

Procedure for Processing Hospice and Palliative Medicine (HPM) Program Applications

According to ACGME Policy HPM programs are *dependent* subspecialty (also referred to as ‘fellowship’) programs.

- Dependent subspecialty programs are required to function in conjunction with an ACGME-accredited specialty (sometimes referred to as a ‘core’) program.
- The continued accreditation of the subspecialty program is dependent on the specialty/core program’s maintaining its accreditation.
- The dependent subspecialty program must be sponsored by the same ACGME-accredited sponsoring institution of the linked specialty/core program and should be geographically proximate.
- ACGME will only consider HPM program applications for accreditation from a sponsoring institution that also sponsors an ACGME-accredited specialty/core program in one of eleven areas.

A hospice and palliative medicine program will be accredited only if the sponsoring institution also sponsors an ACGME accredited program in at least one of the following specialties: Anesthesiology, Emergency Medicine, Family Medicine, Internal Medicine, Neurology, Psychiatry, Obstetrics and Gynecology, Pediatrics, Physical Medicine and Rehabilitation, Radiation Oncology, or Surgery. (Program Requirement I.A.1)

- This requirement ensures that the sponsor of the HPM program has experience with ACGME and a basic understanding of its processes, policies, and standards. It also ensures that there will be review and oversight of the sponsoring institution by the ACGME, either via the Institutional Review Committee or the Residency Review Committee – if the sponsor is a single program sponsor.
- The HPM applicant is required to: (a) identify which specific ACGME-accredited specialty/core program it will align with and (b) describe the relationship to the specialty/core program in the application.
- As dependent subspecialty programs:
 - HPM programs have dependent accreditation statuses.
 - The specialty/core program is notified of all correspondence with the HPM program and vice versa.
 - If the specialty/core program with which the HPM program is associated has its accreditation withdrawn, the HPM program’s accreditation will be administratively withdrawn.
 - If an HPM program needs to re-align and establish a new dependent relationship with a new specialty/core program, it must request voluntary withdrawal of accreditation and submit a new application.

The RRC for Family Medicine will review and accredit all HPM programs, regardless of which specialty/core program the HPM program is aligned with.

- This is a new/different accreditation model than what has been done in past with other multidisciplinary subspecialties (e.g., sleep and sports medicine).
- The new model avoids the possibility of one or two RRCs accrediting a very small number of HPM programs.
- It allows one RRC to develop expertise in reviewing and accrediting HPM programs.
- It allows HPM programs to be reviewed in a consistent and standard way.

Access the FAQ to obtain more information about the HPM applications and programs.

http://www.acgme.org/acWebsite/RRC_120/62008FAQ_HPM_AA_02012009.pdf