

CPME 230

PROCEDURES FOR RECOGNITION OF A SPECIALTY BOARD FOR PODIATRIC MEDICAL PRACTICE

COUNCIL ON PODIATRIC MEDICAL EDUCATION
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Summary of Changes within Draft I CPME 230

Edits made to align with APMA Bylaws: May not hold a leadership position with a specialty board (for HOD, CPME, and specialty board members).

The requirement to provide a list of residency programs recognized by the board was eliminated.

Clarified a psychometrician must evaluate the validity and reliability of the certification and recertification examination results.

Clarified the implications of an area of noncompliance.

Removed administrative probation.

Added the word “specialty” throughout the document to clarify that the board is a specialty board.

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Council on Podiatric Medical Education

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INTRODUCTION

The process for reviewing a specialty board in the podiatric medical profession includes concurrent review of the substantive issues related to the need for certification within a special area of practice and the assessment of the capabilities of the specialty board to conduct and operate a proper certifying process.

The American Podiatric Medical Association (APMA) assigns the responsibility of specialty board recognition to the Council on Podiatric Medical Education (CPME or Council). The Council on behalf of the podiatric medical profession has established the Joint Committee on the Recognition of Specialty Boards (JCRSB), which is a committee comprised of representatives of the profession, specialty boards, health care community, and public. The Council and JCRSB are committed to assuring the public that those podiatric physicians who are certified have successfully completed the requirements for certification in an area of specialization. The recognition of a specialty board by JCRSB serves to provide important information to the profession, health care institutions, and the public about the sound operations and fair conduct of the specialty board's certification process. The Council's authority for the recognition of specialty boards, through JCRSB, is derived solely from the APMA House of Delegates (House).

With respect to the development of specialization and certification processes, the Council has served the profession of podiatric medicine since the early 1960s when discussions first began about certification, including the need for specialization in the podiatric medical profession and the development of regulations for the approval of specialty boards. The Council has been integrally involved in the discussions about specialization and certification since the 1960s and initiated the recognition process for specialty boards in 1974.

The evaluation/recognition procedures described in this publication as well as the criteria described in CPME publication 220, *Criteria and Guidelines for Recognition of a Specialty Board for Podiatric Medical Practice* serve as the primary documents used by JCRSB for the review and recognition of specialty boards. The criteria and procedures are developed by JCRSB and adopted by the Council. Prior to adoption, the criteria and procedures are disseminated widely in order to obtain information regarding how these will affect the community of interest.

Along with the criteria and procedures set forth by the Council, the APMA House of Delegates specifies the broad policy statements for podiatric medical certification. These policy statements are included in CPME publication 220.

Joint Committee on the Recognition of Specialty Boards

The Joint Committee on the Recognition of Specialty Boards is responsible for granting initial and continuing recognition of specialty boards in ~~the~~ podiatric medical ~~profession~~, formulating criteria and procedures for recognition of specialty boards subject to the final approval of the Council and, in accordance with the broad policies for certification as adopted by the House of Delegates, exploring areas of mutual cooperation to the benefit of the recognized specialty boards, the podiatric medical profession, and the public.

Composition of JCRSB includes two representatives of the APMA House of Delegates (~~may not hold a leadership position with a recognized podiatric medical or surgical specialty board or be a member of CPME~~), to be elected by the House; one representative of CPME (~~may not hold a leadership position with a recognized podiatric medical or surgical specialty board~~), to be appointed by CPME; one representative of the American Board of Foot and Ankle Surgery (ABFAS) (~~not to be an active board director~~), to be appointed by ABFAS; one representative of the American Board of Podiatric Medicine (ABPM) (~~not to be an active board director~~), to be appointed by ABPM; one representative of the public, to be ~~recommended-selected~~ by CPME and confirmed by the House; and one representative from the health care community ~~at-large~~ (hospitals, managed care agencies, HMOs, etc.), to be ~~recommended-selected~~ by CPME and confirmed by the House. Terms are staggered and extend for two years. Members may not serve more than three full or partial terms. JCRSB is empowered to elect its own chair on an annual basis. The chair is responsible for providing a report at meetings of the Council. CPME funds the attendance at meetings of JCRSB for representatives of the House of Delegates, public, health care community, and CPME, and provides a modest honorarium for representatives from the public and health care community.

JCRSB meets once a year to review continuing compliance of recognized specialty boards, applications submitted by ~~specialty~~ boards seeking initial recognition, and, on a periodic basis, the criteria and procedures for recognition.

Role of CPME

CPME is responsible for managing the specialty board recognition process on behalf of the profession. CPME approves the criteria and procedures used by JCRSB in the recognition of ~~specialty~~ boards. CPME also serves as the appeal body for adverse actions taken by JCRSB.

CPME appoints one representative to JCRSB; and ~~recommends-selects representatives of the public and health care community at-large for confirmation by~~ the House ~~for confirmation to~~ JCRSB, ~~representatives of the public and health care community~~. CPME provides staffing to JCRSB with the understanding that anticipated or unanticipated increases in workload must be approved by CPME.

The CPME chair includes information about the activities of JCRSB in his/her annual report to the House of Delegates.

Role of the House of Delegates

The APMA House of Delegates elects two representatives to JCRSB. The House adopts broad policies for specialty certifying boards. These policies may include, but are not limited to, recognition of special areas of practice deemed acceptable for the creation of new certifying ~~specialty~~ boards, ~~deauthorization-withdrawal~~ of previously recognized special areas of practice for which certification may no longer be needed, and delegation of authority to CPME to function as the agency to coordinate the recognition of specialty certifying boards. No organization-specific policy may be adopted by the House.

SPECIALTY BOARDS SEEKING INITIAL RECOGNITION

Application Process for Initial Recognition of a Specialty Board

An application for initial recognition of a specialty board must be submitted to the office of ~~Council on Podiatric Medical Education~~CPME, accompanied by specified supplementary documentation and the application fee. The application form outlines the required supplementary documentation.

The application must include such information and evidence as may be necessary to assure that the criteria for recognition are fulfilled:

- a. A cover letter that articulates the name of the applicant organization, official address of the organization, telephone number, and name and signature of the administrative officer of the organization.
- b. Evidence of the establishment of a specialty area as demonstrated by the existence of an APMA affiliated specialty organization that has been in existence for a minimum of five years.
- c. A narrative account of the organization's compliance with the criteria identified in CPME publication 220. Each area must be accompanied by a full description of the organization's plans or operations, demonstrating compliance. Merely to restate the criteria and affirm compliance is not viewed to be a satisfactory response.
- d. Articles of Incorporation.
- e. Bylaws.
- f. Names, ~~and~~ addresses, [and email addresses](#) of the members of the board of directors.
- g. A statement of purposes and objectives of the [specialty](#) board.
- h. A three-year budget.
- i. Model curriculum for advanced educational programs.
- j. Requirements for approval of advanced educational programs.
- k. List of advanced educational programs recognized by the applicant organization.
- l. Requirements for founders and grandfathers.
- m. Requirements for certification of individual candidates (including [specialty](#) board qualification requirements if appropriate).

- n. Description of areas of content to be covered on the certification examination with rationale for each area, including a sampling of types of questions.
- o. The name and credentials of the testing service or agency contracted to implement the certification examination(s).
- p. An indication of how the examination(s) will be evaluated with respect to validity and the name of the testing service or other agency that will perform the validation process.
- q. The certificate to be awarded to successful candidates.
- r. A statement indicating plans for recertification and/or reassessment of diplomates.
- s. A statement signed by the administrative officer of the applicant body, providing assurance that candidates for certification have not been solicited or accepted in anticipation of recognition of the specialty board.

Additionally, JCRSB encourages the applicant organization to submit letters of support from recognized podiatric certifying specialty boards, including comments about whether or not duplication of efforts is present. If such written statements are not included with the application, JCRSB seeks such statements on its own.

JCRSB reserves the right to request additional information, including the opportunity to meet with representatives of the petitioning organization concerning the materials submitted.

The applicant will be notified no later than 60 days after receipt of the application regarding initial staff review of the completeness of the application.

Application Fee

An application fee, determined by the Council, is required to offset the costs of the review process. The applicant should contact CPME staff in order to ascertain the current fee schedule. The fee is 75 percent refundable only if the organization elects to withdraw its application before JCRSB meets to conduct its review of the organization's application. Only written statements of withdrawal will be accepted in order to facilitate a refund. The application fee is otherwise nonrefundable.

Application Review and Recognition Action

Review of the application will be conducted by JCRSB. The review may include a conference with representatives of the applicant specialty board.

A two-thirds majority vote of JCRSB is required for recognition of a new specialty board.

CONTINUING RECOGNITION

Continuing recognition of each specialty board is determined by JCRSB annually based upon review of an annual data report and every three years based upon review of a petition for continuing recognition submitted by the [specialty](#) board. JCRSB reviews and considers the [specialty](#) board's annual data report and petition for continuing recognition in the light of the criteria specified in CPME publication 220.

Although the period of recognition is considered to be ongoing with no specific expiration date, continuing recognition is considered to be premised upon the [specialty](#) board's success in accomplishing its goals and purposes, in responding to JCRSB requests for information, in paying fees, and in demonstrating ability and competency to continue to satisfy the criteria for recognition. Consequently, failure of the [specialty](#) board to meet the criteria will be considered as reason for withdrawing recognition at any time provided the [specialty](#) board has been notified of the decision of JCRSB and provided appropriate opportunity to appeal the decision to the Council.

Annual Report

CPME publication 240, *Annual Report*, enables JCRSB to obtain and review data pertaining to the recognized [specialty](#) board's activities for the previous 12-month period. Data pertaining to the examination and certification of candidates, current list of diplomates ([upon request](#)), current composition of the board of directors, list of formal complaints received and the [specialty](#) board's response to each, and significant changes in operations are the essential information to be provided as part of the annual report.

Each recognized specialty board must submit the annual report to the Council office by [December-January 15](#) each year or by such other date as JCRSB may request. Organizations that sponsor multiple certification processes must submit separate reports for each area in which certification is conducted. Failure to submit the annual data report may be cause for withdrawal of recognition.

Petition for Continuing Recognition

The *Petition for Continuing Recognition*, CPME publication 250, enables JCRSB to obtain and review specific information about the recognized [specialty](#) board and its continuing compliance with the criteria for recognition. The petition is submitted every three years. Among the information to be included in the [specialty](#) board's petition are:

- a. A statement of goals and objectives of the [specialty](#) board, including a description of the public need served by the certification process.
- b. Bylaws.
- c. Names, ~~and~~ addresses, [and email addresses](#) of the members of the board of directors.

- d. Independent certified annual audit for most recent fiscal year.
- e. A three-year budget.
- f. Nondiscrimination policy.
- g. Continuing education requirements for diplomates.
- h. Requirements for certification of individual candidates (including specialty board qualification requirements if appropriate).
- i. Requirements for acceptance of educational training programs.
- ~~j. List of residency programs recognized by the board.~~
- ~~jk.~~ Dates, locations, and notification of certification examinations.
- ~~kl.~~ The name and credentials of the testing service or agency contracted to implement the certification examination(s).
- ~~lm.~~ Description of process to field test the examination and set the passing score.
- ~~mn.~~ Certification and recertification examination results for the past three years. A narrative summary of how the examination(s) has been evaluated by a psychometrician with respect to validity and reliability including the results of the evaluation since submission of the last *Petition*. The name of the testing service or other agency that performs the validation process also must be included.
- ~~no.~~ Re-examination policy.
- ~~op.~~ The certificate to be awarded to successful candidates.
- ~~pq.~~ The protocol for recertification and/or reassessment of diplomates.
- ~~qr.~~ List of all diplomates certified.
- ~~rs.~~ Names and addresses of diplomates whose certificates have been revoked and reasons for revocation.
- ~~st.~~ Policy for ensuring that diplomates truthfully advertise their certification status.

Organizations that sponsor multiple certification processes may submit one petition for all areas of certification, providing that the petition distinguishes the unique characteristics and objectives for each area of certification for which the specialty board is recognized.

Failure to submit the petition for continuing recognition may be cause for withdrawal of recognition.

Annual Recognition Fee

An annual recognition fee is assessed ~~to~~ all recognized specialty boards. This fee may be based partially upon the agreement of a specialty board to engage in joint evaluation and review of educational programs for which additional administrative costs associated with the evaluation/review processes are incurred by the Council.

The Council ~~on Podiatric Medical Education~~ reserves the right to determine and modify fees as it sees necessary. The specialty boards will be notified at least six months in advance of changes in fees.

CATEGORIES OF RECOGNITION

The categories of recognition with respect to the recognition, continuation of recognition, or denial/withdrawal of recognition include the following alternatives. Actions taken with respect to these categories require a two-thirds majority vote of JCRSB.

Recognition or Continued Recognition

Recognition indicates that the specialty board has met or continues to meet the recognition criteria. This category implies that the specialty board is functioning properly and serves the public and the profession appropriately.

Notice of Noncompliance

This category is determined when a recognized specialty board is viewed to be in noncompliance with recognition criteria of the Council to the extent that the effectiveness and proficiency of the specialty board is in jeopardy. This category indicates that JCRSB is considering proposes to withdrawal of recognition of the specialty board due to the reported area of noncompliance at some time in the immediate future unless the specialty board can provide explicit and demonstrable reasons for not ~~taking such an action~~ correcting the area of noncompliance.

For notice of noncompliance actions, the written communication to the affected specialty board identifies the specific criterion or criteria with which the specialty board is in noncompliance and the materials that JCRSB has requested to address the area(s) of noncompliance.

The notice of noncompliance is not an action that may be appealed.

Denial or Withdrawal of Recognition

This category indicates that the specialty board does not meet the recognition criteria of the Council or has failed to respond to requests for submission of reports, petitions, and/or payment of fees. A decision to deny or withdraw recognition will not become final until the specialty board has been provided opportunity to appeal the proposed action to the Council.

Voluntary Termination

Changes in the health care delivery system, decrease in the number of educational programs in the specialty, loss of interest on the part of the profession and/or public, or other factors may cause a recognized specialty board to discontinue operations and seek voluntarily to have its recognition withdrawn by the [Joint Committee on the Recognition of Specialty Boards](#) JCRSB.

An action to withdraw recognition based upon voluntary termination is not subject for appeal.

The [specialty](#) board is advised to provide an orderly discontinuation of the certification process in accord with the procedures specified in the Discontinuation of a Specialty Board Section of this publication.

Recognition Suspended

Should the operations of the recognized specialty board be temporarily interrupted to the extent that the future activities of the [specialty](#) board may be affected adversely, JCRSB may elect to suspend recognition of the [specialty](#) board until such a time that the [specialty](#) board can demonstrate that certification activities should be reinitiated and that the [specialty](#) board is capable of operating in an appropriate manner. The reasons for suspending recognition may be similar to the reasons that may be given to withdraw recognition; however, in determining the former action, JCRSB has been given some impression that the problems facing the [specialty](#) board may be beyond the control of the [specialty](#) board and conceivably may be ameliorated within a reasonable period of time (within 12 months).

The category of suspension of recognition will not become final until the [specialty](#) board has been provided opportunity to appeal the proposed action to the Council.

JCRSB will reevaluate the affected [specialty](#) board's status of suspended recognition within one year to determine whether recognition should be reinstated or whether notice of noncompliance and withdrawal of recognition actions should be considered.

The [specialty](#) board is required to inform candidates and applicants for certification of the [specialty](#) board's suspended status.

Administrative Probation

~~Administrative probation may be accorded automatically when a recognized specialty board fails to submit a report, a response to a request for information, or payment of a fee when requested. The category of administrative probation may be activated by the Council staff based upon a board's failure to respond to requests for information or payment of fees. The board will be notified in writing that materials and/or fees are past due and that consideration is being given to placing the board on administrative probation. If no response is received within 30 days, administrative probation will become effective.~~

~~A decision to grant administrative probation may not be appealed. Administrative probation may be removed when all requested materials are received. JCRSB will consider withdrawing recognition of the board if no response is received within 60 days. This withdrawal of recognition~~

~~will be based upon failure of the specialty board to provide requested information or payment of fees. Because the action will be viewed to be based upon a voluntary decision on the part of the board, the withdrawal of recognition may not be appealed.~~

APPEAL PROCEDURES

If an adverse action is taken, i.e., when JCRSB elects to deny, withdraw, or suspend recognition of a specialty board, the specialty board is provided an opportunity to appeal the adverse action to the Council. A request for an appeal will be accepted for cause and not be accepted solely on the basis of dissatisfaction with the adverse decision. Also, an appeal may not be accepted on the basis of modifications made by the specialty board subsequent to the determination of the adverse action.

The specialty board receives formal written notification by certified mail of the adverse action within 30 days following the meeting of JCRSB. The basis for the adverse action and the specialty board's right to request an appeal are clearly stated in the notification letter.

When JCRSB considers an adverse action, the action does not become final, nor is it published, until the specialty board has been afforded an opportunity to complete the appeal process. If the specialty board does not initiate the appeal procedures, the appeal process will be viewed to be exhausted.

During the period of appeal, the recognition status of the specialty board continues. If, as a result of the appeal, the adverse action is sustained, the effective date of the action will be no sooner than the date of the final action taken by CPME.

The specialty board may appeal the decision to a hearing committee. The appeal process followed by the Council is articulated in CPME 935b, *Guidelines for the Conduct of Appeals by Residencies, Fellowships, Providers of Continuing Education, and Specialty Boards*. The specialty board is free to pursue a substantive and/or procedural claim.

CHANGE OF SCOPE/MERGER/CHANGE OF NAME

As the podiatric medical profession evolves and as changes in health care systems, modalities, technology, and patient treatment regimens occur, specialty boards may need to modify themselves accordingly. Such modifications could result in changes in the focus and intent of the activities of the specialty board, mergers with other specialized boards, or name changes to reflect more accurately the area of specialization.

When a recognized specialty board seeks to change its scope, merge with another recognized specialty board, or change its name, JCRSB may elect to consider the specialty board's request as a reasonable change within the existing goals, objectives, and definition of the specialty board. Alternatively, if the request of the specialty board is viewed to result in a distinct and significant philosophical change in the definition and scope of the specialty area or the original intent of the specialty board, then JCRSB will require that the specialty board seek recognition as a new applicant in accord with the expectations for specialty boards seeking initial recognition. In any

event, JCRSB must give approval prior to a recognized specialty board changing its scope, merging with another recognized specialty board, or changing its name.

In the case of a significant change in the definition and scope of the specialty board that requires the [specialty](#) board to seek recognition as a new applicant, JCRSB reviews the current recognition status of the [specialty](#) board in order to determine if continued recognition is warranted.

DISCONTINUATION OF A SPECIALTY BOARD

When a recognized specialty board has its recognition withdrawn for cause, an orderly discontinuation of the certification activities will occur. The date of withdrawal will be determined by the Council based upon a recommendation of JCRSB to allow for a fair and orderly termination of certification activities.

Individuals holding status as diplomates or board qualified with a [specialty](#) board that has lost recognition will maintain all certification to the extent and the period of time certification has been granted. All individuals affected by the termination of the [specialty](#) board will be notified either by the [specialty](#) board or by public notice. Affected individuals have an ethical obligation to inform hospitals, patients, and others of the loss of recognition of the specialty board.

REAPPLICATION FOLLOWING DENIAL OR WITHDRAWAL OF RECOGNITION

A [specialty](#) board may seek to gain or regain recognition after having recognition denied or withdrawn. The [specialty](#) board will be viewed as a new applicant for recognition and must follow the procedures described in this publication accordingly. JCRSB will not consider a new application from a [specialty](#) board that has lost or been denied recognition until the next scheduled meeting of JCRSB.

CONFIDENTIALITY

All proceedings of JCRSB and the Council with respect to reports and communications regarding the review and consideration of any specialty board are held in executive session. All reports and communications regarding any proposed or recognized specialty board are confidential between the [Joint Committee on the Recognition of Specialty Boards](#), [JCRSB](#), [Council on Podiatric Medical Education](#), [CPME](#), and the [specialty](#) board.

DISCLOSURE

Decisions regarding recognition are transmitted in writing to the president and the executive director of the specialty board within 30 days of the action date.

Recognition decisions are announced in the Council's annual report, which is published on the Council's website. The Council also publishes a list of recognized specialty boards.

The Council will publish a public notice when a final action is determined with respect to denial, withdrawal, or suspension of recognition. This public notice will be distributed upon request to anyone interested in the status of the specialty board. This status also will be published in the Council's annual report and list of recognized specialty boards.

STATEMENT OF RECOGNITION STATUS

A specialty board that has been recognized by the Council on Podiatric Medical Education may use the following statement in its reference to recognition in its publications:

The (name of the specialty board) is recognized by the Joint Committee on the Recognition of Specialty Boards of the Council on Podiatric Medical Education under the authority of the American Podiatric Medical Association as the specialty board to conduct a certification process in (name of the specialty). Recognition is an indication of satisfactory compliance with the recognition criteria as well as public approbation, attesting to the competency and proficiency of the specialty board to assure that only qualified podiatrists have obtained certified status.

No other statements regarding recognition by the Joint Committee on the Recognition of Specialty Boards may be used without the permission of JCRSB.