

AACOM Recommendations

Strengthening Relationships with the OME Community

Submitted to the National Academic Affiliations Council and the Office of Academic Affiliations

March 30, 2018

The American Association of Colleges of Osteopathic Medicine (AACOM) appreciates the opportunity to provide comprehensive recommendations for the U.S. Department of Veterans Affairs (VA) National Academic Affiliations Council and the Office of Academic Affiliations' (OAA) consideration to help strengthen relationships with the osteopathic medical education (OME) community and eliminate barriers that often create challenges for osteopathic affiliates. The following recommendations are based on the feedback received from the [2017 OME & VA Survey](#), input from our [OME & VA Task Force](#), and other strategic outreach.

These recommendations can be divided into broad categories, including:

- Improve Communication and Coordination of VA Policies between Local/Regional/National Levels
- Increase Education and Outreach to the OME Community to Ensure Understanding of Available VA Undergraduate Medical Education (UME) and Graduate Medical Education (GME) Opportunities
- Streamline Policies and Administrative Processes for New and Existing Academic Affiliates

Extensive Recommendations

AACOM RECOMMENDATION 1: The VA should strengthen and enhance the resources available to a team of VA officials within each Veterans Integrated Service Network (VISN) dedicated to strengthening relationships with academic affiliates and communicating with VA OAA leadership.

- The team should be able to speak to both UME and GME opportunities. Furthermore, AACOM urges the VA to increase outreach to the osteopathic postdoctoral training institutions (OPTIs), which have the necessary connection with UME and GME resources.

AACOM RECOMMENDATION 2: The VA should clearly designate an individual(s) within each VISN to provide on-the-ground support to include assistance with *Veterans Access, Choice, and Accountability Act of 2014* (VACAA) GME and Veterans Equitable Resource Allocation funding, and to help guide affiliates through the initial process of establishing a partnership with the VA.

Feedback/Findings:

- **Improve communication and coordination:** OME partners frequently experience challenges connecting with appropriate VA personnel to initiate academic partnerships. This has often led to a breakdown of communication and might prevent the partnership from initially forming.
- **Designate a “local” VA advocate:** An advocate within the VA system, someone who is employed by the VA facility where an institution is seeking to establish an affiliation and who can provide on-the-ground support, is critical to ensure rotations are available and is needed to help guide OME partners through the process to complete the necessary administrative and documentation requirements. Additionally, within

large VA Medical Centers and particularly those with more diverse clinical locations, the VA may consider establishing an Education Coordinator position that would focus on coordinating learners and their educational experiences.

- Increase education on VA opportunities: More specifics are needed on the UME opportunities available at the VA. Additionally, increased promotion is needed of the VACAA GME expansion initiative. Furthermore, AACOM urges the VA to increase outreach to the OPTIs, which have the necessary connection with UME and GME resources. AACOM is willing and ready to serve as a liaison to facilitate this process.
- According to AACOM's recent survey, more than 75 percent of respondents would like to be contacted directly by the VA to explore adding VACAA GME positions. Approximately 80 percent indicated interest in expanding medical student clinical rotation experiences during the third and fourth years of medical school. Respondents were also seeking opportunities to expand fellowship positions and collaborate on faculty sharing with the VA.
- AACOM can serve as a liaison between the OME community and the VA to help facilitate the lines of communication and promote information/resources to its membership by hosting periodic webinars and other informational sessions with our schools and GME partners.

AACOM RECOMMENDATION 3: The VA should work to streamline the affiliation agreement process to help eliminate lengthy timelines and improve coordination with its affiliates and allow specific requirements to be established by the individual VA facility.

Feedback/Findings:

- Streamline the affiliation agreement process: AACOM recognizes the need for proper oversight and approval of academic affiliation agreements; however, the VA should work to streamline this process to help eliminate lengthy timelines and improve coordination with its affiliates.

AACOM RECOMMENDATION 4: The VA should formalize its policy surrounding their messaging on partial continuity clinic as it relates to GME accreditation and provide official written language to address any misunderstanding between the local and national levels with respect to meeting GME accreditation standards.

Feedback/Findings:

- Partial continuity clinic: There is often confusion about whether a partial continuity clinic is permissible to meet GME accreditation requirements. Further education by the VA is needed to clarify this issue. It is recommended that the VA, in consultation with Accreditation Council for Graduate Medical Education (ACGME) and the American Osteopathic Association (AOA), formalize its policy and provide official language to address any misunderstanding between the local and national levels.
- Continuing education among VA staff and affiliates is needed to clarify the issue. AACOM stands ready to help disseminate educational materials to the OME community on this policy.

AACOM RECOMMENDATION 5: The VA should work to close the information gap relating to the process of creating partnerships with community-based sites in a way that meets accreditation requirements.

Feedback/Findings:

- **Partnering with community-based sites:** Although AACOM has received feedback that the VA is eager to partner with community-based sites, there is an information gap on how to create partnerships that will meet accreditation requirements.
- All respondents to the survey believe that the VA would benefit from looking at outcomes from historic academic medical center training programs/relationships compared to smaller/newer community-based (often-osteopathic) programs.
- Data and research show that medical students and residents who train in community-based sites and rural and underserved areas are more likely to practice in these areas.
- According to the recent [report](#) by the U.S. Government Accountability Office, made publicly available in June 2017, although a majority of residents trained in GME programs accredited by ACGME, the number of residents training in programs accredited by the AOA increased by 108 percent and accounted for most of the growth in rural areas.

Other Important Issues to Consider:

1. AACOM encourages the VA to explore ways in which GME funding can be provided to support the training of primary care and other specialty physicians, particularly those needed to serve veterans in rural and underserved areas, even if the educational requirements necessitate care of non-veteran populations.
2. Given the VA's strong history of interprofessional education (IPE), AACOM requests that the VA explore opportunities to specifically support programs that enable IPE in the clinical setting. AACOM notes that nearly all health professions accreditors have made this requirement part of their standards.
3. AACOM encourages the VA to consider streamlining interagency processes and partnerships to better allow for collaboration across federal programs.

Contact Information

On behalf of the OME community, AACOM stands ready to serve as a resource and provide additional information and consultation that would benefit the VA moving forward. Please do not hesitate to contact Pamela Murphy, AACOM Senior Vice President of Government Relations, at pmurphy@aacom.org or (202) 844-4217, if you have any questions or need further information.

About AACOM

The [American Association of Colleges of Osteopathic Medicine \(AACOM\)](#) represents the 34 accredited colleges of osteopathic medicine in the United States. These colleges are accredited to deliver instruction at 51 teaching locations in 32 states. In the current academic year, these colleges are educating nearly 29,000 future physicians—more than 20 percent of all U.S. medical students. Six of the colleges are public and 28 are private institutions.

AACOM was founded in 1898 to support and assist the nation's osteopathic medical schools, and to serve as a unifying voice for osteopathic medical education. AACOM provides leadership for the osteopathic medical education community by promoting excellence in medical education, research and service, and by fostering innovation and quality across the continuum of osteopathic medical education to improve the health of the American public.