PROCEDURES FOR RECOGNITION OF A SPECIALTY BOARD FOR PODIATRIC MEDICAL PRACTICE

DRAFT 1

COUNCIL ON PODIATRIC MEDICAL EDUCATION

JOINT COMMITTEE ON THE RECOGNITION OF SPECIALTY BOARDS

AMERICAN PODIATRIC MEDICAL ASSOCIATION

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INTRODUCTION

The Council on Podiatric Medical Education (CPME) is an autonomous, professional accrediting agency designated by the American Podiatric Medical Association (APMA) to serve as the agency for the evaluation, accreditation, approval, and recognition of educational institutions, providers, programs, and specialty boards in the field of podiatric medicine.

The evaluation/recognition procedures described in this publication as well as the criteria described in CPME publication 220, *Standards and Requirements for Recognition of a Specialty Board for Podiatric Medical Practice*, serve as the primary documents used by the Specialty Board Recognition Committee (SBRC) for the review and recognition of specialty boards. The CPME approves the standards, requirements, and procedures used by the SBRC in the recognition of specialty boards.

The mission of the CPME is to promote the quality of graduate education, postgraduate education, certification, and continuing education. By confirming these programs meet established standards and requirements, the CPME serves to protect the public, podiatric medical students, and doctors of podiatric medicine.

Delete. Included in CPME 220. 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.

Certification by a specialty board serves patients, families, and the public and improves patient care by establishing high standards for assessment of professionalism, training, and knowledge of candidates for specialty certification. Specialty boards serve the public through the development and implementation of the required rigorous and relevant standards that are sensitive to advances in residency and fellowship training.

Board certification is a process to recognize individuals who have demonstrated professional development through initial certification and the process of ongoing certification. It serves to demonstrate excellence in promoting the health, welfare, and safety of the public. Initial certification occurs after completion of residency training and evaluation of clinical knowledge and skills through a rigorous standardized process. Continuous certification embodies a lifelong dedication to professional growth and education.

The CPME *Bylaws*, CPME 900, guide and direct the conduct of affairs and activities of the CPME and the SBRC and identify the specific procedures, standards, and requirements used in the conduct of the specialty board recognition process.

Throughout this document, the term “specialty board” refers to a CPME-recognized specialty board and an “applicant board” refers to a board in the process of applying for recognition.

The American Podiatric Medical Association (APMA) assigns the responsibility of specialty board recognition to the Council on Podiatric Medical Education (CPME or Council). Delete the following. Included in CPME 220: 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.

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.

In CPME 220, 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

**RESPONSIBILITIES OF THE SPECIALTY BOARD RECOGNITION COMMITTEE**

The Joint Committee on the Recognition of Specialty Boards (SBRC) is responsible for protecting and promoting the health, safety, and welfare of the public by

- formulating standards and requirements for recognition of specialty boards subject to the final approval of the CPME
- granting initial recognition of specialty boards in the field of podiatry and
- continuing recognition of specialty boards in podiatric medicine.

- 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.

The SBRC has the responsibility of

- reviewing applications, annual reports, petitions, progress reports, and requests for
The SBRC and the CPME have the authority to investigate and act on any issue brought to the specialty board’s attention.

Composition of JCRSB includes two representatives of the APMA House of Delegates (may not hold a leadership position with a recognized 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 board), to be appointed by CPME; one representative of the American Board of Foot and Ankle Surgery (ABFAS), to be appointed by ABFAS; one representative of the American Board of Podiatric Medicine (ABPM), to be appointed by ABPM; one representative of the public, to be 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 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 Council meetings. 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.

The JCRSB meets at least once a year to review (1) applications submitted by applicant boards seeking initial recognition and (2) 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 selects representatives of the public and health care community at-large for confirmation by the House to JCRSB. 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 an 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, withdrawal of previously recognized special areas of practice for which reconsideration including other topics on its agenda based on timely issues or concerns.
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.

BOARDS SEEKING INITIAL RECOGNITION

Requirements for Recognition of a New Specialty Board

- Boards seeking initial recognition by the CPME must first complete and submit an eligibility requirements application electronically to the CPME office.
  - The CPME will not consider an applicant’s request for recognition unless all eligibility requirements have been addressed to the satisfaction of the SBRC.
  - In addressing the eligibility requirements, the applicant must respond to each eligibility requirement and include any supplementary documentation that the board believes is necessary to support its responses.
  - The CPME encourages applicant boards to contact CPME staff early in the developmental stages of the board in order that full assistance in understanding the CPME’s eligibility requirements may be provided.

- CPME staff will review the eligibility application and determine if the application is complete. If the application is not complete, additional information will be requested with a specified due date.

- Following staff review, the eligibility application will be forwarded to the SBRC chair who will determine if the application is complete and ready for dissemination to the community of interest.

- The community of interest will be surveyed for a period of at least 60 days following the submission of a complete eligibility application to determine specialty area and the need for a specialty board.

- The SBRC will review the survey comments and the complete eligibility application within six (6) months.

- The SBRC will make a recommendation to the CPME. The CPME will review the eligibility application, the comments from the community of interest, and the recommendation of the SBRC, and will make an approval decision.

- The applicant board will be notified within 30 days of the CPME’s decision.

SBRC recommendations and CPME decisions include:

a) approve the eligibility application, allowing the board to proceed with submitting an application for recognition;

b) determine that additional information is needed. If an eligibility application remains incomplete for greater than six (6) months, the eligibility application will expire and must
c) deny the eligibility application based on a determination that the application does not satisfactorily address all requirements

Denial of an eligibility application is not considered an appealable action.

Flow chart example of the eligibility application process.

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**Application Process for Initial Recognition of a Specialty Board**

*Once the eligibility application has been accepted, an application for initial recognition as a specialty board must be submitted electronically to the CPME office, accompanied by specified supplementary documentation and the application fee. The application form outlines the required supplementary documentation.*

The initial recognition 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. A statement of goals, purpose, and objectives of the specialty board, including a description of the public and profession’s need served by the certification process.

d. 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-standards and requirements 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 standards and requirements and affirm compliance is not viewed to be a satisfactory response.

d. Articles of Incorporation.

e. Bylaws.

f. Names, addresses, and email addresses of the members of the board of directors.

g. The sponsoring institution and/or the specialty board’s independent certified annual audit or independent operational review for most recent fiscal year.

h. A three-year budget.

i. Nondiscrimination policy.

j. Model curriculum for advanced educational programs.

k. Requirements of education and training in the for specialty area, approval of advanced educational programs.

l. List of advanced educational programs recognized by the applicant organization.

m. Requirements for founders (if applicable) and grandfathers.

n. Requirements for certification of individual candidates (including specialty board qualification/eligibility requirements if appropriate).

o. Description of the practice analysis and the resulting content blueprint areas of content to be covered within the certification examination process with rationale for each area, including a sampling of types of questions/examination items, and the scoring protocol.

p. The name and credentials of testing services or agency contracted to develop, administer, and evaluate implement the certification examination(s), if applicable.
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. An examination policy that includes the following, but is not limited to, frequency of administration, information provided to failing candidates, reexamination policy, etc.

q. Complaint and appeal policies.

rq. The certification document to be awarded to successful candidates.

sr. A statement indicating plans process for continuous re-certification, and/or reassessment of diplomats.

t. Policy for ensuring that diplomates truthfully advertise their certification status.

u. 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 will seek such statements on its own.

JCRSB reserves the right to request additional information concerning the materials submitted, including as well as 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.

Withdrawal or Termination of the Application

A board that has submitted an application for initial recognition may withdraw its application at any time before the CPME takes action on the recognition status of the board.

If the board fails to respond in writing within six (6) months (or other specified date communicated to the board) to written requests from CPME staff and/or the SBRC for information to complete the initial recognition application, the initial recognition application will be terminated by staff. CPME staff will correspond with the executive director of the board to inform them the initial recognition application has been terminated. The board may submit a new initial recognition application, supplemental material, and application fee after the initial recognition application has been terminated.

Fee policies included later in document. 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 or review the CPME website 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 initial recognition application will be conducted by the JCRSBRC. The review may include a conference with representatives of the applicant specialty board, either in person or via videoconferencing, at the board’s own expense, to submit additional information about its application. The SBRC determines acceptability of the specialty board’s initial recognition application at its next annual meeting unless the chair of the Committee or a majority of Committee members call for an additional meeting. Such additional meetings are subject to the approval of the CPME chair and are based upon a demonstration by the proposed board that it has established or has the potential for establishing a viable specialty certification program that, when fully implemented, provides reasonable assurance of meeting the expectations for recognition.

Following review of a specialty board’s initial recognition application, the SBRC will make a recommendation to the CPME to either:

(a) approve the specialty board, with or without a request for additional information (progress report),
(b) deny recognition, or
(c) table the decision and request additional information. The SBRC and the CPME reserve the right to collect supportive data through any reasonable means considered necessary to facilitate a recognition action.

The CPME will review the specialty board’s initial recognition application at its next meeting unless the CPME chair calls for an additional meeting via video or conference call. Once the CPME has finalized their decision, the applicant specialty board will be notified of the CPME action within 30 days.

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-recommended by the JCRSBRC to the CPME 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. The JCRSBRC reviews and considers the specialty board’s annual data report and petition for continuing recognition in the light of based upon 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
(a) the specialty board’s success in accomplishing its goals and purposes,  
(b) in responding to the JCRSBRC requests for information,  
(c) in paying fees, and  
(d) in demonstrating ability and competency to continue to satisfy the criteria for recognition.

Consequently, failure of the specialty board to meet the criteria could impact the recognition status of the board 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, The Annual Report, CPME publication 240, enables the JCRSBRC 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 (i.e., complaints that rose to the level of review by the specialty boards’ board of directors) 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 CPME Council office by January 15 each year by a date to be determined by CPME staff 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, or any required elements of the annual report, could impact the recognition status of the board may be cause for withdrawal of recognition.

Petition for Continuing Recognition

The Petition for Continuing Recognition, CPME publication 250, enables the JCRSBRC 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. The information to be provided in the specialty board’s petition includes:

a. A cover letter that articulates the name of the organization, official address of the organization, telephone number, and name and signature of the administrative officer of the organization.

b. A statement of goals and objectives of the specialty board, including a description of the public need served by the certification process.

c. Bylaws.

d. Names, addresses, and email addresses of the members of the board of directors.

e. Independent certified annual audit or independent operational review for most recent
fiscal year.

f. A three-year budget.

g. Nondiscrimination policy.

h. Continuing education and competency requirements for diplomates.

i. Requirements for certification of individual candidates (including specialty board qualifications/eligibility requirements if appropriate).

   Requirements for acceptance of advanced educational training programs.

j. Dates, locations, and notification of certification examinations.

k. The name and credentials of the testing services or agencies contracted to develop, administer, and evaluate implement the certification examination(s).

l. Description of the process to field-test the examination and set the passing score.

m. 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.

n. Process for ongoing certification, recertification, and/or reassessment of diplomates.

o. An Re-examination policy that includes the following, but is not limited to, frequency of administration, information provided to failing candidates, reexamination policy, etc.

p. The certification document to be awarded to successful candidates.

q. The protocol for recertification and/or reassessment of diplomates.

r. List of all diplomates certified.

r. Names and addresses of diplomates whose certifications have been revoked and reasons for revocation.

s. 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, or any required elements of the petition,
could impact the recognition status of the board may be cause for withdrawal of recognition.

Added process. **Consideration of Continuing Recognition by the CPME**

**SBRC Review**

The SBRC reviews the annual report, petition, and/or progress report during their annual meeting or by video/conference call. The review may include a conference with representatives of the specialty board, either in person or via videoconferencing, at the board’s own expense, to submit additional information about its annual report, petition, or progress report. The SBRC recommendation is then transmitted to the CPME for consideration at their next meeting.

For each proposed recognition action to the CPME, the SBRC recommendation includes the recognition status, date by which the annual report or petition must be submitted, identification of any areas of noncompliance with the standards and requirements, and a schedule for requesting progress reports. The recommendations from the SBRC to the CPME are confidential. In reviewing an annual report, petition, or progress report, the SBRC may recommend to the CPME adding, modifying, or deleting areas of noncompliance.

**CPME Action**

At a meeting of the CPME, the SBRC chair presents for each specialty board the confidential recommendation of the SBRC. The specialty board may be requested to submit documentation of progress made in addressing areas of noncompliance and/or concerns expressed by SBRC or the CPME. Recognition actions are taken by the CPME at official meetings. Under special circumstances, e-ballots or video/conference calls may be used for specialty board recognition decisions. During discussions about the recognition status of the specialty board, CPME members deemed in conflict with a specialty board must recuse themselves from the deliberations and vote.

**Fee policies moved to later in document. 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 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 include with respect to the recognition, recognition or continued recognition, recognition with report, probation.
or denial of initial recognition, withdrawal of recognition, or suspension of recognition include the following alternatives. Actions taken with respect to these categories require a two-thirds majority vote of JCRSB.

All recognition categories are detailed below.

**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. The SBRC and/or the CPME may request additional information for review at its next meeting.

**New recognition category: Recognition with Report**

Recognition with report is a recognition category granted to a specialty board that is in substantial compliance with the CPME’s standards and requirements for recognition but may have been cited with one or more areas of noncompliance. As a condition of continued recognition, the specialty board may be requested to provide one or more progress reports at specified intervals, as indicated in the CPME action. The CPME action letter will include the specific standard and requirement with which the specialty board is in noncompliance and the materials that SBRC has requested to address the area(s) of noncompliance.

The progress report(s) is to demonstrate correction of specific areas of noncompliance in meeting one or more requirements, to address concerns identified by the SBRC and the CPME, to allow for further monitoring of issues of concern, and/or to answer questions arising from review of the progress report. Failure to meet the requirements as stated by the CPME may result in probation. The notice of noncompliance is not an action that may be appealed.

**Notice of Noncompliance Probation**

This category indicates when a recognized specialty board is viewed to be in noncompliance with one or more of the recognition criteria standards and requirements of the Council-CPME to the extent that the effectiveness and proficiency of the specialty board is in jeopardy. This category indicates that JCRSB is considering withdrawal of recognition of the specialty board due to the reported area of noncompliance unless the specialty board can provide explicit and demonstrable reasons for not correcting the area of noncompliance.

Probation serves as a strong warning to the specialty board that serious problems exist that could cause the specialty board to fail. When a specialty board is placed on probation, the board is considered to be a candidate for withdrawal of recognition. The specialty board must provide evidence of significant progress in correcting the area(s) of noncompliance within a specified period. This period of probation is to be determined by the CPME but is usually limited to a maximum of two years. Failure to meet the requirements as stated by the CPME during the two-year period, including any extension for good cause, will result in withdrawal of recognition. A decision to place a specialty board on probation is not subject to the CPME’s procedures for
procedural reconsideration, reconsideration, or appeal. The specialty board is required to verify to the CPME, in writing, that all current diplomates or candidates for board qualification/eligibility of certification have been notified of this recognition status (see Notification of Action).

The CPME may elect to extend the two-year year probation period for the following good causes:

- Change in executive director
- Demonstration of progress on a plan whose fulfillment would require an extension in time
- Other substantive financial or administrative changes which affect the operation of the specialty board

This period of extension is to be determined by the CPME but is usually limited to a maximum of two additional years. Failure to meet the requirements as stated by the CPME during the two-year period, including any extension for good cause, will result in withdrawing recognition.

For notice of nonecompliance 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 nonecompliance 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.

Denial of recognition is determined in the event that an applicant board seeking recognition demonstrates substantial noncompliance with the CPME’s standards and requirements for recognition. When the CPME proposes denying recognition of an applicant board, factors that have a significant impact on the effectiveness of the board are identified as the basis for the action. A decision to deny recognition will not become final or be published until the processes of procedural reconsideration, reconsideration, and appeal are exhausted (see Procedural Reconsideration, Reconsideration, and Appeal).

Withdrawal of Recognition

This category indicates that the specialty board does not meet the recognition criteria of the CPME 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. When the CPME considers an action to withdraw recognition, factors that have a significant impact on the effectiveness of the specialty board are identified as the basis for the action. A decision to withdraw recognition will not become final or be published until the
processes of procedural reconsideration, reconsideration, and appeal are exhausted. Reconsideration and appeal are available only to specialty boards on probation that have failed to correct areas of noncompliance (see Procedural Reconsideration, Reconsideration, and Appeal).

When the CPME proposes to withdraw recognition of a specialty board, the specialty board is required to verify to the CPME, in writing, that all current diplomates or candidates for board qualification/eligibility of certification have been notified of this recognition status (see Notification of Action).

**Voluntary Termination**

Changes in the health-care delivery system, decrease in the number of advanced 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 JCRSB. An action to withdraw recognition based upon voluntary termination is not subject to 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, the JCRSBRC may recommend to the CPME 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, JCRSBRC 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.

The JCRSBRC 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/probation and withdrawal of recognition actions should be considered. The category of suspension of recognition will not become final until the specialty board has been provided opportunity processes of procedural reconsideration, reconsideration, and appeal are exhausted to appeal the proposed action to the Council (see Procedural Reconsideration, Reconsideration, and Appeal).

The specialty board is required to inform candidates and applicants for board qualification/eligibility of certification of the specialty board’s suspended status (see Notification of Action).
**Voluntary Termination**

Changes in the health care delivery system, decrease in the number of advanced educational programs in the specialty, loss of interest on the part of the profession and/or public, or other factors may cause a specialty board to discontinue operations and seek voluntarily to have its recognition withdrawn by the CPME. An action to withdraw recognition based upon voluntary termination is not subject to 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.

**New information provided concerning notifications from CPME.**

**NOTIFICATION OF ACTION**

Within a reasonable period following each of the CPME’s semi-annual meetings, a letter indicating the CPME action is forwarded to each specialty board currently under consideration. Confidential correspondence regarding CPME actions is addressed to the executive director and president of the specialty board.

When the CPME action is to place the specialty board on probation, to continue probation, to deny recognition, to suspend recognition, or to withdraw recognition, the letter to the executive director is sent by email and delivered via trackable delivery service such as FedEx, UPS, or USPS. Letters to deny, suspend, or to withdraw recognition are forwarded to the executive director within 30 calendar days of the CPME action.

Each action letter indicates the recognition status of the specialty board and the due date of the next annual report, progress report, or petition, unless the action is to deny, suspend, or withdraw recognition. When the CPME takes an action and requests submission of a progress report, the letter identifies the reason(s) for taking the action. The letter outlines the necessary information that must be submitted for SBRC and the CPME to review the recognition status of the specialty board at future scheduled meetings, as well as the date on which this information is due in the CPME office.

**Probation.** When the CPME places a specialty board on probation, the specialty board is required to verify to the CPME, in writing (electronic submission is acceptable), that all current diplomates or candidates for board qualification/eligibility of certification have been individually notified of this recognition status. (See Disclosures.)

**Denial, Suspension, or Withdrawing Recognition.** When the CPME considers denying, suspending, or withdrawing recognition, the letter advising the specialty board of the proposed action contains:

1. the specific reason(s) for taking the proposed action,
2. the date the action becomes effective unless a request for procedural reconsideration or reconsideration is received from the specialty board,
3. the right of the specialty board to request procedural reconsideration, reconsideration, and appeal and the date by which such a request must be received by the CPME; and
4. the specialty board’s obligation to inform every current diplomate and candidate for
New Procedures added. PROCEDURAL RECONSIDERATION, RECONSIDERATION, AND APPEAL

The following reconsideration and appeal procedures are available if the CPME proposes denying, suspending, or withdrawal of recognition:

• Procedural reconsideration, followed by reconsideration, followed by appeal, or
• Reconsideration, followed by appeal.

A request to initiate the processes of procedural reconsideration, reconsideration, or appeal will be accepted for cause and will not be accepted solely on the basis of dissatisfaction with the proposed adverse action, nor will it be accepted on the basis of modifications made subsequent to the determination of the adverse action. A specialty board that conforms to CPME standards, requirements, and/or procedures following determination of an adverse action (resulting in denying, suspending, or withdrawing recognition) will be viewed as a new specialty board and will be required to follow the application procedures described earlier in this publication.

The specialty board receives formal written notification of the adverse action following the action of the CPME. The basis for the adverse action and the specialty board’s right to request procedural reconsideration, reconsideration, and appeal are stated clearly in the notification letter.

When the CPME considers an adverse action, resulting in denying, suspending, or withdrawing recognition, the action does not become final, nor is it published, until the specialty board has been afforded an opportunity to complete the processes related to procedural reconsideration, reconsideration, and/or appeal. If the specialty board does not initiate the procedural reconsideration, reconsideration, or appeal processes, then the specialty board’s rights to due process through the CPME are viewed to be exhausted.

During this due process period, the recognition status of the specialty board reverts to the status prior to the adverse action. If the CPME sustains an action to deny, suspend, or withdraw recognition, the final action becomes effective as determined by the CPME but will not be fewer than 60 days and not more than one year following the date of the action.

Procedural Reconsideration

Procedural reconsideration is the process that allows the specialty board the opportunity to request that the CPME review the proposed adverse action for the purpose of determining whether the CPME or the SBRC failed to follow CPME procedures described in this publication. Because procedural reconsideration is designed for the review of errors in the application of CPME procedures, matters of disagreement related to issues of substance will not be reviewed within the procedural reconsideration process. Such matters, however, may be identified as the basis for a request for reconsideration and/or appeal.

A request for procedural reconsideration must be submitted by email and also delivered via
trackable delivery services such as FedEx, UPS, or USPS, within 30 calendar days following receipt of the notification letter. If such a request is not submitted and postmarked or date stamped within this 30-day period, the CPME considers the specialty board to have waived all rights to procedural reconsideration. The request for procedural reconsideration must identify the procedure(s) in question and describe in detail the specialty board’s claim that the procedure(s) was not followed, including any documentary evidence to support the claim. Following review by CPME staff, the request for procedural reconsideration is considered by the CPME’s Executive Committee by virtual/conference call or meeting. The CPME staff acknowledges in writing the receipt of all procedural reconsideration materials. Based on a recommendation of the Executive Committee, a decision may be made by the CPME, either by virtual/conference call or meeting to: (1) sustain the previous action; or (2) rescind the previous action and refer the matter for additional review by the SBRC. The executive director of the specialty board is notified of the procedural reconsideration action no later than 30 calendar days following the next meeting of the CPME.

Reconsideration

Reconsideration is the process that allows the specialty board the opportunity to request that the SBRC and the CPME review the proposed adverse action for the purpose of determining whether any error or omission occurred in making the decision. Additional information provided by the specialty board following the proposed adverse action will not be considered by the SBRC or CPME. A request for reconsideration must be submitted by email and also delivered via trackable delivery services such as FedEx, UPS, or USPS, within 30 calendar days following receipt of the notification letter. If such a request is not submitted and postmarked or date stamped within this 30-day period, the CPME considers the specialty board to have waived all rights to reconsideration and subsequent appeal.

The request for reconsideration must include specific facts and reasons for which the specialty board contends the adverse action should not be taken. The CPME staff acknowledges in writing the receipt of all reconsideration materials. Following review by CPME staff, the materials are considered by the SBRC by virtual/conference call or at its next meeting. Reconsideration related to denial, suspension, or withdraw of recognition must be considered by the SBRC at its next meeting following the original determination.

Based on a recommendation of the SBRC, a decision to sustain or rescind a proposed action to deny, suspend, or withdraw recognition is considered by the CPME at its next scheduled meeting. The executive director of the specialty board is notified of the reconsideration action no later than 30 calendar days following the next meeting of the CPME.

During the reconsideration process, a representative(s) of the specialty board under reconsideration may request in writing the opportunity to provide a statement to the SBRC regarding the proposed adverse action. Any additional information that is to be brought to the attention of the SBRC must be submitted to the CPME office prior to the meeting.

All information concerning appeals is included in CPME 935b. Appeal

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.

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

**Moved to SUBSTANTIVE CHANGES TO BE REPORTED FOR CONTINUED RECOGNITION. 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-LOSS OF CPME-RECOGNITION 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 CPME, but will not exceed five (5) years, and will be based upon a recommendation of JCRSBRC to allow for a fair and orderly termination of certification activities. If the specialty board chooses to continue its certification activities, it must advertise that the board and its activities are no longer recognized by the CPME.

Individuals holding status as diplomates or board qualified/eligible 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 loss of CPME recognition of the specialty board will be notified either by the specialty board and/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. The application will be reviewed during JCRSB will not consider a new application from a specialty board that has lost or been denied recognition until the next scheduled meetings of the JCRSBRC and the CPME.

Detailed information provided concerning substantive changes. **SUBSTANTIATIVE CHANGES TO BE REPORTED FOR CONTINUED RECOGNITION**

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 make substantive changes. Specialty boards may contact CPME staff for guidance to determine whether the change rises to the level of a substantive change. If a specialty board wishes to implement a substantive change, the specialty board must receive prior approval from the CPME before implementing the substantive change to continue recognition (except in the case of the appointment of a new executive director). Substantive changes that must be reviewed by the SBRC and approved by the CPME prior to implementation include the following:

- Changes in the focus and intent of the activities of the specialty board;
- Changes in the certification process;
- Mergers and acquisitions with other specialized boards;
- Name changes to reflect more accurately the area of specialization; or
Other changes that rise to the level of a substantive departure from or addition to the specialty board’s current activities.

When a specialty board seeks to change its scope, merge with another specialty board, or change its name, the CPME 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, the CPME may 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, the CPME must provide prior approval of a specialty board changing its scope, merging with another specialty board, changing the certification process, 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, the SBRC reviews the current recognition status of the specialty board in order to determine if continued recognition is warranted.

If a specialty board modifies an existing certification or changes its name without prior approval of the CPME, it will be subject to loss of recognition.

The CPME must be notified of the appointment of a new executive director and president of the specialty board within 30 days.

The specialty board submitting for a substantive change must provide a report to the SBRC and CPME 60 days prior to the SBRC annual meeting when it will be reviewed to include the following:

- Rationale for the change
- Analysis of the change, both positive and negative
- Governing board discussion and approval
- Impact on the specialty board including governance, finances, services

The specialty board’s substantive change will be monitored as appropriate to include:

- Governing body bylaws and/or policies and procedures
- Continued analysis of the change, both positive and negative

**New Section** NEW SUBSPECIALTY CERTIFICATION

Subspecialty certification relates to a specific component of a specialty to which a practicing podiatric physician may devote a significant portion of time. CPME does not recognize certificates of added qualification (CAQs).

Specialty boards can only offer their primary certification(s) and subspecialty certification(s). Specialty boards cannot offer certificate of added qualification (CAQ), focused areas of practice,
or other forms of recognition, only primary and subspecialty certifications.

Subspecialty certification incorporates a specific and identifiable body of knowledge that may include certain procedural skills or practice modes but must not be limited only to training in a technical skill.

Specialty boards may issue subspecialty certification in the fields represented by such specialty boards.

**Process to Submit a Proposal for a Subspecialty Certification**

- Prior to submitting a proposal for a subspecialty certification to the SBRC and the CPME, the specialty boards must first consult among themselves, formally and in writing, to determine interest and willingness to collaborate.

- The proposal from a specialty board for a new subspecialty certification is forwarded to the CPME staff.

- CPME staff will review the proposal for a subspecialty certification and determine if the proposal is complete. If the proposal is not complete, additional information will be requested with a specified due date.

- Following staff review, the proposal will be forwarded to the SBRC chair who will determine if the submitted proposal is complete and ready for dissemination to the community of interest.

- The community of interest will be surveyed for a period of at least 60 days following the submission of a new subspecialty certification. These comments will be forwarded to the SBRC and CPME.

- The SBRC will review the survey comments and the complete proposal for a subspecialty certification within six (6) months.

- Prior approval of the CPME is required if any specialty board proposes creation of a new subspecialty certification.

- All existing qualifications/certifications beyond primary certification cannot continue to be offered without the prior approval of the CPME.

**EXTENSION, ALTERNATIVE PATHWAYS, AND TRANSITION OF RESIDENCY PROGRAM REQUIREMENTS AND BOARD CERTIFICATION POLICIES**

**Extension Policy**

The Specialty Boards must establish a well-defined and transparent extension policy for those candidates and certificants who because of extenuating circumstances (e.g., pregnancy,
maternal/paternal leave, illness, military service), cannot meet the initial/continuous certification
requirement timelines.

**Alternative Pathways and Transition of Residency Program Requirements and Board Certification Policy**

The Specialty Boards must develop policies to allow those who did not complete a PMSR, PMSR/RRA or PM&S-36 residency program to apply for board certification.

**CONFIDENTIALITY**

The CPME maintains the confidentiality of written and orally presented information received or produced as a result of the recognition process, including, but not limited to, materials, reports, letters, and other documents prepared by the specialty board, the CPME, or other entities relative to the evaluation, recognition, or follow-up and ongoing review of a specialty board. The public disclosure of certain information, including the results of final recognition actions, is noted in the following section. (See Disclosures.)

All proceedings of the SBRC and the CPME with respect to determining recognition status of a specialty board are held in executive session.

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 JCRSB, 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 CPME Council’s annual report, which is published on the CPME Council’s website. The Council-CPME also publishes a list of recognized specialty boards along with the recognition status and any areas of noncompliance of the specialty board on the CPME website.

The Council-CPME will publish a public notice when a specialty board is placed on probation or a final action is determined with respect to denial, withdrawal, or suspension, or withdrawal 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-CPME annual report and list of recognized specialty boards.

The specialty board must provide written notification to each of their diplomates that includes the reasons for the probation action. The probation status and the reason for probation will be listed on the CPME website.
STATEMENT OF RECOGNITION STATUS

Recognition is an indication of satisfactory compliance with the recognition standards and requirements as well as public approbation, attesting to the competency and proficiency of the specialty board to assure that only qualified podiatric physicians have obtained certified status. The process of board certification involves ongoing assessment to encourage continuous learning. It calls on podiatric physicians to demonstrate their knowledge, skill, and professionalism throughout their careers.

A specialty board that has been recognized by the Council on Podiatric Medical Education must 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.

New Section. REVIEW OF FORMAL COMPLAINTS

A mechanism exists for reviewing formal complaints against specialty boards. The CPME reviews only those complaints related to the alleged noncompliance of a specialty board with the CPME’s standards and requirements. The mechanism for reviewing formal complaints is specified in CPME 925b, Complaint Procedures.

New Section. NONDISCRIMINATION POLICY

The CPME prohibits discrimination related to all of its activities on the basis of sex, creed, race, national origin, age, color, sexual orientation, gender identification, political belief, disability, or any other factor protected by law.

New Section. DOCUMENT REVIEWS

The standards, requirements, and procedures of the SBRC are developed by an ad hoc committee of the SBRC and adopted by the CPME. CPME conducts a comprehensive review of its procedural documents six years following completion of its last comprehensive review. The comprehensive review is completed by a CPME-appointed Ad Hoc Advisory Committee as prescribed in the CPME Bylaws.

Along with the comprehensive review, an interim review of the standards and procedures
documents occurs three years after the last comprehensive review. The purpose of the interim review is to “fine-tune” any areas of the documents that may not be functioning appropriately, rather than to propose major changes in direction or philosophy, which would be within the purview of the Ad Hoc Advisory Committee and the CPME during its next major review.

Following the comprehensive review and the interim review, the results are transmitted to the CPME. Before any substantive changes become final, the CPME disseminates proposed revisions in policies, standards, requirements, and procedures for comment to the community of interest. The CPME will afford the community of interest a defined period of time to comment on the proposed changes and will take into account any comments received on the proposed changes. If the CPME determines that additional document revisions are needed based on review of the comments received, the additional revisions will be forwarded to the community of interest for another comment period. See CPME Policies and Miscellaneous Documents for further information.

Issues that arise outside of the document review schedule will be reviewed by the SBRC and CPME and may result in policy changes or emergency additions to the standards, requirements, and procedures.

FEES

CPME reserves the right to develop and adjust fees for recognition as necessary. The fee schedule is posted on the CPME website, and modifications in the fee schedule are posted to the website at least six months in advance of the effective date for implementation. Nonpayment of fees may impact the specialty board’s recognition status. The Council reserves the right to deny recognition or to withdraw recognition from any proposed or existing specialty board that, after due notice, fails to pay its fees. Fees paid to CPME are nonrefundable.

Application Fee

The CPME charges an application fee. The applicant should contact CPME staff or review the CPME website in order to ascertain the current fee schedule.

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 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.

New Section. Glossary
**Americans with Disabilities Act (ADA)** is a federal civil rights law that prohibits discrimination against people with disabilities in everyday activities and requires accommodations to board certification candidates with documented disabilities (e.g., learning and reading disabilities; physical disabilities; visual impairments) or in other situations (e.g., extra break time for nursing mothers). Board certification candidates should be provided with information describing the documentation to be submitted with the request for accommodations and the timeframe within which an accommodation decision will be made. Procedures for responding to these requests should be equitable and consistent and should include a mechanism for handling candidate appeals of these decisions.

**Applicant Board** refers to a board in the process of applying for recognition.

**Continuing professional development (CPD)** activities are structured learning experiences that professionals participate in to maintain and enhance their knowledge, skills, and competence throughout their careers. These activities help them stay updated with the latest advancements in their field, adapt to changing industry standards, and improve their overall performance.

**Knowledge, Skills, and Abilities (KSAs)** within podiatric medicine are achieved through completion of intensive study and extended clinical experiences beyond the professional degree.

**Primary Certification** refers to a distinct and well-defined field of podiatry. Podiatric physicians earn primary board certification when they meet all requirements of the specialty certifying board.

**Specialty Board** refers to a CPME-recognized specialty board that awards board certification to its diplomates. Specialty boards have the ultimate responsibility of identifying qualified practitioners who have successfully completed approved postgraduate training and passed a rigorous examination that attests to advanced skills and knowledge.

**Subject Matter Experts (SMEs)** refer to individuals who hold expertise and knowledge in a specific subject.

**Subspecialty Certification** relates to a specific component of a specialty to which a practicing podiatric physician may devote a significant portion of time and incorporates a specific and identifiable body of knowledge that may include certain procedural skills or practice modes but must not be limited only to training in a technical skill.

**Systems-Based Practice** requires physicians to demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Physicians are expected to:

- Work effectively in various health care delivery settings and systems relevant to their clinical specialty;
- Coordinate patient care within the health care system relevant to their clinical specialty;
- Incorporate considerations of cost awareness and risk benefit analysis in patient care;
- Advocate for quality patient care and optimal patient care systems;
- Work in inter-professional teams to enhance patient safety and improve patient care quality; and
• Participate in identifying system errors and in implementing potential systems solutions.