# Addiction Psychiatry Milestones

The Accreditation Council for Graduate Medical Education



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### Addiction Psychiatry Milestones

The Milestones are designed only for use in evaluation of fellows in the context of their participation in ACGME-accredited residency or fellowship programs. The Milestones provide a framework for the assessment of the development of the fellow in key dimensions of the elements of physician competence in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competence, nor are they designed to be relevant in any other context.

## Addiction Psychiatry Milestones

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American Board of Psychiatry and Neurology
Review Committee for Psychiatry

#### **Understanding Milestone Levels and Reporting**

This document presents the Milestones, which programs use in a semi-annual review of fellow performance, and then report to the ACGME. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME Competencies organized in a developmental framework. The narrative descriptions are targets for resident/fellow performance throughout their educational program.

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert fellow in the specialty or subspecialty. For each reporting period, the Clinical Competency Committee will review the completed evaluations to select the milestone levels that best describe each learner's current performance, abilities, and attributes for each subcompetency.

These levels *do not* correspond with post-graduate year of education. Depending on previous experience, a junior fellow may achieve higher levels early in his/her educational program just as a senior fellow may be at a lower level later in his/her educational program. There is no predetermined timing for a resident to attain any particular level. Fellows may also regress in achievement of their milestones. This may happen for many reasons, such as over scoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the fellow.

Selection of a level implies the fellow substantially demonstrates the milestones in that level, as well as those in lower levels (see the diagram on page iv).

#### **Additional Notes**

Level 4 is designed as a graduation *goal* but *does not* represent a graduation *requirement*. Making decisions about readiness for graduation and unsupervised practice is the purview of the program director. Furthermore, Milestones 2.0 include revisions and changes that preclude using Milestones as a sole assessment in high-stakes decisions (i.e., determination of eligibility for certification or credentialing). Level 5 is designed to represent an expert fellow whose achievements in a subcompetency are greater than the expectation. Milestones are primarily designed for formative, developmental purposes to support continuous quality improvement for individual learners, education programs, and the specialty. The ACGME and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

Some milestone descriptions include statements about performing independently. These activities must occur in conformity to ACGME supervision guidelines as described in the Program Requirements, as well as to institutional and program policies. For example, a fellow who performs a procedure independently must, at a minimum, be supervised through oversight.

A Supplemental Guide is also available to provide the intent of each subcompetency, examples for each level, assessment methods or tools, and other available resources. The Supplemental Guide, like examples contained within the Milestones, is designed only to assist the program director and Clinical Competency Committee and is not meant to demonstrate any required element or outcome.

Additional resources are available in the <u>Milestones</u> section of the ACGME website. Follow the links under "What We Do" at <u>www.acgme.org</u>.

The diagram below presents an example set of milestones for one subcompetency in the same format as the ACGME Report Worksheet. For each reporting period, a fellow's performance on the milestones for each subcompetency will be indicated by selecting the level of milestones that best describes that fellow's performance in relation to those milestones.

Level 1	Level 2	Level 3	Level 4	Level 5
Establishes and maintains a therapeutic alliance and provides appropriate psychotherapy	Uses current practice guidelines in evaluation and psychotherapeutic treatment	Participates in the delivery of evidence- based psychotherapy	Delivers various types of evidence-based psychotherapy	Competently teaches at least one evidence-based psychotherapy to other learners or contributes to scholarly work in psychotherapy for addictive disorders
Sets treatment goals in collaboration with the patient, including community resources	Develops comprehensive, individualized treatment plans for patients with uncomplicated substance use and addictive disorders	Incorporates co- occurring medical and psychiatric disorders into a comprehensive individualized treatment plan	Develops comprehensive, individualized treatment plans for patients with complex presentations	
Comments:				Completed Level 1
Selecting a responsible of a level milestones in the levels have been demonstrated.	implies that t level and in lower	between in lower demonst	g a response box on the levels indicates that no levels have been substrated as well as <b>some</b> es in the higher level(s	nilestones tantially

#### Patient Care 1: Evaluation and Diagnosis of the Patient with Addiction or Co-Occurring Disorders

- **A.** Thorough evaluation of the patient with substance use and addictive disorders, including patient interview, gathering of collateral information, use of screening, assessment tools, and risk assessment
- **B.** Synthesis of information to generate patient formulation and differential diagnosis specific to substance use, addictive, and co-occurring disorders

occurring disorders				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs biopsychosocial history and targeted examination, including assessment for patient safety and risk of self and other harm, intoxication, and overdose	Incorporates biopsychosocial history, examination, lab, and collateral data into patient evaluation	Performs comprehensive patient evaluation of routine patient presentation, including interpretation of toxicology testing	Performs comprehensive patient evaluation, including patients with complex presentations	Provides a significant contribution in education or scholarly work in the evaluation of patients with substance use and addictive disorders (e.g., teaches a course, research, publication)
Organizes, summarizes information, and develops a differential diagnosis	Organizes and accurately summarizes information, and develops a differential diagnosis while avoiding premature closure	Incorporates collateral information, other assessments, subtle findings, and conflicting information into a complete differential diagnosis	Uses all available information to generate a complete and accurate differential diagnosis; takes steps to resolve apparent inconsistencies, and continuously reassesses the diagnosis	Provides a significant contribution in education or scholarly work in differential diagnosis and diagnostic criteria
Comments:			NIc+V-+C	Samanlata d Laval 4
				Completed Level 1
			NOT TELF	133C33dDIC

	nerapy, Behavioral, and Ps dence-based psychotherape			dictive Disorders
Level 1	Level 2	Level 3	Level 4	Level 5
Establishes and maintains a therapeutic alliance and provides appropriate psychotherapy	Uses current practice guidelines in evaluation and psychotherapeutic treatment	Participates in the delivery of evidence-based psychotherapy	Delivers various types of evidence-based psychotherapy	Competently teaches at least one evidence-based psychotherapy to other learners or contributes to scholarly work in psychotherapy for substance use and addictive disorders
Sets treatment goals in collaboration with the patient, including community resources	Develops comprehensive, individualized treatment plans with patients to treat uncomplicated substance use and addictive disorders	Incorporates co- occurring medical and psychiatric disorders into a comprehensive individualized treatment plan	Develops comprehensive, individualized treatment plans for patients with complex presentations	
Comments:				Completed Level 1

#### Patient Care 3: Pharmacological Interventions for Substance Use and Addictive Disorders

- A. Uses evidence-based pharmacologic treatments for substance use, addictive, and co-occurring disorders, including monitoring of patient response and appropriate adjustment of treatment; to include long-term and acute management

∟evel 1	Level 2	Level 3	Level 4	Level 5
Appropriately prescribes commonly used by sychopharmacologic agents and recognizes patients with acute action or withdrawal	Appropriately prescribes pharmacologic agents for substance use and addictive disorders, including for the management of intoxication and withdrawal states	Manages pharmacokinetic and pharmacodynamic drug interactions for patients prescribed multiple medications and/or using non-prescribed substances	Titrates dosages; manages side effects and complex drug interactions for patients prescribed multiple medications; and manages complex intoxication, withdrawal, and long-term management	Contributes significantly to education or scholarly work in psychopharmacology for substance use and addictive disorders
Sets treatment goals in collaboration with the patient, including general indications, dosing parameters, and common side effects for prescribed psychopharmacologic agents	Develops comprehensive, individualized treatment plans, including psychopharmacology, for patients with uncomplicated substance use and addictive disorders	Incorporates co- occurring medical and psychiatric disorders into a comprehensive individualized treatment plan, including psychopharmacology	Develops comprehensive, individualized treatment plans, including psychopharmacology, for patients with complex presentations	
Comments:				

#### Medical Knowledge 1: Clinical Neuroscience of Substance Use and Addictive Disorders

- A. Neuroanatomy and neurophysiology specific to substance use and addictive disorders
- **B.** Neuropharmacology of addictive substances

C. Neuropharmacology of treatment modalities specific to substance use and addictive disorders				
Level 1	Level 2	Level 3	Level 4	Level 5
Describes neurobiological and genetic hypotheses of common psychiatric disorders	Describes the basic neuroanatomy of addictive disorders	Describes the basic and neurophysiology related to the pathophysiology of addictive disorders	Incorporates the latest research findings into discussions of the neuroscience of addictive disorders	Designs a neuroscience course focusing on substance use and addictive disorders
Describes the categories of common and uncommon addictive substances	Demonstrates knowledge of the basic principles of the neuropharmacology of common addictive substances	Describes the detailed neuropharmacology of all classes of addictive substances, including emerging addictive substances	Teaches others about the neuropharmacology of addictive substances	Participates in a scholarly activity related to the neuroscience or neuropharmacology of addiction
Describes the general indications and common side effects for commonly prescribed psychopharmacologic agents for addictive disorders	Describes the neuropharmacology and mechanisms of action of agents used for treatment of addictive disorders	Demonstrates understanding of the detailed mechanisms of action and side effects of pharmacologic agents for addictive disorders, including the potential for medication interactions	Integrates knowledge of neuropharmacology into selection of appropriate agents for patients	addionom
Comments:  Not Yet Completed Level 1				
			Not Yet A	Assessable

#### Medical Knowledge 2: Psychopathology

- **A.** Knowledge of the developmental trajectories, risk factors, and biological, environmental, social, psychological, and epidemiological factors that contribute to the development of substance use and addictive disorders
- **B.** Knowledge of criteria to determine the appropriate level of care for the patient (including risk factors for morbidity and mortality)
- C. Knowledge at the interface of addiction psychiatry and other fields of medicine

C. Knowledge at the interface of addiction psychiatry and other fields of medicine					
Level 1	Level 2	Level 3	Level 4	Level 5	
Demonstrates knowledge of risk factors that contribute to the development of substance use and addictive disorders	Describes biological, social, psychological, and epidemiological factors that contribute to or protect against the development of substance use and addictive disorders	Describes the developmental trajectories of substance use and addictive disorders	Applies knowledge of the biological, environmental, social, psychological, and epidemiological factors that contribute to the development of substance use and addictive disorders	Teaches others about or engages in research on biological, environmental, social, and psychological factors that contribute to the development of substance use and addictive disorders	
Describes appropriate criteria to determine the necessary level of care for patients	Incorporates risk of morbidity and mortality from substance use in describing the appropriate level of care for patients	Consistently applies appropriate criteria to determine necessary level of care for patients	Applies current practice guidelines for the treatment of substance use and addictive disorders	Teaches others about or engages in research related to level of care and treatment guidelines	
Demonstrates sufficient knowledge to perform initial evaluations of patients with medical, psychiatric, and substance use and addictive disorders	Describes the medical effects of addictive substances and psychiatric comorbidity	Applies knowledge of addictive and co-occurring conditions in patients with medical and psychiatric disorders	Demonstrates advanced knowledge sufficient to treat patients with complex medical, psychiatric, and addictive co-occurring disorders	Teaches others about or engages in research related to the interface of medical, psychiatric, and substance use and addictive disorders	
Comments:					
	Not Yet Completed Level 1 Not Yet Assessable				

Medical Knowledge 3: Psychotherapy, Behavioral, and Psychosocial Treatments, including Individual Therapies, Group
Therapies and Family Therapies; Motivational-Based Therapies; Contingency Management; 12-Step Facilitation; Self-Help
Groups; Cognitive Behavioral Therapies
A. Knowledge of the theoretical underpinnings, techniques, components, and evidence base of the psychotherapies and behaviora

and psychosocial treatments specific to substance use and addictive disorders

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Level 1	Level 2	Level 3	Level 4	Level 5
Lists the currently available non- pharmacologic treatment modalities for substance use and addictive disorders	Describes basic theoretical principles, components, and techniques for the use of several non-pharmacologic treatments for substance use and addictive disorders	Demonstrates knowledge of the evidence base for non- pharmacological treatments for substance use and addictive disorders	Demonstrates comprehensive knowledge of the current evidence for non- pharmacological treatments for substance use and addictive disorders	Teaches others or engages in research on the delivery of non-pharmacological treatments for substance use and addictive disorders
Comments:			Not Vot (	Completed Level 1

Not Yet Completed Level 1 Not Yet Assessable

#### **Systems-Based Practice 1: Patient Safety and Quality Improvement**

A: Analyzes patient safety events

**B:** Appropriately discloses patient safety events

C: Participates in quality improvement

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to improve systems to prevent patient safety events
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (simulated or actual)	Participates in disclosure of patient safety events to patients and patients' families (simulated or actual)	Discloses patient safety events to patients and patients' families (simulated or actual)	Models or mentors others in the disclosure of patient safety events
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., reduced infection rates, overdose rates, suicide rates; increased access to evidence-based treatment)	Participates in local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses quality improvement initiatives at the institutional or community level

#### Systems-Based Practice 2: System Navigation for Patient-Centered Care

A: Coordinates patient care

**B:** Safely transitions care

C: Addresses population and community health needs

C: Addresses population and community health needs				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of care coordination	Coordinates care of patients in routine clinical situations effectively using the roles of the interprofessional teams	Coordinates care of patients in complex clinical situations effectively using the roles of the interprofessional teams	Role models effective coordination of patient-centered care among different disciplines and specialties	Analyzes the process of care coordination and leads in the design and implementation of improvements
Identifies key elements for safe and effective transitions of care and hand-offs	Performs safe and effective transitions of care/hand-offs in routine clinical situations	Performs safe and effective transitions of care/hand-offs in complex clinical situations	Role models and serves as a patient advocate for safe and effective transitions of care/hand- offs within and across health care delivery systems, including outpatient settings	Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes
Demonstrates awareness of population and community health needs and disparities	Identifies specific population and community health needs and inequities for the local population	Uses local resources effectively to meet the needs of a patient population and community	Participates in changing and adapting practice to provide for the needs of specific populations	Leads innovations and advocates for populations and communities with health care inequities
Comments:  Not Yet Completed Level 1				

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#### Systems-Based Practice 3: Physician Role in Health Care Systems

A: Understanding and working within the health care system

B: Understanding health care financing and advocacy

**C:** Transitioning to practice

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the complex health care system	Describes how components of a complex health care system are interrelated, and how this impacts patient care	Discusses how individual practice affects the broader system	Manages various components of the complex health care system to provide high-value, efficient, and effective patient care and transitions of care	Advocates for or leads systems change that enhances high-value, efficient, and effective patient care and transitions of care
Describes practice models and basic addiction care payment systems	Identifies barriers to care in different health care systems	Engages with patients in shared decision making and advocates for appropriate care and parity	Advocates for patient care needs, including mobilizing community resources	Participates in advocacy activities for access to care in addiction treatment and reimbursement
Identifies basic knowledge domains for effective transition to practice	Demonstrates use of information technology and documentation required for medical practice	Describes core administrative knowledge needed for transition to practice	Analyzes individual practice patterns and professional requirements in preparation for practice	Educates others to prepare them to transition to practice
Comments:			Not Yet	Completed Level 1

Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates how to access and summarize available evidence, and incorporate patient preferences and values, to the care of a routine patient	Articulates clinical questions and elicits patient preferences and values to guide evidence-based care	Locates and applies the best available evidence, integrated with patient preference, to the care of complex patients	Critically appraises conflicting evidence and applies it to guide the care of an individual patient	Mentors others to critically appraise and apply evidence for complex patients, and/or participates in the development of guidelines
Comments:  Not Yet Completed Level 1				

Level 1	Level 2	Level 3	Level 4	Level 5
Accepts responsibility for personal and professional development by establishing goals	Demonstrates openness to performance data (feedback and other input) to inform goals	Seeks performance data episodically	Seeks performance data consistently	Models consistently seeking performance data
Identifies the factors that contribute to gap(s) between expectations and actual performance	Analyzes and reflects on the factors that contribute to gap(s) between expectations and actual performance	Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Challenges assumptions and considers alternatives in narrowing the gap(s) between expectations and actual performance	Mentors others on reflective practice
Recognizes opportunities to improve performance	Designs and implements a learning plan, with supervision	Independently creates and implements a learning plan	Uses performance data to measure the effectiveness of the learning plan, and, when necessary, improves it	Facilitates the design and implementation of learning plans for others

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies and describes core professional behavior	Demonstrates professional behavior in routine situations	Demonstrates professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in oneself and others	Models professional behavior and ethical principles
Recognizes that one's behavior in professional settings affects others	Takes responsibility for one's own professionalism lapses and responds appropriately	Describes when and how to appropriately report professionalism lapses in others, including strategies for addressing common barriers to reporting	Responds appropriately to professionalism lapses of colleagues	Seeks to address issues of lapses in professionalism on a systems level
Demonstrates knowledge of core ethical principles	Analyzes straightforward situations using ethical principles	Analyzes complex situations using ethical principles and recognizes when help is needed	Recognizes and uses appropriate resources for managing and resolving ethical dilemmas as needed (e.g., ethics consultations, literature review, risk management/legal consultation)	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution

Level 1	Level 2		Level 3			Level 4	Level	5
Completes tasks and responsibilities	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in routine situations; identifies potential contributing factors for lapses; describes strategies for ensuring timely task completion in the future	o r	responsib timely ma appropria	nner with te attention to omplex or		Recognizes when others are unable to complete tasks and responsibilities in a timely manner and assists in problem solving	ideas/	des innovative /plans for vements to systen mes
Introduces oneself as the patient's fellow physician	Accepts the role of the patient's physician and takes responsibility (under supervision) for ensuring that the patier receives the best possible care	l nt	the patien family, an members primary p	zed by onese t, the patient's d medical staf as the patient sychiatric care physiciar	s ff t's	Displays increasing autonomy and leadership in ensuring patients receive the best possible care	in den respoi ensuri	es as a role model monstrating nsibility for ing that patients we the best possibl
			$\overline{\ \ }$					

Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the importance of addressing personal and professional well-being	Lists available resources for personal and professional well-being	With assistance, proposes a plan to promote personal and professional well-being	Independently develops a plan to promote personal and professional well-being	Creates institutional level interventions that promote colleagues' well-being
	Describes institutional resources designed to promote well-being	Recognizes which institutional factors positively or negatively affect well-being	Describes institutional programs designed to examine systemic contributors to burnout	Contributes to institutional programs designed to examine systemic contributors to burnout, or participates in research in this area

This subcompetency is not intended to evaluate a fellow's well-being, but to ensure each fellow has the fundamental knowledge of factors that impact well-being, the mechanisms by which those factors impact well-being, and available resources and tools to improve well-being.

Level 1	Level 2	Level 3	Level 4	Level 5
Uses language and non- verbal communication to demonstrate empathic curiosity and respect, and establish rapport	Establishes a therapeutic relationship in straightforward encounters using active listening and clear language	Establishes a therapeutic relationship in challenging patient encounters; uses nonverbal communication skills effectively	Effectively establishes and sustains therapeutic relationships, with attention to the patient's/patient's family's concerns and context, regardless of complexity	Mentors others in situational awareness and critical self-reflection to consistently develop positive therapeutic relationships
Identifies common barriers to effective communication	Identifies complex barriers to effective communication	When prompted, reflects on personal biases that may contribute to communication barriers	Independently recognizes personal biases and attempts to proactively minimize their contribution to communication barriers	Models self-awareness practice while identifying and teaching a contextual approach to minimize communication barriers
Recognizes communication strategies may need to be adjusted based on clinical context	Organizes and initiates communication with the patient/patient's family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying understanding of the clinical situation	With guidance, sensitively and compassionately delivers medical information, elicits the patient's/patient's family's values, goals, and preferences; acknowledges uncertainty and conflict	Independently uses shared decision making to align the patient's/patient's family's values, goals, and preferences with treatment options to make a personalized care plan	Models shared decision making in communication with the patient/patient's family, including in situations with a high degree of uncertainty/conflict
Comments:				

Interpersonal and Communication Skills 2: Interprofessional and Team Communication						
Level 1	Level 2	Level 3	Level 4	Level 5		
Uses language that values all members of the health care team	Communicates information effectively with all health care team members	Uses active listening to adapt one's communication style to fit team needs	Coordinates recommendations from different members of the health care team to optimize patient care	Models flexible communication strategies that value input from all health care team members, resolving conflict when needed		
Recognizes the need for ongoing feedback with the health care team	Solicits feedback on performance as a member of the health care team	Communicates concerns and provides feedback to peers and learners	Respectfully communicates feedback and constructive criticism to peers and superiors	Facilitates regular health care team-based feedback in complex situations		
Comments:	Comments:  Not Yet Completed Level 1					

Interpersonal and Comm	unication Skills 3: Comm	unication within Health Ca	are Systems			
Level 1	Level 2	Level 3	Level 4	Level 5		
Accurately records information and communicates verbally with the rest of the health care team	Demonstrates organized diagnostic and therapeutic reasoning through notes and verbal communication	Concisely and appropriately reports diagnostic and therapeutic reasoning in the patient record and through verbal communication	Communicates clearly and concisely, in an organized written form, and through verbal communication, including providing anticipatory guidance to others	Contributes to departmental or organizational initiatives to improve communication systems		
Communicates about administrative issues through appropriate channels, as required by institutional policy	Respectfully communicates concerns about the system	Uses appropriate channels to offer clear and constructive suggestions to improve the system	Initiates difficult conversations with appropriate stakeholders to improve the system	Facilitates dialogue regarding systems issues among larger community stakeholders		
Comments:	Comments:  Not Yet Completed Level 1					