

ACTION PAPER

TITLE: Medical Supervision of Psychiatry Residents and Fellows

WHEREAS:

According to the ACGME Program Requirements for Graduate Medical Education in Psychiatry, “Supervision in the setting of graduate medical education provides safe and effective care to patients; ensures each resident’s development of the skills, knowledge, and attitudes required to enter the unsupervised practice of medicine; and establish a foundation for continued professional growth.”

The ACGME recommends that “each patient must have an identifiable and appropriately-credentialed and privileged attending physician (or licensed independent practitioner as specified by the applicable Review Committee) who is responsible and accountable for the patient’s care.”

The ACGME Review Committee does not clearly indicate the qualifications and level of training of licensed independent practitioners tasked with the medical supervision of residents and fellows, and leaves it to the discretion of the training program.

In several documents and guidelines published by the ACGME for various specialties like Family Medicine and Internal Medicine, it has been stated that the program has the onus of demonstrating that the appropriate level of supervision is in place for all residents who care for patients.

Recently, it has become an emerging and noticeable trend for academic institutions to permit the medical supervision of resident and fellow trainees by mid-level practitioners (also called advanced practice providers), like psychiatric nurse practitioners and physician assistants. Although the evidence is limited and anecdotal, it is concerning and steadily accumulating despite the fact that published data is not available at this time. Many trainees have indicated to this as being a poor training experience primarily because of the mismatch in the level of education, training, and expectations.

The American Academy of Emergency Medicine (AAEM) updated their position statement on advanced practice providers (APP) on 1/29/2019 to state: “APPs should not supervise emergency medicine residents, nor should they interfere in the education or clinical opportunities for emergency medicine residents.”

The American Psychiatric Association (APA) does not have a position statement or recommendation on the medical supervision of psychiatry residents and fellows by mid-level practitioners.

BE IT RESOLVED:

That the APA adopts the position statement: Medical Supervision of Psychiatry Residents and Fellows stating: *“American Psychiatric Association supports the medical supervision of psychiatry residents and fellows only by licensed physicians. Mid-level practitioners should not supervise psychiatry residents and fellows, nor should they interfere in the education or clinical opportunities of psychiatry trainees.”*

AUTHORS:

Cristina Secarea MD, Area 3 RFM Representative and ACORF Chair
Sanya Virani MD, MPH Area 2 RFM Deputy Representative

SPONSORS:

Elias Shaya MD, Maryland Psychiatric Society Representative
Navjot Brainch MD, Area 2 RFM Representative

ESTIMATED COST:

Author: \$ 790
APA: Leave Blank

ESTIMATED SAVINGS: None

ESTIMATED REVENUE GENERATED: None

ENDORSED BY:

Assembly Committee of Resident-Fellow Members (ACORF)

KEYWORDS: supervision, ACGME, guidelines, training, residents, fellows, licensed independent practitioners, mid-level practitioners, advanced practice provider

APA STRATEGIC PRIORITIES: *(Pick all that apply to the paper.)*

Education
Advancing Psychiatry

REVIEWED BY RELEVANT APA COMPONENT: (with attached comments as appropriate)

References:

1. ACGME Program Requirements for Graduate Medical Education in Psychiatry
https://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/400_psychiatry_2017-07-01.pdf
2. American Academy of Emergency Medicine (AAEM) Updated Position Statement on Advanced Practice Providers
3. <https://www.aaem.org/resources/statements/position/updated-advanced-practice-providers>