

ACCREDITATION OF VA ORTHOTIC, PROSTHETIC, AND PEDORTHIC FACILITIES AND PERSONNEL CREDENTIALING

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive outlines the requirements and procedures for the accreditation of Department of Veterans Affairs (VA) orthotic, prosthetic and pedorthic facilities to ensure the highest quality standards for the provision of orthotic, prosthetic, and pedorthic services to Veterans by board-certified orthotists, prosthetists, or pedorthists.

2. SUMMARY OF MAJOR CHANGES:

Amendment dated August 29, 2022, updates the Transmittal Sheet to include to a new paragraph, Implementation Schedule (see paragraph 7.a. and 7.b. on page T-2).

NOTE: *New policies published after the publication of VHA Directive 0999, VHA Policy Management, dated March 29, 2022 now contain implementation dates on the Transmittal Sheet.*

As published September 26, 2019, this directive replaces VHA Directive 2006-065, Accreditation of VA Prosthetic and Orthotic Laboratories, dated December 21, 2006. This directive additionally includes the following major changes:

- a. The terms laboratory/laboratories are exchanged with facility/facilities.
- b. Expands upon the services provided within a VA orthotic, prosthetic, and pedorthic facility that require accreditation to assure consistency with accrediting bodies.
- c. Includes provision and consideration of orthotic, prosthetic, and pedorthic support staff practice.
- d. Includes provisions further detailing levels of responsibility and training.

3. RELATED ISSUES: None.

4. RESPONSIBLE OFFICE: The Deputy Patient Care Services Officer for Rehabilitation and Prosthetic Services, within the Office of Patient Care Services, is responsible for the contents of this directive. Questions may be referred to the National Director of Orthotic and Prosthetic Services at 813-625-5406 or 813-972-2000 ext. 2143.

5. RESCISSIONS: VHA Directive 2006-065, Accreditation of VA Prosthetic and Orthotic Laboratories, dated December 21, 2006, is rescinded.

6. RECERTIFICATIONS: This VHA directive is scheduled for recertification on or before the last working day of September 2024. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded

7. IMPLEMENTATION SCHEDULE:

a. VA medical facilities which currently do not offer Orthotic, Prosthetic and Pedorthic Clinical Services (OPPCS), but aim to expand options for Veterans to receive such care on site, may hire appropriately credentialed OP&P clinical staff to provide OPPCS related care while working toward accreditation. The VA medical facility must become fully compliant with this directive within 18 months upon hiring the first credentialed clinical O&P provider.

b. VA medical facilities which have credentialed OP&P staff and have been delivering OPPCS care, for 6 months or more, at the time of publication of this directive and are currently not accredited, will have 12 months from the time of this amendment's publication date to become fully compliant with this directive.

**BY DIRECTION OF THE OFFICE OF
THE UNDER SECRETARY FOR HEALTH:**

/s/ Lucille B. Beck, Ph.D.
Deputy Under Secretary for
Health for Policy and Services

NOTE: *All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.*

DISTRIBUTION: Emailed to the VHA Publications Distribution List on September 17, 2019.

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ACCREDITATION OF VA ORTHOTIC, PROSTHETIC, AND PEDORTHIC FACILITIES AND PERSONNEL CREDENTIALING

1. PURPOSE

This Veterans Health Administration (VHA) directive outlines the requirements and standards for the accreditation of Department of Veterans Affairs (VA) orthotic, prosthetic, and pedorthic facilities for services and care rendered by board-certified orthotists, prosthetists, or pedorthists only. This is to ensure the highest quality standards for the provision of orthotic, prosthetic, and pedorthic services to Veterans. The intent of this directive is not to restrict other VHA clinical professionals who are not board-certified orthotists, prosthetists, or pedorthists working within their own professional scope of practice as licensed and credentialed to work within the Department of Veterans Affairs (VA). **AUTHORITY:** Title 38 United States Code (U.S.C) 7301(b).

2. BACKGROUND

a. On May 17, 2004, the Under Secretary for Health issued VHA Directive 2006-065, Accreditation of VA Prosthetic and Orthotic Laboratories, mandating that all VA orthotic, prosthetic, and pedorthic facilities become accredited either through the American Board for Certification in Orthotics, Prosthetics and Pedorthics (ABCOPP) or the Board of Certification for Orthotist or Prosthetist (BOC).

b. In accordance with the ABCOPP, accreditation is necessary if a VA medical facility provides comprehensive orthotics or prosthetics, prefabricated or off-the-shelf orthotics, comprehensive pedorthics, non-custom therapeutic footwear, mastectomy or ocular prosthetics. **NOTE:** *The latest edition of the ABCOPP's accreditation criteria can be found at:*

<https://www.abcop.org/facilityaccreditation/patientcare/Pages/general.aspx>.

c. While orthotic, prosthetic, and pedorthic facilities within VA are accredited in accordance with the ABCOPP, responsible staff may elect to pursue accreditation in accordance with the standards and policies outlined by the BOC – or vice-versa. This directive's intent is to ensure accreditation across all VA orthotic, prosthetic, and pedorthic facilities. The BOC's current Accreditation Standards Guide can be accessed at: https://www.bocusa.org/files/Facility_Accreditation_Standards.pdf. **NOTE:** *This linked document is outside of VA control and may not be conformant with Section 508 of the Rehabilitation Act of 1973.*

3. POLICY

It is VHA policy that only accredited orthotic, prosthetic, and pedorthic facilities can fabricate, fit, adjust, repair, align, service, program, provide, or otherwise maintain custom orthoses, prostheses, and pedorthics. The intent of this policy is not to restrict other VHA clinical professionals who are not board-certified orthotists, prosthetists, or pedorthists working within their own professional scope of practice as licensed and credentialed to work within VA. Pursuant to either ABCOPP or the BOC criteria, only

certified orthotists, prosthetists, or pedorthists may independently fabricate, fit, adjust, repair, align, service, program, provide, or otherwise maintain prostheses and custom orthoses appropriate to their credentialed scope of practice. Board-certified orthotists, prosthetists, or pedorthists may supervise, oversee and privilege appropriately credentialed, trained or experienced orthotic, prosthetic, and pedorthic support staff to provide care and services in alignment with the respective accrediting body's (i.e., ABCOPP or BOC) accreditation and privileging provisions and policies. **NOTE:** *The Implementation Schedule added via amendment dated August 29, 2022 is copied below in 3.a. and 3.b.*

a. VA medical facilities which currently do not offer Orthotic, Prosthetic and Pedorthic Clinical Services (OPPCS), but aim to expand options for Veterans to receive such care on site, may hire appropriately credentialed OP&P clinical staff to provide OPPCS related care while working toward accreditation. The VA medical facility must become fully compliant with this directive within 18 months upon hiring the first credentialed clinical O&P provider.

b. VA medical facilities which have credentialed OP&P staff and have been delivering OPPCS care, for 6 months or more, at the time of publication of this directive and are currently not accredited, will have 12 months from the time of this amendment's publication date to become fully compliant with this directive.

4. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring overall VHA compliance with this directive.

b. **Deputy Under Secretary for Health for Operations and Management.** The Deputy Under Secretary for Health for Operations and Management is responsible for:

(1) Communicating the contents of this directive to each of the Veterans Integrated Services Networks (VISN).

(2) Ensuring that each VISN Director has the sufficient resources to fulfill the terms of this directive in all VA medical facilities within that VISN.

(3) Providing oversight of VISNs to ensure compliance with this directive, relevant standards, and applicable regulations.

c. **Deputy Under Secretary for Health for Policy and Services.** The Deputy Under Secretary for Health for Policy and Services is responsible for supporting the implementation and oversight of this directive across VHA.

d. **Veterans Integrated Services Network Director.** The VISN Director is responsible for ensuring that the VISN Prosthetic Representative (VPR) and the VA medical facility Director implement this directive.

e. Veterans Integrated Services Network Prosthetic Representative or VA Medical Facility Director. The VISN Prosthetic Representative or VA medical facility Director, or designee, is responsible for:

(1) Ensuring VA medical facilities that have orthotic, prosthetic, and pedorthic facilities maintain the accreditation or certification status of their respective facilities, practitioners, and support staff.

(2) Ensuring that no orthotic, prosthetic, and pedorthic devices are fabricated or related services provided in an unaccredited facility by board-certified orthotists, prosthetists, or pedorthists.

(3) In partnership with the VA medical facility Chief of Staff or the Service Chief, ensuring that all non-certified orthotists, prosthetists, or pedorthists perform only delegated duties under the direct supervision of their certified counterparts. **NOTE:** For additional information see ABCOPP's Orthotic, Prosthetic, and Pedorthic Scope of Practice, available at: <https://www.abcop.org/individual-certification/Documents/Scope%20of%20Practice.pdf#page=28>. This linked document is outside of VA control and may not be conformant with Section 508 of the Rehabilitation Act of 1973.

f. VA Medical Facility Service Chief or Laboratory Manager (Orthotic, Prosthetic and Pedorthic Facility Manager). The VA medical facility Service Chief or Laboratory Manager (Orthotic, Prosthetic and Pedorthic Facility Manager) is responsible for:

(1) Assuring the Orthotic, Prosthetic and Pedorthic Clinical Supervisor or Designated Lead has the necessary resources to comply with this directive.

(2) Assuring the Orthotic, Prosthetic and Pedorthic Clinical Supervisor or Designated Lead has the support to comply with specific actions, (i.e., fiscal requirements, site visits, documentation) to ensure the facility secures and maintains accreditation.

(3) Assuring the Orthotic, Prosthetic and Pedorthic Clinical Supervisor or Designated Lead uploads the required documentation outlined in paragraph 7.a. of this directive.

g. VA Medical Facility Prosthetic, Orthotic and Pedorthic Clinical Supervisor or Designated Lead. The VA medical facility's Orthotic, Prosthetic, Pedorthic Clinical Supervisor or Designated Lead is responsible for:

(1) Coordinating and leading the personnel and procedures for assuring the VA orthotic, prosthetic, and pedorthic facility is initially accredited and maintains accreditation.

(2) Becoming familiar with the processes, timelines, and personnel related to orthotic, prosthetic, and pedorthic facility accreditation, including an awareness of key points of contact. **NOTE:** Key points of contact may include finance personnel to process payments and liaisons with accreditors and with the VA Central Office (VACO)

Orthotics and Prosthetics Services (OPS) program office. For additional information see the OPS site at:

https://spsites.cdw.va.gov/sites/RPS_STAGE/OPClinical/SitePages/HomePage.aspx.

This is an internal VA Web site that is not available to the public.

(3) Coordinate the accreditation site visit with the accrediting body ensuring the site review team has an appropriate work space and necessary access to Human Resources (HR) and patient records.

(4) Create or secure key accreditation documents (i.e., application for accreditation, proof of payment for accreditation, accreditation site visit(s) results, certificate of accreditation) and to upload these documents onto the Orthotic and Prosthetic Information Repository (OPIR) Facility Accreditation Reporting System. **NOTE:** *The Orthotic and Prosthetic Information Repository (OPIR) Facility Accreditation Reporting System can be accessed at:*

https://spsites.cdw.va.gov/sites/RPS_STAGE/OPClinical/SitePages/HomePage.aspx.

This is an internal VA Web site that is not available to the public.

(5) Educate and familiarize staff (i.e., orthotic, prosthetic, and pedorthic clinicians, practitioner assistants, fitters, technical, administrative and support staff) with the steps, timelines and additional personnel necessary to become accredited or maintain accreditation, and to familiarize subordinate staff with VA's reporting requirements related to accreditation.

(6) Oversee the maintenance of practice in accordance with the responsibility of the accreditation standards.

5. ACCREDITATION

Accreditation improves Veteran care by creating standards for VA orthotic, prosthetic, and pedorthic facility organization, function, and physical environment. Compliance with accreditation standards is initially determined by a review of facility application materials and an onsite survey. The accreditation renewal cycle requires additional subsequent onsite surveys with subsequent renewals. The onsite survey is conducted by qualified site surveyors (ABCOPP or BOC) and results are reported to the Prosthetic, Orthotic, Pedorthic Clinical Supervisor or Designated Lead. Payment to the accrediting body and the generation, maintenance and storage of documents are also key elements of the accreditation process. Practice is then conducted in accordance with the approved standards. Renewal of accreditation must be timely so that accreditation is maintained. **NOTE:** *For additional information on the accreditation process see the ABCOPP Web site at: <https://www.abcop.org/facility-accreditation/patientcare/Pages/getting-started.aspx> and the BOC Web site at: <https://www.bocusa.org/facility-accreditation>.*

6. TRAINING

It is recommended that all VA prosthetic, orthotic, pedorthic Clinical Supervisors or Designated Leads; the VISN Prosthetic Representative; and orthotic, prosthetic, and pedorthic practitioners become familiar with this directive and:

(1) The process of orthotic, prosthetic, and pedorthic facility accreditation and the maintenance of individual credentialing requirements, as described by the ABCOPP and BOC. **NOTE:** For ABCOPP's guidance, please visit the main ABCOPP site at: <https://www.abcop.org/facility-accreditation/patientcare/Pages/getting-started.aspx>. For BOC guidance, please visit the main BOC Web site at: <https://www.bocusa.org/facility-accreditation> or see BOC's Accreditation Standards Guide, available at: https://www.bocusa.org/files/Facility_Accreditation_Standards.pdf. This linked document is outside of VA control and may not be conformant with Section 508 of the Rehabilitation Act of 1973.

(2) ABCOPP and BOC's documentation and payment process associated with orthotic, prosthetic, and pedorthic facility accreditation.

(3) Upon receipt of facility accreditation, become familiar with documentation reporting and maintenance requirements associated with orthotic, prosthetic, and pedorthic facility accreditation via the OPIR Facility Accreditation Reporting System, available at: https://spsites.cdw.va.gov/sites/RPS_STAGE/OPClinical/SitePages/ClinicalCare.aspx. **NOTE:** This is an internal VA Web site that is not available to the public.

7. RECORDS MANAGEMENT

a. Original accreditation documents (i.e., application for accreditation, proof of payment, accreditation site visit results, certificate of accreditation) shall be maintained and accessed according to records management requirements set forth by the local VA medical facility and the respective accreditor. Copies of the required documents (i.e., application for accreditation, proof of payment, accreditation site visit results, certificate of accreditation) shall be uploaded to the OPIR's Facility Accreditation Reporting System. See paragraph 4.f.

b. All records regardless of format (paper, electronic, electronic systems) created in this directive shall be managed per the National Archives and Records Administration (NARA) approved records schedule found in VA Records Control Schedule 10-1. Questions regarding any aspect of records management should be directed to the facility Records Manager or local Records Liaison.

8. REFERENCES

a. 38 U.S.C. 7301(b).

b. The Orthotic and Prosthetic Information Repository (OPIR) Facility Accreditation Reporting System, available at: https://spsites.cdw.va.gov/sites/RPS_STAGE/OPClinical/SitePages/HomePage.aspx. **NOTE:** This is an internal VA Web site that is not available to the public.

c. American Board for Certification in Orthotics, Prosthetics and Pedorthics (ABCOPP), Facility Accreditation, General Info, available at: <https://www.abcop.org/facility-accreditation/patientcare/Pages/general.aspx>.

d. American Board for Certification in Orthotics, Prosthetics & Pedorthics (ABCOPP), Orthotic, Prosthetic, and Pedorthic Scope of Practice, available at: <https://www.abcop.org/facility-accreditation/patientcare/Pages/general.aspx>.

e. The Board of Orthotist and/or Prosthetist Certification (BOC), Facility Accreditation Web site, available at: <https://www.bocusa.org/facility-accreditation>.

f. The Board for Orthotist and/or Prosthetist Certification (BOC), Accreditation Standards Guide, available at: https://www.bocusa.org/files/Facility_Accreditation_Standards.pdf. **NOTE:** *This linked document is outside of VA control and may not be conformant with Section 508 of the Rehabilitation Act of 1973.*