

AACP Scholarship and Training Committee Report
October 10, 2007

Members present:

LaMelle
Saunders
Sowers
Christensen
Lim
Jewell
Hutton
Nitsche

The focus of the meeting revolved around ways in which the AACP can play a more active role in providing guidance to institutions planning, or currently offering, training initiatives for those psychiatrists pursuing careers in community psychiatry. The question posed to the committee members was, “How can our organization assume a leadership role in facilitating the planning, development, implementation and growth of training programs in community/public sector psychiatry?”

Due to time constraints, discussion centered specifically on postgraduate-level Fellowship Programs across the country and examined Columbia’s very successful Public Psychiatry Fellowship, specifically addressing the applicability of the core elements of that initiative to the development and growth of other Fellowship initiatives.

Several action steps were proposed:

1. Under the auspices of the AACP, a survey would circulate to residency training /Fellowship programs across the country to identify programmatic structure, curricular content, challenges faced regarding initiation/ implementation, and strategies for maintenance/ growth. Jules Ranz, MD, has already developed a nascent set of questions and the committee requested that he and Stephanie LaMelle refine a questionnaire, circulate it to the Board members for comments/approval, and distribute to programs across the country.
2. Once we obtain data and have a better idea of the nature and number of training programs that are offering Fellowships in Community Psychiatry, we can work on modifying and generalizing the core elements/principles defining the “Columbia model” in order to lend guidance to programs across the country. This particular set of broader, more general principles can function as programmatic guidelines and would be placed upon the AACP website and disseminated by the AACP.
3. Consider a presentation to the Board at the Winter Meeting by Drs. Ranz and LaMelle based upon the Columbia model’s core principles, the status of the questionnaire/data, and the feasibility of moving ahead with the AACP assuming a more visible role in this area of scholarship and training.

The implications of this approach are several:

1. Positions the AACCP to assume a visible role in providing a programmatic advisory body for Fellowship programs in Community Psychiatry.
2. Allows the AACCP to serve as a resource for “mentoring” programs that are newly established or are facing challenges of sustainability.
3. Develops the future potential for the AACCP to assume a role as a certifying body that would be capable of offering a Certificate of Added Qualification in Community Psychiatry Practice once the means of measuring/assessing competencies have been established for those who are working in community psychiatry settings and/or have completed formal training programs in community/public sector psychiatry.