AADPRT Executive Committee Meeting New Orleans, Louisiana Thursday March 13, 2008

Present: M. Servis, D. Cowley, S. Sexson, C. Varley, S. Benjamin, B. Levy, S. Weissman, D. Stubbe, L. Ascherman, A. Bentman, A. Louie, D. Katz, D. Rosen, D. Goldberg, J. Layde, M. Jibson, K. Sanders, L. Mellman, L. Meinsler

Call to order 11:01 am

- **1. APA Report.** D. Hales and S. Sexson reported on current initiatives:
 - a. IMG institute. One day program for PG I and II's at APA May 3. About 350 IMGs match in psychiatry on yearly basis. ECFMG has much acculturation material (stimulus vignettes/videos) on the web.
 - b. Census data for residents all online at APA website.
 - c. 2nd Mind Games this year. Finalists for this year to be announced on Saturday.
 - d. Board Remediation. APA sponsored workshop for candidates who have failed Boards multiple times done successfully in past. On hold for now. Most of the candidates' problems were anxiety and difficulty presenting cases. 15/20 passed after taking the remedial workshop.
 - e. Focus. Subscriptions increasing. Now includes sections that could be used for performance improvement.
 - f. Clinical eFocus. 4 times per year online case discussion. First case on OCD; next one on treatment-resistant depression.
 - g. Suicide during residency curriculum now on website.
 - h. Journal Club now all online.
 - i. Resident's only case conferences now online. Residents must sign up for this residents' only access. Live discussion for 2 weeks.

2. **RRC.** Victor Reus reported:

- a. PIF. ACGME wanting to create generic PIF for all programs. Further changes for psychiatry PIF on hold for now.
- b. Dr. Reus is available for input and questions from members and may be included on AADPRT listserve.

3. **ABPN.** Larry Faulker reported:

- a. Conference with major stakeholders on training evaluators for clinical skills assessment credentialing process will be held June 18-9 in Baltimore. Develop strategy of developing objectives; implementation/curriculum; and assessment of the objectives. Two AADPRT representatives will be invited (at ABPN expense) to this meeting along with reps from other major organizations (e.g. AAP, APA, AACAP, Chairs, etc). Didactics, vignettes, video, web-based training all possibilities.
- b. AADPRT Task Force report. Points of clarification: there should be one bar, one standard (regardless of year of training). Will need to monitor, observe this process. What if no one fails? What if PG Is are able to pass? Board sees this as a work in progress and many ways to approach. Opposed to premature closure on one way to do this. Other issues include: who should be in charge of this process? Agreed on need to train TDs first. How to transport training to field? DVD? Use of ARS? Try to put this into annual meeting for next year. One model: Use of "gold standard" of

senior ABPN directors rating videos. Evaluators then credentialed to provide test.

Action items:

- 1. Appoint AADPRT reps to ABPN retreat in June.
- 2. Continue AADPRT Task Force to consider how to train and vet evaluators

4. **Competencies**. L. Ascherman reported:

a. Free standing common factors position paper nearly completed and anticipate submission to Academic Psychiatry. Should this be integrated with clinical skills verification Task Force work?

Action Items:

1. Communication between L. Ascherman and Task Force about possibilities for integrating the common factors into credentialing process.

5. Work force. Deb Katz:

- a. PsychSign: while clearly an important organization and intiative for the field, consensus was not to involve them in official way at annual meeting. The meeting is a time for TDs to be able to "let hair down" and adding medical students to meeting would fundamentally change the feel and purpose of the meeting, increase competition between programs, require TDs to be "on", etc. This year a number of AADPRT members (including Mark Servis, others on EC) will be presenting at PsychSign meeting also in New Orleans this weekend.
- b. Relationship with ADMSEP. Tension exists between their role as educators for all med studs and recruitment into psychiatry. Unclear where the organization now stands vis a vis these competing interests. Consider ways to increase collaboration with ADMSEP (e.g. consider adding EC member(s) who also ADMSEP members)
- c. AAMC Workforce Issues group. Should AADPRT have liaison with this group? Website: http://www.aamc.org/workforce/

Action items:

- 1. Continue to look for opportunities outside of annual meeting to interface with PsychSign.
- **2.** Consider adding EC members who are both AADPRT and ADMSEP members.

6. **Membership.** A. Bentman reported:

- a. Continued refinements made to make online registration even more user-friendly
- b. While banner year for collecting dues, there are still some delinquent programs (6 institutions and 37 individuals unpaid.) October 31 deadline will be monitored closely this year.
- c. NTD orientation has record number signed up. Format and topics have been same for a few years. Looking for suggestions for new topics.
- d. TD calendar and orientation manual being revised and updated.

Action items:

- 1. Consider additional consequences for programs whose dues are not paid up prior to meeting.
- 2. Propose new lecture ideas for NTD symposium

3. Complete TD calendar and orientation manual

7. Fellowship Caucus. J. Layde

- a. 110 members in AADPRT although much lower number in attendance at meeting.
- b. Forensics considering match amid much controversy. No action for now.
- c. Geriatrics, Addictions continue to have low numbers and difficulty recruiting. Reasons primarily lack of perceived need for clinical practice in subspecialty; only those interested in academic careers see "need" for subspecialty training.
- d. Psychosomatic medicine fellowship off to good start. Considering a match.

8. **AAP.** J. Anzia

- a. Annual Meeting in Santa Fe September 24-27. Co-occurring with AACDP meeting.
- b. Membership growing and increased numbers at annual meeting (last year Boston).
- c. New administrative director needed. 20-30 hours per week. Can do from home.
- d. Collaboration re ABPN credentialing process. Close communication with other stakeholders is goal.
- e. Debbie Hales is incoming President of AAP.

Action items:

- 1. Forward suggestions for administrative director to Joan Anzia.
- 2. AADPRT to have representation at AAP annual meeting.

9. **OPDA**. C. Woodman

- a. Proposed USMLE changes to Steps I and II. USMLE heard the concerns of TDs across specialties about having the collapsed exam moved into the 4th year. Now agreed to move the exam into the third year so that results available for TDs. Although appearing to back off, pass-fail grading still being discussed and decision has not been finalized.
- b. NRMP will survey programs and applicants re number issues in near future.
- c. AMA: no to fifth pathway. Loan repayment. Home call
- d. ACGME: reportedly focused on reducing TD burden with goal to decrease program specific PIF by 30%. Considering lengthening survey cycles.
- e. AAMC: reviewing the unmatched scramble process. Projected workforce issues also major issue.

10 Academic Psychiatry. J. Coverdale and A. Louie

- a. Submissions continue to be high (180 for 2008; similar to past 2 years). Goal of 200 submissions in future.
- b. New initiative for International Column to include cross cultural perspectives on psychiatric and general medical education.
- c. Impact factor .91 which is lower than Editors would like, although it is increasing. Not as high as Academic Medicine.
- d. Seeking to decrease time to publication and will be publishing 3 expanded issues this year to help address backlog.
- e. Considering online resources. Perhaps one issue per year for these updates.

11 **AAMC**. S. Weissman:

a. Reorganization at AAMC.

b. USMLE changes scheduled for class entering 2010. No commitments made about what to do re pass-fail. Will be decided next year. Rationale for proposed changes discussed. One line of reasoning is that there is no correlation of Step I with resident performance. Another is greater interest in integrating basic and clinical sciences.

13. **CORF.** Paul O'Leary reported:

- a. Joint project of online survey with AECOM on resident stress, coping mechanisms. Goal is to develop monitoring checklist for training directors. 660 residents so far have completed.
- b. Resident edition of AJP ejournal up and running. Residents need to sign up for this.
- c. Paul is Editor of License and Practice, a journal for residents in all specialties.

14. **Pre-meeting**. M. Pato:

- a. Review yesterday's meeting: very well received. 130 attended. Almost all evals 6-7 (out of 7).
- b. 2009 Premeeting: topic is neuroscience. Considering topics such as: talking with patients about neuroscience concepts; neuroimaging; neuropsych testing and neurocognitive bedside evaluation. Charney, Sapolsky, or Nemeroff possible keynotes.
- c. Grant that has supported premeeting is ending in two years. M. Pato plans to resubmit for continuation of this premeeting.

Action items:

- 1. AADPRT representatives (D,.Cowley, S. Benjamin, R. Rieder) to continue planning with M. Pato for next year's meeting.
- 2. Planning for resubmission of premeeting grant.

15. **Information.** B. Boland (by phone)

- a. Archiving ABPN-style Vignettes. Need adult and child editor for these cases. L Ascherman willing to do this for Child but may be a conflict of interest as he is on Board committee for Child vignettes.
- b. Working on search engine for website

Action items:

1. Check with ABPN to be sure no conflict of interest for Lee Ascherman (or others with ABPN involvement) to be editor for the vignette section of the website.

16. **Teichner award.** G. Beresin.

a. Sponsored by the American Academy of Psychoanalysis and Dynamic Psychiatry and funded by estate of Victor Teichner. Anticipate support for a number of years. Mission of award is to provide master psychoanalytic clinician for up to 3 days to a program underrepresented by faculty with expertise in psychodynamic psychotherapy. 16 programs applied for this year's first award. This year's awardee is University of Kentucky.

17. Frieda Fromm Reichman Award. G. Beresin

a. Anne Alonso sadly died unexpectedly in past year. Her Endowment for Psychodynamic Psychotherapy founded and provided resource support for

this award. In honor of her it was proposed to change the name of the award to the Anne Alonso Memorial Award. Unanimously agreed.

Action item:

1. Name of this award will be changed to the Anne Alonso Award.

18. **ADMSEP.** S. Schlozman (A. Brodkey unable to attend)

- a. Expanding membership to residents.
- b. Mayo reduced psychiatry clerkship to 3 weeks recently and prompted ADMSEP to write a position statement that minimum length of time on rotation "must" be 6 weeks. Also note that California requires a minimum of 4 weeks for licensure.

19. Child Caucus. D. Stubbe

- a. NRMP Match:
 - i. 316 enrolled applicants; 279 certified applicants. 258 (92%) matched with a program.
 - ii. 100 programs participated; 5 withdrew. 61% programs filled positions; 39% did not fill. Total positions offered: 316. 81% positions filled; 19% unfilled
- b. Post-pediatrics portal program: in pilot stage. 3 programs are approved (Case Western, Creighton, U. Penn) and will accept residents in July 2008. Primary issue is funding (i.e. GME) because PPP residents will have completed their pediatric training and hence institutions ineligible for GME DME/IME support. Another issue is to clarify where funding comes from for the 1.5 years of adult vs. CAP. Third issue is ABPN credentialing.
- c. Considering common application for all CAP programs.

20. **Development.** K. Sanders

- a. Grants submitted to 8 companies. 4 were approved. Total funding of \$50K was similar to last year. Submissions are all online and industry has completely separated off educational funding from marketing. Amount of work involved in grant application process has grown exponentially and reconciliation required. Propose budget item to pay for grant writer (?Lucille Meinsler or other in TAGME).
- b. Funding for IMG fellowship (Forest past 2 years) was rejected. Need to reconsider this fellowship from both mission and financial support perspectives.

Action items:

- 1. Pursue grant writing support and automate through AADPRT central office.
- 2. Revisit mission of IMG fellowship and consider alternative sources of funding.

Meeting adjourned 3:53 pm

Respectfully submitted, David Kaye Secretary