

# Creation of a new program or track or expansion of a program

## RESOURCE GUIDE

AADPRT Workforce Taskforce 2020

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This guide should serve as a resource for program or fellowship directors or other Psychiatry GME leaders who are interested in creation of new residency programs or expansion of existing programs. This guide reviews some of the core considerations, practical steps and lessons learned. We include input from those with expertise as well as survey data from AADPRT members.

AADPRT offers ACGME consultation services, workshops during the annual meeting on topics related to creation of new programs and expansion of existing programs and resources on topics of interest in the Virtual Training Office (VTO).

### FUNDING

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Sources of potential funding for new GME positions differ from state-to-state and institution-to-institution. This list is not all-inclusive, but a starting point to explore in a program or fellowship's specific context.

#### Local/community sources of funding

- a. Hospitals – over-the-cap funding
- b. Community Mental Health organizations – specific rotations or tracks
- c. Foundations – specific needs identified, ie. underserved areas or populations

#### State sources of funding

- a. Medicaid funding – State/Federal match program
- b. State funding of GME positions – mechanisms differ state-to-state. Strategies to explore include: partnerships with state policy advocacy partners, state mental health leadership, local and state APA chapters

#### Federal sources of funding

- a. Medicare funding – current priorities are rural, new programs in shortage subspecialties (Psychiatry) and addiction
- b. Veteran's affairs (VA) and Military funding – institutions affiliated with VA and Military programs can request additional stipends/support
- c. Health Resources and Services Administration (HRSA)
  - a. Teaching Health Center GME (THCGME) programs – prioritizes service to rural and underserved areas – [bhw.hrsa.gov/grants/medicine/thcgme](http://bhw.hrsa.gov/grants/medicine/thcgme)

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- b. Addiction Medicine Fellowship (AMF) Program – new program for addiction fellowship training in underserved, community-based settings – [hrsa.gov/grants/find-funding/hrsa-20-013](https://hrsa.gov/grants/find-funding/hrsa-20-013)

#### **2019 AADPRT survey information on funding sources**

The majority of new or expanded program positions nationally have come from: 1) Local institutions, 2) health care systems, 3) state funding, 4) Medicare, Medicaid, VA, and 5) Philanthropy or grants

### CLINICAL INFRASTRUCTURE

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Creating new residency positions, either within an existing program or a new program requires consideration of the clinical training experiences. Questions to consider: 1) How will training additional residents influence current resident training? 2) Is expansion focused on specific types of training (i.e. tracks or subspecialty)? 3) Are there types of clinical experiences that should be added? Some of the answers to these questions are linked to funding sources, as above, which will guide the next steps.

- a. Expansion of existing sites- Impact on psychiatry residents and other trainees (see survey information below)
- b. Developing new clinical experiences
  - a. Track or Subspecialty training – Rural psychiatry, Public or community psychiatry
  - b. Specific clinical experiences/skills – Interprofessional Education, Telepsychiatry, Integrated care, Collaborative care, Interventional psychiatry/Neuromodulation

#### **2019 AADPRT survey information on training of non-psychiatrists:**

**71%** of respondents perceive a **positive impact** on their program of training non-psychiatrists

**87.5%** of programs are training residents or fellows from **other departments**. **78.1%** are training **psychology interns or post-docs**. **50.5%** are training **APNs/APN students**. **44.8%** are training **PAs/PA students**. **40%** are training nursing students. **34.3%** are training **pharmacy trainees**.

**62%** of programs are providing some form of **interprofessional training**

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### EDUCATIONAL INFRASTRUCTURE

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Creating new residency positions, either within an existing program or a new program requires consideration of the educational resources, including institutional support, faculty recruitment, retention and development, curriculum development and administrative support.

- a. Institutional support – conversations with leaders (GME, Chairs, etc.) within your institution should focus on value, services and unmet needs
- b. Faculty – issues for faculty include buy-in, recruitment/retention of excellent faculty, development opportunities and ongoing support, resources/protected time for education, competitive salaries
- c. Curriculum – Track or subspecialty curriculum development
- d. Administration – Training of existing staff or additional hiring

Available resources of interest:

- Leadership development programs (WIMS, ELAM)
- GME consultants within or outside of your institution
- Healthcare consultants
- National organizations (AADPRT, AAMC)
- Peer faculty programs
- Online faculty development
- Local, regional, state faculty development programming

### RECRUITMENT AND RETENTION OF TRAINEES

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New or expanded programs will want to attract applicants by promoting and distinguishing themselves. Important steps include: 1) Developing a mission statement and collaborative goals, 2) Creating a high-quality program, 3) Developing an online presence (informative website, etc.) 4) Focus on diversity and teamwork 5) Transparency, feedback and continuous quality improvement