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Ideas of Reference

is the newsletter of the Minnesota Psychiatric Society, a district branch of the American Psychiatric Association



Read Sulik, MD and George Aurand, RN describe the Red Lake BRIDGES Project's successful collaboration. (More on page 4.)

MINNESOTA PSYCHIATRIC SOCIETY

Working on behalf of psychiatric physicians and their patients

Our vision is physician leadership creating the nation's highest quality, affordable and accessible system of mental health care.

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2008 MPS Honors

Linda Vukelich

On Friday, May 31, 2008 President Jeff Hardwig, MD welcomed a full room to the 2008 MPS Recognition Dinner. MPS hosted APA President Nada Stotland who presented the keynote presentation, *Shaping the Future*.

Psychiatrist of the Year

MPS presented the Psychiatrist of the Year award to Joe Westermeyer, MD whose dedication and leadership for nearly forty years have strengthened this psychiatric community. His contributions and good nature are well-known. Dr. Westermeyer is a distinguished author, researcher, and teacher. He has been an international consultant in substance abuse, and is highly respected in the field of transcultural psychiatry. Dr. Westermeyer has served on multiple national committees, and is a Past President of MPS. Throughout his many appointments and positions, he has maintained an active psychiatric practice. Most recently, he has worked with a team of VA clinicians in providing psychiatric services in a rural VA outreach clinic. Dr. Westermeyer stepped down from his position of head of the Department of Psychiatry and the Mental Health Service Line at the Minneapolis VA after many years of distinguished service. This recognition was timely because of his efforts to provide needed mental health services to returning veterans from Iraq and Afghanistan.

Dr. Hardwig gratefully presented the 2008 Psychiatrist of the Year Award, noting that Dr. Westermeyer truly epitomizes the best of psychiatry.



2008 Psychiatrist of the Year Joseph Westermeyer, MD

Paul Wellstone Advocacy Award

MPS presents the Paul Wellstone Advocacy award to individuals who have advocated for Minnesotans with mental illness. The award honors the memory of Senator Paul Wellstone, a man of action and integrity who always fought for the underdog. Each year, we remember Paul, a beloved advocate for justice and activism, by selecting award recipients whose contributions personify these ideals.

MPS was pleased to present the Paul Wellstone Advocacy Award to Representative Neva Walker. Representative Walker has proudly represented her district, South Central Minneapolis District 61B, in Minnesota for eight years. A passionate advocate for social justice, Representative Walker has worked on many issues during her tenure, including access to affordable housing, reducing racial disparities especially in health care and foster care, promoting fair treatment of prisoners, and protecting valuable human services from drastic funding cuts.

Representative Walker has been a strong ally for psychiatry in her role as the chair of the Mental Health Division where the legislature has counted on her leadership to debate and decide important mental health issues. As a member of the Health Care and Human Services Finance and Policy Committees, Representative Walker works to address the array of issues



APA President Nada Stotland, MD pauses with MPS Past President Jeff Hardwig, MD and MPS President Jon Van Loon, MD.

Continued on page 4



Ideas of Reference

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Ideas of Reference

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From the Editor: Humbled and Uplifted

I am humbled and uplifted each spring to hear about the MPS award winners. Our hat is off to Jeff Hardwig, now the Past President, for all his efforts this year. We welcome our newest President, Jon Van Loon. We salute Joe Westermeyer for his decades of service and accomplishment. Please read about all the award winners- it will encourage you to continue to take arms against a sea of troubles (Who am I to argue with the Bard about a mixed metaphor?).

Please also see Dominic Sposeto’s legislative summary. We escaped with only \$50 million raided from the Health Care Access Fund. We also have a new plan for Quality Incentive Payments to clinicians. The plan borrows from both capitation and Diagnosis-Related-Group (DRG) payment systems. A simple screening tool, not designed for full evaluation, has been proposed to measure depression treatment response. There is lots of room here for gaming the system. We might borrow a phrase from my Honda salesman and say to our patients, “My boss says a score of 4 out of 5 is not good enough. If you really like my care, I would appreciate it if you could rate me (or your improvement) as 5 out of 5”. There is also potential for conflict or adverse selection between clinicians and patients who are complex, treatment-resistant, or uncooperative. With a 3-year phase-in period, I hope we will be able to revise the plan to be less simplistic and perhaps involve patients in their responsibility for recovery.

I’ve quoted Shakespeare and my Honda salesman, so I’ll close with a phrase that could come from your favorite weatherperson: Be ready for tornadoes, but enjoy the summer. ■

Eric Larson, MD

George Dawson, MD Named Managing Editor of Philosophy, Ethics and Humanities in Medicine (PEHM)

A note from Dr. Dawson:

PEHM is funded by BioMed Central as one of their open access journals. BioMed Central has a number of American and International supporting members and the list is available on our site. There are additional fees for publication. Unlike traditional journals there is no paper version and there is a unique approach to the copyright. In terms of subscriptions - PEHM is free via online access at www.peh-med.com. All articles can be read, downloaded and if you register - commented on. The degree of discussion varies quite a bit from topic to topic. For example if you look at Damiaan Denys commentary “How new is the new philosophy of psychiatry?” <http://tinyurl.com/yreo4h> you can click on the reader’s comments links on the right and read them. ■

A new booklet is available through NAMI – Advocating for People with Mental Illnesses in the Minnesota Criminal Justice System. Copies are free to families and others; however, NAMI encourages people to send a \$1 donation per copy when requesting multiple copies. The new NAMI video entitled “Coming Home: Supporting Your Soldier” is also available for \$20 plus shipping and handling. To order one or both, please e-mail libs@nami.org



Take Back the Profession--Together!

by Jon Van Loon, MD
MPS President

In many aspects of our lives, most of us are content to let someone else make difficult decisions and take the lead — that is why leadership exists. Unfortunately, the leadership of organizations that took control of our mental health system have not maintained our profession’s best interest as a priority. As individual providers, we have stood by as passive followers, while they have allowed a significant erosion of our personal and professional values.

I am not suggesting that any of these organizations purposefully mean us harm. In fact, this is not an indictment of any specific organization or their leaders. This is an indictment of our (followership’s) passive acceptance.

It is a simple fact that the goals and values of these organizations are misaligned with the personal goals and values of individual physician psychiatrists providing clinical care. This misalignment plays a large role in the demoralization and burnout of Minnesota psychiatrists. The more demoralized we are as individuals, the less likely we are to play a role as “active followers” in helping our leaders determine our future.

As the frontline providers of care, we focus on individual patients, while, at an organizational leadership level, populations are the priority. We must creatively respond to the personal needs of the patient in front of us, while organizations value systematic approaches and expect achievement of arbitrary standards. A focus on the financial aspects of “the health care industry” appears to induce organizations to push things to the legal limit, while we, as individuals, are obliged to maintain our personal and professional ethics.

The impact of these fundamental differences can be seen, directly and indirectly, in many of the important issues that challenge our profession today. Frustrations related to patient- and profession-unfriendly third party payers have induced many Minnesota Psychiatrists to give up dealing with them and adopt “cash only” practices. Low earning potential, the appearance of lack of respect of our physician peers and the apparent absence of support from society for mental health in general have caused

our residencies to struggle to recruit bright and interested medical students into our field. Short sighted social policies leave certain patient populations within our cities and nearly all patients in rural Minnesota chronically under served.

Perhaps the most devastating consequence of these fundamentally different goals and values has been the withdrawal of individual psychiatric physicians from the process.

We have, collectively, turned responsibility for our profession to the leadership of these organizations, in some cases out of a sense of trust, in other cases because we feel powerless. However, we can no longer ignore the fact that our values are not aligned. We can no longer frame our passivity as “benign neglect.”

Our profession doesn’t belong to organizations, be they 3rd party payers, employers or even academic institutions. Our profession “belongs” to us, and it is our responsibility to protect it for ourselves, for our successors and for society in general. Apathy and non-involvement will get us nowhere. There is nothing benign about our neglect.

We are planning our Fall meeting, and hopt to focus on the need to empower each of us, as individuals, and collectively as MPS, to take back responsibility for our profession.

We are calling a “Summit Meeting” of Minnesota psychiatrists to:

- Encourage dialog and mutual support within our ranks
- Identify the causes and consequences of professional demoralization and apathy
- Articulate the causes and consequences (professional and clinical) of further erosion of our professional autonomy and responsibility
- Challenge and empower each of us to defend our profession and play an active role in defining the mental health system in Minnesota

Please plan to join us September 13th, and be a part of the movement to take back our profession! ■

Psychiatric Ethics, Integrity, and Identity: Making Self Care a Standard of Care
Saturday, September 13 - Minnesota Humanities Center - St. Paul



that impact the lives of our patients. She was the chief author of 42 bills during the 2007-2008 Session, many of which address mental health services, resources, access

and regulations that impact psychiatric care in Minnesota. Her bills impart her deep concern for children and families, especially those with limited financial resources. Representative Walker has been the voice of reason during some heated exchanges and has a smile that calms the storms surrounding her in her role as legislator and advocate.



(l to r) Gloria Segal Award winner Jennifer Vander Voort with Drs. Gail Berstein, Doug Hedund, Jim Jordan, Deane Manolis and Jack Drucker.

Arnold, RN; Marsha Field, EdD, and Steve Sutherland, MD were not able to attend, but were noted and thanked as well.

Medical Volunteers:

Phil Edwardson, MD; David Einzig, MD; Kathleen Heaney, MD; Mike Koch, MD; John Simon, MD; William Spring, MD; Read Sulik, MD. Linda

Incoming President's Remarks



Jon Van Loon, MD encouraged more member participation.

Jon Van Loon, MD presented his invitation to all MPS members to get involved in the organization, noting that MPS is in a unique position to advocate for psychiatry and for psychiatric patients when

our members are motivated and mobilized. He reminded the audience of their strength and responsibility with his characteristic candor and good humor.

MPS Assembly Representative and long-time colleague who works with Dr. Stotland at the regional national level, Dr. Judith Kashtan, introduced Dr. Nada Stotland who presented the keynote address. Dr. Stotland's slides are available by contacting the MPS office. Dr. Stotland's comments evoked enthusiastic responses including one participant who noted that she had heard many APA presidents speak, but none more encouraging and motivating. Dr. Stotland commended MPS on its achievements and noted that Minnesota is known for its active district branch and innovation and leadership. ■



Red Lake Hospital staff and volunteers enjoyed a meal together.

Pilots: Tim Baird and Art Mouyard were honored. The following pilots were not able to attend, but were thank also acknowledged: Michael Bertini, Dr. Gareth Eberle, David Hill, Ryan Kensrud, Shane Luthens, Dr. Cary Mariash, Andrew Niemyer, Gary Norman, John Riedy, Scott Sinks, Ed Terry, Kent Vilendrer, R. Jeff Von Horn

Hospital staff: George Aurand, RN; Constance James, Carla McGraw, Tom Floyd PhD; Albert Allick, MD



Read Sulik, MD presents the Community Partnership Award for Angel Flight Central to pilots Art Mouyard, Tim Baird.

Representative Walker is stepping down from her elected position this year and she will be greatly missed- by her constituents, her colleagues and by those of us in the mental health community.

Outstanding Community Partnership Award

Dr. Read Sulik gave a brief history of the Red Lake BRIDGES Project and presented Outstanding Community Partnership Awards to the Red Lake Indian Health Service Hospital and Angel Flight Central. MPS is pleased to be part of an amazing partnership, and acknowledged the volunteer pilots and psychiatrists individually as well.

Presidential Service Award



Roger Kathol, MD accepts the 2008 Presidential Service Award.

Dr. Hardwig presented Roger Kathol with the MPS Presidential Service Award and thanked him personally for his dedication and leadership, especially in the area of integrated care.



Lively conversations abound!

Join us at the MPS Summit!
Psychiatric Ethics, Integrity, and Identity: Making Self Care a Standard of Care
Saturday, September 13
Minnesota Humanities Center, St. Paul, MN



Legislative Session Wrap-up

Dominic J. Sposeto, MPS Lobbyist

The Minnesota State Legislature engaged in its usual frenetic pace to complete its work for the year. Legislators adjourned at midnight the day before their constitutional deadline for completion of the session.

Once again it was the state budget and the projected nearly \$1 billion budget deficit that created the greatest controversy between legislators and the governor. Fortunately, they were able to reach consensus on a budget compromise avoiding the need for a special session.

Health care reform was also a major area of controversy. Insuring more Minnesotans while reforming our health care delivery system were top legislative priorities for both the legislature and the governor. While they agreed in concept to sweeping reforms based upon the recommendations of the Governor's Health Care Transformation Task Force, reaching consensus on the details remained elusive. The legislature consistently objected to the Governor's use of the health care access fund surplus to balance the state budget. The governor objected to the scope of the

legislature's expansion of the MinnesotaCare program. In the end, they reached a compromise, \$50 million from the access fund was directed to the budget shortfall and 12,000 more Minnesotans were given access to MinnesotaCare. The following is a brief description of health care reform and other mental health legislation that MPS worked on this year.

Health Care Reform.

The health care reforms passed by the legislature and signed into law by the governor take some first steps towards addressing cost, quality and transparency in our health care market. They basically set up a blueprint for change that will have to be filled in beginning next year.

Most of the reforms are directed at reimbursement of health care providers and are phased in over the next four years. In many cases, they will be voluntary for physicians but the state, local governments and health plans will be required to include reforms in their insurance products. The health care reform law establishes medical or health care homes where

primary care providers coordinate patient care and receive care coordination payments. The new form law moves away from payments based upon procedures and towards payment based upon quality, cost and outcomes, establishing "baskets of care" on which providers compete. Treatment for depression will be one of the first seven baskets of care to be established. A timetable for some of the major reforms by their subject areas is available at www.mnpsychsoc.org.

The health care reform initiative contains several provisions of interest not directly related to physicians' treatments or reimbursements. The commissioner of health will award grants to community health boards to reduce the percentage of persons who are obese or overweight and to reduce the use of tobacco. Employers of 11 or more employees will be required to establish Section 125 health plans to allow employees to purchase health

Continued on page 7

2008 Psychiatric Research & Clinical Update Pictorial



Eric Brown, MD and Karen Kattar, PsyD presented *Caring for Returning Veterans: PTSD* and Eric Wittenberg, LGSW presented *Reintegration and Family Dynamics in Recently Returned Veterans*



Julie Petersen, MD offered *ACT Psychiatry: You go to their homes?* She and Carrie Parente, MD (I) discussed the finer points of ACT psychiatry together.



Former MPS member Mark Willenbring, MD returned to present *Alcoholism Isn't What It Used to Be: New Approaches to Diagnosis and Treatment of Alcohol Dependence*



Treatment of Children and Adolescents with Anxiety Disorders presenter Gail Bernstein, MD and *Cognitive Behavioral Therapy in the Treatment of Childhood Anxiety Disorder* presenter Andrea Victor, PhD shared a laugh with Conference Committee member Eric Brown, MD.



Drs. Mark Willenbring, Jeff Hardwig and Bruce Hermanson continue the discussion during a break.





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Gloria Segal Winners Named

The Gloria Segal award is given by MPS to a fourth year medical student at Mayo and a fourth year medical student at the U of M who demonstrates excellence in the care of psychiatric patients, outstanding performance during pre-clinical and community involvement on behalf of the mentally ill.

Mayo's Kristin Frances has volunteered with church youth groups and social ministries and is active with hospital and Guatemalan medical clinic mission outreach. Her degrees in biology and psychology from Arizona State University strengthened her interest in psychiatry. She belongs to the American Medical Student's Association and co-founded the ASU Chapter of the Christian Medical and Dental Association. Kristin worked as an in-home assistant for autism in Rochester and plans to pursue a child and adolescent psychiatry.

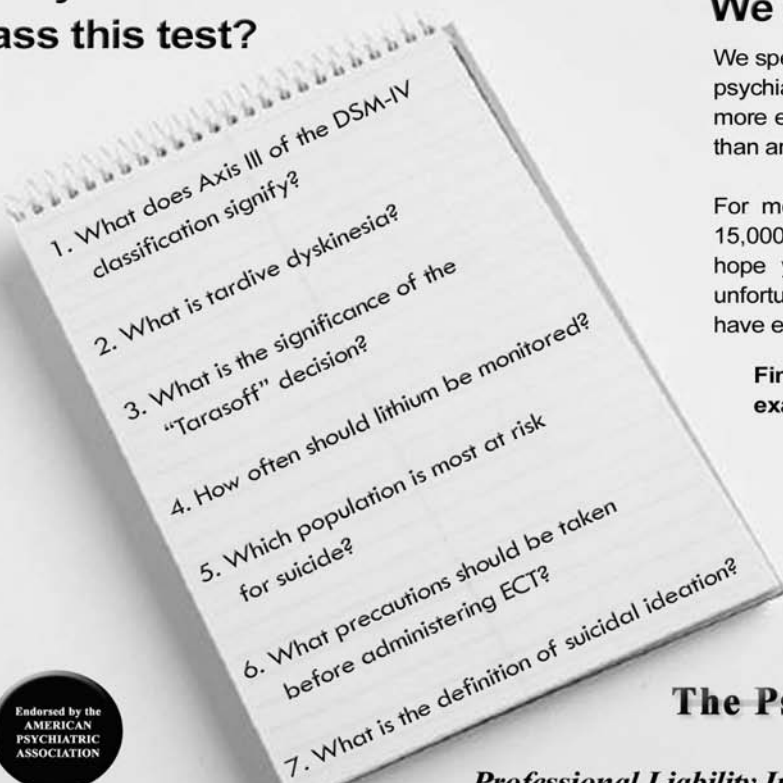
As a fourth year Mayo medical student, **Jennifer Vande Voort** is already an acclaimed and published researcher and international speaker. In 2004, she graduated with honors from Iowa State University with a 4.0 GPA and a BS in Biology. While still an undergrad, she participated in research and was the lead writer of an article published in *Phytopathology*. Another interest

area has been celiac disease, and she published in the February 2008 American Journal of Gastroenterology. Jennifer is interested in professionalism in medicine and has presented and published on the topic. In January, she presented at the 3rd Annual Klingenstein 'Games' in New Haven, Connecticut.

Chris Erickson is the University of Minnesota Gloria Segal winner. He earned his BS in Biology with a minor in Child Psychology from the U of M, has been active in the U's Mentor Program with Timothy Gibbs, MD and has volunteered with the Elementary School Autism Program. Chris' volunteer activities during medical school include the Medical School Mentor Program, Mini Medical School, "La Escuelita" community service project, Knowledge Co-op, "So You Want To Be A Doctor" Program, CATALYST program, and the College of Biological Sciences Mentor Program. Chris has also published and participated in research through the U of M's Gene Therapy Center and Department of Pediatrics. Chris has won the Paul D. Wellstone Memorial Scholarship, the Robert J. Murtaugh, M.D. Scholarship, and the Brimmer Scholarship.

Congratulations to our 2008 Gloria Segal award winners! ■

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Legislative Session Wrap-up (Continued from page 5)

coverage on a pre-tax basis. MinnesotaCare eligibility for families with children will be increased from \$50,000 in annual income to \$57,000 effective July 1, 2010. Eligibility for single adults will increase from 215% of the federal poverty level to 250% of poverty. The state will be required to offer HAS type high deductible plans to its employees. By January 1, 2011 all providers and dispensers must establish and maintain an electronic prescription drug program to transmit prescriptions using electronic media.

The new law includes several studies mostly conducted by the commissioner of health or human services including determining the percentage of gross monthly income that could be devoted to health care premiums, deductibles and co-pays, studying the necessary changes to fully utilize advanced practice nurses, physician assistants, and other health care professionals, developing an essential benefit set for clinically and cost effective health care services, and studying the impact of uniform health prices.

Health Care Access Fund

Ultimately, the legislature and the governor agreed to use \$50 million of the health care access fund for immediate state budgetary needs. This money will eventually be returned to the health care access fund if certain conditions are met.

Prairie St. John's Psychiatric Hospital

A proposal to allow for the construction of a new free-standing psychiatric hospital in Woodbury was perhaps the most contentious mental health issue of the session. The proposal passed several legislative committees in the House before running into opposition in the Senate. A compromise proposal reducing the number of beds to 66 and restricting them to children and adolescents, assuring 24-7 care, and an agreement with a local general hospital to assist with emergency medical care

emerged. With these changes MPS was generally supportive of the bill, but it failed to get the necessary support in the Senate.

Mental Health Needs Workgroup

In response to the debate about a new psychiatric hospital in the Twin Cities, the legislature established a mental health needs workgroup convened by the commissioner of human services. The work group will analyze the current capacity and utilization of inpatient beds, residential treatment, mobile crisis services, partial hospitalization, intensive outpatient services and support housing. The work group shall also analyze the number of practicing psychiatrists and other mental health professionals and the present staffing needs of both inpatient and community programs. Their recommendations shall be presented to the state legislature by January 16, 2009. The report must include recommendations for any expansion in capacity for mental health facilities, removing obstacles in rules, licensing and payment rates that could limit any recommended expansion and strategies to improve efficient transition from inpatient to community services.

Children's Restraint and Seclusion

A new law was enacted that regulates the use of restrictive procedures on children in mental health facilities. The law will require mental health service providers to develop and maintain on file a restrictive procedures plan. Providers may include in their plan physical escort, holding, and seclusion. They may also include the limited use of mechanical restraints only in emergency situations. Providers must use the least intrusive intervention that will effectively react to the emergency. The written plan must include procedures for documenting the intervention and notification to parents of the restraint. This new law is effective August 1, 2008.

Provider Fee reductions

One of several proposals for addressing the state's budget shortfall included a three percent reduction in payments to physicians for Medical Assistance, GAMC and MinnesotaCare. This proposal was eventually dropped. However, legislation was enacted that reduces payments to hospitals by 3.46 percent in the first year of the biennium and 1.9 percent in the second year. These payment reductions do not apply to inpatient mental health treatment. Outpatient services were cut by 3% but outpatient mental health treatments were also exempted from cuts.

Psychologists and Medications

Legislation was proposed to authorize psychologists to discuss prescription medications and their effects with their client, the client's physician or other prescribing health care providers. Psychologists could discuss specific medications by trade or generic name or dosage, and discuss the discontinuation of medications with their clients. This proposal would have amended the psychologist practice act. MPS raised concerns about this proposal. It was not heard this session.

Medical Privacy Protection Act

Under this new law, health care providers will not be able to discuss or provide information about a patient's financial history or medical debts to another entity. Nor will they be able to obtain this information from any entity that gathers, maintains, evaluates or distributes individual patient financial or debt information until after they have provided the needed health care services. This legislation was enacted to assure that patients with problem finances are not turned away from treatment. The new law was effective immediately on its enactment May 8. ■

MINNESOTA PSYCHIATRIC SOCIETY

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CALENDAR

August 14 **Barbara Schneider Summer Soiree**
Theodore Wirth Park Country Club, Minneapolis, MN. Call 612-801-8572 or go to www.thebarbaraschneiderfoundation.org

September 13 **Psychiatric Ethics, Integrity, and Identity: Making Self Care a Standard of Care**
Minnesota Humanities Center, St. Paul, MN. Call 651-407-1873 www.mnpsychsoc.org

September 19 **Psychoanalytic Training** Minnesota Psychoanalytic Institute. For further information, an application, or details, call Chair of Admissions Joan Lentz, PhD 612-339-0270. www.mpsi.info.

ONLINE RESOURCES www.mnpsychsoc.org

Legislative Highlights and Health Care Reform Initiatives
Member Contributions
MPS Survey
MPS Directory Update Information
APA Resources

Statewide Collaborative Invitation

Behavioral Health clinics and individual practices are invited to participate in a statewide collaborative to improve depression care. It involves using the PHQ-9 to measure symptom severity and 6 and 12 month response and remission rates. The Minnesota Community Measurement website will be the data repository. Call Linda Vukelich at 651-407-1873 or email to L.vukelich@comcast.net.

NAMI Honors Minnesota Psychiatrists

Read Sulik, MD, received the Exemplary Psychiatrist Award during the American Psychiatric Association's annual meeting in May. Drs. Susan Jenkins and Christine Sigurdson were also honored, but were not on hand for the ceremony.

The Exemplary Psychiatrist Award, presented by the National Alliance for the Mentally Ill (NAMI), honors psychiatrists who have made substantial contributions and exhibited leadership in serving people with mental illnesses. Drs. Sulik, Sigurdson and Jenkins are three of only a handful of psychiatrists honored nationwide this year.

"We are proud to honor 30 psychiatrists from 21 states who are stars within the nation's mental health care system," NAMI National Executive Director Michael J. Fitzpatrick said. "They each have shown an exemplary commitment to treatment and recovery for people with severe mental illnesses, who often are among the nation's most vulnerable populations." Honorees are nominated by individuals and families affected by mental illness.

Congratulations to Minnesota's Exemplary Psychiatrist Award Winners!

Saturday, September 13
MPS SUMMIT
Minnesota Humanities Center
St. Paul



Recruit and Win! APA Member Get-a-Member Campaign

APA MEMBERS - Refer a potential new member to APA in 2008 and win special prizes for your recruitment efforts!

Refer at least one colleague and be eligible for quarterly drawings to win a \$100 American Express Gift Card and other special prizes!

PLUS: All recruiters whose referrals are approved and enrolled for membership will be eligible for the grand prize drawing to **win Complimentary Registration for the APA Annual Meeting in May 2009 or a free year of membership*!**

Recruitment Guidelines:

- Campaign will run from January 1 – December 31, 2008.
- Contest is open to all APA members in good standing.
- Eligible referrals include psychiatry residents (Members-in-Training) and fully trained psychiatrists (General Members). Former members who have not been members for at least one year are also eligible.
- Medical students and international psychiatrists are not eligible.

Referrals must be approved and enrolled for membership by December 31, 2008 in order for the recruiter to be eligible for the grand prize drawing.

*offer good only for national dues

Watch for more details on www.psych.org!