

## Lifestyle Medicine (LM) Program Certification

The LM Program Certification is a designation that can be awarded to structured programs that use a consistent protocol. While these programs may nest within clinics, departments, individual practices, or health systems, the designation is specific to the program and not a surrounding entity.

The Program Certification designation is not for clinics, departments, individual practices, or health systems.

Practices or health systems that wish to grow their LM knowledge and alignment should consider having staff join as individual <u>members of ACLM</u>, as well as pursuing <u>individual Certification of staff</u> in LM through the American College of Lifestyle Medicine or the American Board of Lifestyle Medicine, as appropriate.

The Program Certification is divided into two tracks – **LM Treatment Programs** and **LM Education Programs**. The requirements for each are similar but slightly different, and are presented below.

#### Fees

The cost of Program Certification is a one-time fee of \$2500. Application fees can by paid by check addressed to: The American College of Lifestyle Medicine, PO Box 6432 Chesterfield, MO 63006. Application fees should only be sent once an application is submitted.

### **Program Updates**

**Minimum Requirements** 

If programs change delivery platforms (from in-person to virtual for example) or other meaningful aspects of their structure that might render previous research published on the program irrelevant, a new application must be submitted but can be reviewed without additional fees.

If you would like to ask more questions about the requirements, please email ACLM Sr. Dir. of Research Dr. Micaela Karlsen at <u>mkarlsen@lifestylemedicine.org</u>.

# Requirement Treat

Requirement	Treatment	Education
Time since launch	Active for at least one year	Active for at least one year
Evidence-based foundation	Program design is strongly	Program design is strongly
	informed by existing scientific	informed by existing scientific
	evidence in terms of both	evidence in terms of both
	content and mode of delivery	content and mode of delivery
Program description and	In alignment with the six pillars	In alignment with the six pillars
alignment with Pillars of LM	of Lifestyle Medicine, for those	of Lifestyle Medicine, for those
	pillars which are a focus of the	pillars which are a focus of the



	program (focus on all six pillars	program (focus on all six pillars
	is not required).	is not required)
Adverse side effects	Program has no known adverse	Program has no known adverse
	side effects or	side effects or
	anticipated/resulting increased	anticipated/resulting increased
	need for medications for	need for medications for
	chronic disease as a result of	chronic disease as a result of
	program participation	program participation
Minimum number of	100 completed participants to	300 completed participants to
completed participants	date	date
Treatment supervision and	Program staff supervise health	Participants are asked to agree
medication management	metrics, lab work, and	to work closely with their PCP
	medication management, or	and/or prescribing provider for
	communicate directly with	supervision of health metrics,
	prescribing providers	lab work, and medication
	(specialists or PCPs) of enrolled	management
	participants	
	Participants should also be in	
	contact with their PCP as	
	needed	
Evaluation	Health outcomes should be	Pre-post program assessments,
	evaluated by appropriately	at minimum a survey and
	trained program staff and	preferably one or more
	should be directly relevant to	validated survey(s) are included
	program goals.	in program structure to
		evaluate changes in health
		behaviors and knowledge
		relevant to program goals
Evaluation schedule	Health outcomes must be	Self-reported health behaviors
	assessed at baseline and again	and relevant knowledge must
	upon treatment program	be assessed at baseline and
	completion for all participants	again upon program completion
		for all participants
Research	A minimum of two peer-	A minimum of one peer-
	reviewed publications	reviewed publication
	demonstrating improvements in	demonstrating improvements in
	health outcomes relevant to	outcomes of knowledge or
	program goals following	health behavior changes
	program completion, with a	relevant to program goals
	minimum sample size of 30	1 0 0 0 0



		following program completion, with a minimum sample of 30
Scalability	Not required for LM Treatment Programs, but if program is scalable or has been replicated or scaled, this information should be included	It must be feasible to replicate the education program at multiple sites or to disseminate it broadly

### Additional Requested Lifestyle Medicine Program Certification Application Information

In addition to questions on the minimum requirements presented above, the following information will be asked for context <u>but not scored</u>

- Contact information and geographic area served
- Program overview of program development, history, structure and goals, content, growth, and current level of implementation
- Professional expertise/profiles of founders/developers
- Additional details intervention/education product (some of these details are logically added to the question on alignment with the pillars of LM). The following information is asked over several questions:
  - Objectives and expected outcomes
  - Content delivered
  - Format, including:
    - Setting (in-person/virtual/self-paced content)
  - Type of interactions/live sessions (live, automated, self-paced curriculum, etc.)
  - o Facilitators/teachers and qualifications
  - Duration, timepoints, and expected contact hours
- Follow-up resources, including required or optional follow-up after active intervention or educational product concludes
- Implementation history should provide an overview of the use or potential use of the program in various settings, including:
  - Setting of origin
  - Implementation with external partners/collaborators
  - Scalability in various settings
  - o List of external settings or partners in which program has been used
- At least one professional reference letter from a collaborating partner or healthcare professional familiar with the program
- Patient testimonials
- Support to facilitators
- Efforts to address health equity
- Costs to participants and financial impact