

# AADPRT Executive Council Meetings

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Friday, October 18, 2013: 6:30 pm - 9:30 pm

Saturday, October 19, 2013: 11:00 am – 3:00 pm

Meeting Room: Cooper Room

Hilton Doubletree Hotel

Charleston, SC

AADPRT EXECUTIVE COUNCIL  
Friday, October 18- Saturday, October 19, 2013

Doubletree Hotel  
Charleston, SC

<b>Friday, October 18-6:30 pm - 9:30 pm</b>				
<b>Saturday, October 19-11:00 am - 3:00 pm</b>				
<b>Friday</b>	<b>Cooper Room</b>			
<b>Time</b>		<b>Minutes</b>	<b>Speaker/topic/Committee</b>	<b>Presenter</b>
<b>6:30 PM</b>	<b>9:30 PM</b>			
6:30 PM	7:00 PM	30	dinner	
7:00 PM	7:12 PM	12	Welcome	Adrienne Bentman
7:12 PM	7:27 PM	15	COPE	Brad Booth, MD, Secretary-Treasurer, Incoming Chair,
7:27 PM	7:42 PM	15	Finance-registration increase	Michael Travis
7:42 PM	7:47 PM	5	Academic Psychiatry	Publisher update
7:47 PM	7:52 PM	5	2014 Meeting update	Art Walaszek
7:52 PM	8:00 PM	8	Break	
8:00 PM	8:10 PM	10	BRAIN Conference-incl reg fee	Melissa Arbuckle
8:10 PM	8:25 PM	15	Milestones/Specialty -specific Revisions	Chris Thomas
8:25 PM	8:55 PM	30	Meeting Location Discussion	Adriene Bentman
8:55 PM	9:05 PM	10	Meeting Location Discussion	Iverson Bell
9:05 PM	9:15 PM	10	Meeting Location Discussion	Marshall Forstein
9:15 PM	9:30 AM	15	Meeting Location Discussion	Executive Council
<b>Adjourn</b>	<b>9:30 PM</b>			
<b>Saturday</b>	<b>Cooper Room</b>			
<b>11:00 AM</b>	<b>3:00 PM</b>			
11:00 AM	11:15 AM	15	Snack	
11:15 AM	11:45 AM	30	Meeting Location discussion/decision	Adrienne Bentman
11:45 AM	12:00 PM	15	ACGME Liaison	Adrienne Bentman
12:00 PM	12:05 PM	5	Subspecialty Caucus	Robert Rohrbaugh
12:05PM	12:23PM	18	PGY4/Fast Track	Jane Eisen
12:23 PM	12:30 PM	7	Child & Adol Psych Caucus	Shashank Joshi
12:30 PM	12:43 PM	13	Information Management	Sahana Misra☎
12:43 PM	12:53 PM	10	Psychotherapy	Adam Brenner/Donna Sudak
12:53 PM	1:03 PM	10	Model Curriculum	Tony Rostain/Melissa Arbuckle
1:03 PM	1:34 PM	31	Lunch	

AADPRT EXECUTIVE COUNCIL  
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1:34PM	1:41PM	7	Recruitment (NRMP)	Sandra DeJong
			New Training Directors	
1:41 PM	1:53PM	12	Symposium/Membership	Isis Marrero
1:53PM	2:05PM	12	Regional Representatives	Chandlee Dickey
2:05 PM	2:10PM	5	Development	Brian Palmer
2:10 PM	2:15PM	5	Fellowships	Chris Varley
2:15PM	2:20PM	5	Assessment Tools TF	Deb Cowley
2:20PM	2:30 PM	10	GME Task Force	Jed Magen
2:30 PM	2:40PM	10	CMELL	Rick Summers
2:40PM	2:45 PM	5	Neuroscience Task Force	Melissa Arbuckle
2:45PM	2:50PM	5	Lucille's Goodbye	Adrienne Bentman
2:50PM	3:00 PM	10	Wrap up	AB

AADPRT  
Balance Sheet  
September 30, 2013

ASSETS

Current Assets		
BOA Checking - General	\$	162,718.93
BOA Savings - General		50,371.65
BOA Savings - Paypal		54,088.49
PNC - Checking		1,849.23
PNC - Money Market		244,937.32
Wells Fargo-Checking		65,759.27
Wells Fargo-Neuro		<u>57,562.68</u>
Total Current Assets		637,287.57
Property and Equipment		<u>                    </u>
Total Property and Equipment		0.00
Other Assets		
Prepaid Expense - Deposits		<u>2,500.00</u>
Total Other Assets		<u>2,500.00</u>
Total Assets	\$	<u><u>639,787.57</u></u>

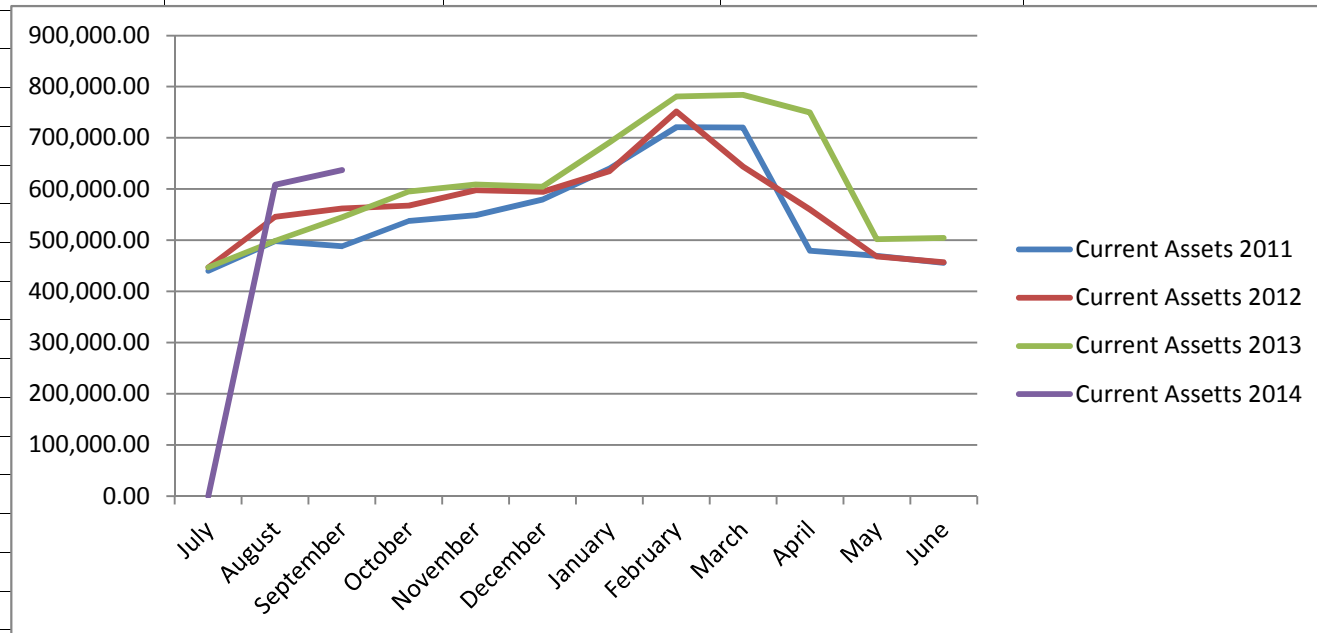
LIABILITIES AND CAPITAL

Current Liabilities		<u>                    </u>
Total Current Liabilities		0.00
Long-Term Liabilities		<u>                    </u>
Total Long-Term Liabilities		<u>0.00</u>
Total Liabilities		0.00
Capital		
Beginning Balance Equity	\$	505,517.30
Net Income		<u>134,270.27</u>
Total Capital		<u>639,787.57</u>
Total Liabilities & Capital	\$	<u><u>639,787.57</u></u>

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AADPRT  
Current Assets  
FY 2011, FY2012, FY2013

Month	Current Assets 2011	Current Assets 2012	Current Assets 2013	Current Assets 2014
July	440,167.76	447,057.09	446,999.17	513,566.95
August	498,352.03	545,788.71	499,079.79	607,968.33
September	488,127.83	562,107.96	544,544.40	637,287.57
October	537,692.43	567,797.96	594,997.24	
November	549,110.97	597,801.73	608,588.33	
December	579,467.71	594,698.29	604,429.23	
January	639,898.84	634,982.46	690,748.57	
February	720,844.03	751,750.66	781,023.18	
March	720,256.78	644,148.14	783,977.33	
April	479,322.77	560,217.95	749,804.67	
May	469,206.86	468,402.38	501,854.44	
June	455,760.83	457,007.62	504,348.97	



**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18-19, 2013**

**Date:** October 1, 2013

**Committee or Liaison Group Name:** Program Committee

**Chair/Representative's Name:** Art Walaszek (chair), Adrienne Bentman, Sandra DeJong

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**Report/Updates of Importance & Pertinence for October Meeting**

Planning for the March 2014 meeting (“A Vision for Residency Education: Focusing on Patients, Setting our Sights on Quality”) is fully underway. Activities thus far:

- Plenary speakers Christine Montross and Paul Summergrad (Shein Lecture) have been confirmed.
- Milestones and NAS will be a central topic of discussion, with a special session on Thursday morning (Deb Cowley and Michael Jibson on Assessment of the Milestones; Deborah Spitz on Clinical Competency Committees), the usual ACGME Psychiatry RC session on Thursday afternoon, and a final panel on Saturday morning with GME leaders outside of Psychiatry.
- Thursday morning will also include four parallel meetings, designed for program directors at various career stages:
  - New Training Directors
  - Early Career Training Directors (2-5 years) – workshop to be developed by Melissa Arbuckle, Adam Brenner, Sallie De Golia and Simon Asher of the APD Caucus
  - Mid-Life Crises (5-10 year) – workshop on professionalism and disciplinary issues to be developed by Joan Anzia and Jim Lomax
  - Lifers (10+ years) – by Gene Beresin and Tony Rostain
- Workshop submissions are now being collected, with a deadline of October 25.
- We have analyzed flights out of Tucson on Saturday afternoon, and by ending the meeting at noon, most attendees will be able to return home that day.

Next steps will include:

- We will finalize plans for the Saturday morning panel on “lessons learned” from NAS Phase I programs and on faculty development related to the milestones.
- Lucille Meinsler and Art Walaszek will visit the Hilton El Conquistador on November 3-4 in order to meet with hotel staff and inspect the facilities.
- Lucille and Art will work with the hotel regarding the possibility of video capture of plenaries and panels using hotel AV staff.

**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18-19, 2013**

**Date:** October 18, 2013

**Committee or Liaison Group Name:** BRAIN Committee

**Chair/Representative's Name:** Sid Zisook, MD & Deb Cowley, MD

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**Brief summary of committee, taskforce, or caucus purpose or charge:**

- Organize and implement annual pre-meeting conference on teaching research literacy and evidence based practice

**Goal(s) or tasks to be completed in 2013-2014**

- Plan for 2013 pre-meeting.
  - Theme is Neuroscience: What to Learn and How to Teach.
  - Program Director is Melissa Arbuckle, MD, PhD
  - Considering more involvement from NIMH, ACNP and Biological Psychiatry in next year's program
  - Deb Cowley will again chair the Scholars' Selection Committee
    - Scholars will have an improved venue for poster presentations and a more active role in the program in 2014
- Tracking Committee (Art Walaszek, Jane Eisen and Ron Rieder) will continue updating and expanding surveys regarding numbers and trajectory of MD/PhDs in training
- Continue development of scholars' networking project (Richard Balon, MD, Chair)

**Action Items from May 2013 Meeting**

- Drs. Zisook and Arbuckle will work together to coordinate the activities of the BRAIN Conference committee and the Model Curriculum committee.
- Drs. Zisook and Cowley will work on developing an AADPRT Teacher Award.
- Lucille Meinsler will review the expenses vs. income once all bills are paid and make a comparison across years. Lucille and Mike Travis will model increasing registration fees to predict the best fit to current costs. This will be shared with the BRAIN Conference Committee and discussed at the next EC.

**Report/Updates of Importance & Pertinence for October Meeting:**

- Mike Travis and David Ross have joined Melissa Arbuckle as co-directors of the 2014 BRAIN conference which will focus on teaching neuroscience. Goals are to: 1) Empower faculty with or without a neuroscience background to feel confident that they can teach neuroscience effectively; 2) Engage conference attendees to participate as both student and instructor using new and innovative teaching methods; and 3) Provide programs with resources for how they might address, teach, and assess neuroscience specific milestones.
- Applications for the BRAIN Scholars are arriving. Scholars will actively participate in the workshops and may have some additional activities focused on their academic growth and mentorship
- Deb Cowley will discuss our recommendations for the AADPRT 'Outstanding Teacher of the Teachers Award' at the October meeting.

**New Action Items:**

## Annual Meeting--Future Meeting Dates & Locations

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### **2014**

Wednesday, March 12 – Saturday, March 15  
Hilton El Conquistador  
Tucson, AZ

### **2015**

Wednesday, March 4 – Saturday, March 7  
Hilton Orlando Bonnet Creek  
Orlando, FL

### **2016**

Wednesday, March 2 – Saturday, March 5  
Hilton Austin  
Austin, TX

### **2017**

Wednesday, March 8 – Saturday, March 11  
Hilton Caribe  
San Juan, Puerto Rico

### **2018**

Wednesday, February 28 – Saturday, March 2  
Hilton New Orleans Riverside  
New Orleans, LA



**AADPRT Committee, Task Force, Caucus Report  
Executive Council Meeting  
October 18- 19, 2013**

**Date:** 9/16/13

**Committee or Liaison Group Name:** ACGME Liaison Committee

**Chair/Representative's Name:** Adrienne Bentman, MD; Assistant Chair, Adam Brenner, MD

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**Brief summary of committee, taskforce, or caucus purpose or charge:**

1. To serve as a bi-directional liaison between the ACGME/Psychiatry RC and AADPRT members via the RC Chair.
2. To organize and engage members in providing feedback to the ACGME/RC around the NAS, CLER requisites and site visits, Milestones, RC guidelines, and any other additions or revisions to guidelines and residency regulation and accreditation
3. To inform the ACGME/RC of program burdens, needs, and uncertainties surrounding regulation and accreditation processes
4. Facilitate liaison with our partner organizations: APA, AACAP, AAP, ADMSEP, ABPN around issues related to the ACGME/RC.

**Goal(s) or tasks to be completed in 2013-2014**

**Tasks Completed:**

1. A letter clarifying the ACGME regulations regarding duty periods and on call was sent to members and posted on the website.
2. Survey of AADPRT members on the content, specificity, measurability, and practicality of the General Psychiatry Milestones was conducted. Data analysis, synthesis, and recommendations were shared with the Milestone Working and Advisory Groups, the members, and the AACDP and APA-CMELL.
3. PG4/Fast Track Task Force convened under direction of Jane Eisen. Survey for program directors written and currently in circulation. Collect, analyze, synthesize data. From this make recommendations to the Psychiatry RC as they begin the process of Adult and CA specialty-specific guideline revision this fall.
4. Sent letter to the ACGME supporting inclusion of Combined Program residents as eligible for transfer between programs and into fellowships. Welcomed similar efforts of partner organizations including: ABPN, APA-CMELL, AACAP, AACDP, subspecialty organizations, AMP, ANPA, AAP.

5. Sent letter to the ACGME supporting the focused revision of the General Adult Psychiatry Eligibility and Transfer sections. If approved by the ACGME, PG2 applicants will be able to be recruited in an ad hoc, rolling fashion throughout the year beginning in the 2014-15 recruitment season.
6. Serve as liaison between the member needs for curricula and assessment tools and the Assessment Tools Task Force and the Model Curriculum Committee. This Committee will also facilitate bi-directional communication between these groups and the Regional Caucuses who can supply member feedback.
7. Organize collection of Best Practices regarding the NAS and CCC processes.

**Tasks in Process or planned:**

1. PG4/Fast Track survey: collect, analyze, synthesize data by from the program director survey before 9/30/13. Share these data with the Psychiatry RC so that they can use this as they prepare the initial draft of the General Adult and CA specialty-specific guidelines at their October meeting.  
Complete the same for the Resident PG4/fast Track Survey shortly thereafter.
2. Respond to the Draft of the RC specialty General and CA revisions due out later in the fall, 2013 (will receive after the October EC meeting).
3. Facilitate the work of the Combined Program Caucus towards accreditation of Combined programs and board eligibility of their graduates.

**Action item from May Meeting:**

- Dr. Bentman will send a letter to Dr. Thomas expressing EC's concern about how to reconcile common program requirements, specific program requirements and milestones – to be continued
- A PGY4/Fast Track Task Force under the leadership of Dr. Jane Eisen has been established and will review the issues associated with "fast tracking." – in process

**Report/Updates of Importance and Pertinence**

- See #3-5 under Tasks Completed
- See #1-2 under Tasks Planned

**New Action Items:**

- During the PG4/fast Track discussion, review the survey results and deliberate whether more than a report of the results should be done.
- Discuss Chris Thomas' report to the EC regarding the ACGME-NAS and the guideline revision work of the RC. Decide how AADPRT wishes to manage the General and CA draft revisions which include consideration of Fast Tracking into fellowships.
- Discussion of registered, cost paid graduates unable to take the boards d/t no state license



**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18-19, 2013**

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**Date:**

**Committee or Liaison Group Name:** Subspecialty Caucus

**Chair/Representative's Name:** Bob Rohrbaugh, M.D.

**I. Brief summary of committee, taskforce, or caucus purpose or charge (Definition of the Committee):**

- (1) Represent interests of Program Directors in Addiction, Forensics, Geriatrics and Psychosomatics on the AADPRT Executive Committee
- (2) Facilitate opportunities for General Adult program directors to learn more about educating general adult residents in these sub-specialty areas

**II. Goal(s) or tasks to be completed in 2013-2014:**

- (1) Presentation at the AADPRT Annual Meeting on innovations in teaching in the subspecialties
- (2) Appoint a new AADPRT Psychosomatics Lead
- (3) Explore more effective liaison between AADPRT and the Sub-Specialty Organization's Training Committee
- (4) Develop and implement action plan on residents entering Subspecialty Training as PGY 4's.

**III. Action Items for May 2013 AADPRT Meeting**

- (1) The Subspecialty Caucus and the Regional Representative Caucus will work with the new PGY4/Fast Tracking Task Force on identifying the risks and benefits of "fast tracking" proposals.

#### **IV. Report/Updates of Importance & Pertinence for October Meeting:**

#### **V. New Action Items:**

- (1) Subspecialty organizations alerted to AADPRT position on combined fellowship grads being eligible to be boarded in subspecialty fellowship training. Adrienne sent me the AADPRT statement and I sent this to each of the subspecialty liaisons. I know Geriatrics and Psychosomatics subspecialty organizations were able to send a similar statement in support of this clarification. Time period for comment was short and I don't think Forensics and Addictions subspecialty organizations were able to respond in time.
- (2) Faculty and resident fast-tracking survey has been sent to the membership

AADPRT Committee, Task Force, Caucus Report  
Executive Council Meeting  
October 18-19, 2013  
Committee or Liaison Group Name: Fast Track Task Force  
Chair/Representative's Name: Jane Eisen

**Brief summary of committee, taskforce, or caucus purpose or charge:**

The Psychiatry RRC is considering a proposal to allow Psychiatry residents to enter ACGME approved one-year fellowships, including Geriatric Psychiatry, Addiction Psychiatry, Psychosomatic Medicine, and Forensic Psychiatry after completing the PG3 year.

The fast track task force was asked to create a survey to assess AADPRT members' views and concerns about this proposal, which would allow residents to "fast track" into these specialties instead of being eligible to enter them only after 4 years of training, the current requirement.

**Goal(s) or tasks to be completed in 2013-2014:**

With the goal of ensuring representation from different sized programs, different parts of the country, and fellowships including child and adolescent psychiatry as well as the one-year ACGME approved psychiatry fellowships, we constructed the following group for the task force:

Adrienne Adams, Robert Boland, Deb Cowley, Steven Fischel, Jed Magen, Robert Rohrbaugh, Mike Travis

Through a series of conference calls, we developed and refined an AADPRT membership fast track survey. We also developed a survey to assess psychiatry residents' views on the process of fast tracking. Both of these surveys were further refined after input from the Steering Committee. With extensive input from Bob Boland on the survey itself and compiling responses, and Adam Brenner who was responsible for distilling the comments, I created a document, which summarized the survey results. This document, which will be distributed separately, was then incorporated into a letter sent to Adrienne Bentman to the Psychiatry RRC.

**Action Item for October Meeting:**

The EC needs to review the survey summary and decide whether to add additional comments to the survey summary.

**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18-19, 2013**

**Date:** October 18, 2013

**Committee or Liaison Group Name:** Child & Adolescent Psychiatry Caucus

**Chair/Representative's Name:** Shashank V. Joshi, MD

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**Brief summary of committee, taskforce, or caucus purpose or charge:**

- Facilitate and promote the communication and collaboration of child and adolescent psychiatry training directors
- Develop, identify and promote useful and appropriate educational and program material for child and adolescent psychiatry residency programs
- Collaborate with relevant educational groups from other organizations (e.g. AACAP, APA, ADMSEP)

**Goal(s) or tasks to be completed in 2013-2014:**

- Provide a forum for child & adolescent psychiatry training directors to collaborate, have access to educational and program resources, remain up to date on educational and program initiatives and obtain/ provide mentoring
- Coordinate meeting during the AADPRT annual meeting
- Collaborate with AACAP Training and Education Committee; continue to work on the development of program and educational materials that can be useful to child/ adolescent psychiatry training directors
- Continue to provide support for the CSV development groups; investigate the copying of and posting on the AADPRT website of the curriculum, with special attention to issues of privacy for patient and resident videotapes.
- Identify and develop electronic based information and formats that can be useful to child/ adolescent psychiatrists for website, listserv and other sites
- Obtain feedback from child directors on child caucus activities with suggestions for improvement/ additional activities; use feedback to develop possible initiatives that can be presented and reviewed by the group with decisions about proceeding
- Continue to encourage child members to submit annual meeting submissions and contribute information to child section of website-16 submitted for 2013 meeting.

**Action Items from May 2013 AAP Meeting:**

- The Caucus will monitor for any problems that arise with using ERAS for the CAP Match.
- The Caucus will solicit CAP workshops for the 2014 Annual Meeting.
- The Caucus will review the work on Milestones in General Psychiatry residencies, and determine what can be adapted for CAP programs.

**Report/Updates of Importance & Pertinence for October 2013 Meeting:**

Review ERAS process thus far, and solicit input from EC CAP and Gen Adult PD's regarding this year's CAP application process

**New Action Items:**

Convene CAP ERAS Task Force to solicit experiences of with new ERAS process from CAP applicants, and both General and CAP PD's in AADPRT membership



**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**May 2013**

**Date:** 5.19.13

**Committee or Liaison Group Name:** Child & Adolescent Psychiatry Caucus

**Chair/Representative's Name:** Shashank V. Joshi, MD  
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**Brief summary of committee, taskforce, or caucus purpose or charge:**

- Facilitate and promote the communication and collaboration of child and adolescent psychiatry training directors
- Develop, identify and promote useful and appropriate educational and program material for child and adolescent psychiatry residency programs
- Collaborate with relevant educational groups from other organizations (e.g. AACAP, APA, ADMSEP)

**Action Items from March 2013**

- The CA Caucus will be involved in the rollout of the CA Milestones. Chris Thomas spoke to the Caucus at AACAP and at the AADPRT annual meeting.

**Goal(s) or tasks to be completed in 2013:**

- Provide a forum for child & adolescent psychiatry training directors to collaborate, have access to educational and program resources, remain up to date on educational and program initiatives and obtain/ provide mentoring
- Coordinate meeting during the AADPRT annual meeting
- Collaborate with AACAP Training and Education Committee; continue to work on the development of program and educational materials that can be useful to child/ adolescent psychiatry training directors
- Continue to provide support for the CSV development groups; investigate the copying of and posting on the AADPRT website of the curriculum, with special attention to issues of privacy for patient and resident videotapes.
- Identify and develop electronic based information and formats that can be useful to child/ adolescent psychiatrists for website, listserv and other sites
- Obtain feedback from child directors on child caucus activities with suggestions for improvement/ additional activities; use feedback to develop possible initiatives that can be presented and reviewed by the group with decisions about proceeding
- Continue to encourage child members to submit annual meeting submissions and contribute information to child section of website
- - 16 separate workshop ideas for CAP submissions thus far

**Report/Updates of Importance & Pertinence for May 2013 APA Meeting:**

- ERAS starting the process to register CAP program for July 2014 applicant recruitment
- Psychosomatic Fellowship joining CAP in the NRMP early MATCH, and will have same deadlines
- Report from SPCAP May 2013, Wash DC meeting: **Concerns about Funding of CAP training as GME funding gets cut**

- Will provide a summary (or elicit a summary from those EC members who went to SPCAP) re: SPCAP members' experiences are regarding possible reductions in training slots, particularly at sites that are not affiliated with children's hospitals.

**Action Items for September 2013 AAP Meeting:**

- Review any road bumps in using ERAS for CAP Match
- Send gentle reminders to those CAP Program Directors who have proposed specific workshops for 2014 AADPRT meeting
- Review Milestones progress and Templates from Adult Programs, Yr #1, that can be adapted for CAP Programs

**AADPRT Committee, Task Force, Caucus Report Executive Council Meeting  
October 18-19, 2013**

Date: 10/3/13

**Committee or Liaison Group Name:** Information Committee (IM)

**Chair/Representative's Name:** Sahana Misra MD

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**Brief summary of committee, taskforce, or caucus purpose or “charge”:**

This committee oversees the organizations communication with its members and with the public at large. This includes overseeing the organization's web site and list serve. The members of the committee are charged with both initiating and vetting proposals for the web site and directing the web master as to changes or enhancements to the site.

**Goal(s) or tasks to be completed in 2013-2014:**

- a) Preparation for 2014 Annual meeting
- b) Ongoing cleanup of website – old workgroup/committee documents that need updating, broken links etc.
- c) ‘What’s new’ on the website – “news you can use”
  - i) monthly emails to membership with links
  - ii) inclusion in President’s blog
  - iii) home page with ‘what’s new’ section -revolving

**Action Items from May Meeting:**

- Dr. Misra will review the documents within the Virtual Training Office and make recommendations as to which documents should be password-protected and which should be open.
- Dr. Misra will work with the Model Curriculum Committee on technology to support the activities of the committee

**Report/Updates of Importance & Pertinence for October Meeting:**

- 1) Annual Meeting issues:
  - a. Minor fixes to CME system will be completed
  - b. Updates to registration form – exploring forced radio buttons to help issues such as signing up for more than one session at the same time, Thursday morning track, etc
  - c. Consider piloting videotaping two plenaries to ultimately be posted on the website
  - d. Strategies to obtain workshop materials earlier
- 2) Coordinator’s group – completing updates on mentorship list
- 3) VTO – Site was reviewed. Most sections would be nice to have publicly available. If some are to be restricted, might consider the following:
  - a. Professionalism and the Internet curricula
  - b. CSVs – video vignettes
  - c. Model Curricula
- 4) New Milestones section on the VTO for both Evaluation and Assessment Tools

**New Action Items:**

- 1) Changes to web-based platform for milestone assessment tools (project of MC Committee) – TBD based on exec committee approval of bid
- 2) Have CME system ready for conference
- 3) On-going clean up of site

**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18-19, 2013**

**Date:** September 24, 2013

**Committee or Liaison Group Name:** Psychotherapy Committee

**Chair/Representative's Name:** Donna Sudak, MD, Adam Brenner, MD

**Brief summary of committee, taskforce, or caucus purpose or charge:**

The Psychotherapy Committee was established in recognition of the integral importance of psychotherapy training in the development of psychiatry residents. Its purpose is to serve as a resource for AADPRT members focusing on psychotherapy competencies and their implementation through model curriculum and assessment with evidence-based measures. It also interfaces with the EC and RRC Taskforce in order to provide guidance regarding training requirements. It is a resource to demonstrate the relevance and applicability and evidence-base for psychotherapy as it applies to wide areas of psychiatric practice including diagnostic interviewing, inpatient psychiatry, consultation, and medication management.

**Goal(s) or tasks to be completed in 2013-2014:**

Continue to provide ongoing "Training Tips" to the membership  
Pilot the A-Map Assessment form in our own programs; modify as appropriate  
Disseminate the A-Map to the membership  
Develop further milestone assessment tools for PDT, CBT, ST

**Action Items from the May Meeting:**

None

**Report/Updates of Importance & Pertinence:**

We have developed an assessment tool for Core psychotherapy skills mapped to the milestones and will share it with the group.

**New Action Items:**

# **AADPRT Committee, Task Force, Caucus Report**

## **Executive Council Meeting**

**October 18-19, 2013**

**Date:** October 1, 2013

**Committee or Liaison Group Name:** Model Curriculum Committee

**Chair/Representative's Name:** Melissa Arbuckle, MD, PhD, Tony Rostain, MD, Co-Chairs

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### **Brief summary of committee, taskforce, or caucus purpose or “charge”**

The charge for the Model Curriculum Committee (MCC) is to pull together models of useful curricula on a variety of topics, and to showcase work which Training Directors are doing to promote curricular innovation.

In line with this charge, the members of the MCC will:

1. Constitute a diverse committee broadly representing AADPRT, including subspecialties
2. Set annual priorities of which curricular areas to showcase
3. Develop a process for soliciting, reviewing, and selecting curricula and educational materials of interest to the membership
4. Coordinate with the Information Committee the posting of selected curricular materials

### **Action Items from May 2013:**

- The Model Curriculum Committee will put out a call for curricula related to Milestones, specifically faculty development, QI/patient safety, neurosciences.
- The Model Curriculum Committee will ask prior awardees to link their curricula with specific milestones, and will link new curricula with specific milestones

### **Report/Updates of Importance & Pertinence for October Meeting:**

**Updates to the Submission Site:** We have been exploring the possibility of updating the submission site with IT/Web support. The initial system was set up with the anticipation that the needs would be similar those of other committees (for example, the various fellowship award review committees). While other committees review submissions through the website in a single timeframe with applications that do not roll over, the model curriculum review process has cycling, on-going activity. This includes feedback to authors, requests for resubmissions and re-reviews and multiple calls for submissions each year (and now the addition of the milestones toolkits). Currently the system was only set up to manage initial submissions and evaluations in a discrete timeframe. The scope of the committee work has expanded beyond this initial vision.

At this time, we would like to update the submission site to include a mechanism for tracking workflow, specifically with: e-mail alerts, a centralized communication system, storage and archive of materials and a chairs dashboard. The estimate to make these updates is \$650. This upgrade would also include a mechanism for integrating the milestones toolkit submissions. Melissa Arbuckle would work directly with Shan to review these updates as they're developed to make sure that they will meet the committee's needs. Given the complexity of managing submissions in various stages of review/revision, and given the delays in moving from receipt of materials to the final step in the process, we believe this is a worthwhile investment.

**Milestones toolkits:** We did not receive any submissions by our initial deadline. We discussed possible reasons for this including the fact that this was over the summer months and people may have been away on vacation. In response we have:

- Extended the deadline to December 2nd—Lucille sent out an announcement about this on 9/18/13
- Encouraged faculty with accepted model curricula to submit updates that include how to use these curricula to address the milestones.

In addition, we plan to:

- Reach out to faculty who have presented related workshops at AADPRT or AAP in order to encourage them to adapt these as workshops into potential milestones toolkit submissions. We also intend to offer free consultations on how workshops might be converted into teaching activities related to the milestones. We are currently drafting an e-mail to send out to all members through the list-serve.

As a follow up, we have received one submission so far on teaching integrated/collaborative care models (SPB4).

**Model Curricula:** We are continuing to post accepted model curricula on line and review re-submissions. We have eight submissions that have been accepted and are in the process of being posted on line. There are an additional seven submissions pending requested revisions.

#### **New Action Items:**

Review proposal to upgrade the model curriculum submission site (as described above).

**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18-19, 2013**

**Date:** September 30, 2013

**Committee or Liaison Group Name:** Recruitment Committee

**Chair/Representative's Name:** Sandra DeJong, MD

**Goal(s) or tasks to be completed in 2013-2014:**

- 1) Add new membership.
- 2) Continue Talking Points project.

**Action Items from May Meeting:**

None

**Report/Updates of Importance & Pertinence:**

1. Melissa Arbuckle has stepped down from the committee to work on BRAIN conference etc. New members added are: Nyapati Rao, MD (Nassau/NY); Bob Rohrbaugh, MD (Geriatrics, Yale); Erika Ryst, MD (CAP, Nevada); John Spollen, MD (Arkansas; ADMSEP liaison). Existing members: Lisa Clement (CAP Fellow, Wisconsin); Francis Lu, MD; Jed Magen, DO; Mark Servis. Consultants: Geri Fox, MD (CAP); Debbie Hales, MD (APA).
2. The committee has reached out to ally with other organizations to disseminate talking points. Final word pending.
3. Continuing to interface with Debbie Hales around a possible Recruitment Summit. Unclear as yet if APA supports.
4. We have continued working on Talking Points project focusing on Talking Points for recruiting IMGs into psychiatry and Talking Points for recruiting osteopathic physicians into psychiatry. Expect to have final product by March Annual Meeting.
5. Submitting AM workshop entitled "Recruitment Tips and Tricks" focusing on maximizing the recruitment process from soup to nuts (promoting the program, ERAS, interview day, putting together a match list, etc). Focus on assessing and wooing IMG and DO applicants.
6. Continued work on the NRMP All-In policy and efforts to change ACGME regulations so that psychiatry is a fully categorical program, including liaison with NRMP representative Jane Eisen.
7. Response to training coordinator and TD concerns re revamped NRMP website and coordinators' lack of access.

**New Action Items:**

None.



## AADPRT Committee, Task Force, Caucus Report

### Executive Council Meeting

October 18- 19, 2013

Date: 10/7/13

Committee or Liaison Group Name: Membership Committee

Chair/Representative's Name: Isis Marrero, MD

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**Brief summary of committee, taskforce, or caucus purpose or charge:** Our committee is charged with recruitment of members, orientation to AADPRT, and maintaining awareness of issues pertinent to our members, responding proactively to their needs or concerns, and communicating those concerns to AADPRT leadership. We are also charged with expanding our membership and encouraging their participation. We accomplish our mission through the membership committee, new training directors program and the mentorship program.

#### **Goal(s) or tasks to be completed in 2013-2014:**

1. Planning and coordinating New Training Directors Program for next year-selection of speakers, course content and BOG leaders, as well as streamlining process for signing up for NTD Symposium and BOG lunch.
  - a. Repeat NTD boot camp but reevaluate timing of the activity.
2. Continue Mentorship program under the leadership of Joan Anzia.
3. Update annually the membership and orientation manual.
4. Assign a more active role to committee members.

#### **Action Items from May Meeting:**

- Dr. Marrero will coordinate with the Program Committee regarding the timing and logistics of the New Training Directors symposium.
- Dr. Marrero will solicit names of potential Break-Out Group leaders from EC members (the leaders cannot be EC members because the EC meeting probably conflicts with the NTD meeting).

#### **Report/Updates of Importance & Pertinence for the October Meeting:**

1. **Emeritus Membership Status-** considered after a member asked if this category existed within the organization.
  - a. According to the ADDPRT Bylaws 3.3 *"How Members Become Members,"* there are three membership categories:
    - i. Institutional members
    - ii. Affiliate members
    - iii. Honorary members- This class of membership shall consist of individuals who have rendered significant contributions to psychiatry or psychiatric residency training. Honorary members shall not have voting rights. According to the bylaws, *"nominations of Honorary members may be made by any voting member and duly second by another voting member. The nomination should then be forwarded to the Secretary of the organization for discussion and voting by the Executive Council. Such individuals shall be elected by a two-thirds (2/3) vote of the Executive Council."*

b. Emeritus or Retired Membership Status exist in a number of other professional organizations:

- i. American College of Psychiatrists
- ii. Association of Women Psychiatrists
- iii. Association for Academic Psychiatry
- iv. Academy of Psychosomatic Medicine
- v. The American Association for Geriatric Psychiatry
- vi. AACAP
- vii. American Neuropsychiatric Association

Note: The dues varied from no charge to varied discounted rates.

**c. Proposal for AADPR Emeritus Membership Status:**

- i. A member may become emeritus after they have ceased their scientific or medical occupation for which they received remuneration (i.e., income based on professional services has ceased or is less than 10% of full-time occupational income). Upon approval by the Executive Council, an emeritus member will receive discounted dues and will pay meeting registration fees at the trainee rate, but will be expected to pay other meeting costs. In order to qualify for this category, members should have had an institutional or affiliate membership for a minimum of seven (7) years.

Note: At this point the suggested dues for the emeritus membership status is \$100.

**2. Proposed scheduled for 2014 NTD program:**

**Thursday, March 13, 2014**

7:30-8:00 am- Breakfast and mentorship program

8:00-8:45 am- Spotlight on PD

8:45-9:00 am- Break

9:00-10:00 am - Nuts and Bolts

10:00-10:15 am- Questions

10:30-11:45 am- attend "Implementing the Milestones"

Lunch & BOG

**Saturday, March 15, 2014**

Workshop- Hands-on experience implementing the Milestones

**New Action Items:**

- 1. Finalize planning NTD program- inclusive of BOG leaders, speakers and workshop.**
- 2. Update registration form for the annual meeting.**

**AADPRT Committee, Task Force, Caucus Report  
Executive Council Meeting  
October 18-19, 2013**

**Date:** 9/13/13

**Committee or Liaison Group Name:** Regional Representatives Committee

**Chair/Representative's Name:** Chandlee Dickey, MD

**Brief summary of committee, taskforce, or caucus purpose or "charge":** This committee provides a channel of communication between individual training programs and the AADPRT executive council. Communication is facilitated by regional representatives and the committee chair during the year, typically through the AADPRT regional list serves. Information is relayed from and to the AADPRT executive council for each EC meeting. Once a year, during the annual meeting, this information exchange occurs in person - within regional caucuses, Regional Representative Committee meetings and EC meetings.

**Goal(s) or tasks to be completed in 2013-2014:**

Clarity from ABPN / ACGME regarding future plans to allow residents to short-track into fellowships other than Child.

Encourage other committees to compile and share Milestones Best Practices.

**Action Items for the May 2013 Meeting**

**Issues unresolved from March meeting:**

**Report/Update of Importance and Pertinence**

There are many issues of concern to the membership at this time and they are being addressed in specific committees.

**New Action Items**

Covered in other committees.

**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18- 19, 2013**

**Date:**   **Committee or Liaison Group Name:** Development Committee

**Chair/Representative's Name:** Brian Palmer, MD, Chair

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**Brief summary of committee, taskforce, or caucus purpose or charge:**

The Development Committee seeks to identify funding sources to support the activities of the organization, in particular at the Annual Meeting. The Committee also develops policies to minimize the conflict of interest that may arise from such arrangements, as well as possible conflicts of interest among the leadership of the organization.

**Goal(s) or tasks to be completed in 2013-2014:**

1. Pursue outside funding opportunities for the fellowships, particularly IMG
2. Internal solicitation for fellowships
3. Monitor conflicts of interest and adherence to COI policy in the organization
4. Assess exhibitions in terms of revenue and perceived conflicts, continue to enhance

**Action Item from May 2013**

- Dr. Palmer will work with Ms. Meinsler to revise the registration process to make it easier to donate.
- Dr. Palmer will coordinate additional requests for donations in the fall and will solicit donations from Past Presidents.

**Report/Updates of Importance & Pertinence for October Meeting**

1. Reviewed membership and registration processes; donation opportunities included.
2. Continuing to pursue IMG fellowship sponsorship – some initial interest, lots of run-around, I'll be persistent and hope to have an update at the annual meeting.
3. Solicitation of past-presidents will be in November. Lucille is compiling the list, and I've drafted a letter for Adrienne to send.
4. Goal of 100% of Exec donating is coming along. 9 members have donated. Right now, at the exact moment you're reading this, is a chance to make that 10 – or 11 – or more! Wouldn't it be great to announce at the annual meeting that we all donated and as we encourage others (including past presidents)?
5. Lucille's departure is an opportunity to consider a fund in her honor, perhaps that could be attached to the coordinator award. Thoughts?

**New Action Items:** None

**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18-19, 2013**

**Date:** 10/8/13

**Committee or Liaison Group Name:** Assessment Task Force

**Chair/Representative's Name:** Michael Jibson and Deb Cowley

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**Brief summary of committee, taskforce, or caucus purpose or charge:**

The charge of this task force is to assist the membership with assessment/evaluation of the Psychiatry Milestones.

**Goal(s) or tasks to be completed in 2013-2014:**

1. Solicit best practices of assessment/evaluation methods relevant to milestones from the AADPRT membership.
2. Search the literature for relevant measures and methods for milestone assessment.
3. Inform the membership about resources for assessment of milestones.
4. Where needed, develop tools or examples of assessment methods, working in conjunction with the ACGME Psychiatry Milestones Workgroup to avoid duplication of effort.

**Report/Updates of Importance & Pertinence for October Meeting**

To date, the task force has:

1. Solicited best practices and selected 3 for posting on the AADPRT website (now posted). We will send out another solicitation once the final version of the milestones is posted on the ACGME website.
2. Assigned members specific subcompetencies for literature review of assessment methods and tools.
3. Sent out 3 "Milestones Assessment Tips." We plan to continue sending these out as we find useful approaches or tools for evaluation of milestones.
4. Categorized milestones in terms of possible assessment methods. We will refine this once the final version of the milestones is posted on the ACGME website.
5. Since the ACGME Psychiatry Milestones Workgroup is developing milestones-based assessment tools, we have not done that as yet. We will see what they develop and whether we need to develop any measures ourselves.

6. Some members of the task force will participate in a workshop at the AAP meeting designed to give attendees experience with, and an opportunity to provide feedback about, some novel assessment methods based on direct observation of specific resident skills and clinical interactions.
7. Drs. Jibson and Cowley will conduct a session at the AADPRT meeting in March about assessing milestones.

**Action Items for October Meeting:**

No specific action items, but we would appreciate any feedback and/or suggestions about things the task force could do to be helpful to AADPRT members.

# MEMO

**To: AADPRT SC**

**From: Richard F. Summers, MD**

**Re: Report from APA Council on Medical Education and Lifelong Learning**

**Date: October 18, 2013**

## **Meetings**

The Council met by teleconference in July and in person on Sept. 20, 2013. Jeff Lieberman and Paul Summergrad joined the September meeting. Dr. Lieberman's emphasis was on the need to help the field prepare for new roles with the transformation of the healthcare system, the importance of aligning medical and residency education with these roles and the relevance of developing improved curricular materials for neuroscience education. Dr. Summergrad reflected on the rapidly changing healthcare environment, APA's role in studying this and preparing for it, and the changing educational imperatives.

## **Milestones**

CMELL reviewed the draft Milestones available in July and wrote a letter to the ACGME Psychiatry RRC providing feedback. Our letter made the following points:

- The development and neuroscience milestones are particularly ambitious with respect to the state of the field.
- Some milestones are not realistically achievable by many current residency programs.
- Should specific language regarding skills relevant to integration with primary care be included in the milestones?
- We are concerned about the administrative burden of the implementation of the milestones.

## **Training the Psychiatrist of the Future Project**

We are starting a 1-2 year project to understand and define the skills required by the increased demand for integration with primary care and the changes in UME, GME and CME that would help meet those demands.

The Council's work will be carried out in collaboration with the APA's efforts in this area, particularly the Board of Trustees Workgroup. We will collaborate closely with the

psychiatry education organizations, including AADPRT. Claudia O'Reardon will become a consultant to the CMELL in her role as Chair of the AADPRT Integrated Care Task Force.

The Council will begin this effort over the next months with a series of webinars with leaders in the field to develop our understanding of the issues.

### **Recruitment**

The Council will work with Debbie Hales on developing tools and knowledge about effective recruitment strategies for psychiatry and consider holding a conference to further refine and disseminate these ideas.

### **Neuroscience Education**

The Council has a liaison relationship with the AADPRT Neuroscience Education Initiative and is hoping to help facilitate the development of nationally available curricular materials in this area.



**AADPRT Committee, Task Force, Caucus Report**  
**Executive Council Meeting**  
**October 18-19, 2013**

**Date:** September 30, 2013

**Committee or Liaison Group Name:** Coordinators' Caucus

**Chair/Representative's Name:** Carol A. Regan, C-TAGME

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**Brief summary of committee, taskforce, or caucus purpose or charge:**

The Coordinators' Caucus is comprised of five committees (Membership, Information, Program, TAGME and Coordinator Recognition Award) and a task force (Professional Development) which have been formed to better educate our members in the administration and management of residency training programs and allow for more opportunities in professional growth.

**Goal(s) or tasks to be completed in 2013-2014:**

**Committee Descriptions & Goals for this Year:**

The Membership Committee contacts new coordinators, introducing them to AADPRT and helping them learn about all of the resources available. They are currently updating the mentor list for coordinators. They are also assisting the Program Committee with the New Coordinators' University portion of the Coordinators' Symposium.

The Information Committee is actively working on updating the Coordinators' section of the AADPRT website ensuring that all the information provided for coordinators is current, comprehensive and well formatted.

The Program Committee is currently putting together the schedule for the Coordinators' Symposium at the AADPRT Annual Meeting. They have solicited workshop submissions from the Coordinator Membership and are currently reviewing submissions for acceptance/scheduling at the Annual Meeting. This committee will continue to be actively working on the implementation of the 3-day Coordinators' Symposium including a New Coordinators' University for the 2014 Annual Meeting. They will also follow-up with evaluations sent to all attendees in order to make future improvements.

The TAGME Committee is putting together a newsletter with the latest news and opportunities available for coordinators which will be distributed electronically by mid-October.

The Coordinator Recognition Award Committee has solicited and received nominations for the award. The awardee will be announced at the 2014 Annual Meeting.

The newly formed Professional Development Task Force is planning on developing a handbook on advancement as well as creating a general job description that can be used as a starting point for coordinators to build on. They also plan to resurvey coordinators about their present positions.

Most of the above committees are submitting one or more workshops to be given during the Coordinators' Symposium at the AADPRT Meeting in March 2014.

### **Report/Updates of Importance & Pertinence for October Meeting**

This Caucus officially formed in April 2013 and the Caucus Chair was elected in May 2013. The Chairs for each of the committees had already been established by the Coordinators' Planning Committee for the initial two-year period. The Caucus appointed a Professional Development Task Force Chair in July. All Committee Chairs have solicited and obtained a membership for their respective committees (attached).

### **Action Items for October Meeting:**

AADPRT Coordinators' Caucus  
Carol Regan, Chair

Membership Committee

Mia Collins, Chair

Members

Cheri Bingham

Tiffany Burns

Ola Golovinsky

Deborah Horton

Jennifer Laflin

Meghan Morrissey

Information Committee

Michele Peliel, Chair

Members

Mary Barraclough

Debra Bibeau

Cheryl Casner

Elaine Danyew

Nicole Junjulas

Jeannette Souder

Program Committee

Robert Tetirick, Chair

Members

Barbara Burns

Elain Danyew

Workshop Review Subcommittee

Zoellen Murphy

Penny Pourat

TAGME Committee

Linda Gacioch, Chair

Members

Beverly Pernitzke

Georgina Rink

Dorothy Winkler

Coordinator Recognition Award Committee

Mary Barraclough, Chair

Members

Linzi Connors

Laura Covert

Isis Marero

Lucille Meinsler

Robert Tetirick

Professional Development Task Force

Kimberly Kirchner, Chair

Members

Sophia Bienek-Cate

Cheri Bingham

Heather Close

Laura Covert

Tara Lauriat

Kate Rusi

Shirin Salzer