

Frequently Asked Questions: Psychosomatic Medicine

Question	Answer
Sponsoring Institutions	
<p>How can an accredited program's sponsoring institution be changed to another institution/hospital?</p> <p><i>[Program Requirement II.A.3.d).(2)]</i></p>	<p>Transfer of sponsorship requires a letter from the program's current sponsor (the designated institutional official (DIO) and that institution's senior administrative official) indicating willingness to give up sponsorship, and a letter from the proposed sponsor (the DIO and that institution's senior administrative official) indicating willingness to sponsor the program. The letters should be addressed to the executive director of the Residency Review Committee (RRC), with a copy to the Director of the Department of Field Activities at the ACGME.</p> <p>The RRC will review each request and determine if a site visit is required prior to a transfer of sponsorship. Upon approval of a transfer of sponsorship, the name of the program changes to that of the new sponsor in all ACGME records.</p> <p>If the existing sponsoring institution wishes to retain the program, it is suggested that the issue be resolved locally between the hospital and its sponsoring institution. The welfare of the fellows currently appointed to the program must be considered.</p> <p>For additional information, please review the ACGME website at: http://www.acgme.org/acWebsite/fieldStaff/fs_faq.pdf</p>
Program Director	
<p>How should a change in program leadership be reported?</p> <p><i>[Program Requirement II.A.1]</i></p>	<p>A new program director must be reported electronically through the ACGME's Accreditation Data System (ADS), using the program's existing password. All of the information requested must be provided. Once the required information has been submitted, a new temporary program password will be sent to the e-mail address provided for the new program director. ADS will generate a notice of the change to the RRC. The RRC reviews all program director changes that have occurred since the last regularly-scheduled RRC meeting, and will notify programs if the change is not approved. Programs whose institutions require documentation for approval of a change in program director should contact the executive director of the RRC at the ACGME.</p>
<p>What specialty qualifications other than American Board of Psychiatry and Neurology (ABPN) certification are acceptable to the RRC?</p>	<p>The RRC accepts only ABPN certification in the subspecialty; no other credentials or "Equivalent Qualifications" are accepted. The RRC does not grant waivers to this requirement and will withhold accreditation of new programs that are not led by ABPN-certified psychosomatic medicine psychiatrists.</p>

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<i>[Program Requirement II.A.2.b)]</i>	
<p>What type of change in the program's curriculum is considered major and requires RRC approval?</p> <p><i>[Program Requirement II.A.3.d).(2)]</i></p>	<p>Major changes in program structure that require approval by the RRC include: changes in participating sites; anticipated changes in fellow complement (unless a temporary increase is due to a medical leave or remediation of three months or less); the presence of other programs (such as combined programs); new elective rotations, including global health electives; or a change in block rotations that significantly alters fellow experience. Programs should contact the executive director of the RRC at the ACGME if they are unsure whether RRC approval is needed.</p>
Faculty	
<p>Must a psychosomatic medicine program maintain a specific minimum number of faculty members?</p> <p><i>[Program Requirement II.B.1.a)]</i></p>	<p>There must be at least two core faculty members, including the program director, with current ABPN certification in psychosomatic medicine. This is the only minimum requirement regarding number of faculty members.</p>
<p>Must all ABPN-certified psychosomatic medicine core faculty members be full-time, or may they be part-time faculty members?</p> <p><i>[Program Requirements I.A; II.B.2)]</i></p>	<p>Faculty members may be full-time or part-time. Except for the program director, the amount of time the faculty must devote to the program is not specified; however, programs may be cited for non-compliance with the common program requirement for 'a sufficient number of faculty' if problems with faculty teaching and/or supervision or excessive service obligations are reported.</p> <p>The program director is always considered a core faculty member and so must devote a minimum of 15 hours per week to the program.</p>
<p>How much of the faculty must participate in scholarly activity to fulfill the faculty scholarship requirements?</p> <p><i>[Program Requirement II.B.5)]</i></p>	<p>All physician faculty members must demonstrate scholarship through participation in national committees or educational organizations. A majority of physician faculty must demonstrate scholarship through peer-reviewed publications/book chapters/review articles and presentations at regional and national meetings. Some faculty should demonstrate scholarship through peer-reviewed funding, in addition to the above. Programs may be cited for non-compliance with this requirement if all physician faculty members do not provide evidence for regular (at least annual) scholarly activity, since active faculty scholarship is needed in order to establish and maintain an educational environment of inquiry and scholarship.</p>
Fellow Appointment	
<p>How must a request for a change in fellow complement be submitted?</p> <p><i>[Program Requirement II.A.3.c).(2)]</i></p>	<p>All requests for changes in fellow complement, whether permanent or temporary, must be made through ADS. Note that ACGME staff will not receive the fellow complement request until the DIO has approved the request.</p> <p>Additional information about requesting a change in fellow complement for psychiatry programs</p>

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	is posted on the ACGME website at http://www.acgme.org/acWebsite/RRC_400/400_resComp.pdf .
Can a PGY-4 resident be appointed to a fellowship in psychosomatic medicine? <i>[Program Requirements III.A.1; Int.C.2]</i>	Only residents who have completed an ACGME-accredited program in general psychiatry are eligible for appointment to a psychosomatic medicine fellowship. Electives in psychosomatic medicine completed during general psychiatry education are not counted toward fellowship credit.
Are international medical graduates eligible for appointment to a fellowship in psychosomatic medicine? <i>[Program Requirement III.A.1]</i>	Regardless of country of origin, only physicians who have completed an ACGME-accredited program in general psychiatry are eligible for appointment to a psychosomatic medicine fellowship.
When should programs request a temporary increase in fellow complement? Under what circumstances will the RRC approve a temporary increase in fellow complement? <i>[Program Requirement III.B]</i>	A temporary increase in fellow complement should be requested when the number of on-duty fellows will temporarily exceed the total approved fellow complement. This situation may occur under the following circumstances: an institution is closing and the program wishes to accept displaced fellows; a current fellow requires a medical leave for greater than three months and the program wishes to recruit the full approved complement for the next entering class; the educational program for a current fellow must be extended for more than three months beyond the required 12 months of education due to the need for remediation. Temporary increases should be limited to one position per year unless unique circumstances occur. When considering a request for an increase in fellow complement, whether temporary or permanent, the RRC reviews the program's current accreditation status, recent program history, Resident/Fellow Survey data, and program resources. The decision is based on the how an increase might impact the education of current fellows and the presence of sufficient resources to support the education of the proposed number of fellows.
When a complement increase is approved, does the RRC consider the additional position as one FTE or one person? <i>[Program Requirement Int.C.3]</i>	One approved fellow position is considered one FTE, not one person, which means the program may fill one approved position with two fellows, each completing his or her education on a half-time basis. Note that while part-time education is permitted, the program must be completed within a two-year period.
Duty Hours	
Must every interprofessional team include representation from every profession listed in the requirement?	No. The Review Committee recognizes that the needs of specific patients change with their health status and circumstances. The intent of the requirement is to ensure that the program has access to these professional and paraprofessional personnel, and that interprofessional teams will be constituted as appropriate and as needed, not to mandate that all be included in every

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[Program Requirement: VI.F.1]	case.
PIF Preparation	
What is the timetable for submission of an application for accreditation of a new program in the subspecialty of psychosomatic medicine?	<p>The application must be received by the RRC staff at the ACGME no later than 15 weeks prior to a scheduled RRC meeting. This provides time for internal processing, including assignment of a unique program number and internal review of the application to ensure that it is complete. The RRC reviews fellowship applications without a prior site visit. If the RRC determines that it cannot conclude its evaluation without a site visit, one will be scheduled for at least four months later. The site visit report must be received by the RRC staff 10 weeks before the next RRC meeting.</p> <p>Additional information about the application process can be found on the ACGME website at http://www.acgme.org/acWebsite/home/Accreditation_Application_Process.asp.</p>
Can additional materials, such as program brochures, containing information requested in the program information form (PIF) be submitted with the application documents?	All information should be provided in the designated section of the PIF. No additional material is to be attached to the PIF unless expressly requested in the PIF instructions.
What font should be used if the fonts specified in the PIF are unavailable?	Comparable fonts and point sizes may be used as long as they are easy to read. The questions should be in a smaller bold type to differentiate it from the answer.
How should programs determine which physician faculty members meet the requirements for core faculty to be listed in the PIF physician faculty roster?	Faculty members who devote at least 15 hours per week to fellow education and administration are automatically designated as core faculty, and CVs must be provided for each of these core faculty members. <u>All</u> physician faculty members, up to a maximum of 25, who provide essential teaching, supervision, research involving fellows, and/or administrative support, regardless of whether they provide 15 or more hours to the program, should be listed in the physician faculty roster. For each physician faculty member listed, the program must indicate how much time <u>on average throughout an academic year</u> he or she devotes to clinical supervision, administration related to the program, didactic teaching, and research involving fellows. This should be listed as actual hours on average per week, calculated over one typical academic year. The role of each core faculty in the program must be included in the CV and this role should be consistent with information provided in the later narratives describing rotations in the specialty specific portion of the PIF.
How should programs determine which non-physician faculty members should be included in the non-physician faculty roster	Non-physician faculty members (usually PhDs and nurses) who provide required/essential teaching and/or supervision, including research supervision, should be included in the non-physician faculty roster. These faculty members may be full-time or part-time regular tenure-

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of the PIF?	track or non-tenure-track appointees, adjunct appointees, or volunteer faculty members as defined by each institution. In addition, other non-physician professionals who provide required education (e.g., social workers) should be included in the non-physician faculty roster. CVs must be provided for each listed individual. The role of each listed individual in the program must be included in the CV and this role should be consistent with information provided in the later narratives describing rotations in the specialty specific portion of the PIF.
Can rotations be entered by weeks instead of by months on the block diagram in the PIF?	Programs that organize their schedules by weeks may enter the “rotation months” in blocks of four FTE weeks. The narrative section of the PIF should indicate if the schedule is by months or weeks. If the total number of rotation “months” does not equate to 12 months (52 weeks) for all sites combined per year, an explanation must be provided.

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