The pandemic continues...

J. Clay Sawyer, M.D., DLFAPA, Chair, Texas Federation of Psychiatry

Not surprisingly, we are still in the midst of the Covid pandemic. Over the past few months, the Federation has entered much useful information on our webpage (https://www.txpsych.org) regarding resources available to help deal with this situation. Please refer to that page for more details.

The most important concern at present is continuing to help our patients deal with the enormous challenges facing all. It is our duty to keep them informed, to keep them as healthy as possible, and to encourage their cooperation with recommendations designed to achieve these objectives. As has been the case, these effective recommendations continue to involve wearing a mask, keeping appropriate distancing, avoiding social gatherings, and hand washing.

Now, new vaccines are available to a degree due to failed initial rollout plans. This situation is slowly improving, but the time interval to even begin any semblance of herd immunity is likely to stretch until late Summer or early Fall at the earliest. In the interim, we must do our duty to our patients and continue to educate them about the facts. We must help them to realize, for example, that wearing a mask is not a political statement, but rather is scientifically proven to be effective and exhibits common good sense, as well.

At present, new infections and new hospitalizations appear to be diminishing in number. This may prove to be the calm before the storm; you may recall an increase in these parameters about two weeks after ill-advised social gatherings at Halloween, Thanksgiving, Christmas, and New Year’s. Now we must be prepared for a potential increase after Super Bowl parties and after Valentine’s Day. I hope I am wrong about this potential, but past experience says otherwise.

I know how impatient we all are for a return to relative normalcy, but we must deal with reality. It is far better to follow these essential recommendations now than to no longer be around in the near future as a result of not following them. We must not only effectively educate our patients in this regard, but must always set the example. To do otherwise is to be disingenuous and to constitute a failed standard of care. I am convinced that literally hundreds of thousands of lives have been needlessly lost because of impatience, because of politics, and because of the lack of setting an effective example. Let’s do everything we can to end this preventable loss so that our ultimate return to normalcy will be that much quicker for a greater number of people. If we do what is necessary to achieve that goal, then we can truly say that we have done our duty as physicians.

The Legislature is in Session

Debra Arakisson, M.D., DLFAPA, Vice Chair Public Policy, Texas Federation of Psychiatry

Legislators look at the numbers. The 87th Texas Legislature convened on January 12 and will be in session until May 31. Challenges from the pandemic have not stopped the Texas representatives and senators from going about the business of developing bills their constituents believe are needed. And we as Texas psychiatrists will need to stand ready to meet as informed constituents about bills patients need and bills that could harm Texas patients.

Eric Woomer, our lobbyist, and the Federation Legislative Committee began meeting last August to prepare for this upcoming session. Members of the committee include the Federation Chair, J. Clay Sawyer, MD, and the three Presidents of our Federation psychiatric organizations: Tim Wolff, MD as President of TSPP; Melissa DeFilippis, MD as President of TSCAP; and Daryl Knoll, MD as President of TAP. Other members of the committee Michael Arambula, MD, PharmD; Federation Vice Chair of Education; LesSecret, MD, Federation Delegate; Debra Arakisson, Federation Vice Chair of Public Policy, and Legislative Committee Chair; Lynda Parker, MD, Federation Secretary/Treasurer; Karen Wagner, MD Secretary/Treasurer of TSPP; Daniel Pearson, MD, Federation Delegate, and Melissa Eshelman, MD, immediate Past President of TSPP; and Melissa Eshelman, MD, immediate Past President of TSPP; Melissa Eshelman, MD, immediate Past Federation Legislative Chair; Lynda Parker, MD, Federation Secretary/Treasurer; Karen Wagner, MD Secretary/Treasurer of TSPP; Daniel Pearson, MD, Federation Delegate, and Melissa Eshelman, MD, immediate Past President of TSPP; Melissa Eshelman, MD, immediate Past President of TSPP; Melissa Eshelman, MD, immediate Past President of TSPP; Melissa Eshelman, MD, immediate Past President of TSPP; Melissa Eshelman, MD, immediate Past President of TSPP; Melissa Eshelman, MD, immediate Past President of TSPP; Melissa Eshelman, MD, immediate Past President of TSPP; Melissa Eshelman, MD, immediate Past President of TSPP.

Save The Date! – March 2, 2021

Federation of Texas Psychiatry
Texas Society of Psychiatric Physicians
Texas Society of Child and Adolescent Physicians
Texas Academy Psychiatry

VIRTUAL CAPITOL DAY
(In Conjunction with TMA First Tuesday)

President of TSPP: Joseph Penn, MD, Past President of TSPP: and Richard Noel, MD; Past President of TSPP. In addition to our committee members, Leah Kolar, MD, a PGY4 Resident at UTMB and Chair of the TSPP REM Committee, worked with the committee. Derek Neal, MD, her mentor, to develop training to assist when we present workshops on legislative advocacy. The enthusiasm and interest of our residents with TMA. We will meet from 12:30 to 5:00 PM virtually. Eric Woomer will have a briefing time and we will split into groups with identified spokespersons to meet with different legislators. Our major topics:

• Scope of practice
• Collaborative care
• Telepsychiatry
• Prior authorization of antipsychotics

The Federation needs your input on the following:

• Medicaid IMD exclusion for patients who are hospitalized in private psychiatric hospitals.
• The Federation must also address the need for mental health services for patients treated in inpatient hospital settings.

Group each will have spokespersons who are prepared to talk about the issues related to the topic – BUT WE NEED A NUMBER OF PEOPLE TO JOIN IN WITH THEM! Legislators look at the numbers; and a good showing of faces with each meeting will help us as we make the informed points that our representatives and senators need to hear. Keep on the lookout for an email from the Federation about how to be a part of our Capitol Day. Join us to help bring those points into the forefront in order to help Texas patients – and Texas psychiatrists – during this unprecedented time.
T he 87th Texas Legislature gavelled in on January 12th, 2021, with low-key opening day ceremonies. Lawmakers have 140 days to complete their business – March 12th is the filing deadline for bills, and Sine Die – the last day of session – is May 31st. Opening day of the session was chiefly focused on addressing process modifications in response to the COVID-19 pandemic and the enthusiastic response to the election of Rep. Dale Phelan (R-Beaumont) as Speaker of the Texas House.

Each chamber performed their opening day functions to an unusually empty gallery, and everyone entering the Capitol was subjected to mandatory COVID-19 testing, facilitated by the Texas Department of Public Safety. One notable change on the Senate side - a rule change that allows for eighteen senators to bring a bill to the floor for a vote, rather than the previous nineteen-vote requirement. This will allow GOP senators to advance a bill without Democrat support.

The beginning of session is typically filled with energy and the excitement of meeting new members and catching up with old friends. This year, however, posed some historic challenges and opportunities that will require creativity and adjustment. Already, four members of the House have already tested positive for COVID-19 since the session began – meaning continued refinement of process will need to be made to keep lawmakers, their staffers, the lobby and the public safe.

Key Issues Facing the Legislature

COVID logistics, the state budgetary short-fall, and redistricting are some of the main subjects legislators will face this year, although redistricting is likely to be addressed in a special session. Here are some of the challenges in addressing these issues:

COVID-19

The public is being allowed into the building, but restrictions are in place. The Senate is requiring a negative coronavirus test upon entry into the chamber or entry into committee meetings. The House is not requiring tests but is requiring everyone to wear a mask. Public seating in the gallery will continue to be limited, and during the debate on House rules, lawmakers rejected a measure that would have allowed for virtual public testimony, so anyone wishing to testify will need to do so in person.

Budgetary Shortfall

The House and Senate released their base budget for the 2022-2023 biennium, with both chambers proposing General Revenue expenditures of $119 million, staying under the Legislative Budget Board’s 7% spending limit. The budgets both prioritize teacher retirement funding and the investments made in public education last session, as well as providing funding for Medicaid caseload growth. Budget hearings are to begin in mid-February. The overall shortfall between the current budget and the next cycle is around $7 billion – a daunting number but one that is perhaps more manageable than expected.

Redistricting

The Senate special committee has already begun hearings on the redistricting process, which determines how many seats each state gets in Congress based on data from the U.S. Census Bureau. In Texas, the state legislature uses that data to equally split up the U.S. House seats across the State, as well as the Texas House and Senate districts.

The Legislature will also consider many issues related more specifically to psychiatry and the care of the mentally ill. Some of the highlights of issues that will be on lawmakers’ radar:

Mental Health Budget

Combined initial budget funding recommendations exceed $8 billion across 24 state agencies. This amount includes funding for inpatient client services at state and community mental health hospitals, outpatient services provided through local mental health authorities, substance abuse prevention, intervention, and treatment services for adults and children, and mental healthcare services for veterans. This amount is a decrease of $500 million overall, but the decrease is largely attributable to a reduction in “Rainy Day” funds and bonds appropriated for one-time construction, repair and renovation projects at state mental health hospitals.

Behavioral health-related expenditures in Medicaid are estimated to be $3.7 billion for the biennium, and CHIP behavioral health funds are nearly $100 million. Importantly, these funding recommendations do not include any new federal funds COVID response for the 2022-23 biennium, which are likely to be bolstered in the coming months.

Other Legislative Priorities

Scope of Practice Expansion – APRNs and Psychologists

The Federation continues to oppose the independent practice of Advanced Practice Registered Nurses. There is a significant gap in educational and training experience between physicians and APRNs as physicians must accrue many thousands of more hours of education and clinical practice than nurse practitioners in order to independently treat a patient. Moreover, there is scant evidence to suggest that allowing APRNs to independently practice would increase access to care, as most maps of Texas counties indicate that APRNs tend to congregate in urban areas of the state, just as most other providers, and independent practice would not suggest they would spread to more rural areas of the state.

No APRN bill has yet been filed, but a psychological prescribing bill – H.B. 1462 - has been filed by Rep. Vikki Goodwin (D-Austin). Granting psychologists prescribing authority would compromise patient care - an estimated 50% of those who require medication for their mental illness also have other medical conditions which require medication. The complex interactions of these drugs and their effects present a challenge even to experienced physicians.

Capitol Day

The Federation is planning for ways to connect our members with lawmakers during the 87th Legislative Session. This new way of interacting has proven to be effective over the past year and has been established as an efficient way of communicating legislative priorities as the session moves forward. The Federation is developing a plan to facilitate a virtual Capitol Day, targeting key lawmakers on our priority issues, including scope bills, collaborative care, telepsychiatry, and Medicaid access to psychiatric services.

As always, it is our pleasure to be your voice at the Texas state capital. Please feel free to reach out with any questions, comments or concerns that you may have. We look forward to continuing to serve the interests of Texas psychiatrists and your patients for the remainder of the 2021 legislative session.
concluding your application essay about why you wanted to be a physician, and then sometime later, perhaps four years later, you wrote one about why you wanted to be a psychiatrist. Grandine—perhaps. Idealistic—likely. Naïve—of course. You have forgotten the words—but if you pause, in your heart, you can remember the gist of it. In many ways, it is likely you have realized those goals.

With your hard-earned expertise, you found your calling in the workforce, did your continuing medical education, and did administration for, provided supervision of, and/or directly attended to patients, ranging from the seriously mentally ill to the worried well. You sought affiliation in your personal and professional life—and you found your niche. In the process, you came to appreciate that this universe was not so enchanted and challenges abound. The reality principle replaced an ideal one. You have been changed by patient expectations, the culture of prescribing medications for nearly all patients, a dramatic rise in the cost of psychiatric care, and advocacy challenges. You may have been swayed by the heavy hand of gatekeeping and were frustrated during negotiations for authorizations. You have been frustrated by the lack of parity, startled by dwindling psychiatric beds, and chagrined by the persistence of the stigma of psychiatric illness.

Despite all that, you were managing decently when the pandemic hit. Now your interactions with patients, colleagues, and students were shaken and stirred. You had to deal with patients’ fears as well as your own. You have done telephone visits, navigated BlueJeans on the electronic medical record, and masked up in-person visits. You have learned ZOOM, organized conference calls for meetings, and advocated in new ways. Bravo! You have adapted, and are likely to continue to do so in the upcoming months.

For me:

So, I too, have gone down this path of idealism giving way to realism, adapted as psychiatry has changed. I have not been infected by the SARS-CoV-2 virus and gratefully have had vaccinations. However, like so many others, my family has been affected. My wife’s uncle and both of my parents have had COVID—and survived. The angst was up-front and personal. Unfortunately, there have been losses this past year: sadly, Dr. Ken Altshuler, the longtime, dedicated chairman for the department of psychiatry at the University of Texas Southwestern Medical Center died in January. He was a fine mentor and friend. My observations of the effect of the pandemic on patients has been varied—some bad, but also some good. The stress of restrictions and the capricious nature of the virus has led to increased anxiety and lower mood for established patients and has led to an increased number of new evaluations. Other patients initially have felt unaffected (especially those who identified as introverted), have appreciated the ability to have sessions from the safety of their home either by telepsychiatry or telephone, and have been less likely to “no show” for appointments. I miss being able to be with my fellow faculty members, staff and patients; however, have enjoyed the comforts of home, being protected from transmission, and having a 30 second commute to work for a majority of days.

For us:

We are carrying on—but what were the alternatives? Patients are getting treated, students and residents are being taught, and important research is happening. Concerns about inherent biases and racial prejudices are being heard. The pandemic is like a war. Most of us are surviving. Unfortunately, casualties have been and will continue to be very significant. The immediate future remains very murky. Hopefully, most of us will make it to the other side. Regardless, the TSPP will be there, helping us to pick ourselves up and to be stronger. We need to be there to support ourselfs and our patients, and to provide hope.

We had success with two virtual meetings in 2020 and this spring are having two separate virtual meetings—the executive council and committee meetings in March—and the CME program later in April. Membership involvement remains key. Our advocacy in the current legislature has its own hurdles, but we can negotiate these. Indeed, we are all adaptor—ready for future challenges.

I am grateful for the opportunity to be the president of the TSPP regardless of good times or bad—and look forward to assisting Dr. Mike Arambula as he takes the rudder for the journey ahead.

Texas Society of Psychiatric Physicians / Texas Academy of Psychiatry

2021 Spring Meeting Schedule

PROGRAM SCHEDULE

SATURDAY, MARCH 20, 2021
8:30 am – 9:30 am Chapter Leadership Forum

Council on Leadership Meetings:
9:30 am – 10:30 am Ethics
9:30 am – 10:30 am Distinguished Fellowship
9:30 am – 10:30 am Finance
10:30 am – 11:00 am Break / Members Visit with Sponsors Exhibiting

Council on Education Meetings:
11:00 am – 12:00 pm Continuing Medical Education
11:00 am – 12:00 pm Professional Practice Management

Council on Service Meetings:
12:00 pm – 1:00 pm Academic Psychiatry
12:00 pm – 1:00 pm Children and Adolescents Psychiatry
12:00 pm – 1:00 pm Forensic Psychiatry
12:00 pm – 1:00 pm Public Mental Health Services
1:00 pm – 1:30 pm Break / Members Visit with Sponsors Exhibiting

Council on Advocacy Meeting:
1:30 pm – 2:30 pm Government Affairs
2:30 pm – 3:30 pm Texas Academy of Psychiatry Board of Directors Meeting
2:30 pm – 3:30 pm Resident Fellow Member in Training Section
3:30 pm – 4:00 pm Break / Members Visit with Sponsors Exhibiting
4:00 pm – 5:00 pm TSCP Executive Committee Meeting
5:00 pm – 6:00 pm Federation Delegate Assembly Meeting
6:00 pm – 7:00 pm Foundation Board of Directors Meeting

SUNDAY, MARCH 21
12:00 pm – 2:00 pm TSPP Executive Council Meeting and Installation of 2021-22 Officers at Conclusion of Meeting:

2021 Distinguished Fellowship

Distinguished Fellowship status is awarded to outstanding psychiatrists who have made broad and significant contributions to the psychiatric profession and their communities, and is the highest membership honor the American Psychiatric Association bestows upon members. Excellence, not mere competence, is the hallmark of an APA Distinguished Fellow. If you are considering applying for Distinguished Fellowship status, please review the APA requirements at https://www.psychiatry.org/join-apa/ become-a-fellow and then reach out to your Chapter Representative to the TSPP Distinguished Fellowship Committee to discuss your interest. If you don’t have a local chapter representative, contact TSPP via email at tsppofc@aol.com, and one of our committee members will be designated to serve as your advisor.

In addition to belonging to APA for at least eight consecutive years as a General Member or Fellow, and being Board Certified in Psychiatry, applicants should demonstrate excellence in a number of areas. Since Distinguished Fellowship is an APA honor, length and quality of service in the activities of the Chapter, District Branch (TSPP), and

TSPP Distinguished Fellow Committee

Michael Arambula, MD, Pharm D
Debra Aikinson, MD
Melissa Edelman, MD, Vice Chair
Edythe Harvey, MD
Frutuscu Ierogion-Rascón, MD
Mark Jacobs, MD, Chair
Chad Lemaire, MD
Carol North, MD
J. Clay Sawyer, MD

Bexar County Chapter
Tarrant Chapter
Austin Chapter
Galveston-Brazoria Chapter
South Texas Chapter
Housto Chapter
Housto Chapter
North Texas Chapter
Lone Star Chapter

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markjacobsmd84@cloud.com
chad.lemaire@bghglobal.net
marksjacobsmd@bghglobal.net

CONGRATULATIONS

to the Following TSPP Members whose nominations were approved by the APA Board of Trustees for Distinguished Fellow and Fellow status in 2021:

DISTINGUISHED FELLOWS

E. Sherwood Brown, MD, DFAPA, Dallas Clifford K. Moy, MD, DFAPA, Houston

FELLOWS

Rebecca Castro, MD, FAPA, Seguin Chad A. Hooten, MD, FAPA, Texarkana
Askit Joshi, MD, FAPA, Lubbock

For you:

You, Me, and Us

Timothy K. Wolff, MD, DFAPA
President, Texas Society of Psychiatry Physicians
Scientific Program Schedule
Presented in Central Time Zone

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>9:15 am</td>
<td>Log onto Virtual Webinar (Zoom) to be admitted to the CME Program, starts promptly at 9:30 am.</td>
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<tr>
<td>9:30 am</td>
<td>Welcome and Introductions - Open Remarks / CME Accreditation Statements and Certificate of Attendance Information</td>
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<tr>
<td>9:35 am - 10:40 am</td>
<td>Physician Support Line – Confidential Peer-to-Peer Physician Self Care and Prevention of Burnout: One Grassroots Solution for Stressors of COVID and Beyond</td>
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<td>10:40 am - 11:45 am</td>
<td>15 Minute Q&amp;A with Audience Objectives: The learning objectives for this activity have been designed to address clinician competence. Upon conclusion of the activity, participants should be able to:</td>
</tr>
<tr>
<td>11:45 am - 12:00 pm</td>
<td>Discuss and employ HIPAA and privacy laws.</td>
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<tr>
<td>12:00 pm - 2:05 pm</td>
<td>ETHICS: “Ethics and Telepsychiatry”</td>
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<tr>
<td>2:05 pm - 2:20 pm</td>
<td>Break</td>
</tr>
<tr>
<td>2:20 pm - 3:25 pm</td>
<td>“Novel Pharmacological Treatments for Schizophrenia”    Stephan R. Saklad, MD, Pharm.D. BCPP</td>
</tr>
<tr>
<td>3:25 pm - 3:50 pm</td>
<td>Closing Remarks</td>
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CME PROGRAM GOAL / TARGET AUDIENCE
This live activity has been designed in a lecture format with case examples followed by an interac-
tive audience question and answer period to pro-
vide primary target audience of Psychiatrists, as well as other specialties of medicine, with the most up-to-date, evidence-based data that can be translated into clinical practice. The information and data presented will address the professional practice gaps of the learners and advance the physician’s competence and improve their knowl-
edge about the complex contributing factors in this patient population and introduce additional resources and new strategies to improve out-
comes so that they may develop strategies for applying the knowledge, skills and judgement of the information presented in the educational activity into their practice.

IDENTIFIED PRACTICE GAPS / NEEDS ASSESSMENT
TSP identified educational needs and professional practice gaps from members expressed needs and in medical literature and incorpo-
rated it into the CME activity to address the relev-
ant educational needs concerning competence that under the professional practice gaps of the participants. Patients with depression and medical co-morbidities may be under-
treated due to warnings about medical co-morbidities, and psychiatrists and primary care clinicians may have difficulty communicating and under-
standing the risks and benefits of psychotropic medications in these patients. The presentation will provide an update on best practices in treat-
ing patients with depression and medical co-
morbidities to increase their knowledge and competence. The COVID-19 pandemic has caused a rapid shift to telemedicine work. Usual laws like HIPAA have been suspended to allow greater access to patients at risk for mental health issues. CMS has directed states to allow telepsychiatry to make telemedicine and telephone visits equivalent to in person visits. However practi-
tioners may not be fully aware of the impact of telework on the therapeutic relationship, confi-
dentiality issues, the susceptibility to some apps and platforms to breaches in confidentiality and how this affects provision of safe and optimal care. Psychiatrists need to be updated on the development, timeline for release of new med-
ications, early results of trials / pre-market expe-
rience with novel drugs for schizophrenia. COVID-19 has added additional stressors to physicians and psychiatrists. Psychiatrists need to be educated about Physician Support Line, a peer-to-peer physician self-care and prevention of burnout, understanding what can be accomplished and how to access support in a phone helpline for physicians during the pandemic and beyond.

OBJECTIVES
The learning objectives for this activity have been designed to address clinician competence. Upon conclusion of the activity, participants should be able to:
- Identify new receptor mechanisms for new drugs.
- Describe and chart the timeline for release of drugs.
- Calculate early results of trials.
- Discuss and employ HIPAA and privacy laws.

ETHICS DESIGNATION STATEMENT
The presentation “Ethics and Telepsychiatry” has been designated by the Texas Society of Psychiatric Physicians for two (2) hours of education in medical ethics and/or professional responsibility.

FACULTY AND PLANNERS
In compliance with the ACCME/TMA Standards for Commercial Support of CME, to assure balance, independence, objectivity and scientific rigor in all of its CME activities, prior to the education activity being delivered to the learners, the Texas Society of Psychiatric Physicians implemented a mechanism to identify and resolve potential conflicts of interest from everyone who was in a position to control the content of the education activity.

TSP will disclose to learners the existence (or non-existence) of all relevant financial relationships that the faculty and planners did (or did not) have with any commercial interests concerned with the content of the educational presentation. Disclosure will occur prior to the presentation through oral communication and inclusion on the beginning slide of the program.

CME CREDIT STATEMENT
The Texas Society of Psychiatric Physicians design-
ges this Live Activity for a maximum of five (5) AMA PRA Category 1 Credits ™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Mark Kunik, MD, M.P.H, DFAPA
Director, VA South Central Mental Illness Research, Education and Clinical Center (RECC)
Chief, QUEST Behavioral Health and Implementation Program
Professor
Menninger Department of Psychiatry and Behavioral Science
Houston, Texas

Avrim B. Fishkind, MD
Consultant-Clinician: Emergency Psychiatry, Telepsychiatry and Psychiatric Emergencies
Services Design Empathic Soul Health, LLC
Former General Manager
SOC Telemetry
Former Chief Executive and Chief Medical Officer, Owner
JSA Health Telepsychiatry
Houston, Texas

Smita Gaudam, MD
Co-Founder, Collaboration Coordinator and Volunteer Coordinator of Physician Support Line
Board Certified Child and Adolescent Psychiatry
The Family Institute, A Non-Profit Organization Affiliated with Northwestern University
Involved in Community Mental Health Education in Chicago and Northern Suburbs
Chicago, Illinois

Moni Masood, DO
Founder and Chief Organizer of Physician Support Line
Certified in General Adult Psychiatry
Outpatient Psychiatrist, Greater Philadelphia Area

Stephen R. Saklad, MD, Pharm.D., BCPP
Director, Psychiatric Pharmacy Program
Pharmcotherapy Education and Research Center
UT Health Science Center
San Antonio, Texas

Clinical Professor
Pharmcotherapy Division
The University of Texas at Austin College of Pharmacy

Adjunct Professor
School of Medicine
Pharmcotherapy Education and Research Center
UT Health Science Center San Antonio

Clinical Pharmacologist
San Antonio State Hospital
Texas Department of State Health Service
Virtual Live CME Webinar

April 17, 2021

Cutting Edge Psychiatry in the Time of COVID

J. Clay Sawyer, M.D., Chair, DIFAPA, Texas Foundation for Psychiatric Education and Research

The resources of the Foundation help to provide education for the general public and for legislators at all levels of government—the more information provided, the less the chance that our patients will be taken advantage of by those who would wish to act as physicians without undergoing, and successfully completing, the training which all physicians receive (medical school, residency, and beyond) before we are deemed ready to take on the serious responsibilities of caring for patients in the highest professional manner.

The Foundation’s educational objective does not stop there. Our resources can also be used to help TSPP for example, to provide CME programs in order to help all of us maintain our licensure. These CME programs are of high quality and have been historically well-received, and are vital to our mission of helping our physicians to continuously attain the highest possible standard of care through taking advantage of mastering the latest developments in our field.

Finally, we are now in the midst of a new Texas legislative session with many new members of that body. Continuing to help educate elected officials about what constitutes a high standard of medical care (as well as correcting approaches that would have the opposite effect) is a vital role for organized psychiatry in Texas. Whether scope of practice issues, admitting privileges, prescription pre-authorization, and many others, the involvement of all psychiatrists in Texas is essential for the success of these goals. If one cannot help in this endeavor in person, then a generous contribution to the Foundation can be highly effective, too.

So, don’t let COVID-induced changes interfere with the work which must be done and in which we must participate. Please give, and give generously, to the Foundation as quickly as possible so that all Texas psychiatrists will have the resources we need to get this job done.

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Foundation 2021 Annual Fundraising Campaign

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The Foundation’s educational objective does not stop there. Our resources can also be used to help TSPP for example, to provide CME programs in order to help all of us maintain our licensure. These CME programs are of high quality and have been historically well-received, and are vital to our mission of helping our physicians to continuously attain the highest possible standard of care through taking advantage of mastering the latest developments in our field.

Finally, we are now in the midst of a new Texas legislative session with many new members of that body. Continuing to help educate elected officials about what constitutes a high standard of medical care (as well as correcting approaches that would have the opposite effect) is a vital role for organized psychiatry in Texas. Whether scope of practice issues, admitting privileges, prescription pre-authorization, and many others, the involvement of all psychiatrists in Texas is essential for the success of these goals. If one cannot help in this endeavor in person, then a generous contribution to the Foundation can be highly effective, too.

So, don’t let COVID-induced changes interfere with the work which must be done and in which we must participate. Please give, and give generously, to the Foundation as quickly as possible so that all Texas psychiatrists will have the resources we need to get this job done.
I t is hard to believe Spring is just around the corner, especially as we approach the one-year anniversary of practicing so many social distancing/work-from-home/mask-wearing measures that were once foreign but are now a part of daily life. I cannot help but be hopeful as I see here fully vaccinated, but that relief is coupled with the weighty knowledge of how fortunate I am to be able to feel that hope, when so many of our fellow citizens are waiting for their “shot” at getting the COVID-19 vaccination. No one can predict how long it will take our country to return to a state of normalcy (or if we will merely continue making adjustments to a “new normal”), but humanity is demonstrating its resilience as we continue learning more about this virus every day and how to best prevent and treat it.

This year has been difficult in so many ways. Our country has faced upheaval and conflict in many arenas: politically, socially, economically, and culturally. Tragic events have forced our society to literally see and reckon with the long-standing, continuous systemic racism and oppression that have shaped not only our country’s history but our present moment. As a white, cis-gendered, heterosexual, able-bodied human, I must vigilantly assess my privileged position in this country, continually identifying areas where I have contributed to or supported systemic oppression by being complicit in or ignorant of my privilege. I have learned the concept of being anti-racist, and I am embarrassed to admit that I have often fallen short, even while thinking I am doing an okay job at it. I am working to talk less and listen more. I am actively seeking and consuming stories and philosophies shared by people who not only look different than I do, but who have developed different ways of knowing and being in the world by their having lived vastly different experiences than my own. Still, I know I can do more, and I am trying to make certain that I don’t sacrifice my growth in order to ensure my comfort.

As psychiatrists, we all strive to be compassionate, understanding, and non-judgmental with our patients. This intention creates a strong foundation, but it is also important to honor the ways in which the intersection of race, ethnicity, age, sexualility, gender identity, disability, socioeconomic status, and other aspects of our patients’ identities often compound to create situations in which they experience more oppression in our society and are, therefore, made more vulnerable. Simultaneously, these same intersections can also hold sources of cultural knowledge and strength for our patients. Our efficacy as physicians is improved when we can better envision how such intersectionality contributes to an individual’s overall mental health. This allows us to enhance our biopsychosocial formulation and provide more effective therapeutic interventions for our patients.

TSCAP’s summer scientific program will focus on intersectionality in psychiatry, tackling issues that lead to oppression and marginalization of the young patients we work with. Wonderful speakers will join us to discuss topics such as implicit bias and racism and PTSD, and the ethics of seclusion and restraint in youth involved in the juvenile justice system. We will also have speakers presenting on the work they do with vulnerable populations, including patients with intellectual disabilities, youth in the foster care system, and immigrant youth and families at the border and in detention centers. We have decided to hold it virtually again this year, and while I am disappointed that I will not be able to see everyone in person in one of my favorite cities in Texas (Galveston!), I am confident the program will be interesting, informative, and safe. I encourage all my fellow Federation members to consider joining us in July!
Restrain in Correctional Setting” have been designated by the Texas Society of Psychiatric Physicians for a total of two (2) credit of education in medical ethics and/or professional responsibility.

TARGET AUDIENCE/ PROGRAM OBJECTIVES
This virtual activity has been designed with didactic lectures supplemented with panel discussion; clinical vignettes; audiovisual presentations and question and answer discussion in multiple educational sessions.

The program is designed to provide its’ target audience of Child and Adolescent Psychiatrists, Adult Psychiatrists, Pediatricians and Primary Care Physicians with clinically relevant information to advance the physicians’ competence and provide them with effective use of targeted skills so that they may develop strategies to apply the knowledge, skills and judgement of the information presented in the educational activity into their practice.

NEEDS ASSESSMENT
TSCAP has incorporated into this CME activity the relevant educational needs concerning competence that underlie the professional practice gaps of the participants.

FACULTY AND PLANNERS DISCLOSURE POLICY
In compliance with the ACCME/TMA Standards for Commercial Support of CME, to assure balance, independence, objectivity and scientific rigor in all of its CME activities, prior to the education activity being delivered to the learners, the Texas Society of Psychiatric Physicians implemented a mechanism to identify and resolve professional conflicts of interest from everyone who was in a position to control the content of the education activity. TSPPI will disclose to learners the existence (or non-existence) of all relevant financial relationships(s) that the faculty and planners did (or did not) have with any commercial interest concerned with the content of the educational presentation. Disclosure will occur at the beginning of the Virtual CME Activity through verbal and written slide display.

SPEAKERS
“Child Psychiatry at the Crossroads: Focus on At Risk Populations and Social Change”

Pierre W. Banks, MD, Assistant Professor & Senior Specialist Learning and Career Counseling University of Texas Medical Branch Galveston, Texas

Lisa Falls, MD Associate Professor Department of Psychiatry University of Texas Medical Branch Galveston, Texas

Mohsin Khan, MD Assistant Professor Department of Psychiatry UT Southwestern Medical Center Dallas, Texas

Joseph V. Penn, MD, CCHP, FAPA Director Mental Health Services UTMB Correctional Managed Care Clinical Professor UTMB Department of Psychiatry Galveston, Texas

Steven R. Pliszka MD Distinguished Professor and Chair Department of Psychiatry San Antonio, Texas

Kimberly Stone, MD Assistant Professor Department of Pediatrics UT Southwestern Medical Center Dallas, Texas

DISCLOSURE POLICY
Faculty and planners will disclose to learners the existence (or non-existence) of all relevant financial relationships that the faculty and planners did (or did not) have with any commercial interest concerned with the content of the education activity. Disclosure will occur at the beginning of the Virtual CME Activity through verbal and written slide display.

PAYMENT INFORMATION
Check or Money Order payable to Texas Society of Child and Adolescent Psychiatry. (Please charge $_________________ To My: [VISA/ MasterCard/ American Express] Credit Card # _______________ Expiration Date: ___________.)

ADDRESS WHERE YOU RECEIVE YOUR CREDIT CARD STATEMENT (Include address, city, state, zip): ____________________________

Cancellation Policy: No REFUNDS given after July 1

REGISTRATION FEES

REGISTRATION FEE SCHEDULE

Texas Society of Child and Adolescent Psychiatry VIRTUAL LIVE CME WEBINAR Saturday, July 24

PAYMENT INFORMATION
Check or Money Order payable to Texas Society of Child and Adolescent Psychiatry. (Please charge $_________________ To My: [VISA/ MasterCard/ American Express] Credit Card # _______________ Expiration Date: ___________.)

ADDRESS WHERE YOU RECEIVE YOUR CREDIT CARD STATEMENT (Include address, city, state, zip): ____________________________

Cancellation Policy: No REFUNDS given after July 1

REGISTRATION FORM
When your registration payment has been processed, about one week prior to the meeting, you will receive an email invite at the email address provided on your registration form with a link to join the meeting, the unique Meeting ID # and information for joining the meeting on Saturday, July 24. It is IMPORTANT that the email address you list on the Registration Form is the email you will use to participate on the Zoom Meeting or Zoom will not recognize and allow you to log into the meeting. If you do not already have Zoom loaded on your device with the email address you provide on your Registration Form, you will not be able to access the program. Please refer to the Zoom Guide attachment for instructions to access the meeting.

The program will begin promptly at 9:00 am so please log on about 5-10 minutes prior to 9:00 am. Thank you for registering!
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CALENDAR OF MEETINGS

MARCH
2 Federation of Texas Psychiatry
Virtual Capitol Day
20 Texas Society of Psychiatric Physicians,
Texas Academy of Psychiatry
Virtual Spring Committees, Component Organizations
21 Virtual TSPP Executive Council Meeting

APRIL
17 Texas Society of Psychiatric Physicians and
Texas Academy of Psychiatry
Virtual CME Program
“Cutting Edge Psychiatry in the Time of COVID”

JULY
24 Texas Society of Child and Adolescent Psychiatry
Virtual CME Program
“Child Psychiatry at the Crossroads:
Focus on At Risk Populations and Social Change”

TSPP, TSCAP and TAP MEMBER SURVEY
See Link Below

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JOB BANK

Whether you are looking for career opportunities or you are recruiting to fill a position in your organization, you will want to check out the Federation’s JOB BANK on its website at www.txpsych.org. The Federation’s JOB BANK could be just what you have been looking for.