INTRODUCTION
Accreditation by the Society of Behavioral Sleep Medicine (SBSM) is a voluntary program offered to Behavioral Sleep Medicine (BSM) training programs that meet the standards outlined in this document. The goals of accreditation are:

- To promote excellence in the preparation of pre-doctoral, doctoral, masters-level, internship/residency, and postdoctoral trainees who enter the professional practice of behavioral sleep medicine
- To promote appropriate training for BSM trainees interested in sitting for the BSM certification examination
- To encourage BSM training programs to monitor and enhance the efficacy of their educational activities by means of continuous self-study and improvement
- To certify to the educational community and general public that a BSM training program has clearly defined and appropriate standards and objectives
- To assure the educational community and the general public that a BSM training program continues to maintain appropriate standards and conditions under which their achievement can reasonably be expected
- To provide a forum in which accredited BSM training programs are encouraged to communicate and share ideas that will ultimately raise the level and standards of BSM training

ACCREDITATION APPLICATION INSTRUCTIONS

1. The program director will review the “Standards for Accreditation of Behavioral Sleep Medicine Training Program Self-Assessment” document to determine if the training program meets criteria for accreditation. If so, proceed to Step 2. If you have any questions about the Standards for Accreditation or are unsure if you should proceed, please feel free to contact the SBSM Accreditation Committee for assistance. All inquiries may be sent to Kathryn Hansen; Society of Behavioral Sleep Medicine, 1522 Player Drive, Lexington, KY 40511 or email to kathryn@behavioralsleep.org.

2. Cover Sheet: Please complete the cover sheet and include it as the first page of your application. This sheet must be signed by the program director.

3. Application Questions: When completing the application, please insert your answers after each question and do not delete the questions from the final document. For questions that are not applicable, please respond “not applicable” with an explanation stating why it does not apply. In addition to descriptive answers, tables, charts and graphs may be used to represent types and hours of training. Please include any attachments requested to provide documentation of each standard.

4. For new accreditation applications: Please answer all questions in the section titled “Application Questions”.

For reaccreditation applications: Please answer all questions in the sections titled “Application Questions” AND “Additional Questions for Reaccreditation”. If answers to “Application Questions” are the same as for the prior application, you may cut and paste answers from the prior application.
5. Exhibits and other materials should be included as numbered attachments and inserted at the end of the application.

6. Enclose a check made out to the “Society of Behavioral Sleep Medicine” in the amount of $500 for processing of a new accreditation application and the amount of $300 for processing of a reaccreditation application. No site visit is required.

7. Please mail completed applications with a check enclosed to the SBSM national office: Kathryn Hansen; Society of Behavioral Sleep Medicine, 1522 Player Drive, Lexington, KY 40511

**SBSM Accreditation Application Review:**

After careful and thoughtful review, the Accreditation Review Committee will confer on the training program one of the following:

- BSM Accreditation of the training program for a maximum of 5 years.
- Probationary accreditation, with specific explanations of issues that must be addressed within a given time frame to convert to full accreditation. A proviso report will be distributed to the applying program to meet the conditions of full accreditation. If the conditions are not satisfied, probationary accreditation automatically converts to withdrawal of accreditation
- Denial of Accreditation with specific changes that must be made before re-applying to satisfy accreditation standards. Reapplication for BSM Training Program Accreditation by the SBSM will be treated as a new application and requires an additional processing fee to be submitted. Denial of accreditation will be recommended when one or more of the following conditions are identified:
  
  1. The training program fails to meet any of the four accreditation standards listed below.
  2. Responses to the application questions are determined to be insufficient or non-compliant with the accreditation standards and correspondence with the program is not able to resolve the issue in order to meet accreditation standards.
  3. The training program fails to resolve provisos within the period of time allotted to correct the deficiencies.
  4. The SBSM has evidence that the training program submitted falsified documents or misrepresented information in seeking to achieve or retain accreditation.
Cover Sheet  
Society of Behavioral Sleep Medicine  
Application for BSM Training Program Accreditation

Type of Program: [ ] Doctoral/Pre-doctoral Internship/Residency  [ ] Postdoctoral  
[ ] Masters  Ages (check all that apply):  [ ] Pediatrics (< 18 yrs)  [ ] Adult  
Specify:  [ ] New Program  [ ] Re-Accreditation

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<th>Name of Institution:</th>
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<tbody>
<tr>
<td>Department Affiliation:</td>
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<td>Program Director:</td>
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<td>Correspondence Address:</td>
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Date of Application:

NOTE: This form must be signed and dated by the director of the BSM training program.  
*I certify that the statements made in this application are true and complete to the best of my knowledge.*

Signature  Print name clearly  Date
Standards for Accreditation of Behavioral Sleep Medicine Training Programs
Self-Assessment

Please review the standards below to determine SBSM accredited training program eligibility. Applicants are encouraged to contact the Accreditation Committee with any questions and can direct inquiries to Kathryn Hansen, Executive Director at kathryn@behavioralsleep.org.

Programs must be in compliance with all accreditation standards at the time of application. If it is determined in the application review process that a training program is not in compliance with the required standards, the application will be returned with the issues identified and the program will need to re-submit its application once the required standards are met.

STANDARD 1 – TRAINING CONTEXT

The training context in which the BSM training is housed, referred to from here on as the home program, should be one of the following:

1. Doctoral training program
2. Pre-doctoral internship/residency
3. Post-doctoral program
4. Masters-Level training program (LCSW, LCPC, etc.)

Most often these will be housed in departments of clinical psychology, counseling psychology, social work or nursing, or additionally at the postdoctoral level, in psychiatry. The home program should already be accredited by the primary body responsible such as a health care provider training program (i.e. APA-approved clinical psychology graduate program) and should be affiliated with, but not necessarily housed within an AASM accredited sleep disorders center. In programs where the BSM trainee is not fully qualified to practice independently in the respective field, the trainee is appropriately identified as “student,” “trainee,” “intern,” “resident,” “fellow” or another title indicating training status.

The sleep training offered should be consistent with the scope of BSM, which is defined as the study of behavioral, psychological, and physiological factors underlying normal and disordered sleep across the life span; and, the development and application of evidence-based behavioral and psychological approaches to the prevention and treatment of sleep disorders and co-existing conditions. (Please see Scope of Practice document on the SBSM website.)

STANDARD 2 – TRAINING REQUIREMENTS

The program must describe a plan to meeting the following:

**Hours:** 1,000 hours of supervised clinical training are required. This may be satisfied by 1,000 hours of BSM training or may be divided between 500 hours of BSM training and 500 hours of behavioral medicine training. The training experience may be distributed between didactic work, patient contact, and research, and must be primarily cognitive/behavioral in nature.

**Training Period:** The training period in a fully accredited training program cannot exceed 4 years.
Training Parameters: The following guidelines apply to programs with 1,000 hours of BSM training. At minimum 35% of the BSM training experience must be a practicum in the provision of clinical service such as direct patient contact, report preparation, supervision, and attending case conferences (i.e. 350 hours). At minimum, 1 hour of supervision per week is required. Hours obtained delivering services in clinical research (e.g. performing clinical evaluations related to a research study or, for example, providing interventions in an insomnia treatment study) can satisfy no more than 25% of hours required for provision of clinical service. At minimum 10% (i.e. 100 hours) of the supervised BSM training time must be devoted to didactics, such as formal coursework, directed reading, attending invited lectures, etc. The remainder of the training time (550 hours) may be distributed between additional clinical service, research, and didactics. Research training in any area related to BSM is strongly encouraged, but not required. Provision of technological services (e.g. conducting nocturnal polysomnograms and Multiple Sleep Latency Tests as well as scoring sleep records) cannot constitute more than 15% of the BSM training experience.

The following guidelines apply to programs that choose to split between 500 hours of BSM and 500 hours of non-sleep-related behavioral medicine training:

1. If 500 hours of behavioral medicine training are part of the program, the distribution and nature of its training components must mirror the 1,000 hour BSM model. The content of behavioral medicine training should be health-related, as exemplified by anxiety disorders, weight control, smoking cessation, and the like.

2. Paralleling the guidelines from above, when the 1,000 hours are split between BSM and behavioral medicine, then each must have 35% of its training time in provision of clinical services (i.e. 175 hours) and at least 10% in didactics (50 hours) with the remaining 275 hours to be distributed between additional clinical service, research, and didactics.

Supervision and evaluation: The format and frequency of supervision must be clearly outlined. Also, the faculty resources must be described; including, the availability of supervisors and instructors. Students or postdoctoral trainees should receive written evaluations of their progress in BSM at regular intervals occurring no less than at the 50% point and completion point of training.

Documentation and monitoring of progress: The method for documenting the progress of current trainees (e.g., training plan, supervision plan) should be specified by the program. In addition, a method or plan for tracking the progress of graduates from the program should be reported.

Setting: The setting for the BSM training program must be specified. The BSM clinical practicum training should be in a setting that is characterized by its sleep identity and should be affiliated with, but is not necessarily a sleep disorders center. The setting should be multidisciplinary and should treat patients with a broad range of sleep disorders. If the setting is a sleep disorder center, it must be accredited by the AASM, eligible for accreditation by the AASM or accredited by another nationally recognized organization. Other settings would include an insomnia clinic located in a department of psychology. Despite the apparent narrow limits of the name “insomnia clinic” such clinics usually treat the range of disorders that fall within the BSM umbrella.
STANDARD 3 – PROGRAM DIRECTOR AND PROGRAM FACULTY

One individual must be designated the director of the BSM training program. **The director of the BSM training program should be BSM certified (or be eligible to sit for the BSM examination) OR at least one other member of the program faculty involved in the training program must be BSM certified (or be eligible to sit for the BSM examination).** The BSM certified individual must be licensed to practice in the state where the training program is located, and must meet one of the following qualifications:

A. The BSM certified individual must be present at the training program site on a regular basis and not less than 8 hours each month.

B. The BSM certified individual must direct and provide ongoing oversight of the training program’s training activities and their quality.

C. The BSM certified individual must participate in at least 10 credits per year of BSM, BM and/or sleep medicine continuing education, averaged over 3 years.

A variety of training roles for the BSM certified individual are acceptable. Examples include: training director, clinical supervisor and member of training program staff, clinical consultant (full-time or part-time), or adjunct faculty. **(The types of training roles that are acceptable for BSM certified individuals need to be reviewed and approved by the SBSM Board of Directors).**

STANDARD 4 – EDUCATIONAL FOCUS

The scope of BSM training is broadly defined. There are at least 20 substantive areas of educational focus (listed below), and these may be divided into “core areas” and “other areas.” Every training program must provide thorough coverage of the core areas and substantial exposure to most of the other areas. Programs seeking accreditation should provide its trainees with educational opportunities that address sleep health across the life span in order to provide comprehensive education for BSM clinicians. Therefore, a program that does not clinically serve both pediatric and adult populations must provide evidence of educational exposure across the life span not only to produce well-rounded BSM clinicians but also to adequately prepare its graduates for a BSM certification exam.

Core Areas:
- Differential diagnosis of insomnia and comparable pediatric sleep disorders
- Treatment approaches to insomnia and comparable pediatric sleep disorders
- Theories of primary insomnia and comparable pediatric sleep disorders
- Obstructive sleep apnea, central apnea, and sleep-related hypoventilation
- Management of CPAP compliance
- Periodic limb movement disorder and restless legs syndrome
- Normal sleep physiology
- Aging and sleep
- Pediatric sleep disorders
- Methods for measurement and monitoring of sleep

Other Areas:
- Chronobiology
Application Questions

Standard 1 - Training Context

1. Provide an overview of your program along with a detailed outline of the BSM training program; number of hours, types of training and number of patients seen in the last 12 months. A chart and/or table may be helpful in conveying this information.

2. Please give an estimate (in percentages, the sum of all to equal 100%) of the patient populations seen at this training center by diagnosis:

<table>
<thead>
<tr>
<th>OSA</th>
<th>Insomnia</th>
<th>RLS</th>
<th>Narcolepsy</th>
<th>Parasomnia</th>
<th>Circadian Rhythm</th>
<th>Other</th>
</tr>
</thead>
</table>

3. Please give an estimate (in percentages, the sum of all to equal 100%) of the patient populations seen at this training center by ages:

<table>
<thead>
<tr>
<th>0-2 years</th>
<th>3-12</th>
<th>13-19</th>
<th>20-29</th>
<th>30-55</th>
<th>56-75</th>
<th>76+</th>
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4. Is the “home” program (e.g. clinical psychology or nursing graduate program or clinical psychology internship) accredited as a health provider training program? Are the graduates of the home program eligible to sit for the state licensing examination for the provision of health services?

5. Please list the name of the Sleep Disorders Center with which the BSM training program is affiliated and specify whether the SDC is accredited or not and if so by what accrediting body.

Standard 2 - Training Requirements:

6. What are the typical clinical responsibilities of each BSM student? What is the total amount of time dedicated to practicum training?
7. Describe the nature and extent of supervision given to students. Include in your description how often individual meetings with each student are scheduled for the purpose of discussing progress during the BSM training program?

8. Describe the research programs, if any, in which students are typically involved.

9. How many students are currently in your program?

10. How many students have graduated from your program within the past five years? Please provide the names and year of completion.

Standard 3 - Program Director and Program Faculty:

11. Is the program directed by someone with five years experience in BSM (or BSM-certified)? If not, is a BSM-certified practitioner associated with the program? (If yes, please provide name and title.)

12. Please list all faculty involved in providing training with their specialty, titles, and training responsibilities.

Standard 4 - Educational Focus:

13. What is the total amount of time dedicated to didactic instruction and how is the requirement covered? Please specify types of instruction, amount of time dedicated to each, and breadth of content. Please provide evidence that didactic instruction covers sleep health across the lifespan. If you have a schedule of didactics, please include it as an attachment.

Additional Questions for Reaccreditation:

1. Please list all issues/concerns from the last accreditation evaluation and discuss how they have been addressed.

2. List and describe any substantial changes to your BSM training program that have occurred since the last accreditation. Changes of interest include faculty and staff, didactic training, practicum training, research activities, relationship with sleep disorders center, etc. Please indicate if no substantial changes have occurred.

3. Provide the name and phone number of at least two former students who may be contacted for a brief interview regarding their experience in your program.

Attachments:

1. Please attach any program schedules of training used at the training site.
2. Please attach an overall program schedule of the BSM track for a “representative” student (optional).

3. Please attach a BSM student’s progress evaluation form and any other forms used evaluate students’ progress.

4. Please attach a CV of the program director.

5. Please attach biosketches (each maximum 2 pages) of all faculty involved in providing training.

6. Please attach a list of required reading.

*Note: Any changes in program directorship must be reported to the SBSM within 90 days of the change and may result in reevaluation of the program.*