**

Policy: The LECOMT Board of Directors and the LECOMT Osteopathic Graduate Medical Education Committee will assure institutional compliance to the standards set forth by the AOA to achieve the objectives of the OPTI and the quality of the educational programs.

Purpose: To establish and demonstrate LECOMT's involvement and commitment to provide oversight and academic support to all LECOMT postdoctoral programs as it relates to the inspection process.

1. Upon receipt of notice of your inspection date and assigned inspector, contact the LECOMT office with this information.

2. LECOMT staff is available to assist you in the preparation of your inspection, as well as being present on the day of the inspection.

3. Submit a copy of your completed workbook to LECOMT's Academic Officer two weeks prior to submitting to the AOA. Please be mindful of the deadlines in submitting the completed Inspection Workbook to the AOA.

4. After your inspection, send a copy of the deficiencies to the LECOMT office. We will collaboratively write the responses to the deficiencies.

5. Send copies of the LECOTM office of any AOA correspondence pertaining to your internship/residency programs.

6. LECOMT will follow-up on any deficiencies identified in your inspection to assure you have a plan of correction and that suggested outcomes are achieved.

Title:	**Research-Related Educational Objectives**
Policy #:	**3**

Policy: LECOMT internship and residency programs shall provide adequate exposure to medical research/review skills and methods of presentation, including information relating to changes in the health care delivery system. Options for meeting the above requirements are determined by each program director/director of medical education in association with the respective specialty college.

Purpose: To establish guidelines and options for meeting the above requirement in association with the respective specialty college and may include, but not limited to the following:

1. Original research studies (basic science, clinical studies, health services research) and writing.

2. Retrospective studies (medial records analysis)

3. Entry in Specialty College Annual Resident Medical Writing/Research Competition

4. Presentation of a scientific poster/abstract at the Specialty College Convention or AOA National Convention

5. Resident education program on research types and methodology

6. Resident education programs on biostatistics

7. Formal written critique by the program director or designee of resident presentations of journal club articles/literature review (e.g. credibility of material, data statistics and study design)

8. Educational program for resident in health services research, policies, administration, (e.g. access of population groups to health care, compliance issues, public policies, managed care, etc.)

9. Educational programs on “How to Read and Understand the Medical Literature”

Title: **Reporting to the AOA individual trainees' successful completion of each training year/Certificates of Completion**

Policy #: **4**

Policy: It is the responsibility of each institution to report to the AOA individual trainees' successful completion of each training year.

Purpose: To establish defined reporting mechanisms

Procedure:

1. It is the responsibility of the DME of each member institution to report to the AOA individual trainees' successful completion of each training year.
2. Reports are due to the AOA sixty (60) days from the completion of the academic year, normally September 1.
3. Each institution is to submit copies of this report to the LECOMT office in order to maintain accurate record keeping in our database.
4. LECOMT will confer certificates of completion on those interns/residents who have successfully completed the requirements for graduation and have been recommended for graduation by the postdoctoral faculty of the program.
5. DMEs from each institution are responsible for submitting the certificate order information to the LECOMT office (in the required time) in order for certificates to be obtained.
6. Institutions may also confer certificates of completion from their own institutions
7. As of January 1, 2009, all certificates must list the AOA assigned program numbers to identify the program not just by name since many hospital programs have similar or the same names.

Title: Faculty Appointment/Evaluation of Teaching Staff
Policy #: 5

LECOMT recognizes and respects the diversity and uniqueness of each of our member institutions and therefore relies on the expertise of each institution's DMEs and postdoctoral training committee to select and evaluate their own teaching faculty.

The DME &/or Residency Program Directors at each member institution appoint and manage faculty of all postdoctoral programs either through their office or appropriate postdoctoral training committee. This includes the use of policies both written and verbal.

Faculty members who also accept medical students from LECOM have faculty appointments through LECOM in accordance with LECOM's faculty appointment process.

The DME and Residency Program Directors at each institution are held responsible for reviewing the performance of each faculty member on an annual basis. Evaluations of the teaching staff provided by the interns and residents should be taken into account in these reviews. The DME and Residency Program Directors shall certify that these reviews have been conducted as part of the annual confirmation of continuing faculty appointments.

LECOMT member institutions must conform to all federal and state policies regarding equal opportunity without regard to sex, age, ethnic background, and non-limiting disabilities.

All non-osteopathic members of the faculty should have a basic understanding of osteopathic principles and practice and OMT.

Institutional policies should be established to ensure that the faculty:
Nurture interns' and resident' education;
Demonstrate sound clinical practices and teaching abilities;
Support of LECOMT's mission and objectives;
Attain the goals and objectives of the programs with which they are associated;
Expand their own medical abilities and knowledge, skill and education; and
Participate in scholarly activities

Title: LECOMT Research-Related Activity
Policy #: 6

LECOMT is committed to the advancement of knowledge, including osteopathic contributions to medicine through scientific research.

LECOMT will provide support for facilitating resident participation in research requirements and/or projects by an osteopathic specialty college.

LECOMT will identify and list research resources and opportunities available to interns and residents within the OPTI.

LECOMT has identified research-related educational objectives for interns and residents in association with the specialty college.

LECOMT will provide ready access to basic science and/or clinical research mentorship.

LECOMT will identify statistical support services available to interns and residents.

Interns and residents may contact LECOMT's Research Contact Person:
Bertalan Dudas, M.D., Ph.D., Director of Research
814-866-8142
E-Mail: bdudas@lecom.edu
Lake Erie College of Osteopathic Medicine
1858 West Grandview Boulevard
Erie, PA 16509

Dr. Dudas is identified as the resource person for any research-related activity for the consortium. Dr. Dudas will assist in statistical support and research design services.

Dr. Dudas is a member of the LECOMT OGME Committee which is the forum used for residents, interns, and program directors to review/generate ideas and request academic support from the OPTI and college.

LECOMT utilizes the OGME Committee Meeting as the mechanism for informing interns/residents/program directors of research resources and opportunities.

The LECOMT web site is in the process of being developed and will incorporate research opportunities and resources for Internet access by interns/residents/program directors.

Basic Science and Clinical research faculty mentorship is available and coordinated through Bertalan Dudas, M.D., Ph.D., Research Contact, and Richard R. Terry, D.O., FACOFP, Academic Officer.

Title: Notification of Substantive Change
Policy #: 7

As per the LECOMT Bylaws, member institutions will notify the LECOMT Executive Director of any substantive change related to their institution.

Further defined, the Director of Medical Education &/or the individual who represents the institution on the LECOMT Board of Directors is responsible for the advance and timely reporting of any substantive change.

Examples of Substantive Changes are defined but not limited to:

Significant Financial change that may affect the delivery and quality of the training program(s).

Closing of AOA-accredited postdoctoral programs due to the lack of intern/residents in the program for three consecutive years.

Closing of an AOA-accredited postdoctoral program due to the determination that the program fails to meet minimal educational standards for continued accreditation.

Voluntary closing of an AOA-accredited program.

Downsizing or increasing the number of AOA-accredited postdoctoral program positions.

Change in leadership e.g. Director of Medical Education/Residency Program Directors

Addition of Postdoctoral Programs/Application for New Residency Programs.

Training program interruptions or closures due to a catastrophic event.

Hospital accreditation changes that may impact the need for Sponsorship Agreement.

Title: Closed/Downsized Postdoctoral Programs/Hospitals
Policy #: 8

Purpose: To expedite the transfer of trainees when a hospital/program closes

As stated in the LECOMT catalog: "Should an emergency situation arise during an academic year rendering a member institution unable to fulfill its obligation to continue the training of its interns/residents, LECOMT will make every possible attempt to find alternative training for the interns/residents at other LECOMT institutions, to the extent allowable by law and AOA policies.

1. Member hospitals must give adequate and timely advanced notice of anticipated program terminations, closures or downsizing.
   Member hospitals per AOA resolution No. 31 must notify:
   1. The American Osteopathic Association
   2. The OPTI
   3. Its internship and residency program directors
   4. Its interns and residents

2. Member hospitals shall notify LECOMT Executive Director and Academic Officer prior to notification to the AOA.

3. LECOMT will provide assistance to any intern or resident adversely affected by an AOA or individual hospital decision to end or downsize an OPTI-sponsored program.

4. LECOMT will provide information to the intern/resident of programs within the OPTI having vacancies.

5. In instances when no vacancies are available, LECOMT will assist the intern/resident in contacting other OPTIs with the assistance of the AOA Office of Education.

Title: Educational Standards
Policy #: 9

LECOMT is dedicated to exceeding basic established levels of quality for postdoctoral education.

Purpose: To establish guidelines and to encourage continuous quality improvement.

LECOMT will review interns and resident manuals.

LECOMT will review each postdoctoral programs goals and objectives.

LECOMT will review each postdoctoral programs curriculum and rotation schedules, suggested reading lists, and research requirements.

LECOMT will conduct on-site visits to each institution at a minimum of one time per year. Interviews with interns, residents, and faculty will be completed on these visits.

LECOMT will review with the DMEs &/or Residency Program Directors the AOA Basic Documents and Basic Standards for Residency. Any revisions by the AOA to these documents are reviewed at the next scheduled OGME Committee Meeting.

LECOMT encourages DME/RPD (Residency Program Director) mentoring and in addition to faculty development will partner new DMEs/RPDs with experienced DMEs/RPDs.

Title: Guidelines for Governing Scientific Research Activities
Policy #: 10

LECOMT follows the policies and guidelines outlined in the Code of Federal Regulations Office for Protection from research Risks. Part 46: Protection of Human Subjects. Department of Health and Human Services National Institutes of Health.

Consortium wide projects are to be coordinated through:

Richard R. Terry, D.O., FACOFP
LECOMT Academic Officer

Bertalan Dudas, M.D., Ph.D.
LECOMT Research Contact

LECOMT recognizes and accepts the individual processes for research approval through each hospital IRB.

LECOMT will assist interns/residents with the IRB process and when multi-site projects are involved will assist with coordinating efforts between hospitals in the consortium.

Title: Non-Discrimination Policy
Policy #: 11

LECOMT institutions are equal opportunity employers; applicants are considered for all positions without regard to race, religion, gender, national origin, age, marital status, sexual orientation, or physical disability.

LECOMT does not discriminate in the selection of faculty, administrative personnel, interns or residents on the basis of race, sex, color, religion, creed, national origin, age, sexual orientation or physical disability. All LECOMT members shall adhere to this policy of non-discrimination.

The above statements of non-discrimination are published on the LECOMT web site and in the LECOMT bylaws.

Title:	**Conflict of Interest**
Policy #:	**12**

CONFLICT OF INTEREST STATEMENT

It is the policy of the governing board of LECOMT to require its governing board members, officers and managers to discharge their duties in good faith and with undivided loyalty to the interests of the Consortium. Therefore, it is incumbent on each to:

- Conduct him/herself in the interests of the Consortium without consideration of the interests of any other person, company agency, organization or association.

- Disclose any material, financial, or other beneficial interest in any educational organization or any entity providing goods/services to the Consortium.

- Disclose any transaction with the Consortium resulting in any material, financial or beneficial interest and refrain from participation in that transaction unless authorized by the board after full and frank disclosure.

- Refrain from using any information obtained within the scope of his/her responsibilities to the Consortium to his/her material, financial or other beneficial interest or the interest of any other person, company, agency, organization, or association with which he/she is associated.

Governing board members, officers and managers of the organization will be required on an annual basis to disclose in writing all interests which could result in a conflict.

Further, governing board members are subject to the provisions of the Directors' Liability Act, Section 8363 [42 Pa. C.S.A., 8363 (a)] which provided in part:

> **A director of a nonprofit corporation shall stand in a fiduciary relation to the corporation and shall perform his duties as a director, including his duties as a member of any committee of the board upon which he may serve, in good faith, in a manner he reasonably believes to be in the best interests of the corporation and with such care, including reasonable inquiry, skill and diligence, as a person of ordinary prudence would use under similar circumstances.**

DISCLOSURE OF CERTAIN INTERESTS OF GOVERNING BOARD MEMBERS

Whereas, the proper governance of educational institutions depends on governing board members who give of their time for the benefit of their communities; and

Whereas, the giving of this service, because of the varied interests and backgrounds of the governing board members, may result in situations involving a dual interest that might be interpreted as conflict of interest; and

Whereas, this service should not be rendered impossible solely by reason of duality of interest or possible conflict of interest; and

Whereas, this service nevertheless carries with it a requirement of loyalty and fidelity to the institution served, it being the responsibility of the members of the board to govern the institution's affairs honestly and economically, exercising their best care, skill, and judgment for the benefit of the institution; and

Whereas, the matter of any duality of interest or possible conflict of interest can best be handled through full disclosure of any such interest, together with non-involvement in any vote wherein the interest is involved;

Now, Therefore, Be It Resolved: That the following policy of duality and conflict of interest is hereby adopted:

1. Any duality of interest or possible conflict of interest on the part of any governing board member should be disclosed to the other members of the board and made a matter of record, either through an annual procedure or when the interest becomes a matter of board action.

2. Any governing board member having a duality of interest or possible conflict of interest on any matter should not vote or use his personal influence on the matter. The minutes of the meeting should reflect that a disclosure was made and the abstention from voting.

3. The foregoing requirements should not be construed as preventing the governing board member from briefly stating his position in the matter, nor from answering pertinent questions of other board members since his/her knowledge may be of great assistance.

Be It Further Resolved: That this policy be reviewed annually for the information and guidance of governing board members, and that any new member be advised of the policy upon entering on the duties of his/her office.

DISCLOSURE STATEMENT OF POTENTIAL CONFLICTS OF INTEREST
GOVERNING BOARD MEMBERS, OFFICERS AND MANAGERS

Please complete this ***Disclosure Statement*** including all information within your knowledge which may amount to a conflict of interest. Please attach additional pages if the space provided is insufficient to respond completely.

1. Name and Address_____

_____

_____

_____

2. I serve or represent the following educational institutions and subsidiaries in the following capacities:

Organization *Title*

_____

_____

_____

_____

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3. I am a director, officer, legal representative or have a material, financial or beneficial interest in the following organizations which may have a conflict of interest with the Consortium.

Organization *Title*

_____

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4. I am not involved in any activity or transaction, nor am I a party to a contract involving interests which could be found to be adverse to the institutions(s) I represent except for:

_____

_____

_____

5. Neither I nor any member of my family have accepted gifts, gratuities or entertainment that might influence my judgment, decisions, or actions concerning the business of LECOMT except as I have listed below:

_____

_____

_____

6. I disclose the following business relationships which I have with other board members, Consortium administrators or other key Consortium personnel below or as follows; but I do not disclose attorney-client and those confidential relationships not permitted to be disclosed by my employer and other confidential relationships. However, I shall disclose such relationships on an *ad hoc* basis as matters may come before the Board.

_____

_____

_____

6. I am related to the following board members, Consortium administration staff, or key Consortium personnel by blood or marriage:

_____

_____

_____

The undersigned has completed the foregoing Conflict of Interest Statement and verify that the statements are true and correct. The undersigned further understands that the statements made herein are made subject to the penalties of 18 Pa. C.S. Section 4904, relating to unsworn falsification to authorities.

SUBMITTED BY:_____ DATE:_____

Title: Policy to Monitor On-Call and Work Hour Schedules
Policy #: 13

The AOA has charged each OPTI the task of overseeing their partner institution's on-call and work hour policies for interns and residents. To ensure compliance we have established the following protocol for the intern or resident to report any inconsistencies or infractions in their hospital's published work hour policy:

1. The intern or resident must initially report in the manner outlined in "Policies Governing Evaluation & Appeal Mechanism" of their institution's Intern/Resident Manual.

2. In the event the intern or resident feels his/her concerns were not addressed properly, they may then contact their designated Intern or Resident Representative of LECOMT's Osteopathic Graduate Medical Education (OGME) Committee or the LECOMT Academic Officer at rterry@lecom.edu.

3. LECOMT and each member institution agree that there can be no reprisals for the intern/resident reporting the inconsistencies or infractions in the hospital's published on-call and work hour policy.

4. Each LECOMT member institution must included in their intern/resident manual this LECOMT policy to assure the intern/resident has received proper notification of the appropriate protocol and OPTI contacts.

5. LECOMT will also post this policy on the intern/resident bulletin board of the LECOMT web site.

LECOMT Academic Officer: Richard R. Terry, D.O., FACOFP
1858 West Grandview Boulevard
Erie, Pennsylvania 16509
E-Mail: rterry@lecom.edu

Title: Corrective Action Plans
Policy #: 14

Policy: It is the responsibility of the DME of each member institution to submit Corrective Action Plans to the OPTI for approval and signature.

Purpose Required in OPTI Standards as defined by the AOA
To allow the Academic Officer and OGME Committee the ability to review and approve the plan of correction prior to the plan being submitted to the specialty college and AOA.

Procedure:

1. Forward copy of deficiencies and plan of correction in a timely manner to allow adequate intervention and input.
2. AO and Executive Director will review
3. If satisfactory, the plan will be signed and submitted by LECOMT to the AOA with copies of packet to the DME.
4. If unsatisfactory, the AO and ED will contact the DME &/or internship/program director via teleconference to discuss the deficiencies and plan. A new plan will be developed and signature sheets as above will be attached.
5. All corrective action plans are reviewed at the OGME Committee meeting. Due to the requirement to return the corrective action plan to the AOA in a timely, specified time, the plan will be reviewed at the next scheduled OGME but may not be reviewed by the OGME prior to being submitted to the AOA, but always reviewed by the AO and ED.
6. A plan will not be delinquent to the AOA because of the OGME committee schedule, and therefore the AO will have the authority to review and sign without the committee approval. The committee will always have the opportunity to review and make recommendations to amend.
7. All Corrective Action Plans and signature sheets are maintained in the LECOMT office.
8. Corrective Action Plans will be monitored for compliance and continued action by the AO and OGME Committee.
9. ALL Corrective Action Plans, per the AOA standards are submitted to the AOA by the OPTI and not direct from the program.

Title: LECOMT Mid-Cycle Internal Review Policy and Procedure
Policy #: 15

The OGME committee shall ensure that clinical graduate training programs in the LECOMT OPTI meet AOA institutional and residency performance standards.

The LECOMT member hospital/program review will be scheduled by the GME Committee of the institution for each AOA-accredited program mid-cycle between its AOA site visits, or as otherwise needed. In programs with a longer 4-5 year review cycle, there may be leeway in that the review may be completed either three months prior to or three months post the actual mid-cycle date. In programs with shorter review cycles, there will less flexibility. If problems exist in scheduling internal reviews, the DME of each institution shall forward its concern to the Academic Officer or Executive Director for resolution. LECOMT will maintain a tracking system with last inspection date, copies of inspection reports and anticipated date of midcycle internal review. Reminder emails and calls will be made to program directors and DMEs.

The DME/program director must forward copies of the completed Internal Review to the LECOMT office for the Academic Officer to review. Following the review and notification of the outcome of the review, the AO&/or ED may require follow up teleconferences &/or on-site visits for any programs with ongoing difficulties in meeting the AOA standards. LECOMT will continue to assist programs and act upon the concerns until the issue is appropriately addressed and resolved.

Internal Reviews will be summarized at the next scheduled LECOMT OGME Committee.

Standardized Format recommended by the AOA was shared with the LECOMT members.

The AOA sets forth the requirement for the regular review of all graduate medical education programs, pursuant to a written protocol, for the purpose of assessing compliance with both the Institutional Requirements and Program Requirements of the relevant AOA Residency Standards. The review is to be conducted between the AOA/specialty college program surveys and should appraise the following:

- The educational objectives of the program;
- The effectiveness of the program in meeting its objectives;
- The adequacy of available educational and financial resources support to support the program;
- The effectiveness in addressing areas of non-compliance and concerns in previous AOA inspection letters of accreditation and previous internal reviews;
- The effectiveness in defining, in accordance with the Program and Institutional Requirements, the specific knowledge, skills, attitudes, and educational

experience required for the residents to achieve competence in the following: osteopathic principles and practice, patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism and system-based practice. The program's curriculum should include goals and objectives based on the competencies because without them, effective evaluation tools cannot be constructed;

- The effectiveness of the program in using dependable outcome measures developed for each of the 7 general competencies; and
- The effectiveness of each program in implementing a process that links educational outcomes with program improvement.