



AMERICAN OSTEOPATHIC ASSOCIATION

**INSPECTION WORKBOOK
FOR
INTERN TRAINING PROGRAMS**

American Osteopathic Association
Department of Education
Division of Postdoctoral Training
142 E. Ontario Street
Chicago, IL 60611

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INSPECTION WORKBOOK FOR INTERN TRAINING PROGRAMS

All information below must be completed.

HOSPITAL

CITY/STATE

DME

SPONSORING COLLEGE/INSTITUTION (if applicable)

OPTI AFFILIATION

ACGME Training (Attach a copy of the latest ACGME approval letter.)

INSPECTOR/S

INSPECTION DATE: _____

Number of approved positions: _____ Number of interns currently in program: _____
(Attach a list of the current interns in the intern program.)

Past inspection history:

1.

2.

The DME or the Medical Education Department at the institution being reviewed is required to complete the Internship Inspection Workbook **prior** to the on-site review and **mail a copy to the inspector**. The workbook will serve as a self-assessment tool by the training program and will help facilitate the review process. When the inspector(s) are at the facility he/she will ask for further information and documentation of records for several areas outlined in the inspection workbook and required within AOA policies and will validate all information provided through interviews with interns and faculty members.

Name of person completing workbook _____

Title _____

Date _____

CRITERIA FOR RECOMMENDATIONS OF APPROVAL

An existing internship-training program may be approved as follows:

5 years—An excellent program that clearly meets or exceeds all AOA standards, especially those pertaining to Osteopathic principles and practice (OPP)/Osteopathic Manipulative Treatment (OMT), and have no deficiencies noted in the on-site survey.

4 years—An excellent program with only minor educational deficiencies which are primarily administrative in nature and unrelated to the basic structure and quality of the internship.

3 years—A very good program that is in substantial compliance with AOA standards and the number and seriousness of the deficiencies would not impact the educational quality and requires the institution to demonstrate a long-term commitment to improvement.

2 years—A program that meets most AOA standards. The deficiencies may include the following: problems inherent in the basic structure and educational quality of the program; deficiencies not corrected since the previous inspection; or those that indicate the program is in a state of transition requiring close attention.

1 year—A program that is not in compliance with AOA standard requirement/s, which must be corrected immediately. This approval requires that a *mandatory consultation* be conducted within three to six months, which may only be waived by specific action of the PTRC.

Note:

- 1) Any existing osteopathic intern program requiring re-inspection within one year may not contract with new interns until such time as the program receives approval with re-inspection within two or more years, unless specified by PTRC.
- 2) Any intern program that received one year AOA approval for two consecutive years shall be terminated, effective June 30th of the second year. Any such terminated program may reapply for approval as a new program one year after the date of termination.

INSPECTION DAY CHECK LIST

- Review intern logs, evaluation of interns, and intern evaluations of service.
- Minutes of the Education Committee (one year).
- Curriculum Vitae for the Director of Medical Education, department chairpersons and/or residency director, and primary rotation supervisors.
- Minutes or other records of formal academic presentations, morning reports, attendance for lectures, and Clinical Pathology Conferences (CPCs).
- Patient evaluation committee minutes (e.g., tissue, tumor, mortality, quality, & utilization review, etc.), evidence of intern attendance.
- List of educational aids, learning resources, & description of library and availability to interns.
- Recent statistics on scope and volume of patient care (number of beds, percent of occupancy), admissions, discharges, emergency facility visits, inpatient ambulatory surgery, etc.
- Review completed inspection workbook. Ask for necessary backup materials and any other documents needed to answer specific questions pertinent to various departments.
- Tour institution(s).
- Meet with interns and discuss training program.
- Meet with chairpersons, trainers, program directors, if appropriate, and as needed.
- Private meeting with DME (if desired).

American Osteopathic Association
Council on Postdoctoral Training
Traditional Internship Program Inspection Workbook

I. FACULTY AND ADMINISTRATIVE STAFF

The intern training program shall have a faculty and administrative staff who are qualified by training and experience to teach osteopathic interns. These professionals shall not only be competent medical practitioners, but they shall also be dedicated to the science and art of education.

A. Director of Medical Education (DME) (Standard E.2.1-2.5)

DME's name:

1. Is DME employed whole, full or part time basis? whole full part time
 - **WHOLE TIME:** A physician who utilizes his/her entire time for the educational direction of the program with no outside practice.
 - **FULL TIME:** A physician who utilizes the majority of his/her time for the educational direction of the program while continuing to maintain a small private practice.
 - **PART TIME:** A physician who utilizes the majority of his/her time maintaining a private practice while directing the educational program.

2. Is DME a member of AOA? (Standard E.2.2b) yes no
AOA Member # _____

3. Is DME a member of AODME? (Standard E.2.2b) yes no

4. How many AODME meetings has the DME attended in the last 3 years? _____

5. Is DME an osteopathic physician who has successfully completed an AOA-approved internship? (Standard E. 2.2a) yes no

6. Is DME formally appointed by the institution as the person responsible for the clinical education of the interns? (Standard E.2.1) yes no

7. Is this responsibility defined in writing in the form of a job description? (Standard E.2.3a - l) yes no

8. Provide a copy of the job description for review. Attached

9. Does DME meet with interns at least quarterly to insure that program objectives are being met? (Standard E.4.3) yes no

10. Explain how meetings are scheduled and attach representative documentation from the prior year:

11. Does the DME schedule rotations for all interns within the curriculum requirements outlined in the standards? yes no

12. Is the DME readily available and accessible on-site to the interns? yes no

13. How often is he/she in the hospital? _____

14. Describe the DME's Education Office location and availability. Is the office in the same building within the training institution?

15. What percentage of time is he/she in the institution? _____ %

16. Describe distance and frequency of DME at any off-site practice setting.

B. Internship Program Director (Standard G.2.1-2.6)

1. Is the Internship Program Director the same individual as the Director of Medical Education? yes no

2. Name of Internship Program Director:

3. Was the Internship Program Director, formally appointed by the training institution? *(Standard G.2.1)* yes no

4. Has the Internship Program Director successfully completed AOA approved internship training? yes no

5. Is the Internship Program Director readily available to the interns and have medical staff privileges at the institution? *(Standard G.2.6c)* yes no

6. Does the Internship Program Director oversee the scheduling, curriculum development, training and evaluation of interns? *(Standard G.2.6d)* yes no

C. Administrative Director of Medical Education

1. Is there an Administrative Director of Medical Education? *(Standard F.2.1 - 2.4)* yes no

If yes, name:

2. Who does this person report to at the sponsoring institution?

3. Describe the ADME's educational or programatic background.

4. Describe his/her role within the internship program.

D. Education Committee

1. Describe the composition of the Education Committee, the frequency of its meetings and its responsibility.

2. Explain how the Education Committee at the institution works to maintain and improve program quality. *(Standard I.2.2)*

3. Does the Education Committee meet monthly with minutes of the committee meetings maintained in the DME's office? *(Standard I.2.2b)* yes no
(Attach a schedule of meetings covering the past 10 months and attach at least three (3) sets of minutes. (Note: Additional minutes may be requested at the site visit))

If no, explain:

4. Describe how the Education Committee is organized to assist the DME to develop and implement a high-quality educational program for interns and to develop curriculum and methods of evaluation of the educational experience of the interns during training. *(Standard I.2.3)*

5. How does the Education Committee participate in program and intern evaluation? *(Standard I.2.4)*

Describe the evaluation process and frequency:

E. Teaching Faculty

1. List the names of the professional staff members who serve as faculty for family practice, pediatrics, emergency medicine, internal medicine, female reproductive medicine and general surgery for the intern program. List their degree and whether they are certified by AOA or ABMS. Include non-physician faculty members. *(Standard H.2.1)*
(Attach a chart that shows for each specialty the total number of faculty, degree, whether osteopathic or allopathic non-certified)

2. Describe faculty eligibility, selection/appointment process, requirements to maintain status and responsibility. Describe osteopathic, allopathic, non-ME, DO and non-physician composition of faculty.

3. Describe how informal teaching service activity is integrated into daily patient care activity. *(Standard H.2.2)*

4. Describe how teaching faculty provides instruction to interns in formal settings, i.e., case conferences and structured class room style educational programs. *(Standard H.2.3)*

5. Explain the formal didactic program, attendance requirements, how many were held in the past 12 months, frequency of cancellation and how many are scheduled for next year.

6. List teaching faculty, their qualifications, and their involvement in teaching the bio-psychosocial component. *(Standard H.2.4)*

II. SPONSORING INSTITUTION

(This section should only be completed for programs sponsored by an osteopathic college or an AOA accredited hospital. This form is not to be used for affiliate rotations or associate institutions)

Name of Sponsoring Institution

City/State

Director of Medical Education at Sponsoring Institution:

Name/Title:

(DME must be an osteopathic physician with AOA-approved postdoctoral training)

1. Is the DME at the sponsoring institution responsible for assisting in the inspection process at the sponsored site? yes no

If no, explain:

2. Is the affiliation agreement between the sponsoring institution and the sponsored institution on file with AOA? yes no

(Attach a copy of the affiliation agreement/s to inspection workbook)

3. Does the DME from the sponsoring institution meet with the sponsored interns to insure that the program objectives are being met? yes no

4. How often is he/she meeting with the interns? _____

5. Describe the interaction between sponsoring DME and the sponsored site.

6. Describe the oversight provided by the sponsoring institution. *(Standard J.5.1)*

OPTI:

7. Is a representative from the sponsoring organization and/or the OPTI attending the intern inspection? yes no

If so, who: _____

If not, why?

III. AFFILIATE INSTITUTIONS

(Complete this section only if the institution utilizes the same external sites for required rotations on a regularly scheduled basis.)

A program may have affiliate institutions at which selected portions of the intern training program may be regularly conducted. The affiliate institutions may be AOA or JCAHO accredited hospitals or other approved sites offering basic, supplemental or replacement training. Affiliate institutions shall be utilized for training as required by the sponsoring institution for completion of the internship. *(Standard C.2.1)*

1. Are there affiliate institutions used for specific rotations? yes no

2. List both the outside rotations and the institutions where they are held:

<u>Outside Rotation</u>	<u>Institution</u>
a.	
b.	
c.	
d.	

3. Has the sponsoring institution obtained a written affiliation agreement, verification of patient volume and variety and the curriculum vita of the physician responsible for the supervision of the interns while at the affiliate institution? *(Standard C.2.2a - c)*

yes no

(Attach copies of all affiliate agreements)

4. Is the supervising physician at the affiliate institution certified or board eligible in the specialty in which he/she practices? *(Standard C.2.4)*

yes no

(Attach C.V. of accountable supervising physician at affiliate institution)

5. Is the supervising physician who maintains goals and objectives for the affiliate rotations accountable to the DME at the sponsoring institution? yes no

6. Does he participate in the inspection process at the site? *(Standard C.2.4)* yes no

7. Are evaluations of interns at affiliate institutions made available to the DME at the sponsoring institution upon the completion of the rotation? yes no

If no, explain:

8. Are copies available for review at the AOA intern inspection? yes no

IV. ADMINISTRATION OF THE EDUCATIONAL PROGRAM

The intern training program shall have formal policies to direct the activities of the interns and the interns must be advised of these policies, in writing, upon entrance into the program. The minimum period of service for completion is 52 weeks.

Standard 2.3 of the Policies and Procedures for Intern Training outlines the leave policies of the AOA and requires that each institution have leave policies incorporated into its Training Manual.

- 1. Does this institution have such policies incorporated into the Training Manual? yes no

If no, explain where the policies are listed:

- 2. Are educational goals and objectives defined for each rotation and included in the Training Manual? (Standard O.4.5) yes no

(Attach a copy of the goals and objectives)

- 3. Are the goals and objectives being met within each rotation? yes no

- 4. How is this being evaluated?
(Attach a copy of the Training Manual and reference appropriate page and/or section for policies)

- 5. Are the institutional policies consistent with those of the AOA? yes no
If no, explain how they differ:

- 6. Is time at the beginning of the intern training program devoted to formal orientation of the interns, which includes administrative and professional organization of the program, facilities available in the laboratories, nursing, social services, risk management, quality assessment, dietetics, medical records and pharmacy?
(Standard G.4.1) yes no

(Attach a copy of the last intern orientation agenda)

If no, explain how interns are oriented to the program:

- 7. Are interns advised of their duties, professional ethics, and conduct towards other members of the health care team? (Standard G.4.1) yes no

- 8. Do interns devote their entire effort to the educational program? yes no
(Standard H.4.1.) "Interns are to devote their entire effort to the educational program. While interns may participate in private, professional, or clinical practice as it relates to the structured educational experience to which they are assigned, they shall not receive compensation for such activities"

9. Are interns required to receive a medical evaluation, and routine laboratory studies by the institution at the beginning of the internship and periodically as indicated? *(Standard I.4.1)* yes no

10. Describe nature of medical evaluation.

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11. Each institution is required to have a Training Manual presented to the intern upon entry into the program. Does this institution's Training Manual include the following: *(Standard F.4.1a - b)*

List section and page number where listed:

a. An outline of the content of the orientation program.	
b. Educational goals and objectives.	
c. A set of rules and regulations stating intern duties and responsibilities, including floor procedures and general orders.	
d. Leave policies.	
e. Financial arrangements, including housing, meals and other benefits, as determined by the institution and described in the intern contract.	
f. Reminders that outside clinical work (moonlighting) for pay is prohibited.	
g. Interns must remain members of the AOA.	
h. Policies governing evaluation and appeal mechanisms for grievances.	

12. Does this institution offer intern training programs, which qualify as the first year of a residency program? *(Standard D.3.9)* yes no

If yes, indicate the specific residency programs:

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V. CLINICAL AND EDUCATIONAL RESOURCES

Institutional facilities and resources must be adequate to provide educational opportunities to the intern. The institution must assume the financial, technical and educational support and provide the necessary space, facilities and learning environment for the establishment and maintenance of an approved intern program.

1. Does this institution provide ready access to appropriate medical library services properly staffed and maintained by a qualified librarian? *(Standard Y.2.1-2.2)* yes no

2. Describe library access, librarian qualifications, currency of resources and process of updating.

3. Does the library include access to standard medical reference texts and current medical journals? *(Standard Y.2.8)* yes no
(Attach lists of library holdings (books, journals, software, etc.)

4. Describe how the institution provides 24-hour access to basic clinical texts to allow interns “on-call” to consult necessary references.

5. Are conference rooms available for formal instruction? *(Standard X.2.6)* yes no
If no, explain where instructional activities are held:

6. Describe the number and location of conference and classrooms and how they are used for educational purposes in house staff training.

7. Describe teaching resources (i.e., technology, etc.). *(Standard X.2.7)*

8. List current stipend and benefits to interns. *(Standard M.2.2)*

9. How does the Education Committee regularly review each rotation to provide sufficient scope, volume, and variety to ensure a worthwhile educational experience to the interns? *(Standard I.2.4)*

VI. OSTEOPATHIC GRADUATE MEDICAL EDUCATION YEAR ONE TRADITIONAL (OGME – 1T)

(Attach the last and the current annual master intern schedule)

1. Does the intern receive four (4) weeks or one (1) month of family practice? yes no
(Standard L.4.1d, see Appendix 2)

2. Describe how this experience is provided (hospital, ambulatory, combination, etc.), specific locations, supervision, scheduling, etc.

3. How is the family practice training scheduled?
(Standard 4.1.L, see Appendix 2)
 block format continuity of care experience combination

4. How many weeks of general internal medicine does the intern receive? _____ Weeks *(Standard L.4.1b, see Appendix 2)*

5. Describe the format, supervision, location, responsibilities, etc.

6. How many weeks of emergency medicine does the intern receive? _____ Weeks
(Standard L.4.1c, see Appendix 2)

7. Does the intern receive training in general surgery? yes no
(Standard L.4.1a, see Appendix 2)

If yes, describe the location (hospital, ambulatory site, etc.) and supervision and responsibilities.

8. Does the intern receive training in female reproductive medicine? yes no
(Standard L.4.1a, see Appendix 2)

If yes, describe content (ob/gyn, hospital, ambulatory) supervision and responsibilities.

9. Does the intern receive training in pediatrics? yes no
(Standard L.4.1a, see Appendix 2)

If yes, describe site, supervision, content and responsibilities.

10. How are remaining weeks/months of training defined by the institution? _____
(Standard L.4.1f)

a. Explain how this is met for the majority of interns:

b. Discuss elective opportunities, sites, availability of experiences, etc.

a. ADDITIONAL REQUIRED CURRICULUM COMPONENTS

1. Verify that osteopathic principles and practice are incorporated throughout the program. *(Standard O.4.1-4.2)*

2. Describe OPP formal teaching—bedside, hospital, ambulatory, etc.

3. Are structural and palpatory diagnosis and osteopathic manipulative treatment included? *(Standard O.4.1)* yes no

4. Are osteopathic diagnosis and treatments documented on patient charts in hospital and ambulatory sites? *(Standard O.4.1)* yes no

5. Describe how bio-psychosocial knowledge and skills are taught in both formal and informal settings. *(Standard O.4.3) (Note: This includes medical sociology, doctor/patient/family communication, crisis recognition and intervention, the effects of psychological components of health states, interviewing skills, anxiety/depression recognition and management, and substance abuse care)*

6. Describe how each intern receives exposure to anesthesiology, pathology, radiology and other disciplines related to the clinical practice of medicine. *(Standard O.4.4)*

7. Interns are expected to develop the skills to produce high-quality medical records. *(Standard O.4.6)* Do they perform the following:
 - a. Obtain and record the patient history? yes no
 - b. Perform and record the results of the physical and structural examination, including the use and application of osteopathic principles and therapeutics? yes no
 - c. State the working diagnosis on each assigned patient? yes no
 - d. Write daily progress notes that are dated, timed, signed and identify intern status? yes no

8. Do the interns follow assigned hospital patients from admission to discharge or change of service? *(Standard O.4.7)* yes no

If no, explain:

9. Is the progress note, reviewed by an appropriate professional staff member?
(Standard O.4.7) yes no

10. Explain the review of progress notes.

11. Does the institution and intern keep a detailed record (log) of activities on each assigned rotation? (Standard 4.39, 4.40) yes no
If no, explain:

12. Are logs for all interns available for review at time of site visit?
(Standard O.4.8) yes no

13. Does the in-hospital intern instruction consist of regular daily rounds with well- conducted bedside teaching? (Standard O.4.10) yes no

14. Does the intern make rounds with the attending and resident staffs at suitable intervals, preferably on a daily basis, while on in-hospital rotations?
(Standard O.4.10) yes no
Describe intern rounds:

15. Is there systematic instruction of the intern by the attending physicians, with discussion of the history, physical and laboratory findings and diagnosis and treatment? (Standard O.4.10) yes no

Describe the process.

16. Is the intern given increasing responsibility to acquire confidence in clinical judgment, under the supervision of physicians? (Standard O.4.11) yes no

17. Describe intern levels of responsibility.

18. Describe the relationships of the duties and responsibilities between students, interns and residents on teaching services. (Standard O.4.11)

19. Does the chief of each service have the responsibility to ensure that every member of the house staff is receiving the supervision required and is being given responsibility commensurate with ability and level of training? (Standard O.4.11) yes no

Describe where this responsibility falls.

20. Does the staff recognize its obligation, for teaching purposes, in permitting full utilization of all patients assigned to interns? (Standard O.4.12) yes no

21. Are the number of patients assigned to interns sufficient for adequate volume and variety? (Standard O.4.13) yes no
Provide average inpatient/outpatient service numbers. _____

22. Is the number of patients assigned to an intern appropriately limited to ensure that interns have adequate opportunity for thorough study and proper attention to assigned patients? (Standard O.4.13) yes no

23. Are ambulatory rotations appropriately organized, administered and supervised to provide diversified learning opportunities? (Standard 4.45) yes no

24. Describe how this is reviewed?

25. Are structured didactic programs scheduled regularly for the house staff? yes no

26. Explain the formal didactic program, attendance requirements, how many programs are scheduled and how many programs occur:
(Provide a schedule of such programs for the academic year)

27. Are records, kept of conference topics and of interns in attendance? (Standard O.4.16)? yes no

28. Are these available for validation by site reviewer? yes no
If no, explain:

29. Do interns participate in appropriate staff activities that evaluate patient care for quality, mortality, tissue, and utilization review or tumor committee? (Standard O.4.18) yes no
If no, explain: Describe specific activities, assignments and attendance.

30. Do interns participate in a reading program? (Standard O.4.17) yes no

(Note: This may be demonstrated by reporting current medical opinion concerning types of cases similar to those on assigned service or by review of special topics at staff conferences or journal club meetings. Reading should be documented on intern logs and available for review at site visit)

If no, explain:

31. Are records kept of reading assignments on the intern log?

(Standard O.4.17)

yes no

32. Is continuity in the clinical teaching of pre-operative, intra-operative and post-operative services involving various surgical procedures provided for in the education of interns? *(Standard O.4.18)*

yes no

If no, explain:

VIII. EVALUATION OF INTERNS

There must be an effective evaluation of all components of the intern program. This evaluation must relate to the educational objectives of the program and shall include the intern’s clinical experiences, intellectual abilities and skills, and attitudes and inter-personal relationships. (Standard P.4.1-4.6)

Are intern’s evaluated by the appropriate professional staff, at the completion of each rotation? (Standard P.4.2) yes no

- Family Practice
- Pediatrics
- Internal Medicine
- Female Reproductive Medicine
- General Surgery

If no, explain:

1. Explain evaluation process:

2. Are the evaluations signed by the assigned trainer and the intern, reviewed by the DME and maintained on file in the medical education office? (Standard P.4.2) yes no

3. Does the DME and the education committee reviews the performance of every intern to insure that educational objectives are being met, at least quarterly? (Standard P.4.3) yes no

If no, how often are they evaluated?

4. Describe the process.

5. If necessary, does institution provide the intern with appropriate counseling, prior to early termination of an intern contract? (Standard P.4.4) yes no

6. Is there written documentation of deficiencies and attempts to resolve these concerns? (Standard P.4.4) yes no

7. In cases of early termination of an intern contract, does the DME provide the intern with documentation regarding which rotations, if any, were completed satisfactorily? (Standard P.4.5) yes no

IX. EVALUATION OF THE PROGRAM

While the intern program contains an important patient service component, it must be primarily an educational experience. This educational mission must not be compromised by an excessive reliance on interns to fulfill institutional service obligations. To monitor this educational process, provisions should be made for various levels of program evaluation. The results of these evaluations should be used to continually improve the intern program. *(Standard P.4.1 - 4.4)*

1. At the completion of each rotation, does the intern evaluate the rotation?
(Standard Q.4.2) yes no
- Family Practice
 - Pediatrics
 - Internal Medicine
 - Female Reproductive Medicine
 - General Surgery

If no, explain why not:

2. Describe the process and discuss how changes are made, based on this process.
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3. Are these evaluations reviewed and maintained on file by the Intern Program Director or DME?
(Standard Q.4.2) yes no
4. Does the Intern Program Director or DME evaluate each rotation to determine the amount of work being required of the interns to ensure that they are not being overburdened with routine responsibilities and that they have the opportunity to observe a sufficient variety of cases?
(Standard Q.4.1 & Q.4.3)
 monthly quarterly none
5. Are these evaluations reviewed with the appropriate individuals or departments?
(Standard Q.4.3) yes no
6. Does the education committee evaluate the intern training program quarterly?
(Standard Q.4.4) yes no
7. When necessary, does the committee approve affiliations within the scope of AOA policies and procedures? *(Standard Q.4.4)* yes no

X. RECRUITMENT OF INTERNS

1. Is intern recruitment conducted following the policies and procedures of the AOA Intern Registration Program with all appointments made through this program? yes no
(Standard D.4.1)

If no, explain:

2. Does the institution impose local requirements to supersede the AOA intern-matching program? yes no
(Standard D.4.1)
(Note: Imposition of any requirements to supersede the AOA matching program is not permitted)

3. Does this program have a written description of the process and criteria used in selection of interns? (Standard D.4.2) yes no
(Attach a copy of the selection criteria)

4. Is this process adhered to in the selection of interns? (Standard D.4.2) yes no

5. Does the program enroll only graduates of AOA accredited colleges of osteopathic medicine? (Standard D.4.4) yes no

If no, explain: