

**Substantive Changes to CPME 820,
Standards and Requirements for Approval of Podiatric Fellowships**

Standard/Requirement	Revisions
Updates throughout the document	<ul style="list-style-type: none"> • The names of the following committees have been updated throughout the document: <ul style="list-style-type: none"> ○ Residency Review Committee (RRC) (previously the Joint Residency Review Committee (JRRC)) ○ Specialty Board Recognition Committee (SBRC) (previously the Joint Committee on the Recognition of Specialty Boards (JCRSB)) • ‘Competencies’ replaced ‘goals and objectives’ • ‘Assessment’ replaced ‘evaluation’ • ‘Performance improvement’ replaced ‘remediation’ • ‘Fellowship’ was added in front of ‘program’ to provide clarity
New Features	<ul style="list-style-type: none"> • Intent and Background statements to further clarify guidelines • A glossary of definitions has been added at the end of the document.
INSTITUTIONAL STANDARDS	

Standard/Requirement	Revisions
<p>1.0 The sponsorship and control of a podiatric fellowship program are is under the specific administrative responsibility of a healthcare institution that develops, implements, and monitors the fellowship program.</p>	<p>1.1 Revised to include sponsorship by CPME accredited college of podiatric medicine. Revised to include private practice if co-sponsored by a hospital and/or academic health center (but cannot be a sole sponsor.)</p> <p>1.2 Revised to include the one of the co-sponsors in a co-sponsored program can be a health-care agency approved by the Centers for Medicare and Medicaid Services.</p> <p>1.3 Affiliation agreement reaffirmation increased to every 10 years (from 5) <u>Addition:</u> Affiliation agreements may be signed by a designated institutional official. <u>Addition:</u> Site coordinators at affiliate sites must hold a staff appointment and be a faculty member involved actively in the program at the affiliated institution or facility. Written confirmation of this appointment, either within the affiliation agreement or in a separate document, must include the signatures of the program director and the site coordinator. <u>Addition:</u> Fellows must not participate in training at sites until the affiliate agreements are fully executed. <u>Addition:</u> The expected daily commute to each sponsoring and affiliated training site must not have a detrimental effect upon the educational experience of the fellow.</p> <p><i><u>Intent and Background:</u> Agreements are meant to ensure that fellows are protected with professional and general liability insurance. Institutions owned by the same corporate entity as the sponsoring institution may need affiliation agreements if they function independently.</i></p>
<p>2.0 The sponsoring institution ensures the availability of appropriate facilities and resources for fellowship training.</p>	<p>2.2 Replaced 'library' resources with 'education' resources. Replaced 'audio visual' with digital materials. <u>Addition:</u> Educational resources should be readily available, at no cost.</p>

Standard/Requirement	Revisions
<p>3.0 The sponsoring institution formulates, publishes, and implements policies affecting the fellow.</p>	<p>3.7 Identifies specific benefits to be provided to fellows. 3.8 Identifies specific elements to be included in fellow’s contract. 3.9 States that the sponsoring institution will ensure that fellows will not sign a non-competition guarantee or restrictive covenant with the institution or any of its affiliated training sites. 3.10 Requires a fellowship manual and the specific areas to be included. 3.11 Identifies criteria for fellowship certificate. 3.12 Provides more details on requirement of ethical conduct. 3.13 The sponsoring institution shall ensure that policies and programs are in place that encourage optimal resident well-being.</p>
<p>4.0 The sponsoring institution reports to the Council on Podiatric Medical Education regarding the conduct of the fellowship program in a timely manner and at least annually.</p>	<p>4.2 Identifies substantive changes that must be reported to the Council. <u>Addition:</u> Intent and Background.</p>
PROGRAM STANDARDS	
<p>5.0 The fellowship program has a well-defined administrative organization with clear lines of authority and a qualified faculty.</p>	<p>5.2 Updated the requirements for the position of program director of a fellowship:</p> <ul style="list-style-type: none"> • must be certified by at least one board recognized by the Specialty Board Recognition Committee and must have a minimum of three years post-residency clinical experience • sponsoring institution may, with approval by the Residency Review Committee/Chair, appoint an interim fellowship director who does not meet the stated requirements. Institutions must specify the anticipated length of time the interim director will serve, and this appointment may be subject to continued approval by the RRC. <p><i>Intent and Background:</i> <i>Leading a program requires knowledge and skills that are established during fellowship and subsequently further developed. The time period from completion of residency until assuming the role of program director allows the individual to cultivate leadership abilities while becoming professionally established. The three-year period is intended for the individual's professional maturation.</i></p>

Standard/Requirement	Revisions
<p>6.0 The fellowship program has appropriate goals and objectives competencies that are comprehensive in addressing the body of scientific knowledge underlying the fellowship and from which a curriculum of at least 12 months duration is derived and implemented. Curricular components of the program demonstrate consistency with the stated goals and objectives competencies to impart specific knowledge and values and develop specific skills to produce highly trained professionals to continue the search for innovative and improved methods to prevent disease, promote health, and more effectively manage foot and ankle pathology.</p>	<p>6.1 Addition of surgery to podiatric medicine. Addition of scholarly activities to define fellowship.</p> <p>6.2 <u>Addition:</u> The fellow should act as a junior attending, providing surgical advice and enhancing the educational training of residents.</p> <p>6.9 <u>Addition:</u> Fellows must be afforded time for didactic activities.</p> <p>6.12 <u>Addition:</u> Where an electronic format is utilized for activity logs, it must be approved and accessible to the RRC and be able to record didactic, scholarly, and clinical activities.</p>
<p>7.0 The fellowship program conducts appropriate evaluation assessment, remediation performance improvement, and self-assessment processes.</p>	