

Final Deliverable

O&P LABORATORY & EDUCATION STANDARDS



Department of Veterans Affairs

May 29, 2002

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Booz | Allen | Hamilton

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- Examples of Leading Practices in VA for:
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- Survey Results by Facilities
- American Board for Certification in Orthotics and Prosthetics Inc. Standards of Performance Manual
- Board for Orthotist/Prosthetist Certification:
 - Application and Affidavit for Facility Accreditation
 - Candidate Handbook

I. EXECUTIVE SUMMARY

This report provides detailed information on the various issues impacting the veterans affairs medical centers related to standards for Orthotic and prosthetic (O&P) services

- Booz Allen Hamilton was contracted by the Department of Veterans Affairs (VA) to review industry standards for Orthotic and Prosthetic providers and facilities, and determine how VA laboratories fared in comparison to these standards
- To do so, the Booz Allen team met with representatives from the 2 national accreditation bodies, gathered information through literature review, conducted interviews through site visits, and utilized an internet survey developed specifically for this study
- There are several key findings related to how VA O&P laboratories fare, with regards to accepted industry standards as well as to the standards that VA requires of its contracted O&P services
 - There are 52 O&P laboratories within the VA system, as self-reported through the Internet survey
 - The majority of VA O&P laboratories have at least one industry-certified O&P provider
 - Only 5 VA O&P laboratories are accredited
 - VA does not require its O&P staff to be certified but requires that contracted vendors be industry certified
 - VA does not require its laboratories to be accredited but requires that contracted vendors have facility accreditation

The Booz Allen team developed recommendations, based on the various findings, to assist VA in raising the standards for O&P services provided in VA laboratories

- Mandatory facility accreditation of all O&P Labs will serve to validate the quality of services provided to veterans; our recommendations have been developed to assist VA in obtaining facility accreditation
- Recommendations focus on efforts that address key standards that affect facility accreditation
 - Central Office (CO) should add specific questions related to O&P services to the National Prosthetic Patient Satisfaction Survey (NPPSS) and ensure that results are provided to individual facilities in a timely manner, to assist in improvement efforts
 - CO may also consider developing a dedicated O&P patient satisfaction survey instrument, for individual VA Medical Centers to administer, either in lieu of or in addition to the NPPSS
 - VA should develop a formal quality improvement plan specifically for the O&P lab
 - PSAS should continue to use the VA contract templates for Orthotic appliances and artificial limbs, as the contractual requirements include industry standards

O&P Laboratory Standards...Executive Summary...

- VA should focus on recruitment and retention of certified staff, to ensure that each VA O&P lab has at least one certified staff member supervising O&P care
- PSAS should develop clinical standards of care for the provision of O&P services

II. INTRODUCTION AND METHODOLOGY

The Department of Veterans Affairs (VA) provides Orthotic and Prosthetic services to veterans through in-house laboratories and private sector vendors

- VA provides Orthotic and Prosthetic services to their veterans through a variety of ways:
 - Some Veterans Affairs Medical Centers (VAMCs) operate their own Orthotic/Prosthetic Laboratory
 - Some VAMCs contract out to vendor laboratories in order to provide these services to their patient population
 - Some VAMCs contract out to commercial providers to provide Orthotic/Prosthetic care and services for their veterans within the VAMC laboratory
- VA requires *contracted* vendors to meet specific professional and facility standards in order to provide services to their veterans
- In 2001, VA Orthotic and Prosthetic laboratories provided a total of 130,887 Orthotic and Prosthetic products to veterans

The key question of this study is whether VA meets the same certification and education standards for Orthotic and Prosthetic laboratories as private industry

- Booz Allen Hamilton was contracted by VA to answer the following questions:
 - What are the standards set by VA for its O&P laboratories?
 - What industry certification and education standards does VA require of its contracted laboratories?
 - What are the established industry standards for certification of providers and accreditation of facilities?
 - To what extent do VA O&P laboratories meet industry standards?

The Booz Allen team utilized a methodology to answer the study question that incorporates literature review, primary data collection and site visit interviews

- The Booz Allen team reviewed literature and conducted interviews to determine standards for both the Orthotic/Prosthetic ***provider*** and the Orthotic/Prosthetic ***facility***:
 - *Provider* certification standards from the two American certifying bodies, American Board for Certification in Orthotics and Prosthetics (ABC) and Board of Orthotist/Prosthetist Certification (BOC)
 - *Facility* accreditation standards from ABC and BOC
 - VA requirements for the VA position of Orthotist and/or Prosthetist
 - VA standards for VA Orthotic/Prosthetic laboratories

- VA standards for *contracted* Orthotic/Prosthetic services
- The Booz Allen team conducted an Internet survey to:
 - Determine which VAMCs have an internal O&P lab, and which of these laboratories are “fully functioning” O&P laboratories
 - Determine the extent to which VAMCs are meeting industry certification and accreditation standards for O&P lab staff and O&P laboratories
- The Booz Allen team conducted 7 site visits to supplement research and survey results:
 - Hines, IL – Richmond, VA – West Palm Beach, FL
 - Atlanta, GA – New York, NY – Miami, FL
 - Seattle, WA

The Booz Allen Team gathered information on VA O&P Laboratory services through an Internet survey

- The Booz Allen team conducted an Internet survey using Survey Pro software, to:
 - Identify which VAMCs operate O&P laboratories
 - Identify which VAMCs contract out for O&P services
 - Determine the extent to which VAMCs meet certification standards for O&P staff
 - Determine the extent to which VAMCs meet accreditation standards
 - Identify areas for improvement within VA’s O&P laboratories
- The internet survey was sent primarily to PSAS chiefs at 146 VAMCs, excluding VAMCs in Puerto Rico, Guam and the Virgin Islands; the survey may have been completed by other staff members, as delegated by the PSAS chief
- The Booz Allen team sought results from **each** individual VAMC, regardless of whether the facility had a laboratory
 - Each VAMC was asked to indicate whether it had its own O&P lab and if not, the method by which O&P services were provided to its patient population
 - Some responses came from outpatient facilities and integrated health care systems
 - The Booz Allen team reviewed the data to reflect results **only** from VAMCs
- The Internet Survey was completed on January 16, 2002

The Internet survey included responses from a vast majority of VAMCs

- 131 out of 146 VAMCs responded to the Internet survey, accounting for a 90% response rate

- Although there were 131 surveys submitted, not every question within each survey was answered; therefore, the results reflect varying response rates per question
- The following VAMCs did not respond to the Internet survey:

Tuskegee, AL
Battle Creek, MI
Fort Wayne, IN
Marion, IN
Ann Arbor, MI

Columbia, MO
Poplar Bluff, MO
Lincoln, NE
Northport, NY
Chillicothe, OH

Coatesville, PA
Wilkes Barre, PA
Memphis, TN
Murfreesboro, TN
Big Spring, TX

The Booz Allen team was confronted with several limitations when conducting the internet survey and addressed each limitation to ensure the highest accuracy of the data collected

- A major limitation of the study was the inconsistency in the number of respondents per survey question, due to the complexity of the organization of VAMCs and integrated health systems within VHA
- The Booz Allen team adjusted the number of facilities surveyed when there was one response encompassing results for an entire healthcare system. For example:
 - The response received from the New York VAMC encompassed all of the VISN 3 hospitals, i.e., New York, Brooklyn, Bronx, East Orange, Lyons, Castle Point & Montrose VAMCs
- The Booz Allen team followed up with some respondents to gain clarification when necessary
- Another limitation was that respondents did not answer all questions applicable to their facility and/or answered questions that did not apply to their facility

III. FINDINGS

The two certifying bodies for Orthotics and Prosthetics have separate sets of standards addressing professional certification and facility certification

- **ABC** has the following goals through facility accreditation:
 - “Promotion of the welfare of physically challenged by establishing standards in fitting prostheses and orthoses in an adequate and clean facility and proficiency in services”
 - “Assistance and encouragement to persons in the profession and business of fitting orthoses and prostheses to achieve and maintain the professional and business standards to be promulgated”
 - “Encourage and promote high standards of workmanship, the maintenance of adequate facilities, use of adequately trained personnel, and honest dealings and fair trade practices by persons fitting prostheses and orthoses.” (ABC’s Orthotic & Prosthetic Patient Care Management and Facility Accreditation Program – Standards of Performance Manual 2001)
- **BOC** has a two-fold mission, emphasizing “the development and promotion of policies and procedures to assure patients, physicians and the public of the competence of BOC-Certified practitioners and to ensure the availability of comprehensive Orthotic, prosthetic and habilitative services in safe practice environments.” (BOC’s Candidate Handbook 2001)

The professional certification standards vary in the criteria for each requirement

- Both organizations developed standards focusing on professional staff, facility and supplier compliance
- Both certifying bodies have professional standards addressing eligibility prerequisites, examinations and continuing education requirements
- The table presented on the following pages illustrate the differences in professional certification requirements for the 2 certifying bodies

Comparison of O&P Professional Certification Requirements

PROFESSIONAL CERTIFICATION REQUIREMENTS	ABC	BOC
Eligibility Prerequisites	4 pathways: 1) Baccalaureate Degree in orthotics and/or prosthetics from a CAAHEP ¹ accredited program and 12 mo. NCOPE ² accredited residency program, OR a NCOPE-accredited program and 1900 hr. clinical experience supervised by an ABC practitioner 2) Baccalaureate Degree in any major and O&P certification from either an CAAHEP- or NCOPE-accredited program plus 1 year NCOPE accredited Clinical Residency Program with CAAHEP track, or 1 year (1900 hours) clinical experience under supervision of ABC-certified practitioner with the NCOPE track 3) Foreign degree equivalent to a baccalaureate in orthotics and prosthetics and 1900 hrs. clinical experience supervised by an ABC practitioner or a foreign degree equivalent to a baccalaureate degree in any major with the same requirements of path #2 4) Unique Qualification category: having worked in the field for 10 years or more, meeting required hours of academic credits as well as CE credits	<ul style="list-style-type: none"> • Baccalaureate Degree in O& P, or • Associate Degree in related field, or • Two or more years of O&P education, training and/or supervised work experience, including intensive study. • In addition, all applicants must document a minimum of 2 years (3800 hours) of experience providing direct patient services under direct supervision of a BOC or ABC certified practitioner.
Examinations	<ul style="list-style-type: none"> • Written exam – 150 questions (3 hr. exam) • Written Simulation, 6 Case Scenarios (3 hr. exam) • Clinical Patient Management (over 3 days) 	<ul style="list-style-type: none"> • Written exam – 150 questions • Clinical Simulation, 8 Case Scenarios • Clinical Patient Management Exam by video of 6 prescribed tasks in each discipline
Continuing Education (CE)	<ul style="list-style-type: none"> • Minimum 75 Professional CE Credits within a 5 year period for either orthotist or prosthetist (single discipline) or 100 Professional CE Credits for dual discipline during the 5 yr. certification cycle 	<ul style="list-style-type: none"> • 45 CE credits minimum from approved programs over a 3 yr. Period
Renewal Timeframe	<ul style="list-style-type: none"> • Every 5 years 	<ul style="list-style-type: none"> • Annually

¹ CAAHEP: Commission on Accreditation of Allied Health Education

² NCOPE: National Commission on Orthotic and Prosthetic Education

ABC and BOC standards for facilities are recognized by various established accrediting boards, and focus on similar but also distinct areas of patient care

- **ABC** accreditation standards are closely aligned with those of JCAHO, the Rehabilitation Accreditation Commission (CARF), and the Accreditation Association for Ambulatory Health Care
 - ABC concentrates on processes evolving from established standards and programs, addressing not only O&P labs but also the lab’s integration within its larger organization (including physicians, administration and the Board)
 - ABC standards emphasize the patient’s right to participate in decisions and to receive education about his/her care
- **BOC** standards are recognized by Occupational Safety and Health Administration (OSHA), Americans with Disabilities Act (ADA), Centers for Medicare and Medicaid Services (CMS), and the Rehabilitation Accreditation Commission
 - BOC standards focus on local, state and national laws
 - BOC standards focus specifically on the facility requirements, patient privacy, infection control practices, and environmental safety

The certifying boards charge different fees for certification and accreditation

- The two boards charge varying amounts for professional certification and facility accreditation fees

TYPE OF CERTIFICATION	ABC	BOC
Professional Fees – includes application and exam fees	\$1350	\$825 Orthotist \$950 Prosthetist
Facility Fees	\$325 – application fee every 3 years, plus \$600/year	\$ 350 Initial fee \$ 275 Renewal fee

ABC and BOC facility standards are similar in some areas and unique in others; VA laboratories meet a variety of these standards at different levels

- The comparison table on the next few pages illustrates the specific ABC and BOC standards used in the internet survey to determine how well VA O&P laboratories meet industry standards
- The standards presented here are condensed from the more specific, detailed requirements found in ABC and BOC standards
- The percentage of standards met by VAMCs, as self-reported and calculated from survey results, is included in the third column of the table

- The VA-specific columns which are left blank reflect standards which were not directly tied to survey questions
 - Certain standards were not included in the survey because the standard was not amenable to survey questioning
 - Other standards, such as those relating to billing and reimbursement standards, are not applicable to VA at this time

Comparison of ABC and BOC Standards

AREA ADDRESSED	ABC	BOC	RAW NUMBER OF VA LABS MEETING STANDARD	% OF VA LABS MEETING STANDARD
Pt mgmt policies and procedures exist at each site	√		28/52	54%
Policy establishing time frame between referral and first encounter	√		25/52	48%
Orthotic and/or prosthetic care is the responsibility of and is provided under the direct supervision of a qualified, certified practitioner staff member	√	√	38/52 have ABC or BOC 25/52 have ABC 13/52 have BOC	73% 48% 25%
Appropriate services are available in the facility to respond to patient emergencies	√		45/52	87%
Communication system to promote the orderly reporting of pt care info to and from referring and consulting physicians	√		51/52	98%
Pt record system for prompt retrieval of information	√	√	50/52	96%
Pt records are legible, documented in a timely manner, readily accessible to practitioners	√	√	48/52	92%
Supports the rights of each patient	√	√	43/52	88%
Periodic patient satisfaction assessments about the performance of the org. and services provided are completed	√	√	24/52	46%
Pt and/or family education is provided regarding orthotic/prosthetic care and mgmt	√	√	41/52	79%
Appropriate patient follow-up care is provided	√	√	45/52	87%
Ongoing quality assessment and improvement program to monitor and evaluate the quality of care, to improve care and resolve identified problems	√	√	49/52	94%
Emergency preparedness	√		49/52	94%
Smoking policy	√		50/52	96%
Safety management	√	√	52/52	100%

Comparison of ABC and BOC Standards (cont'd)

AREA ADDRESSED	ABC	BOC	RAW NUMBER OF VA LABS MEETING STANDARD	% OF VA LABS MEETING STANDARD
Infection control	√	√	52/52	100%
Equipment management	√	√	50/52	96%
Policies and procedures defining the responsibilities of professional staff to provide quality pt care according to accepted professional standards	√		22/52	42%
Policies established to include written employment criteria and disciplinary guidelines for non-compliance	√		33/52	63%
Contracted vendors carry general, malpractice, product liability and any other required local insurance		√	21/131	16%

There are few remaining ABC and BOC standards relevant to VA which were not addressed in survey

- Certain standards were not included in the survey because the standard was not amenable to survey questioning
- Other standards, such as those under the “Supplier Compliance” section, relate to billing and reimbursement standards, which are not applicable to VA at this time
- These ABC and BOC standards, not incorporated into the Internet survey, follow:

Standards Not Incorporated in the Survey

AREA ADDRESSED	ABC	BOC
Organizational governance and administration management	√	
Credentialing mechanism established for the appointment of professional staff	√	
Compliance program administered addressing appropriate reimbursement practices	√	√
Compliance program maintenance is responsibility of a trained, qualified designated individual	√	√
Education in claims development and billing is provided to appropriate staff	√	√
Auditing and monitoring procedures are established for compliance with appropriate reimbursement issues	√	√
Program is reviewed and updated at least annually		√

This study did not address how VA O&P laboratories fare with regards to other industry standards for facility accreditation, such as facility safety requirements

- Both ABC and BOC also have specific facility safety requirements, against which VA O&P laboratories were not reviewed. These are specific to each accrediting body, but examples of requirements follow:
 - Patient restrooms, designed and equipped to meet the needs of disabled persons
 - Reception areas with separate patient waiting areas with chairs with armrests
 - Dedicated patient treatment area/examination rooms which assure privacy
 - Locking patient file cabinets or file areas separate from patient examination rooms
- Site visits to each laboratory and physical inspection is required to adequately review facilities against these types of standards
 - This study did not include an inspection of each laboratory and therefore, does not reflect how O&P laboratories within VA compare to these physical facility standards

There are variances in level of understanding of VA requirements for O&P providers

- During site visits and in response to the Internet Survey, VAMC staff referred to the VHA Handbook of Directives when asked about standards followed by their O&P Lab staff
 - These directives focus on administrative responsibilities and the allotment/distribution of products and devices (i.e., furnishing appliance, stock procurement, repairs, invoicing, etc.) rather than patient care
 - The O&P labs provide patient care and services but have no formal VHA standards to follow for the provision of orthotic and prosthetic care and services
- Staff consistently reported that VA does not require ABC or BOC certification for its own O&P staff, while requiring contracted staff to be either ABC- or BOC-certified
- 9 out of 117 VAMCs (7.7%) responding to the Internet survey report that they do not require certification of contracted O&P provider staff
- 17 out of 120 VAMCs (14.2%) report that they do not require ABC or BOC accreditation for contracted O&P facilities

VA O&P lab staff have varying views on provider certification

- Staff responses during site visits and telephone conversations indicated mixed reactions to certification requirements as well as to the general preference between ABC and BOC certification
 - Some staff reported there is no incentive for staff to obtain certification within the VA system
 - Some staff feel that certification is important but perceive no difference between ABC and BOC certification
 - Other staff feel strongly that ABC certification promotes and ensures higher standards of patient care
- Many staff members cited the lack of funding for continuing education units and for certification to be a significant obstacle to obtaining certification
- Some staff made comments that are inconsistent with other findings related to job descriptions:
 - during site visits, some staff reported there is no established job description used in job postings
 - one site provided a job posting delineating job requirements, but was not sure whether this posting was developed at a national level or at the specific facility
 - Central Office provided job descriptions dated 10/01 for GS-7 and GS-9 for Orthotist/Prosthetist

VA delineates several standards for contracted resources in the contract templates for artificial limbs and orthotics

- In 1999, PSAS and the Office of Acquisition and Material Management updated a contract template guideline to assist VAMCs with the acquisition of artificial limbs and orthotics. The templates can be tailored by VAMCs to meet specific needs of the Medical Center
- VA Central Office requires its contractors to meet the following clinical performance expectations:
 - Strict conformance with prosthetic prescription provided by VA Amputee Clinic Team
 - Full-time American Board for Certification in Orthotics and Prosthetics (ABC), Board for Orthotist/Prosthetist Certification (BOC), or VA-Qualified (VAQP) prosthetist on staff at each contractor location
 - Contractor’s facility(s) approval by the Facility Accreditation Program of the ABC, the Accredited Facilities Program of the BOC, or successfully passed VA inspection
 - Compliance of prosthetists with specific education requirements, supervising staff for the fitting and alignment of:
 - .. Natural Shape/Natural Aligned Sockets
 - .. Flexible Wall Sockets
 - .. Silicone Suction Sockets

The contract template requires the contractor to show evidence of staff certification and facility accreditation, management capabilities, and performance records

- As outlined in the template, the Contractor must provide:
 - evidence of training, education, certification, licenses, and other professional recognition obtained by staff providing supplies and services to VA beneficiaries
 - evidence of facility(s) certifications, permits, licenses, and any other documents required by law as well as a description of the facility(s) utilized
 - descriptions of management capabilities and approaches to ensure the provision of prompt and quality service, quality assurance and customer service plan tailored to VA beneficiaries
 - performance records and contracts for the past three years including documentation of financial solvency and stability

Most VA labs report that their staff monitor and adhere to contractor standards as outlined in the template

- 62.5% of respondents contract out for Orthotic Services and 91.9% of respondents contract out for Prosthetic Services

- Most VAMCs require some combination of ABC or BOC certification for their contracted **providers**

ABC	EITHER ABC OR BOC	BOC	ABC & BOC	DOES NOT REQUIRE CERTIFICATION	VA INSPECTION	AOPA/STATE LICENSURE	VAQP	CPO
55	20	19	9	9	2	1	1	1
47.0%	17.1%	16.2%	7.7%	7.7%	1.7%	0.9%	0.9%	0.9%

- Most VAMCs require some combination of ABC or BOC accreditation for their contracted **laboratories**

ABC	EITHER ABC OR BOC	DOES NOT REQUIRE CERTIFICATION	BOC	ABC & BOC	VA INSPECTION	AOPA/STATE LICENSURE	VAQP	AAOP	IAOP
50	18	17	15	9	6	2	1	1	1
41.7%	15.0%	14.2%	12.5%	7.5%	5.0%	1.7%	0.8%	0.8%	0.8%

Most VA O&P labs indicate that either the prosthetic representative or the contracting officer is responsible for managing contracted vendors

- Multiple levels of staff state they are aware of vendors' obligations to their O&P contracts

PROSTHETIC REP	CONTRACTING OFFICER (ACQ. & MATERIAL MANAGEMENT)	VPR	ALL O&P STAFF	PROSTHETIC PURCHASING AGENTS	HEALTH TECH	PROGRAM SUPPORT ASSTS.	LEAD O&P	MEDICAL MGMT SPECIALIST	COTR	REHAB SERVICE
107	101	81	73	26	3	2	1	1	1	1
27.0%	25.4%	20.4%	18.4%	6.5%	0.8%	0.5%	0.3%	0.3%	0.3%	0.3%

- There is some variation on who is ultimately accountable for vendor compliance with the terms of O&P contracts

PROSTHETIC REP	OFFICER (ACQ. & MATERIAL MANAGEMENT)	VPR	CHIEF OF PROSTHETICS	PURCHASING AGENTS	PROGRAM SUPPORT ASSTS.	ALL O&P STAFF	COTR	O&P SUPER	DIRECTOR OF CLINICAL ACTIVITIES	PROGRAM MGMT.
61	45	6	2	1	1	1	1	2	1	1
50.0%	36.9%	4.9%	1.6%	0.8%	0.8%	0.8%	0.8%	1.6%	0.8%	0.8%

Most VA O&P labs maintain evidence of certification for both contracted providers and laboratories

- 37.5% of VAMCs maintain the records of certification for contracted providers working in a **VA O&P lab**, but the records are kept in a variety of locations

LOCATION OF RECORDS	VA	VENDOR SITE	BOTH	NETWORK BUSINESS CENTER
# of VAMCs	9	5	15	1
% of VAMCs	26.7%	13.3%	50%	3.3%

- 79% of VAMCs maintain, in a variety of locations, the records of certification for contracted providers working in a **vendor O&P lab**

LOCATION OF RECORDS	VA	VENDOR SITE	BOTH	NETWORK BUSINESS CENTER	CLINICAL DIRECTOR
# of VAMCs	6	26	50	7	1
% of VAMCs	6.7%	28.9%	55.6%	7.8%	1.1%

There have been recent initiatives requiring state licensure of the O&P profession

- Both licensure and certification are based on established educational standards and minimum competencies
- Licensure provides a vehicle for a state to regulate health professions and health professionals in that state
 - A state requiring licensure can prevent an individual from practicing and providing health care in that state
 - Violation of standards could lead to fines, loss of license and the right to practice in that state and imprisonment
- States that do not require licensure have no oversight of the provision of O&P healthcare services and must rely on the self-regulation of the certification and accreditation processes
 - The recourse for non-compliance to these standards is removal of certification or accreditation
 - Civil litigation is the only avenue available to the consumer

Some states have begun to develop legislation, or have legislation pending, related to the licensure of O&P providers

- Six states require licensure of prosthetists and orthotists: New Jersey, Mississippi, Florida, Texas, Washington, and Illinois
- Five other states have legislation pending or are in the process of creating legislation regarding state licensure
 - The common features of the states' legislation include:
 - .. Requirement of CAAHEP education standards
 - .. Regulatory board under the auspices of the regulatory or health agency of the state
 - .. Limited “grandfathering” for individuals currently providing care
 - .. Reciprocity with other states or national accreditation bodies that have equivalent education, testing and competency standards
- New Jersey, Mississippi, and Illinois require applicants to pass ABC certification examination before a state license can be issued
- Texas, Washington, and Florida have contracted with ABC to provide the written examination sections for applicants from these states
- There are other requirements for state licensure but these vary by state

CMS is currently evaluating the definition of a “qualified provider” with regards to appropriate billing and reimbursement for O&P services

- The Harkin Bill introduced in 1999 proposes limiting access to the billing of specific orthotic and prosthetic devices to qualified providers, i.e., those who have received specific training in the custom design, fabrication, modification, and fitting of orthotics and prosthetics.
- The Bill defines a qualified supplier as any entity accredited by ABC or accredited and approved by a program that the Secretary of Health and Human Services determines to be equivalent to ABC accreditation, licensed in O&P by the state in which the item is supplied, or completing 10 years practice in the provision of custom O&P
- The Secretary and appropriate O&P experts will:
 - determine which O&P services and products are applicable items
 - review the applicable items billed under the coding system established
 - limit payment for those items
- The Amputee Coalition of America (ACA) is working with CMS to:
 - identify the custom codes that require special skills, training and facilities to provide the applicable items
 - limit access to a small group of people that have training “essentially equivalent” to ABC’s requirement

CMS’s decision to include both ABC and BOC as qualified provider certifications is likely

- CMS and a selected Committee are using the Negotiated Rulemaking Process to address:
 - what and who should be covered by the rule
 - the certification, credentialing, and licensure of O&P practitioners
 - program management
 - special needs areas (i.e., rural areas)
 - program implementation issues
- CMS is considering the acceptance of either ABC **OR** BOC certification as appropriate qualification for reimbursement

Industry experts indicate a worldwide shortage of trained Prosthetists and Orthotists

- There has been considerable change in the healthcare industry over the past decade, resulting in an increased demand for health services

- The field of orthotics and prosthetics has specifically been impacted by the use of computer software, the growth in prosthetic rehabilitative care, as well as the incorporation of clinical collaboration and research in patient care
- A national shortage of trained prosthetists and orthotists has created a strong demand for these professionals
- The Amputee Coalition of America (ACA) has forecasted that by the year 2020 there will be a 47 percent increase in the amputee population and due to a shortage of prosthetists, only 68 percent of those in need of prostheses will have access to a formally trained prosthetist
- American Academy of Orthotists and Prosthetists is requesting \$1,500,000 increase in the Rehabilitation Services Administration's Training and Pilots account for FY2002 for expansion of the O&P training program capacity
- National shortage in healthcare services is reflected within the VHA system as well, with VA facing expected shortages in nursing, allied health, as well as non-professional healthcare services, such as health aides
 - VA's recognition of the importance of succession planning, as more and more employees meet eligibility requirements for retirement, will extend to O&P providers as well

The Booz Allen team utilized Internet survey results to assist in answering the following research questions

1. Which VA facilities maintain fully functional, completely equipped O&P laboratories?
2. Which VA facilities contract out for these services?
3. How do these VA facilities compare to ABC-established standards?
4. How do these VA facilities compare to BOC-established standards?
5. What is the educational and experiential background of the VA employees at these facilities?
6. What are the current FTE and grade levels for clinical staff in the O&P laboratories?
7. Are contracted labs and VA labs held to the same standards?

The Findings of The Internet Survey Are Reported On The Following Pages

There are 52 self-reported orthotic and/or prosthetic laboratories within the VA healthcare system, and five facilities have obtained industry accreditation

- A total of 52 VAMCs report having an Orthotic or Prosthetic Laboratory
 - of this number, 2 report that they have ABC accreditation:
 - .. Long Beach VAMC, CA
 - .. Oklahoma City VAMC, OK
 - of this number, 3 facilities report having BOC accreditation, however, Cleveland reported incorrectly and is not certified
 - .. Detroit VAMC, MI
 - .. Indianapolis VAMC, IN
 - .. Cleveland VAMC, OH
- The 52 VAMCs that report having an Orthotic or Prosthetic Laboratory does not include Ann Arbor VAMC, which did not respond to our survey. However, it is important to note that Ann

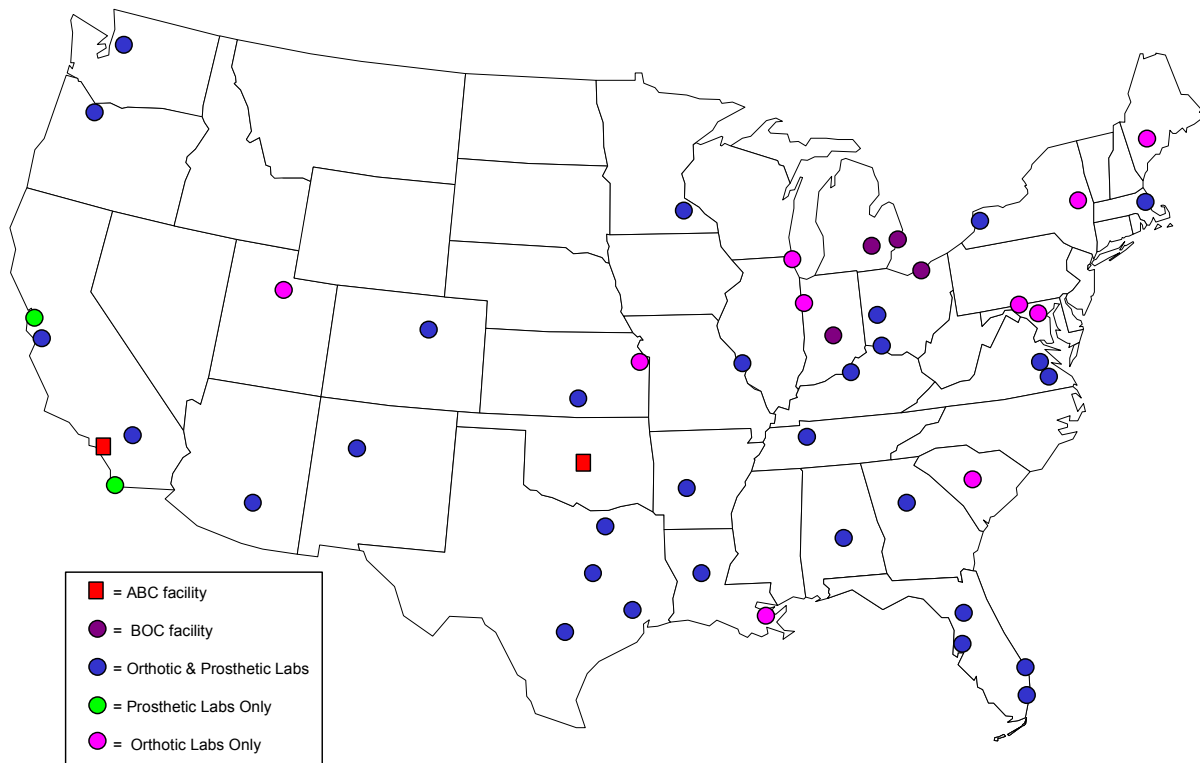
Arbor VAMC is listed in the BOC Facility Directory as having an Orthotic/Prosthetic Laboratory with BOC accreditation

- In summary, 2 facilities have ABC accreditation and 3 facilities have BOC accreditation

The 52 orthotic/prosthetic laboratories provide different types of service

- of the 52 VAMCs reporting to have an Orthotic or Prosthetic Laboratory, 42 reported they have either a Prosthetic laboratory or both an Orthotic and Prosthetic laboratory
- 10 VAMCs report having only an Orthotic Laboratory. These 10 facilities are:
 - Albany, NY
 - Columbia, SC
 - Danville, IL
 - Kansas City, MO
 - Maryland Healthcare System
 - Martinsburg, WV
 - New Orleans, LA
 - Salt Lake City, UT
 - Togus, ME
 - West Side, IL

Figure III-1. Geographic Distribution of VA's O&P Laboratories



The 52 VA Orthotic and/or Prosthetic Laboratories have varying levels of CAD/CAM capability and provide a broad range of prosthetic services

- VA labs can choose to provide prosthetic devices by use of computer-aided design/computer aided-manufacturing (CAD/CAM), which consists of a computer, a digitizer and a carver
 - The digitizer works with the computer to design the device by copying a physical model
 - The carver then fabricates the device from this design
- Among the 52 respondents who report having a laboratory, **30** facilities report having full CAD/CAM capability of both digitizer and carver, while **8** have only a CAD/CAM digitizer
- Within the group of 52 VAMCs that reportedly have an Orthotic and/or Prosthetic laboratory, **41** VAMCs indicate that they are providing either definitive or temporary limbs (below the knee and above the knee) within their local laboratory
- 4 VAMCs report having some level of CAD/CAM capability but report that they are **not** creating definitive or temporary limbs locally. These 4 facilities are:
 - Dayton, OH
 - Danville, IL
 - Salt Lake City, UT
 - Chicago, Westside, IL

The majority of VA Orthotic and/or Prosthetic laboratories have at least one certified provider supervising Orthotic/Prosthetic care

- 39 of the 52 VAMC laboratories¹ (**75%**) indicated that they have a certified provider supervising orthotic/prosthetic care
 - of these 39, 4 facilities did not respond
 - 5 laboratories indicated they have some other form of provider certification, but 4 out of these 5 also had ABC or BOC certification as well
 - .. One facility cited neither ABC nor BOC but reported having provider certification by the American Physical Therapy Association
- 25% of facilities with laboratories (13 out of 52) indicated that they did **not** have a certified orthotic/prosthetic provider within their facility:

Albany, NY

Martinsburg, WV

Palo Alto, CA

Columbia, SC

Miami, FL²

San Antonio, TX

¹ If only ABC or BOC are recognized as valid certifying bodies, this percentage would be 73%, when taking into consideration the facility that cited only The American Physical Therapy Association

Dayton, OH
 Kansas City, MO
 Maryland Healthcare System

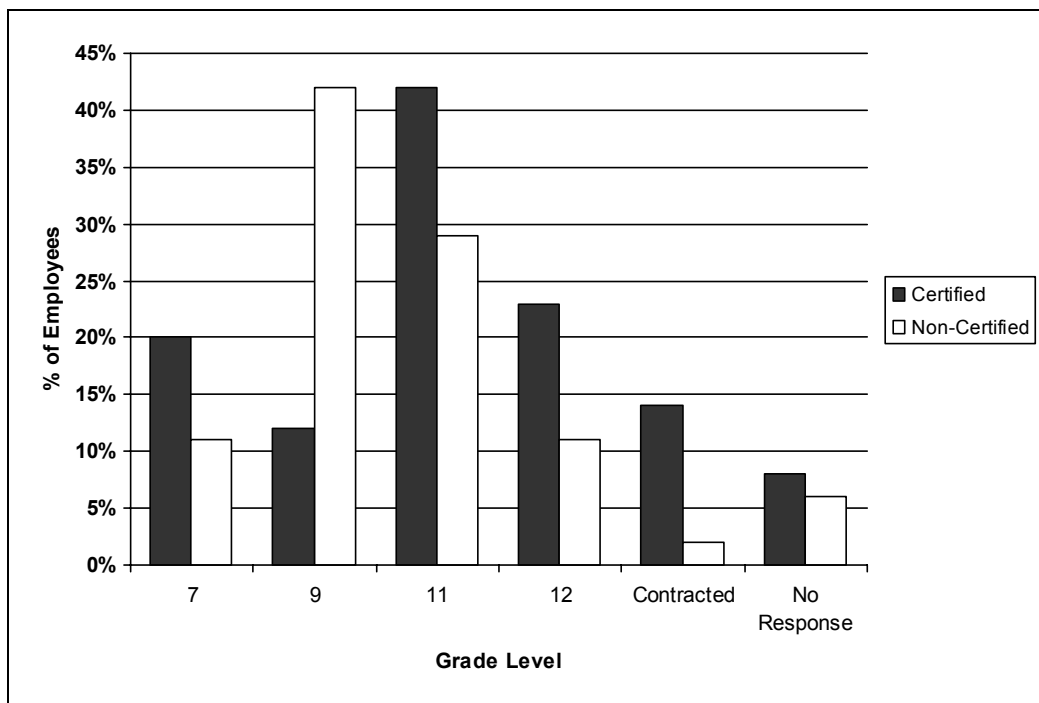
Milwaukee, WI
 Nashville, TN

St. Louis, MO
 Togus, ME

Grade levels vary based on certification and level of education

- Including contracted staff, survey respondents provided information on a total of 178 VA O&P staff members
- Survey respondents were asked to provide specific information regarding each individual staff position within their Orthotic/Prosthetic laboratories
 - 82 out of 178 (46%) did not have any type of certification or a bachelors degree
 - Within this subset, 70% have more than 10 years of experience
 - 70 out of 178 (39%) staff members reported to have ABC or BOC certification
- The grade levels of staff members vary. The distribution is illustrated in the graphic below:

Figure III-2. Grade Levels for Certified and Non-Certified Staff

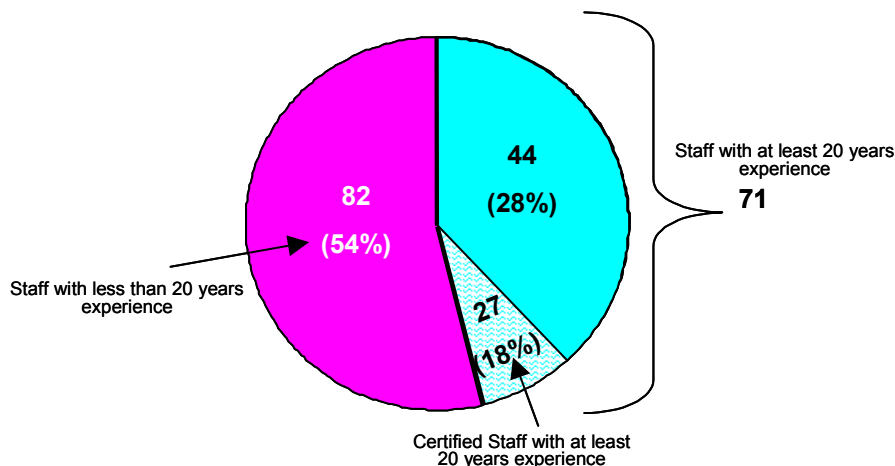


² Miami has since hired an ABC-certified Orthotist/Prosthetist, according to findings from our site visit, which would increase the overall percentage of VA labs with certified providers

VAMC O&P laboratories employ many staff members that have over 20 years of experience

- Survey respondents reported on a total of 153 staff members who are employees of VA O&P laboratories (non-contracted staff). of this 153, 71 (46%) employees were reported to have greater than 20 years of work experience
 - of the 71 employees with more than 20 years of experience, 27 are certified staff members (38%)

Figure III-3. Staff Experience for 153 VA Employees



of the 178 staff members (including contracted staff), 27 have certification and have over 20 years of experience (18%)

VA labs are not meeting certain standards applicable to Both ABC and BOC

- For VAMCs reporting to have an Orthotic/Prosthetic laboratory, the most commonly unmet standards shared by both ABC and BOC are:
 - **The presence of a certified provider responsible for orthotic/prosthetic care** - 13 out of 52 labs (25%) reported that they do not have a certified provider within their laboratory (q. 9)
 - **Completion of periodic patient satisfaction surveys on laboratory performance and services** - 25 out of 52 labs (50%) reported they do not conduct periodic patient satisfaction surveys on O&P laboratory performance and services (q. 14)
 - **Provision of education regarding O&P care and management to patient and/or family** – 11 out of 52 labs (21%) reported they do not provide education on Orthotic/Prosthetic care and management to the patient and/or significant other (q. 17)

Some standards specific only to ABC are not being met by VA

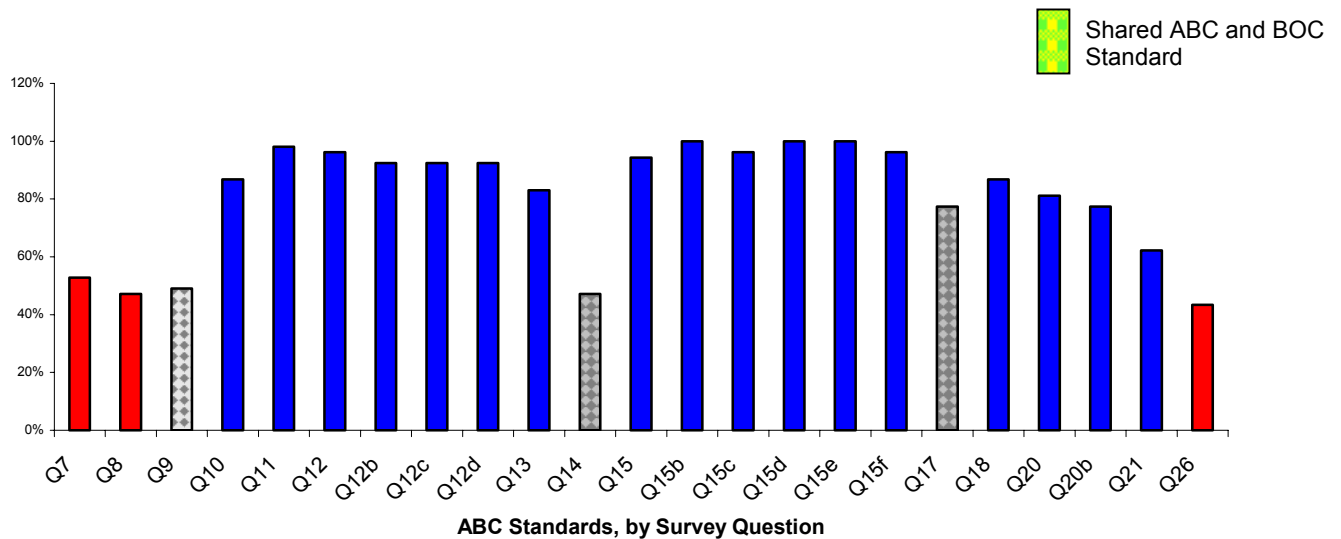
- **Existence of patient management policies and procedures** – 24 out of 52 (46%) VAMCs reported that they do not have written patient management policies and procedures for their laboratory (q. 7)

- **Existence of a policy establishing timeframe between referral of patient and first encounter with the patient** – 27 out of 52 (52%) VAMCs reported to not having documented policy on timeframe between referral of patient and first visit (q. 8)
- **Established policies and procedures defining responsibilities of professional staff to provide patient care based on accepted professional standards** – 30 out of 52 (58%) VAMCs report not having such policies in place at their facilities (q. 26)
- The survey question related to these standards are identified in red within the graphic on the following page

Many ABC standards are met by VA

- The following graph displays the ABC-specific standards met by the 52 O&P laboratories. The survey questions only related to ABC standards are shown. Percentages relate to the number of VA laboratories that meet each standard

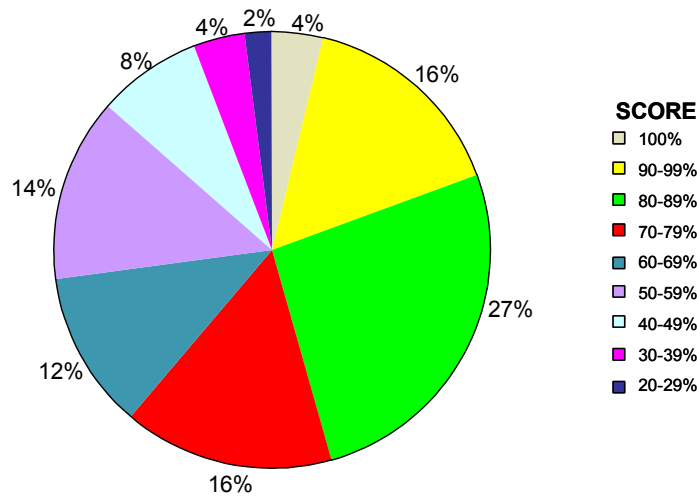
Figure III-4. Percent of VAMCs Meeting ABC Standards



Most VA O&P laboratories meet the majority of ABC standards

- The internet survey incorporated 23 ABC standards. The graphic below shows the breakdown in the percentage of VA laboratories that met the various ABC standards
 - Each VAMC was assigned a “score” calculated by the number of standards met over the 23 ABC standards included in the survey questions

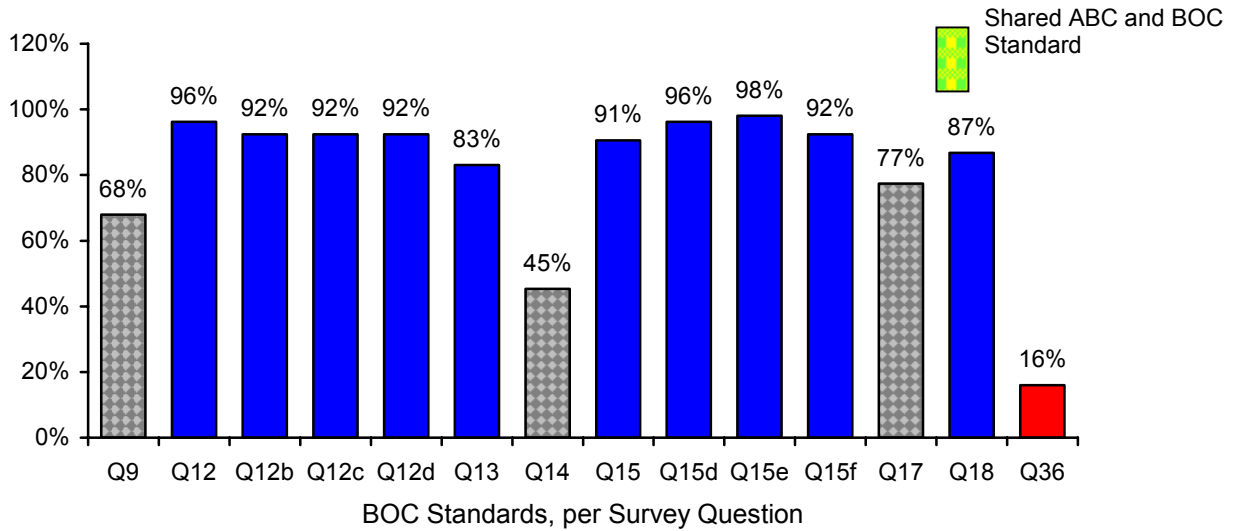
Figure III-5. Breakdown of O&P Laboratory Scores for ABC Standards



VA O&P labs meet most BOC standards

- The main standard that is unique to BOC and most frequently not met by VAMCs is the requirement that contractors carry general, malpractice, product liability and any other required local insurance
 - 31 out of 52 (60%) VAMCs indicated that vendors are not required to have such insurance (q. 36)
- The following graph displays the BOC-specific standards met by the 52 O&P laboratories. The survey questions only related to BOC standards are shown. Percentages relate to the number of VA laboratories who meet each standard

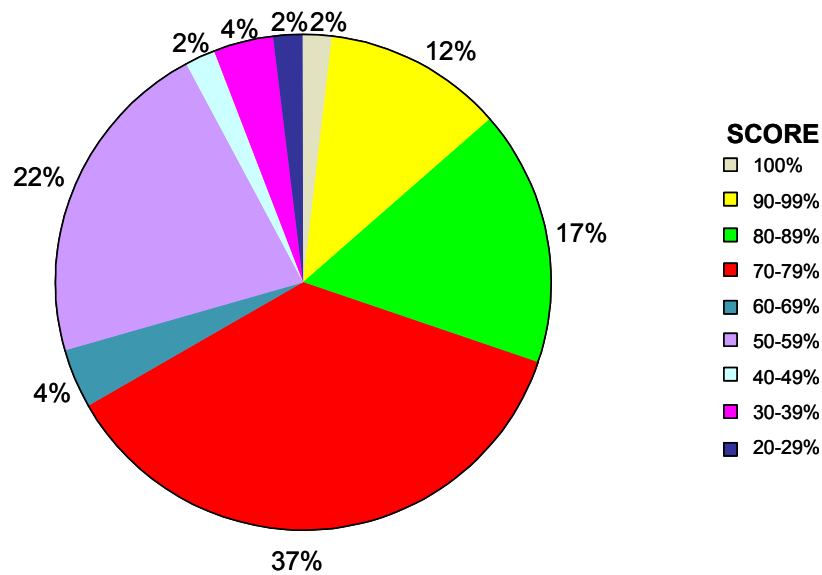
Figure III-6. Percent of VAMCs meeting BOC Standards



VA laboratories meet BOC standards to varying degrees

- The Internet survey incorporated 14 BOC standards. The graphic below shows the breakdown in the percentage of VA laboratories that met the various BOC standards
 - Each VAMC was assigned a “score” calculated by the number of standards met over the 14 BOC standards included in the survey questions

Figure III-7. Breakdown of O&P Laboratory Scores for BOC Standards



During the seven site visits, staff offered their perspectives on retention and recruitment issues for O&P laboratory staff

- Staff discussed the difficulties of recruiting and retaining O&P personnel, citing the following reasons:
 - low salaries
 - inconsistent grade levels for the same position
 - general shortage of orthotists and prosthetists
 - perceived lack of respect by VAMC, other clinicians
 - O&P staff are not considered clinicians
 - inadequate space in some labs
 - lack of formal reimbursement program for certification and continuing education
 - lengthy federal application process
- Recruitment and retention concerns notwithstanding, interviewees reported the following reasons they have stayed within the VA system:
 - benefits
 - greater and quicker career advancement
 - greater latitude within the position
 - commitment to serving veterans
 - loyalty to the PSAS team

During the seven site visits, O&P laboratory personnel identified other staffing issues

- Beyond their recruitment and retention concerns, staff broached two additional human resources issues:
 - Their perception that there are variations in **staffing levels** among different facilities, even when workload levels are the same
 - Their perception that **workload** varies across and within VISNs without commensurate adjustments in staffing levels

O&P laboratory staff shared their viewpoints on certification and accreditation

- Staff consistently reported three major issues affecting facility accreditation and provider certification:
 - VA has no requirements and provides no incentives for provider certification or facility accreditation

- There is no available or budgeted funding to support the certification and/or accreditation processes
- There is a perception that shortage of lab space adversely affects the potential for facility accreditation (i.e., dedicated patient exam rooms, sufficient area for large equipment, such as carver)

O&P lab staff indicated that they view themselves as clinicians

- While most O&P laboratory staff consider themselves providers of patient care, few feel that they are considered “clinicians” within the VA
- O&P laboratory providers reported that they are the only staff members in PSAS whose responsibilities require clinical certification outside of the VA
- Staff reported that O&P labs have evolved from being “technical shops” to “clinical services”
- The O&P staff are able to provide standards regarding the technical pieces of their jobs but were unaware of the existence of standards addressing the clinical/patient care aspects of their duties

IV. CONCLUSIONS

Current efforts to collect information on patient satisfaction do not address patients who have received O&P laboratory services from VA or VA contracted vendors

- Since ABC and BOC require patient satisfaction surveys for orthotic and prosthetic patients, VA can move closer to meeting accreditation standards by administering a dedicated patient satisfaction survey addressing O&P lab services, care and providers
- Some questions in the National Prosthetic Patient Satisfaction Survey (NPPSS) may apply, but only when administered to a patient who received care from an Orthotist or Prosthetist
 - Furthermore, the results of the NPPSS do not appear to be provided to the facilities to be used in improving services
 - It is difficult to ascertain from NPPSS results whether care was provided by a VA staff member or contracted provider
- Opportunities for enhancement of the scope and quality of services based on feedback from patients who have used the O&P lab and received services from O&P providers are missed as the O&P lab does not offer a specific satisfaction survey to its customers

There are internal and external factors that potentially threaten VA's ability to recruit and retain staff

- There is a significant proportion of O&P laboratory staff (VA employees) that report having over 20 years of experience. Although we do not know the ages of the employees, we can anticipate that there are a large number of "senior-level" employees within VA O&P labs with the potential for retirement, making succession planning a priority
- Job descriptions that we reviewed for a GS-7 and GS-9 level Orthotist/Prosthetist did not distinguish between the different clinical emphases of an orthotist and of a prosthetist, as well as an orthotist/prosthetist
- Due to difficulties in recruiting O&P staff, there are discrepancies in grade levels for the same position among VAMCs
- Continuing education is not consistently funded for O&P staff members within the VAMCs
- The majority of VA O&P labs are not accredited, making it difficult to attract certified staff
- Salaries for certified VA staff are not competitive with private sector salaries, resulting in further difficulty in recruiting certified staff

The absence of facility accreditation and provider certification requirements within VA may hinder VA's ability to respond to the impacts of a changing O&P environment

- States requiring O&P licensure and states with pending licensure legislation will further demarcate the difference in certification and accreditation requirements between VA and the private sector
 - Some states have aligned their licensure requirements to mimic ABC criteria
- Between billing regulations and state licensure requirements, virtually all O&P laboratories in the country will fall under a minimum set of established standards
 - Proposed billing regulations will impact the O&P environment as CMS and other payers debate the definition of a “qualified provider”
 - CMS is considering regulations that would recognize only ABC- and BOC-certified providers and as “qualified providers”
 - If CMS decides to recognize only ABC or BOC, most third party payers will inevitably follow suit, as has been the case historically with regards to Medicare coverage criteria
- The VA holds contractors to a stricter set of standards than what is required of its staff and facilities, through the requirements outlined in VA's contracting templates
 - O&P staff reported during site visits that vendors influence veterans' perceptions on quality of care and direct the patient to specific vendors who are accredited, as compared to non-accredited VA laboratories

Two major issues observed address the organization of O&P labs within VAMCs and the organization of how services are provided within the labs

- VA's O&P labs are similarly named throughout the VA yet offer different levels of service by different levels of personnel
 - Some facilities reporting to have an O&P lab do not provide a full range of O&P products and services
 - Others are called Orthotic Labs but provide prosthetic services in addition to orthotic services
 - There are wide discrepancies among some VA O&P labs regarding compliance to ABC and BOC facility standards, though survey results indicate that VA O&P labs are within reach of meeting ABC and BOC standards for facility accreditation
- There are inconsistencies with the alignment of O&P labs within the service line, as compared to the nature of services provided
 - O&P lab staff are providing clinical care but are not aligned with a clinical service
 - O&P labs do not have any clinical standards developed for orthotists and prosthetists to follow
 - A clinical infrastructure (i.e., clinical standards, clinical competencies, clinical quality measures) does not exist in O&P labs even though clinical care is provided in this setting

- Survey respondents reported a vast array of position titles, many of which seem to be for identical positions

V. RECOMMENDATIONS

Summary of O&P lab recommendations

- To increase the capacity of VA O&P laboratories to obtain facility accreditation, VA should focus on meeting the standards most frequently unmet by survey respondents
- The recommendations summarized here assist in meeting these key standards
 - Central Office (CO) should consider adding specific questions about O&P Lab providers and services to the National Prosthetic Patient Satisfaction Survey
 - The O&P Lab Internet survey results should be used as a quality improvement tool to identify areas for improvement
 - VA should develop a formal quality improvement plan specifically for the O&P lab
 - PSAS should continue to use the VA contract templates for orthotic appliances and artificial limbs, as the contractual requirements include industry standards
 - VA should focus on recruitment and retention of certified staff, to ensure that each VA O&P lab has at least one certified staff member supervising O&P care: facility accreditation will assist in recruitment of certified staff and provide a mechanism for the majority of O&P labs to attain facility certification
- VA should consider mandatory facility accreditation of all O&P Labs to validate the quality of services provided to veterans

Central Office (CO) should consider adding specific questions about O&P lab providers and services to the VA National Prosthetics Patient Satisfaction Survey

- Since ABC and BOC require patient satisfaction surveys for orthotic and prosthetic patients, VA can move closer to meeting accreditation standards by administering a dedicated patient satisfaction survey addressing O&P lab services, care and providers
- The VA should include specific questions related to O&P services within the National Prosthetic Patient Satisfaction Survey (NPPSS)
 - The results of the NPPSS should be analyzed by VAMC and provided to the facilities in a timely manner so that facilities can apply the results in performance improvement activities
 - NPPSS should include questions that will distinguish between care provided by a VA staff member and contracted provider

Central Office should develop a dedicated O&P lab survey instrument for individual facilities to administer

- Central Office should develop an O&P Patient Satisfaction Survey for use at the VAMC level

O&P Laboratory Standards...Recommendations...

- Central Office can start this process by reviewing any O&P surveys already developed by those laboratories that have obtained ABC accreditation
- PSAS should focus on collecting patient satisfaction data for O&P laboratory services, as they often do for their home oxygen patients
- The Seattle O&P laboratory is in the process of developing a patient satisfaction survey related to their O&P services, which may potentially serve as a leading practice for other O&P labs to adopt
 - Seattle plans to administer this survey to all O&P patients, in order to compare satisfaction rates for VA services versus commercial services
- A dedicated O&P lab survey would enable VA to monitor patient's feedback on the products and services received from contracted vendors
 - VA would then be able to evaluate along another dimension of quality whether the dollars allocated to vendors is worth the expense of outsourcing
 - A specific O&P lab survey would also serve as an indication to Veteran Service Organizations of PSAS' initiative to be responsive to veterans' needs

The O&P Lab Internet survey results should be used as a quality improvement tool to identify areas for improvement

- The results of the Internet survey should be used to identify the specific standards that are problematic areas as priorities for action
 - The O&P Internet Survey was based on standards from ABC and BOC
 - Results could be used to develop an action plan for accreditation success or accreditation-readiness
- The survey results may also be used to implement a national quality improvement plan. Standards that are problematic for specific labs could be integrated into the local VA Labs' quality or performance measures

O&P services should be included in VAMCS' overall clinical quality improvement plan

- Considering the level of patient-focused care provided in O&P Laboratories, O&P services should be added to the VAMC's *clinical* quality improvement program
 - O&P Labs are not included in hospital-wide clinical quality management programs
 - Seattle VAMC has begun to incorporate clinical outcomes for the balanced scorecard they maintain on O&P lab performance
 - Richmond VAMC has developed and implemented a Home Oxygen Quality Improvement (QI) program, which we consider a leading practice. This program may be used as a guide to develop a clinical QI program for O&P laboratories (A copy of this plan is included in the Appendix)

- Incorporating O&P Laboratory services into the VAMC's clinical quality improvement program would further integrate veterans' experiences across clinical service lines and support areas

PSAS should continue to use the VA contract templates for orthotic appliances and artificial limbs, and incorporate formal processes to monitor and manage these contracts

- VA O&P Labs should continue using the contract templates provided by Central Office, as they successfully address many ABC and BOC standards for vendor compliance
 - Should VA decide to seek BOC accreditation, language requiring vendor insurance should be added to the contract template, as this is a BOC-specific standard that is not currently addressed in the contract template
- PSAS should formalize the oversight process for contracts
 - During on-site visits, PSAS staff described the vendor payment process at their facilities
 - .. Some sites do not allow payment to the vendor until the patient was seen in clinic, and the device was evaluated for appropriateness and quality.
 - A formal process for tracking the quality of vendor's work should be incorporated into each PSAS quality management plan
 - .. Follow up processes should also be established to document and hold vendors accountable for performance and corrective action issues

VA should consider leading practices in monitoring O&P contracted services within VHA and develop similar processes at each facility

- Examples of leading practices identified during site visits follow:
 - In Atlanta, patients are seen in clinic by a physician before the device is "cleared for payment"
 - In Seattle, patients are seen by a rehabilitation physician, who assesses patient and prosthesis before payment is approved
 - In Richmond, a PSAS purchasing agent attends PSAS clinic and obtains patient signatures indicating satisfaction with the prosthesis prior to making vendor payments
 - In Miami, the vendor accompanies the patient and fits the prosthesis in the VA Amputee Clinic, following which the clinic staff review gait; patient must demonstrate satisfaction before PSAS provides payment to the vendor
 - During on-site visits, it was reported that Miami conducts periodic on-site visits to their commercial vendor sites, performing random chart reviews and assessing the facility for quality of care and services

VA should consider mandatory facility accreditation of all O&P labs to validate the quality of services provided to veterans

- VA should strongly consider mandatory ABC or BOC accreditation of VA O&P laboratories to remain competitive, to attract qualified staff, and to provide equivalent levels of care
 - There is a potential for varying levels of quality of care provided within VA labs as compared to care provided by contractors in non-VA labs, if all facilities are not held to consistent standards
- Should VA decide to mandate accreditation of facilities, this requires that each VA O&P laboratory MUST have a certified provider overseeing the lab(s)
 - If the accrediting body chosen is ABC, then each laboratory must specifically have an ABC-certified provider to supervise care. If BOC, then either ABC or BOC certified staff would suffice
- For those labs who do not meet or are unable to meet facility standards for accreditation, VA should consider reclassification/renaming these labs to reflect what services are truly provided (i.e.- Wheelchair Repair, Shoe Repair)
- Another factor for VA to consider in their decision to mandate either ABC or BOC facility accreditation is the impact of this decision on the VA's strategy for succession planning. Our recommendation on facility accreditation is closely tied to recruitment, retention, and succession planning

VA should reclassify each O&P lab based on level of service provided

- Using the results of the Internet survey, VA should identify criteria that constitute a “full service” lab. Each lab should be evaluated against the criteria and should be designated the appropriate classification, based on the level of service provided at each facility
- Following the development of criteria for a “full service” lab, VA should develop consistent names for the different types of laboratories
 - During site visits, the Booz Allen team recognized inconsistencies in laboratory titles across VAMCs
 - .. A lab that provides both Orthotic and Prosthetic services should be called an Orthotic & Prosthetic Laboratory
 - .. A lab that provides only orthotic services should consistently be titled an Orthotic laboratory
 - .. A lab that provides prosthetic only services should be named a Prosthetic laboratory
 - Continuing to use the survey results as a guide, each **position** within the O&P lab should be reviewed and uniform titles should be developed to standardize the roles and responsibilities of O&P lab staff

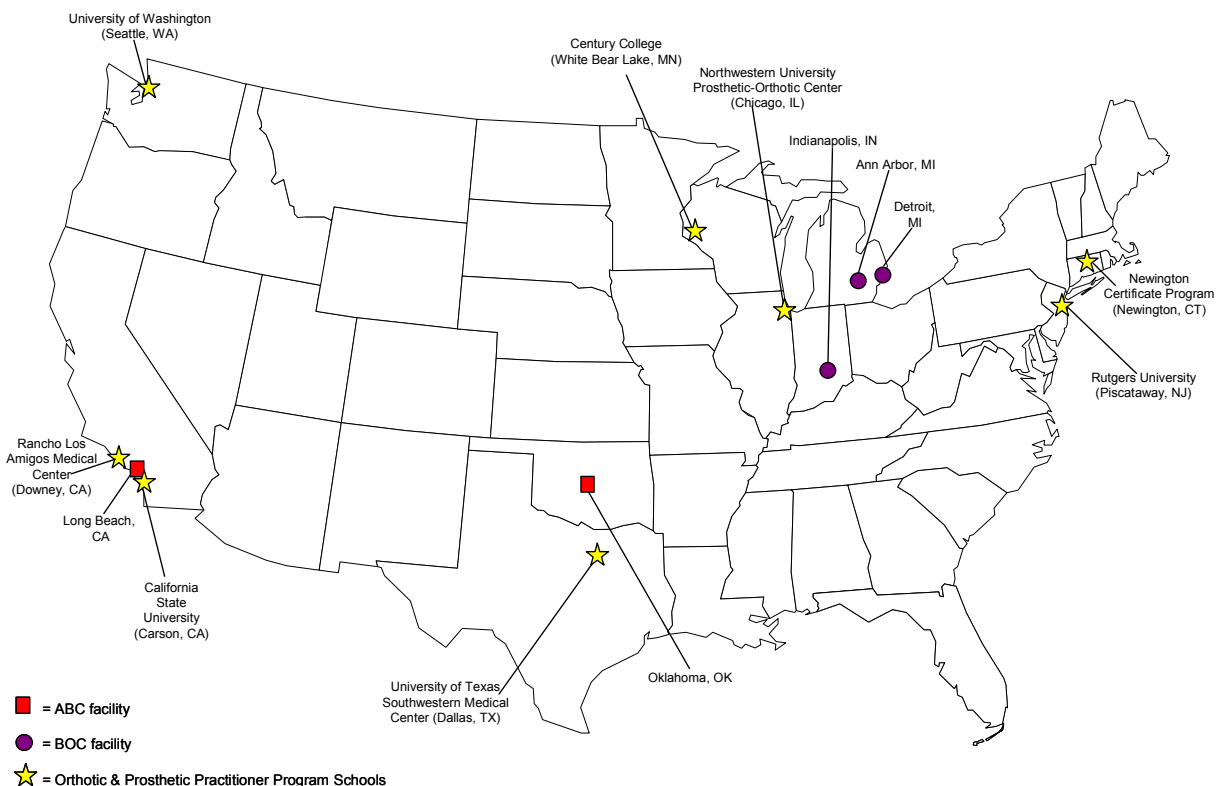
VA should consider the level of care provided in O&P Labs as “clinical” and should therefore develop clinical standards of care for O&P services

- VA should review the different O&P staff positions within each laboratory, and designate the various titles that accompany these positions
- VA should concurrently establish **clinical standards** for their O&P laboratories
 - These standards should reflect the same standards that VA requires of its contractors
 - Although some labs have ABC accreditation, and others BOC, there should still be a minimum set of **clinical, provider and facility standards** that are consistent throughout the VHA system, that reflect what VA requires of its contracted labs
- VISN 22’s O&P laboratory in Long Beach, CA has developed “Reference Guides” for Orthotics and Prosthetics that may be considered a leading practice in the development of O&P clinical standards. These reference guides are provided in the Appendix

Facility accreditation will assist in recruitment of certified staff and provide a mechanism for the majority of O&P labs to attain facility accreditation

- The map below indicates the location of various categories of O&P labs as well as the location of NCOPE- approved O&P Practitioner programs

Figure V-1. VA O&P Labs and Location of O&P Programs



The first step is to focus on those VA O&P Labs that are geographically close to an accredited O&P practitioner program

- VA should target the O&P Labs located in close proximity to NCOPE-approved O&P Practitioner programs to become accredited by ABC or BOC, if not already
 - Central Office should provide adequate support to these O&P labs so that facility accreditation can be achieved
 - Once the targeted facilities are accredited, these sites become **RESIDENCY EDUCATION CENTERS**
- The Residency Education Centers will continue to operate and function as accredited facilities, serving as sites for new O&P practitioners to fulfill their clinical residency requirements
 - ABC accreditation is required for ABC-certified residents, as ABC-certified providers must fulfill their residency requirements in an ABC-accredited laboratory
 - Long Beach and Seattle O&P labs have such residency programs in place and can serve as references and models for the rest of the O&P labs
 - The following VA O&P Labs currently have NCOPE approval to operate as residency sites, though we do not know if they are currently functioning as such:
 - .. North Little Rock, AK
 - .. Oklahoma City, OK

Those O&P Labs that are not in proximity to an O&P Practitioner Program, but meet VA-developed criteria for a fully functional O&P laboratory must also seek facility accreditation

- O&P labs not located near an NCOPE-approved O&P practitioner program and which do not have ABC-facility accreditation should still strive to obtain ABC or BOC-facility accreditation so that all VA O&P Labs are facility -accredited according to industry standards
- For those labs that do not meet VA's criteria for a fully-functional lab, and cannot achieve ABC- or BOC-facility accreditation, VA should consider reclassifying these facilities according to the services they provide, strengthening staffing levels and/or funding commensurately

Establishing Residency education centers will increase the number of accredited VA labs as well as attract certified O&P staff

- This plan would accomplish the following objectives:
 - Each lab would be supervised by a certified provider as required by both ABC and BOC facility accreditation standards
 - The Residency Education Centers would be accredited and staffed with mandated certified providers, thus placing VA O&P labs on an equal level with private sector O&P labs

- The Residency Education Centers would be more attractive to new O&P practitioners because the labs meet the requirements for the practitioner’s residency requirement
- By establishing Residency Education Centers, VA would be able “grow its own” certified staff and thereby have a mechanism in place to assist with recruitment and succession planning

This approach must be considered in conjunction with recruitment and retention issues facing O&P services in VA

- Because the impact of mandatory accreditation on staffing is unpredictable, a decision to require O&P Lab certification should be made in concert with a clear retention and recruitment strategy
 - VA could ultimately see an increase in orthotist/prosthetist applications because of the prestige associated with employment by a certified lab
 - Alternatively, staffing problems could become exacerbated if steps to encourage and support practitioner certification are not addressed
 - VA may well need to request higher funding to underwrite this step towards increasing quality of care and service

This Approach Will Require Significant Commitment and Support From VA

- Should VA make the decision to mandate accreditation and certification, the following recruitment and retention barriers need to be addressed to support the transition required of O&P lab staff:
 - Salary levels are inconsistent throughout the VA and are below private sector rates
 - Grade levels for the same position are inconsistent throughout the VA
 - Tuition reimbursement and continuing education reimbursement is inconsistent or non-existent throughout the VA
- This effort requires a transformation within VA’s O&P Laboratory infrastructure. VA should strongly consider naming a certified O&P provider to a national position, to work under the direction of the Chief Consultant, Prosthetic and Sensory Aids Strategic Healthcare Group
 - This individual can serve as a resource to those in the field
 - This position will provide accountability and leadership within the program
 - This national representative can bring clinical insight and industry-recognized standards of care to VA at a national, programmatic level, and assist in the development and incorporation of a clinical infrastructure for O&P labs

Estimated cost to VA for mandatory accreditation of VA O&P laboratories

- We have estimated at a **high level** the potential costs to VA for implementing mandatory facility accreditation of VA O&P laboratories for ABC or BOC accreditation
- This cost estimate only includes the accreditation fees. Other costs for accreditation may exist depending on the individual facility requirements for accreditation
 - For example, one facility may require hiring of a certified staff member
 - Another facility may require additional facility space
- We recommend that VA perform a detailed cost analysis for implementation of these recommendations for each facility, based on VA cost data

RECOMMENDATION	ESTIMATED COST	RATIONALE
ABC Facility Accreditation for 52 VA Labs	\$48,100 for first year, \$31,200 for annual renewal	\$925 x 52 = \$48,100 for initial year ¹ \$600 x 52 = \$31,200 for renewal
BOC Facility Accreditation for 52 VA Labs	\$18,200 for first year, \$14,300 for annual renewal	\$350 x 52 = \$18,200 for initial year ¹ \$275 x 52 = \$14,300 for renewal

Estimated cost to VA For mandating provider certification for at least one O&P provider at each VA O&P laboratory includes cost of certification fees

- VA does not currently provide reimbursement for provider certification
- Survey results indicate that there are 13 VA O&P laboratories that do not have certified O&P providers on staff
- Should VA mandate that each laboratory have a certified provider:
 - VAMCs may opt to contract out for the services of a certified provider;
 - VAMCs may hire an external provider to join the staff; or
 - VAMCs may certify current staff members

ESTIMATED COST	RATIONALE
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¹ Currently, 2 VA facilities have ABC accreditation and 3 VA facilities have BOC accreditation, which lowers the initial accreditation cost to VA

Certification Fees: ABC: \$17,550 per year	\$1350 fee x 13 sites = \$17,550
Certification Fees: BOC: \$12,350 per year (using fees for prosthetist)	\$950 fee x 13 sites = \$12,350

VA costs for mandatory provider certification may also include increases in current grade levels

- VA should also consider the costs of increasing current grade levels for staff members who obtain certification
 - The majority of non-certified providers reported grade levels of GS-9 and GS-11, while the majority of certified providers reported grade levels of GS-11 and GS12
 - Total estimated costs will range from \$106,561 to \$121,927, depending on current grade levels of non-certified providers who pursue certification

ESTIMATED COST	RATIONALE
Grade Level Increase for 13 VAMCs: From GS-9 to GS-11: \$106,561/year	Difference between GS-9 and GS-11, using Step 5 figures, is \$8,197 \$8,197 x 13 = \$106,561
Grade Level Increase for 13 VAMCs: From GS-11 to GS-12: \$121,927/year	Difference between GS-11 and GS-12, using Step 5 figures, is \$9,379 \$9,379 x 13 = \$121,927

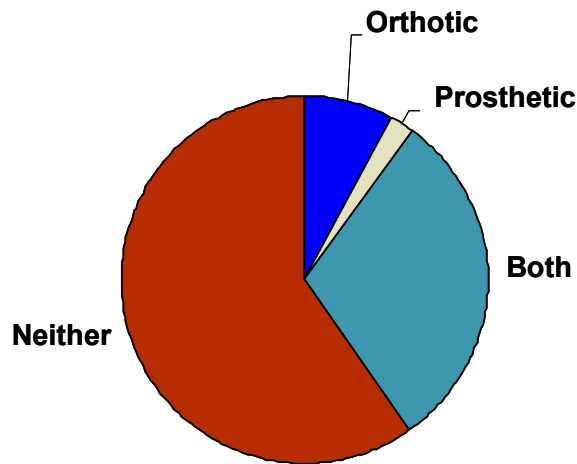
**APPENDIX A:
O&P LABORATORY SURVEY RESULTS RELATED
TO RESEARCH QUESTIONS**

Question 1: Does your VAMC have: Orthotic laboratory, Prosthetic laboratory, both or neither?

- A total of 129 of 131 respondents answered this question
- 52 respondents indicated that they have a laboratory
- 42 VAMCs have either a Prosthetic or both an O&P laboratory

LABORATORY	# of Respondents	Percent
Orthotic	10	7.8%
Prosthetic	3	2.3%
Both	39	30.2%
Neither	77	59.7%

Figure V-2. Breakout of Types of Laboratories within VA



Question 2: Is Your VAMC/laboratory certified by: The American Board For Certification In Orthotics and Prosthetics (ABC), Board For Orthotist/Prosthetist Certification (BOC), both, not certified or other?

- of the 52 respondents that indicated that they have an Orthotic, Prosthetic or an O&P laboratory:
 - 2 VAMCS reported that their O&P laboratory is ABC certified
 - .. Originally, 4 VAMCs reported that they were certified; The Booz Allen team followed up with each and two were incorrectly reported
 - 2 of the respondents indicated that their O&P laboratory is BOC certified
 - .. Originally, 4 VAMCs reported that they were certified; The Booz Allen team followed up with each and two were incorrectly reported
 - 38 of the respondents indicated that their O&P laboratory is not certified, however after the Booz Allen team followed up with each facility noted above, there was a total of 42 laboratories that are not certified
- 6 of the respondents indicated that their O&P laboratory is pending ABC review
 - Some of these respondents have recognized that their laboratory has been reviewed by The National Commission on Orthotic and Prosthetic Education (NCOPE)
 - .. NCOPE serves in cooperation with the Commission on Accreditation of Allied Health Education Programs (CAAHEP) for accreditation of educational programs, not for laboratory certification
 - .. NCOPE certification will enable the laboratory to offer a residency program

Question 3: When your VAMC provides the following items, where are they provided?

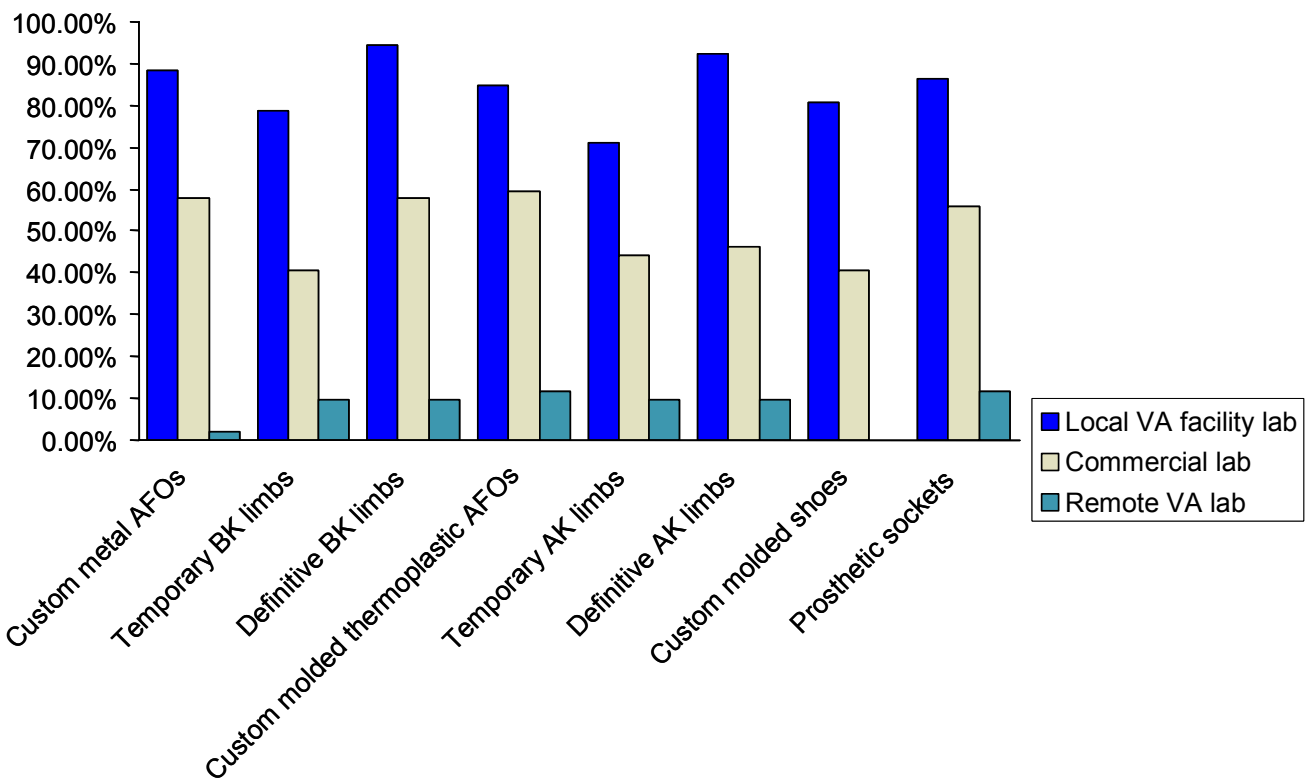
- The majority of items are being produced in a VA local facility laboratory

	LOCAL VA FACILITY LABORATORY		COMMERCIAL LABORATORY		REMOTE VA LABORATORY	
	Percent	Respondents	Percent	Respondents	Percent	Respondents
Custom metal Ankle Foot Orthoses (AFOs)	88.5%	46	57.7%	30	1.9%	1
Temporary Below Knee (BK) limbs	78.8%	41	40.4%	21	9.6%	5
Definitive BK limbs	94.2%	49	57.7%	30	9.6%	5
Custom molded thermoplastic AFOs	84.6%	44	59.6%	31	11.5%	1
Temporary Above Knee (AK) limbs	71.2%	37	44.2%	23	9.6%	5

	LOCAL VA FACILITY LABORATORY		COMMERCIAL LABORATORY		REMOTE VA LABORATORY	
	Percent	Respondents	Percent	Respondents	Percent	Respondents
Definitive AK limbs	92.3%	48	46.2%	24	9.6%	5
Custom molded shoes	80.8%	42	40.4%	21	0.0%	0
Prosthetic sockets	86.5%	45	55.8%	29	11.5%	6

Question 3: The majority of items are fabricated in the local VA facility laboratory

- The graphic below represents the locations where VAMC O&P laboratories fabricate items for their patients



Question 4, 5, 6: Does Your Laboratory Have A CAD/CAM? How many items were fabricated using The CAD/CAM System In FY 01? Are you using any other new technology, other than the CAD/CAM System, to fabricate, fit or measure prosthetic or orthotic devices in your O&P laboratory?

- of the 52 VAMCs who reported to have an O&P laboratory, 14 responded (27%) that they do not have CAD/CAM capabilities
- The remaining VAMCs have CAD/CAM systems with varying capabilities

DIGITIZER ONLY	DIGITIZER AND CARVER
8 (15%)	30 (58%)

- Survey respondents reported that they fabricated 6 to 1200 items in Fiscal Year 2001, using their own CAD/CAM system
- Respondents reported that 2 to 96 items were fabricated using the CAD/CAM system at a remote VA location
- In addition to CAD/CAM, respondents reported the utilization of other new technology items
 - Donjoy Measurement system for Osteo arthritis knee braces
 - AMFIT for foot orthotics
 - C-leg Otto Bock

Question 7, 8: Does your VA laboratory have written patient management policies and procedures? Is there a written policy that establishes a time frame between referral to a VA or Commercial O&P laboratory and the first appointment with the Prosthetist or Orthotist?

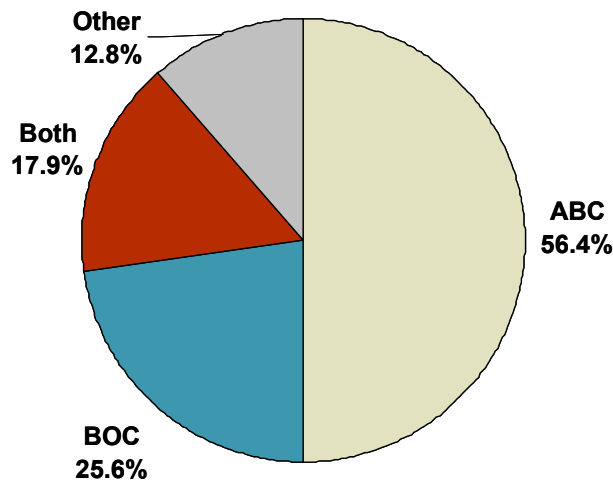
- 28 out of 52 laboratories (53.8%) indicated that the O&P laboratory has documented patient management policies and procedures
- 26 out of 52 laboratories (48.1%) reported having a written policy that establishes time frame between referral to a VA or commercial O&P laboratory and the first appointment with an orthotist/prosthetist

Question 9: Is there a certified provider responsible for the Orthotic/Prosthetic Care in your VA Laboratory? If yes, is this staff member certified by: ABC, BOC, both and/or other?

- 39 of the 52 laboratories (75%) reported that there is a certified provider responsible for the orthotic/prosthetic care, and of those that have a certified provider, 81.6% function in a supervisory capacity within the O&P laboratory

CERTIFYING BODY	PERCENT OF LABORATORIES THAT HAVE A CERTIFIED PROVIDER	NUMBERS OF LABORATORIES THAT HAVE A CERTIFIED PROVIDER
ABC	56.4%	22
BOC	25.6%	10
Both	17.9%	7
Other ³	12.8%	6

Figure V-3. Percentage of Laboratories That Have A Certified Provider



³ Included in the "other" category are labs that identified state licensure and American Physical Therapy Association as being a certifying body; therefore, they were not included in the denominator.

Question 10, 11, 12: Are there services available in your laboratory to respond to patient emergencies? How is patient care information reported to and from referring and consulting physicians: CPRS and/or other? Are Prosthetists or Orthotists able to access patient records? If yes, are patient records: legible, documented in a timely manner, readily accessible?

- 46 of the 52 laboratories (83.6%) have services available to respond to patient emergencies
- 52 or 100% of respondents to this question reportedly utilize CPRS (Computerized Patient Record System) to report patient care information between referring and consulting physicians. Respondents also listed other methods of reporting patient care information such as consults/prosthetic requests, telephone, VISTA, doctor’s notes, and e-mail
- 51 out of 52 (98.1%) of respondents who report having a laboratory reported that their O&P providers have access to patient records
 - Salt Lake City VAMC reported that they couldn’t access patient records. Kansas City VAMC reported that they can access the patient records, but they are not readily accessible

Patient Records Need To Meet Certain Criteria To Meet The ABC Standard

	O&Ps ACCESS PATIENT RECORDS?	LEGIBLE? ⁴	DOCUMENTED IN A TIMELY MANNER? ⁵	READILY ACCESSIBLE? ⁶
Yes	51	49	48	49
No	1	0	2	1

Question 13, 14: Are written “Patient Rights” either posted or accessible to patients in your O&P Laboratory? Are patient satisfaction surveys about your O&P laboratory’s performance and services periodically conducted?

- of the 52 VAMCs that reported to have an O&P laboratory, 44 (84.6%) indicated that “patient rights” are posted and/or accessible within the laboratory
- 25 of 52 (48.1%) O&P laboratories indicated that patient satisfaction surveys are conducted periodically. However, there were no responses regarding the frequency of the patient satisfaction surveys

⁴ 2 did not respond to this question.

⁵ 1 did not respond to this question.

⁶ 1 did not respond to this question.

Question 15, 16: Does your O&P laboratory/VAMC have: Quality Improvement Program, Written Emergency Preparedness Plan, Written Smoking Policy, Documented Safety Management Program, Written Infection Control Program, and/or Documented Equipment Management Plan

- O&P laboratories reportedly meet additional ABC and BOC standards either independently or under the umbrella of VAMC hospital-wide policy. The Booz Allen team combined responses for O&P laboratory and VAMC to show the overall achievement of standards

	WRITTEN INFECTION CONTROL PROGRAM	WRITTEN EMERGENCY PREPAREDNESS PLAN	DOCUMENTED SAFETY MANAGEMENT PROGRAM	QUALITY IMPROVEMENT PROGRAM	DOCUMENTED EQUIPMENT MANAGEMENT PLAN	WRITTEN SMOKING POLICY
% Labs meeting standards	100%	100%	100%	94.2%	96.2%	96.2%
Labs meeting standard	52	52	52	49	50	50

Question 17, 18, 19: Are patient education materials provided to the patient and/or significant other regarding Orthotic/Prosthetic Services? Is follow-up care routinely provided for O&P Laboratory patients? Does your O&P laboratory maintain records to show staff members are currently in good standing with regards to certification education or training? If yes, is this documentation reviewed and updated at least annually?

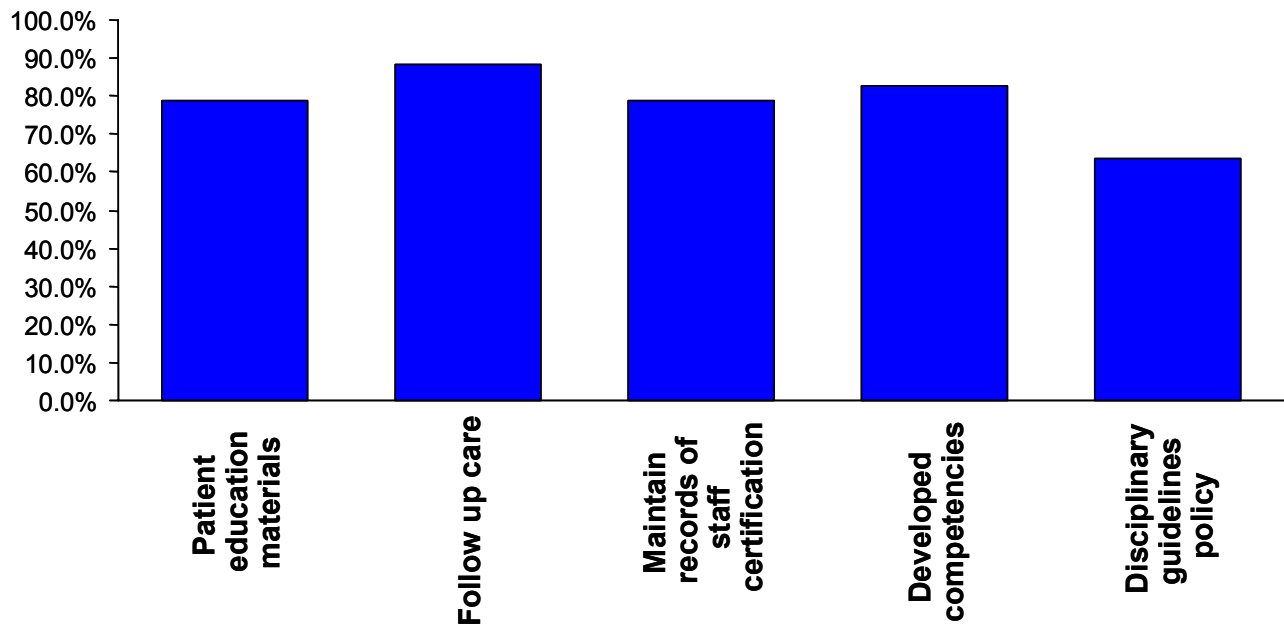
- 41 of 52 VAMCs (78.8%) with O&P laboratories reported that they provide patient education materials
- 46 of 52 VAMCs (88.5%) with O&P laboratories reportedly provide routine, follow-up care
- 41 of 52 VAMCs (78.8%) with O&P laboratories indicated that they maintain records of staff certification, and 41 (100%) of this documentation is reviewed and updated at least annually

Question 20, 21: Has your O&P laboratory developed competencies for O&P clinical staff? If yes, are these competencies documented? Does your O&P laboratory have policies that include disciplinary guidelines for non-compliance with job responsibilities?

- 43 of 52 VAMCs (82.7%) with O&P laboratories reported to have developed competencies for their clinical staff, and 41 (95.3%) of the VA laboratories that have developed these competencies have also documented them⁷
- 33 of 52 VA laboratories (63.5%) reportedly have policies that include disciplinary guidelines for non-compliance

Question 17, 18, 19, 20, 21: This graphic represents the percentage of VA laboratories that have satisfied specific ABC and BOC standards

Figure V-4. ABC & BOC Standards



Question 22, 23: Has any of your staff received formal/specialized training towards ABC and/or BOC certification within the past 2 years? If yes, how was the training funded?

- 12 of 52 VA laboratories (23.1%) reported that their staff have received training towards ABC certification⁸
- 7 of 52 VA laboratories (13.5%) reported that their staff have received training towards BOC certification

⁷ 1 did not respond to the second part of this question.

⁸ One did not respond to this question.

- Certification for ABC and BOC requires formal training and education. Such training and education has been funded differently at each facility

	ABC FUNDING		BOC FUNDING	
BY INDIVIDUAL	75.0%	9	100.0%	7
By VA	66.7%	8	47.1%	4
Free	16.7%	3	28.6%	2
Other ⁹	8.3%	1	14.3%	1

Question 24: Has ABC or BOC certified staff received training or education towards continuing education requirements within the past two years? If yes, how was the training funded? Which organization/university provided the training?

- Out of 52 VAMCs that report having a laboratory, 32 (61.5%) indicate that they have certified staff that have received additional training towards continuing education
 - 8 of the laboratories (15.4%) deny that their ABC and BOC certified staff has received additional training
 - 12 VA laboratories (23.1%) do not have any certified staff¹⁰
- Each staff members gets funding for continuing education differently
 - The majority of respondents report that continuing education is funded either by VA or by themselves

By VA	72.7%	24
By individual	69.7%	23
Free	24.2%	8
Other	6.1%	2

- Providers are receiving continuing education from various organizations and universities, e.g., American Board of Podiatry, AOPA, AAOP, University of Michigan, Northwestern University and internal VA

⁹ Survey respondents indicate that training and education for ABC and BOC certification were received through a variety of organizations and universities. Reported sites include: AAOP (American Academy of Orthotists & Prosthetists), AOPA (American Orthotist & Prosthetist Association), Northwestern University, California State University, US Army and local vendors.

¹⁰ As noted on page V-7, 12.8% (6) labs responded that they are certified by entities that are not identified as being O&P certifying bodies. Of these 6 labs, 1 identified that its staff has received training and education, 1 said that it does not have certified staff, and 4 stated that they have not received training or education towards continuing education requirements.

Question 25: How many O&P laboratory FTEs are at your VAMC?

- of the 48 VAMCs that reported their FTEs, the number of FTEs at each facility ranged from 0 to 16.6¹¹
 - The mean is 5 FTEs
 - The mode is 3 FTEs
 - The median is 3 FTEs

FTE	# OF FACILITIES
0	1 ¹²
0.5	1
1	9
1.5	1
2	9
3	10
4	3
5	5
6	2
7	2
8	2
9	2
16.6	1

¹¹ 4 labs did not respond to this question.

¹² Albany reported that they have 0 FTE, but have reported that they have an Orthotic Laboratory.

Set Questions, Question 26: Please answer 1 set of questions for each member of the O&P laboratory staff: regarding the O&P staff members at your VAMC, what is his/her title/position? Are there position descriptions that define the roles and responsibilities of each staff member?

- Out of 52 VAMCs that have a laboratory, 23 (44.2%) of these positions have descriptions of each staff members' roles & responsibilities¹³
- 50 out of 52 laboratories reported information on a total of 196 staff members

POSITION	NUMBER	PERCENT	POSITION	NUMBER	PERCENT
Orthotist/Prosthetist	67	34.2%	Orthotic Fitter	2	1.0%
Orthotist	46	23.5%	WC Technician	1	0.5%
Prosthetist	20	10.2%	Supervisory Prosthetist	1	0.5%
Supervisory Orthotist/Prosthetist	15	7.7%	Supervisory Orthotist	1	0.5%
Chief O&P laboratory	10	5.1%	Prosthetic Tech	1	0.5%
Health Technician	7	3.6%	Prosthetic Fitter	1	0.5%
Chief Orthotist	7	3.6%	Prosthetic Director of Clinical Activities	1	0.5%
Prosthetic Resident	3	1.5%	Pedorthist	1	0.5%
Orthotic Trainee	3	1.5%	Orthotic Resident	1	0.5%
O&P Technician	3	1.5%	Chief Prosthetist	1	0.5%
Equipment Servicer	3	1.5%	CAD/CAM trainer	1	0.5%
			Total	196	100%

Set Questions: How many hours does each staff member work per week? What is each staff member's grade level?

- VAMCs reported on a total of 178 staff members out of the 196 on the hours per week each staff member works
 - The majority of staff work full-time

Hours per week	0-8	9-16	17-24	25-32	33-39	40
Number of Staff	4	1	2	1	1	169

¹³ The Booz Allen team combined several positions; The Booz Allen team assumed that they have similar job functions, i.e., Lead Orthotist/Prosthetist & Supervisory Orthotist/Prosthetist; Chief & Chief O&P laboratory.

- VAMCs reported on a total of 165 staff out of 196 on the grade level information for each staff member
 - The majority of staff are a grade level 11

GRADE LEVEL	7	9	11	12	Contracted staff	No response
NUMBER OF STAFF	18	48	59	28	12	13

Set Questions, Question 27: Please check the type of certification and degrees received: please check the number of years experience: How many VA laboratories does the Chief Orthotist/Prosthetist at your VAMC supervise/oversee?

- Data was collected on 196 staff members representing 50 of 52 laboratories¹⁴

ABC CERTIFIED	BOC CERTIFIED	NON-CERTIFIED	BACHELOR'S DEGREE OR HIGHER
49	22	94	49
25.0%	11.2%	48.0%	25.0%

- The majority of staff has over 20 years experience¹⁵

Years Experience	0-5	6-10	11-15	16-20	20+
# of Staff	32	24	22	20	81
Percent of total staff	17.9%	13.4%	12.3%	11.2%	45.3%

- of the 29 respondents who answered this question, 65.4% report to supervising only one O&P laboratory. Further detail of supervisory responsibility follows:

# of O&P laboratories	1	2	3	5	6
# of respondents	17	4	3	1	1
% of respondents	65.4%	15.4%	11.5%	3.8%	3.8%

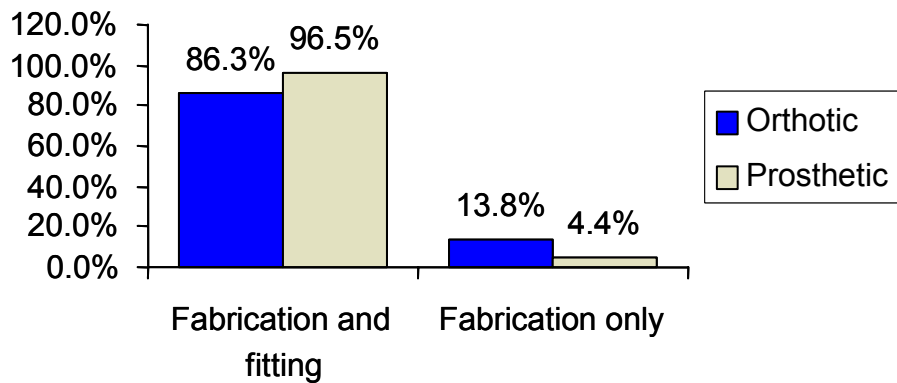
¹⁴ Totals exceeded 100% because survey allowed multiple responses.

¹⁵ Information was not provided for IT staff members.

Question 28, 29: Does Your VAMC contract out for orthotic/prosthetic laboratory services? If yes, does your VAMC contract out for O/P fabrication, O/P fitting and measuring, or both?

- Out of 131 responses, 80 (61.1%) report contracting out for some level of orthotic services¹⁶
 - of this subset, 69 (86.3%) contract out for fabrication and fitting
 - of this subset, 11 (13.8%) contract out for fabrication only
- Out of 131 respondents, 114 (87%) report contracting out for some level of prosthetic services
 - of this subset, 110 (96.5%) contract out for fabrication and fitting
 - of this subset, 5 (4.4%) contract out for fabrication only

Figure V-5. % of VAMCs Contracting Out for Orthotic & Prosthetic Services



¹⁶ 3 did not respond to this question.

Question 30: What industry certification does your VAMC require of its contracted O&P providers?

- of the 131 VAMCs that responded to this survey, 117 responded to this question
- Most VAMCs require some combination of ABC, BOC, both or either certification for their contracted **providers**

ABC	EITHER ABC OR BOC	BOC	ABC & BOC	DOES NOT REQUIRE CERTIFICATION	VA INSPECTION	AOPA/STATE LICENSURE	VAQP	CPO
55	20	19	9	9	2	1	1	1
47.0%	17.1%	16.2%	7.7%	7.7%	1.7%	0.9%	0.9%	0.9%

- of the 131 VAMCs that responded to this survey, 120 responded to this question
- Most VAMCs require some combination of ABC, BOC, both or either accreditation for their contracted **laboratories**

ABC	EITHER ABC OR BOC	DOES NOT REQUIRE CERTIFICATION	BOC	ABC & BOC	VA INSPECTION	AOPA/STATE LICENSURE	VAQP	AAOP	IAOP
50	18	17	15	9	6	2	1	1	1
41.7%	15.0%	14.2%	12.5%	7.5%	5.0%	1.7%	0.8%	0.8%	0.8%

Question 32: Which levels of staff are aware of vendors' obligations to their O&P contracts?

- According to the 131 VAMCs who responded, “Prosthetic Rep” and “Contracting Officer” appear to be the most frequently identified positions of staff who are aware of vendor obligations to their O&P contracts

PROSTHETIC REP	CONTRACTING OFFICER (ACQUISITION & MATERIAL MANAGEMENT)	VPR	ALL O&P STAFF	PROSTHETIC PURCHASING AGENTS	HEALTH TECHNICIANS	PROGRAM SUPPORT ASSTS.	LEAD O&P	MEDICAL MANAGEMENT SPECIALIST	COTR	REHAB SERVICE
107	101	81	73	26	3	2	1	1	1	1
27.0%	25.4%	20.4%	18.4%	6.5%	0.8%	0.5%	0.3%	0.3%	0.3%	0.3%

Question 33: Who at VA is ultimately accountable for vendor compliance with the terms of O&P contracts?

- of the 131 VAMCS, there is some variability in respondents' perceptions of who is ultimately accountable for vendor compliance. A few respondents offered additional positions, such as “prosthetic chief” and “O&P supervisor”

PROSTHETIC REP	CONTRACTING OFFICER (ACQUISITION & MATERIAL MANAGEMENT)	VPR	CHIEF OF PROSTHETICS	PURCHASING AGENTS	PROGRAM SUPPORT ASSTS.	ALL O&P STAFF	COTR	O&P SUPERVISOR	DIRECTOR OF CLINICAL ACTIVITIES	PROGRAM MGMT.
61	45	6	2	1	1	1	1	2	1	1
50.0%	36.9%	4.9%	1.6%	0.8%	0.8%	0.8%	0.8%	1.6%	0.8%	0.8%

Question 34, 35: Are documented records of certification for contracted orthotists and/or prosthetists who work in your VA O&P laboratory or in a contracted O&P laboratory maintained? If yes, where are the documents kept?

- of the 131 respondents, 80 responded that the documented records of contracted O&P staff who work in a VA O&P laboratory is maintained. 30 VAMCs indicated that documentation of

provider certification is maintained.¹⁷ These records may be kept at different locations as evidenced below:

LOCATION OF RECORDS	VA	VENDOR SITE	BOTH	NETWORK BUSINESS CENTER
# of VAMCs	9	5	15	1
% of VAMCs	26.7%	13.3%	50%	3.3%

- of the 131 survey respondents, 119 responded that the documented records of contracted O&P staff who work in a vendor O&P laboratory is maintained. 94 VAMCs indicated that documentation of providers who work in a contracted vendor laboratory is maintained¹⁸

LOCATION OF RECORDS	VA	VENDOR SITE	BOTH	NETWORK BUSINESS CENTER	CLINICAL DIRECTOR
# of VAMCs	9	5	15	1	1
% of VAMCs	26.7%	13.3%	50%	3.3%	1.1%

Question 36: Is every vendor required to carry: General insurance, Malpractice insurance, Product liability insurance, other required local insurance, and/or are vendors are not required to carry insurance?

- 102 out of 131 VAMCs responded to whether their vendors carry insurance
- of the 102 VAMCs that responded, 27 indicated that vendors are not required to carry insurance
- of the remaining, 75 indicated that vendors are required to carry some type of insurance
- The table below provides the breakdown of types of insurance required of the vendor:

GENERAL INSURANCE	PRODUCT LIABILITY INSURANCE	MALPRACTICE INSURANCE	OTHER REQUIRED LOCAL INSURANCE	VENDORS ARE NOT REQUIRED TO CARRY INSURANCE
72.5%	51.0%	43.1%	33.3%	26.5%
74	52	44	37	27

¹⁷ 51 did not respond to this question.

¹⁸ 12 did not respond to this question.

Question 37: Does your VAMC bill 3rd party payers (i.e., private health insurance) for providing O&P appliances and services?

- of the 124 responses, 56 (45.2%) indicate that they currently bill third party payers for O&P related appliances and services
- Follow up conversation with VAMCs indicate that many facilities are in the process of developing methods to bill third party payers for O&P products and services