



Integrative Medicine Criteria for Recognition

Academic Consortium Fellowship Review Committee New Program Standards & Checklist

Please provide the following information about your program:

1. Points of contact. Provide telephone and email contact information for your fellowship director and any other points of contact.
2. Faculty. Please list your faculty, both core and affiliated, and how each of them contribute to fellowship education. Provide a CV for each.
3. Please provide a detailed description of your curriculum, including a block diagram that breaks down different units or topics, as well as an overall schedule for how year/s of training are organized.
4. Please include information that makes your program unique.
5. Please submit your letter of intent to [add /ACIMH contact here]. Below is a letter template for your convenience.

Sample Letter of Intent

Academic Consortium for Integrative Medicine & Health
15875 Boones Ferry Rd, #2216
Lake Oswego, OR 97035

Re: Application for Academic Consortium and ABPS Fellowship Program Status

Dear Academic Consortium Fellowship Review Committee Members:

These documents are being submitted to the ABPS in order for our Fellowship {Program Name} to be added to your roster of approved Integrative Medicine Fellowships. Enclosed is a description of our curriculum, which we believe meets or exceeds existing standards required for approval. We are fully confident our fellowship graduates will be well prepared to take and pass the ABOIM examination and to present themselves to the public as competent Integrative Medicine qualified physicians.

Our institution, the {Program Name}, has long had clinical, educational and research programs in integrative Medicine. {Provide an explanation here. What follows is an example.} We were one of the NIH's R 25 awarded programs to develop curriculum in CAM over 15 years ago. We also were one of the eight pilot schools that helped create the Integrative Medicine in Residency program and have garnered not only NIH grant funding, but also philanthropic and institutional support, along with national and international recognition for our program in Integrative Medicine. This includes multiple scholarly presentations and publications by faculty, residents, students, and fellow. (Provide information that applies to your program, this is just an example of what you could include should it pertain to your program).

{Additional information about the program or specific fellows that have completed fellowship training in your program, etc.}

Sincerely,

{Fellowship Director Name and Contact Information}

Integrative Medicine Fellowship: Fellowship Review Committee Internal Checklist

I. Sponsoring Institution

One sponsoring institution is ultimately responsible for the program.

- Institutional support
 - The sponsoring Institution will ensure the availability of adequate resources for fellow education.
 - The sponsoring Institution will provide adequate administrative support to the program director based upon its size and configuration.
 - The sponsoring Institution and fellowship program will foster wellbeing including:
 - Enhance the meaning that each fellow finds in the experience of being a physician,
 - Protecting time with patients by minimizing non-physician obligations and providing administrative support;
 - Promoting progressive autonomy and flexibility;
 - Enhancing professional relationships;
 - Providing attention to scheduling, work intensity, and work compression that impacts fellow well-being;
 - evaluating workplace safety data and address safety of fellows and faculty members.
- A Fellowship Director with authority and accountability for the operation of the program. For programs with Co-Directors, please provide one contact person.

Qualifications of the program director(s) must include:

- Requisite specialty expertise and documented educational and administrative experience acceptable to the Fellowship Review Committee;
 - Current certification in the specialty by the ABOIM, or specialty qualifications that are acceptable to the Fellowship Review Committee such as Board eligible for ABOIM certification and certified within the next recognition cycle;
 - Faculty Director'(s)' CV has been submitted for review.
- A sufficient number of affiliated faculty with documented qualifications to instruct & supervise all Fellows at location.
 - Physician faculty must have current certification in the specialty by the ABOIM, or possess qualifications judged acceptable to the Academic Consortium Fellowship Review Committee.
 - Affiliated non-physician faculty (i.e. noninstitutional faculty) must have current licensure or certification in their specialty, or possess qualifications judged acceptable to the Academic Consortium Fellowship Review Committee.
 - Fellowship Directors and core faculty are encouraged to participate in leadership or faculty development programs relevant to their roles in the training program. Furthermore, faculty must pursue CME credit to remain current in their emerging fields consistent with the ABOIM recertification requirements.
 - The sponsoring institution should conduct an exit interview for each fellow who has completed or left the program.

II. Educational Program:

The curriculum must contain the following educational components:

- Overall educational goals for the program, which the program must make available to Fellows and faculty
- An approved Fellowship program in Integrative Medicine must provide a minimum of 1000 hours of graduate medical education, which must include:
 - A minimum of 300 hours of clinically focused training (integrative approaches to prevention, health promotion, and the management of disease/restoration of health). This can be delivered in-person, on-line, or a combination of both.
 - Supervision: Faculty members functioning as supervising physicians must delegate portions of care to fellows based on the needs of the patient and the skills of each fellow.
 - A minimum of 100 hours of live training that can be a blend of didactic, experiential and/or clinical. It is recommended that 40 hours include in-person clinical training.
 - No more than 200 hours of research endeavors and/or ACGME---defined scholarly activity can be counted toward the 1000-hour requirement. This includes time spent:
 - preparing or lecturing on Integrative Medicine topics;
 - preparing articles, book chapters, abstracts or case reports for publication in peer---reviewed journals;
 - working on peer---reviewed performance improvement, quality assurance/quality improvement, or education research;
 - preparing peer---reviewed funding/grant preparation;
 - preparing peer---reviewed abstracts presented at regional, state, or national specialty meetings.
 - participating with the faculty in the initiation and conduct of clinical trials.
 - Calculation of Fellowship hours (for reading, on-line curriculum and non-integrative clinic visits) to be clearly delineated by each program through a standardized means including, and not limited to, [CME hour calculation algorithms](#) and documentation of percentage of clinic visit time dedicated to Integrative Medicine.
- Competency---based goals and objectives for each educational activity, which the program must distribute to residents and faculty, in either written or electronic form
- The core curriculum must include a broad educational program that is based upon the core knowledge content of Integrative Medicine, using the ABOIM exam content areas as a minimum foundation:

Please refer to the domains found here - <https://www.abpsus.org/integrative-medicine-description>

III. Assessment:

The program must provide objective assessments of competence in patient care skills and medical knowledge, based on the specialty-specific milestones at a minimum of a quarterly basis.

- Patient care: The program must facilitate the Fellow in Integrative Medicine in building a therapeutic relationship, clinical reasoning and patient management. This assessment must involve either direct in-person observation of Fellow-patient encounters, or a suitable equivalent using technology (video, web streaming, etc.).
- The integrative medicine fellow should demonstrate compassionate, appropriate, and effective patient care based on the existing evidence base in integrative medicine for disease prevention, treatment of illness, and health promotion. This needs to be assessed by the fellowship program, either through direct observation, video technology, or by written submissions from the fellows in a format created by the fellowship. The written submissions should accurately reflect the knowledge skills and attitudes of their fellows.
- Perform an in-depth integrative medicine assessment or in case of on-line learning develop a written narrative to demonstrate the competencies below:

Demonstrate advanced skill in collecting essential components of an integrative medicine assessment, including but not limited to:

- Identifying patients' health concerns, goals, and expectations.
- A thorough conventional medical history and physical exam.
- Current and past integrative, complementary and alternative medicine (CAM) therapy use, including patient experience and response.
- Current and past dietary supplement intake.
- Nutrition, physical activity, sleep pattern.
- Stressors and stress management skills.
- Personal relationships, social network, support systems.
- Religious and spiritual history.

Develop an appropriate differential diagnosis and perform a diagnostic evaluation based on available guidelines and evidence for conventional and integrative testing.

Demonstrate advanced skills in developing written integrative medicine treatment plans based on patient values and preferences, up-to-date scientific evidence, and clinical judgment.

Treatment plans should:

- Integrate conventional medicine, evidence-based complementary therapies, and lifestyle modification, as appropriate.
- Address patient concerns in one or more domains (e.g., physical, psychological, social, spiritual).
- Demonstrate competency in fundamentals of the therapeutic relationship including effective communication skills, motivational interviewing, appropriate goal setting, identification of barriers, and methods to sustain positive behavior change.

Counsel patients on the risks, benefits, and alternatives to an integrative medicine treatment plan, either in person or in writing, including a discussion of existing evidence to facilitate informed decision making on integrative approaches to care.

For additional information, please read [“Developing and implementing core competencies for integrative medicine fellowships.”](#)

- Medical knowledge: The program must use an objective validated formative assessment method, including, but not limited to, longitudinal assessments, direct observations, or a final examination. A remediation pathway must be defined for those Fellows failing to achieve a minimum standard.

The Fellowship Review Committee reserves the right to interview current and past fellows and involved faculty.