

PSYCHIATRIC CLINICAL FACULTY ASSOCIATION AT UCLA

NEWSLETTER



President's Column

By David E. Sones, M.D., President

ccording to the National Resident Matching Program, the number of seniors from medical schools in the United States entering training programs in psychiatry has been trending upwards since the 1990s. There has been an especially steep increase in the last five years from 774 students to 1054 students.

Perhaps one reason to explain this rise in interest in psychiatry is the emphasis that the field places on the doctor-patient relationship. A technological approach currently dominates medicine and in many settings physicians barely talk to their patients. Instead, they focus their attention on computer screens and order a plethora of tests. Much of medicine has lost sight of Osler's dictum: "The good physician treats the disease; the great physician treats the patient who has the disease." A significant number of students are craving more meaningful contact with their patients and have recognized that among all the medical specialties, psychiatry is by far the most human and humane.

The quality of the teaching in the psychiatry training programs affiliated with UCLA is without a doubt one of the highest in the nation and the world. Members of the Volunteer Clinical Faculty play a significant role in achieving this success, especially by providing training with an emphasis on the whole person, including a patient's values, experiences, and relationships.

During the past year, the PCFA Board has continued to oversee programs to provide tools that the residents need to meet the complex demands of psychiatric practice. The articles in this Newsletter provide updates to many of the programs overseen by PCFA. In this column, I wish to highlight some of our initiatives and acknowledge the efforts of members of our board.

The Psychotherapy Program and the Mentoring Program continue to play vital roles in the development of the residents. Most of the residents have been participating in one or the other. Not only have the programs been very well received by the residents, but also I know the faculty involved have found their participation to be highly gratifying.

As I mentioned in the last Newsletter, we were in the process of applying to becoming a Continuing Medical Education provider. I am pleased to announce that our application has since been approved. I would like to thank Lela DeGolia for all of her efforts in attaining this goal. We are looking forward to offering Continuing Medical Education credits to our members for various programs in the future.

Although Joshua Pretsky, M.D. is no longer serving as President of the Board, he continues to be very active in initiating new programs.

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This past year, he started Richard Metzner Psychotherapy Scholarship Fund to provide financial support to residents and fellows who wish to pursue training in psychotherapy. Josh is also working with Residency Education to

develop a concentration in psychodynamic psychotherapy for the residents.

Another past president, Richard Metzner, M.D., responded to a request by residents to establish a Psychiatric Interview Course. Having had a close seat to observe this course take shape, I can assure you this was no easy task given the labyrinth of rules and regulations set up to protect patient confidentiality. But Dick rose to the task, and this course has been very popular among the residents and medical students.

For the past several years, Andrew Russell has served as the Faculty Liaison for the

After many years, the Sepulveda program has closed.

Board. One of Drew's roles has been to oversee the Psychotherapy Training course, and he has helped guide this program to increasing address the number of residents and fellows who participate. Drew is retiring from

the faculty and I wish him all the best in his future endeavors. His insights and institutional memory will be greatly missed at our meetings. The search for a new Faculty Liaison is in progress but Drew might be irreplaceable.

There have been new developments in the UCLA Affiliated Psychiatry Residency Training Programs. After many years, the Sepulveda program has closed. In its wake, two new programs have emerged. The Greater Los Angeles VA Psychiatry Residency Training Program is under the direction of Margaret Stuber, M.D. and the UCLA-Olive View Psychiatry Residency

Training Program is under the direction of Iljie K. Fitzgerald, M.D.

With the addition of these new programs there is a concomitant increase in the number of residents As it happens, over the past several years, the number of new psychiatrists appointed to the Volunteer Clinical Faculty has barely kept pace with the number of faculty being separated. In order to meet the increased demands, the board has been actively recruiting graduating residents and fellows to join the Volunteer Clinical Faculty. If you have the opportunity, please strongly encourage trainees to join the faculty to serve as the future teachers.

I am now entering the final months of my term as President of PCFA. It has been a great pleasure to preside over a board that is so enthusiastic and energetic. I wish to thank all the faculty who enhance the training by teaching both the art and science of psychiatry.

Editor's Note By Shirah Vollmer, M.D., Editor

s Editor of this newsletter, I am so **A**pleased to see how we, as psychiatry clinical faculty, have offered both old and new ways to share our excitement for psychotherapy. Our board works tirelessly, now under the very able leadership of Dr. Sones, to give the adult residents from UCLA, from Harbor, from the new Olive View program and from the new WLA/ VA program, along with the UCLA and Harbor-UCLA child psychiatry programs, the support they need to grow professionally into psychiatrists who are skilled with listening, thoughtfulness

and deep caring of patients who need our help. We do this in old ways by offering them psychotherapy for a very reduced fee, and by offering them psychotherapy supervision for their RPC patients. We also continue to do the intern-psychotherapy retreat, this year facilitated by myself, Wayne Sandler, Paul Puri and Alex Lin. Our faculty are very generous with their time, and when residents show interest, our faculty shows up. We also contribute financially to their recruitment efforts and we offer scholarships when they show interest in expanding their skill set to include a

deeper understanding of psychotherapy. We do this in new ways by doing video teaching on the wards, spearheaded by residents and supported by the highlyesteemed Dr. Richard Metzner. We do this in other new ways, by beginning a psychodynamic psychotherapy emphasis, supported by our hard-working and dedicated colleague Dr. Joshua Pretsky. Further, Dr. Tom Blair has spearheaded a mentorship program in which residents can establish a relationship that helps them with professional guidance. The enthusiasm of the young is matched with both the enthusiasm and the experience of the faculty leading to thoughtful career choices along with an honest examination of the changing nature of psychiatry.

Our distinguished psychiatry lecture this upcoming year, brought together by Dr. Zeb Little, promises to be very exciting. Daniel Carlat MD is coming to discuss his view of the changing field of psychiatry. Finally, and so importantly, our social gatherings, including the June BBO and the holiday party bring together residents and faculty in a relaxed atmosphere to foster personal relationships and a deeper sense of community. The purpose of this newsletter is both to expose you to the various ways in which we support the residents and to say thank you for all you do. We also want to remind you that your efforts are essential to our mission to promote the training and development of well-rounded and thoughtful psychiatrists.

2019 Distinguished Psychiatrist Daniel Carlat. 10 Years After *Unhinged*: Is Psychiatry Back on Track?

By J. Zeb Little, M.D., Ph.D., DPSS Chair



wenty three years ago the Psychiatric Clinical Faculty Association at UCLA established the Distinguished Psychiatrist Seminar Series. This lecture series was created out of concerns that psychiatry was evolving from a field focused on treating mental illness through understanding patients' lives and minds, to one focused on

profession and do better by our patients through rigorous analysis of the research that guides our field's understanding and treatment of mental illness and the academic, social and economic circumstances that influence it

.In this year's lecture, 10 Years after Unhinged: Is Psychiatry Back on Track Dr.Carlat

"It is fitting we should have the honor of awarding Daniel Carlat, M.D., whose career spans this period of transformation in Psychiatry, and whose own concerns about the loss of a patient-centered treatment process for one of "DSM Diagnoses and 15 minute med checks" has led to such an illustrious career. "

Daniel Carlat, M.D.

symptom checklists and medications aimed at putative neurobiological mechanisms thought to explain those symptoms. Many of our organization's early members worried this shift in focus would lead to diminished awareness of humanistic factors they felt impacted the science of treating mental illness and would lead to worse outcomes for patients.

It is fitting we should have the honor of awarding this year's Distinguished Psychiatrist of the Year to Daniel Carlat, M.D., whose career spans this period of transformation in Psychiatry, and whose own concerns about the loss of a patient-centered treatment process for one of "DSM Diagnoses and 15 minute med checks" has led to such an illustrious career. You may know him from his early writings on the conflict of interest between physicians and the pharmaceutical industry which was nominated in 2008 for Perennial's *Best Science Writing* award. Or, you may have read his blogs in the Psychiatric Times and Psychology Today, subscribed (or borrowed from a colleague) his highly regarded monthly newsletter *The Carlat Psychiatry Report*, or read his book *Unhinged* which was published in 2010. In each of these Dr. Carlat reveals a passion to better our

will review how our field's focus on psychopharmacology and neuroscience has changed our understanding of mental illness, changed the training of psychiatrists, and influenced the funding of mental health research. He will discuss how these changes arise from problems of economics, efficiency and systems of care and offer solutions to improve the quality of patient care and outcomes.

→ THIS YEAR'S DISTINGUISHED PSYCHIATRIST LECTURE WILL BE HELD ON SATURDAY, OCTOBER 19, 2019, FROM 10:30 AM TO 12:30 PM AT THE UCLA FACULTY CENTER. THE LECTURE WILL BE PRECEDED BY THE PCFA ANNUAL MEETING AT 9:00 AM.

ACTIVITY REPORTS

FROM THE DEPARTMENT OF PSYCHIATRY, SEMEL INSTITUTE AND THE RESNICK NEUROPSYCHIATRIC HOSPITAL

By Peter C. Whybrow, M.D., Thomas B. Strouse, M.D. and Stephen R. Marder, M.D.

Educational Programs

he UCLA Adult Residency Program had an important transition this year. Jim Spar, MD, retired and Katrina DeBonis, MD, took on the position of Program Director, bringing two new associate program directors into the residency leadership team: Yvonne Yang, MD, PhD at the VA and Enrico Castillo, MD, MSHPM at Semel. The new leadership is functioning well as is evidenced by an extremely successful match for the PGY1 class entering in June 2019 in both the

are new concentrations in Community Psychiatry, Global Mental Health, Clinician-Educator and Psychodynamic Psychotherapy, these complementing the well-established research track. In line with our Department's commitment to Justice, Equity, Diversity, and Inclusion (JEDI), residents and faculty are working together on several important projects, including the design and implementation of a thoughtful, effective cultural psychiatry curriculum.

The quality of the UCLA psychiatry teaching programs and fellowships is

In the Adult residency valuable additions to our educational programs are new concentrations in Community Psychiatry, Global Mental Health, Clinician-Educator and Psychodynamic Psychotherapy

categorical program and the research track. This new class is one of individuals with broad accomplishments and diverse talents which will bring new strengths and perspectives to our programs.

In the Adult residency valuable additions to our educational programs

nationally recognized. According to the 2018-19 Doximity rankings, the UCLA Psychiatry Residency was #3 nationally in research output and #5 in reputation. We are the highest ranking program in the west and lead all other residencies in Doximity rating at UCLA. The PCFA has played a pivotal role in this success through

mentorship, supervision, didactics, and the implementation of innovative educational opportunities such as the popular interviewing course started this year by Dr. Richard Metzner, together with the creation of the Psychodynamic Psychotherapy focus lead by Dr. Josh Pretsky.

In addition to providing outstanding care to UCLA patients, our trainees have been busy collaborating, publishing, and presenting their academic work at national conferences. We had several residents and fellows receive training to conduct evaluations for asylum seekers: they will begin their work this next academic year. Many of our residents and fellows also have been engaged in advocacy efforts to improve mental health policy across the city and state, serving as local and national representatives and helping to shape the future directions of our field.

Fortunately, many of this year's graduating classes will be staying nearby to do research, clinical work, or continue their training through fellowships in Forensics, Child and Adolescent Psychiatry, Mood Disorders, and the National Clinical Scholars Program. As they move forward in their careers we have encouraged our graduates to join the PCFA such that they may play their part in nurturing and educating future generations of psychiatrists, a tradition that the PCFA exemplifies.

Clinical Services

The Resnick Neuropsychiatric Hospital and its day programs, informed by the translational research advances of the NPI, continue to provide high-quality care to patients every day. As many of you know, RNPH is one of the last full-service separately licensed acute psychiatric hospitals in Southern California. RNPH's 74 beds now run full essentially all of the time. As the destination of choice for nearly all patients and families with experience of the mental health system, this unfortunately also means that the UCLA Ronald Reagan Emergency Department is extremely busy with acutely ill psychiatric patients seeking evaluation or boarding for transfer elsewhere when they cannot be cared for here. The partial programs provide weekday care for another 100 or so patients from ages 3-100.

The Department of Psychiatry outpatient clinics are also extremely busy, delivering approximately 60,000 outpatient visits per year. This includes the full range of general and specialty child, adolescent, adult, and geriatric psychiatry services, with which many of you are familiar, and

UCLA faculty and trainees also spend time providing clinical services in a variety of public settings, including at the Venice Family Clinic, various LA County DMH one of the leading research institutes in the world for Psychiatry and Behavioral Neuroscience. Much of this support comes from grants and contracts funded by the

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locations, the LA County Jails and Courts, the Los Angeles Unified School District, and in other local/regional/international elective settings.

In these efforts we are consistently supported by a dedicated community here in Los Angeles. In particular, we are deeply grateful to Nancy Glaser, MD who has served as the founding Chair of the RNPH Board of Advisors since its development in 2012. Similarly, Tom Strouse, MD, RNPH Medical Director, has served as the Board's faculty advisor since inception. Of importance, The Board includes a seat for the PCFA President as a means of insuring that the crucially important perspective

National Institutes of Health. In 2018, UCLA ranked #3 in research dollars received from NIMH, and #5 in research dollars received by NIMH, NIAAA, and NIDA, dollars that support research conducted principally by NPI faculty. Significantly the NPI has maintained its leadership in mental health research over the last 10 years, with a stable ranking within the top 5 institutions in the US receiving funds from NIMH.

This remarkable achievement unparalleled at UCLA. It reflects a broad range of research contributions by the faculty that seek to better define the pathogenesis of the most significant mental disorders -- an effort that is seminal to the development of novel treatments. The many contributions include: genetics and treatment of autism spectrum disorders; comprehensive approaches to the pharmacologic and psychological treatment of the psychoses; neuroimaging genetics of Alzheimer's disease and other dementias; suicide prevention and novel treatment approaches in child and adolescent psychiatry; receptor imaging and development of integrated treatment approaches to substance abuse; development of models in communitypartnered and health services research; research on health disparities and developing programs to correct them; development of models for improved population mental health; nextgeneration neuromodulation treatments for depression, ADHD, and memory loss, and the role of inflammation in the pathogenesis of neuropsychiatric illness.

As many of you know, RNPH is one of the last full-service separately licensed acute psychiatric hospitals in Southern California.

also the tertiary care of UCLA students with serious illness via the SHIP (Student Health Insurance Plan). Many of our faculty also work as embedded psychiatrists in BHA (Behavioral Health Associates), a joint effort with the UCLA Primary Care Network. This group sees an additional 15,000 visits per year. In partnership with UCLA Health System, we are now in the early phases of planning an integrated major expansion of outpatient specialty psychiatry services to support the far-flung and growing UCLA Primary Care clinics throughout the region.

of PCFA is well represented. Indeed, the RNPH Board, together with the Friends of the Semel Institute Board chaired by Vicky Goodman, have succeeded beyond measure in advocacy for the Hospital, the Institute, and the Department, including funding academic scholarships in both research and clinical care at UCLA.

Translational Research

For over a decade the NPI has been awarded more than \$150 million in extramural grants per year, making it

The Richard Metzner Psychotherapy Scholarship Fund Launches

By Joshua Pretsky, MD



eaching the value of the doctor-patient relationship and the importance of the practice of psychotherapy by psychiatrists is vital to the PCFA mission. The PCFA encourages residents to establish, as part of their professional identity, the skills and capacity to conduct psychotherapy and to be able to effectively use the therapeutic relationship for healing and change.

In support of these efforts, last Fall the PCFA board created the Richard Metzner Psychotherapy Scholarship Fund in recognition

of Dr. Metzner's generous support of the PCFA and his commitment to the value of psychotherapy in psychiatric training. The Metzner Scholarship facilitates a unique and memorable learning experience that enhances a resident's knowledge and skill, shapes their identity, and motivates them to advance the practice of psychotherapy by psychiatrists.

Because research has shown that most bona fide forms of psychotherapy are equally effective, the fund supports trainings in any established form of psychotherapy. These include -- but are not limited to -- psychodynamic, cognitive behavioral and interpersonal, as well as others not typically

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represented in psychiatry training; for example, acceptance and commitment, emotion-focused, somatic experiencing, Gestalt, Internal Family Systems, positive psychology, humanistic psychology, hypnosis and motivational interviewing.

A resident or fellow in any of the UCLA - affiliated psychiatric training programs is eligible for the scholarship. Each scholarship provides 75% of the training cost, up to a maximum of \$1250 per application. If a student discount is available for the training, this is required for eligibility. The fund currently awards up to \$4000 in total scholarships per academic year.

As part of the application, residents write a 500-750 word essay about why psychotherapy is important to them and how they will use their skills in the future. They may submit multiple applications over their training but can receive only one scholarship per year. Preference is given to those who have not yet received a scholarship.

The Metzner Scholar is required to contribute their acquired knowledge to the UCLA community. This can be done in a variety of ways, such as an article for the PCFA newsletter, a lunchtime presentation to residents, mentoring of interested medical students, or hosting an experiential workshop. All scholars will attend the PCFA annual meeting to receive special recognition.

We are proud to announce our current outstanding Metzner Scholars. Dr. Sophie Rosseel (NPI PGY2) will be using her scholarship to support attendance at the New Center for Psychoanalysis Psychotherapy Training Program (https://www.n-c-p.org/certificate-adult.html) starting in the Fall. Dr. Elizabeth Dohrmann (NPI PGY2) will be attending ACT (https://www.praxiscet.com/events/act-bootcamp-phl/) and traumafocused CBT training in the Fall. Dr. Sophie Feller (NPI PGY2) will be attending Accelerated Experiential Dynamic Psychotherapy immersion training (https://aedpinstitute.org/aedp-training/immersion-course/) in late summer.

Thank you to Drs. Paul Puri and Alex Lin for your efforts as members of the inaugural Metzner Fund committee. The PCFA board is indebted to Dr. Metzner for his generosity and excited by this new opportunity to nurture the next generation of psychiatrists who practice and teach psychotherapy.

The New Psychodynamic Psychotherapy Concentration (PDPc) Starts This July

By Joshua Pretsky, MD



ne of Dr. DeBonis' goals as the new training director is to develop further specialty concentrations in the adult residency program. Along with a (longstanding) research track, a clinician-educator track and a community and global psychiatry track, she invited me to develop a track in psychodynamic psychotherapy. The PDPc starts this July with two rising PGY3s, Drs. Laura Obler and Sophie Rosseel, and three faculty supervisors; Drs. Tom Brod, Robin Kissell and Hannah Roggenkamp.

to neurobiology through the study of affective and relational neuroscience.

As a skills focused program, the PDP concentration will utilize real time coaching and supervision best practices. Efficiency of skill acquisition will be enhanced through the use of a deliberate practice learning framework and an apprenticeship model of experiential learning. The didactic program, especially the teaching of theory, is designed to directly serve

The PDPc starts this July with two rising PGY3s, Drs. Laura Obler and Sophie Rosseel, and three faculty supervisors; Drs. Tom Brod, Robin Kissell and Hannah Roggenkamp.

The two year program, with special recognition at graduation, requires residents to immerse in 80 hours of psychodynamic psychotherapy and 40 hours of supervision per year, in addition to their already existing therapy training requirements. They will attend a two and a half hour weekly meeting that will include group review of session video from both residents and faculty, didactics, and deliberate practice planning.

The psychodynamic model will emphasize developmental attachment experiences, the therapy relationship, affective experience within the session, mentalizing/reflective function and working with defenses. The model will be linked

the acquisition of pragmatic skills.

The program aspires to include a research component that tracks data and assesses various aspects of the training or clinical care within the program. This will provide participants with an opportunity to fulfill a required scholarly project.

Finally, the program seeks to cultivate future leaders in the practice of psychotherapy by psychiatrists by requiring participants to engage in some teaching and/or supervision of PDP, to attend workshops or meetings and to network with, and seek mentorship from, psychiatrists who practice PDP.

The Creation of a New Video-Mediated Psychiatric Interviewing Course

A Resident/Clinical Faculty Collaboration

By Richard J. Metzner MD

ur story begins with an impressive opening act by a UCLA psychiatry intern. Read on. Despite some early roadblocks, it just keeps getting better.

> PSYCHIATRIC CLINICAL FACULTY ASSOCIATION (PCFA) MEETING OF THE BOARD OF DIRECTORS

> > June 6, 2018 - Minutes

- 6. New Business
- B. Psychiatric Interview Course:

Dr. Puri introduced Sophie Rosseel, a PGY-1 who asked to speak to the board about developing a psychiatric interview course for the interns. There is currently no structured interview course. She proposed that the course take place on Wednesdays during lunch. The interns would find a patient and conduct a 25 minute interview and then receive feedback from an attending. Dr. Metzner suggested that she might consider having the interns videotape an interview outside of the lunch hour and use the tape later when an attending is available to attend the lunch. Dr. Metzner volunteered to attend the lunches.

Sixteen days after the initiative described by PCFA Executive Director Lela DeGolia in the minutes above,

Dr. Sophie Rosseel and I met at the VA to begin planning the course. We were both very sunny about it and ready to hit the ground running. Unfortunately, a deadening early winter set in on July 3rd when we were informed by the Resnick Neuropsychiatric Hospital administration that there would be significant regulatory obstacles to overcome before the course could take place.

Specifically, all video equipment would have to be approved by the UCLA Health Office of Compliance Services (OCS) Information Security authorities, and all PCFA teachers would have to obtain special credentials from the Academic Personnel Office to enter the Resnick NPH locked units and interact with patients. These arduous bureaucratic processes ended up causing months of delays. We nonetheless held our first class at RNPH on July 11. Pending the required



Sophie Rosseel M.D.

approvals, we were restricted to showing archival video recordings of faculty interviews and having trainees simulate patients for each@other to practice upon. These preparatory observations and exercises turned out to be valuable introductions to the skills needed with actual patients. We decided to repeat them more briefly in future years if the class were to be offered again. Finally, on November 7th, we started recording actual patient interviews live-streamed from an interview room to the classroom with equipment purchased for the class by PCFA. Having obtained signed consent, the residents were instructed to establish trust and encourage the patients, whom they had just met, to talk about themselves and what had happened to them. Performing a comprehensive clinical examination wouldn't have been possible in the allotted time and was not the assigned task. To protect private information, the recorded interviews



Figure 1. April 17, 2019: The interviewing resident is Dr. Anna Zsu PGYII. The attending is Dr. Allen Pack. The camcorder is a Panasonic He-V770 HD mounted on a Reticam tripod. The stereo microphones are Sennheiser MKE 440 shotguns ttached to a Mini Tripod.



Figure 2. Image of interviewer and patient (blurred here for confidentiality) being played back on classroom video monitor from camcorder recording. External sound system (not shown) consists of Dayton Audio DTA-1 AC/DC stereo amplifier and two Dali Spector 1 bookshelf speakers.

were erased immediately after class. And so it began. After November 7th Dr. Rosseel continued to make sure every weekly class had a resident to perform the day's interviewand a patient to be the subject of it. On April 3rd we simplified the process technically to provide higher quality video recordings without the drawbacks of livestreaming (not to mention OCS having taken issue with the particular brand of streaming device we were using). The new

The class members have been supportive of each other's work, made useful suggestions and spoken openly about counter-transference feelings and other reactions occurring with patients.

protocol was to record the interview before class in the classroom itself with only the interviewers and the patient present. (Fig. 1)

In accordance with Dr. Rosseel's original concept, the first 20 minutes consisted of the resident interviewing the patient, followed in the last 5 minutes by the attending's participation. Whether I was the only faculty present or joined by a PCFA colleague who conducted the class, I took responsibility for making and erasing the recordings. After the interview, the resident made sure the patient was escorted

back to the unit.Once the other trainees had arrived and served themselves from the buffet lunch just delivered, we played back the full interview on the classroom's video monitor and an external stereo speaker system — also provided by PCFA — obtaining much higher sound and image quality than we'd encountered previously trying to live-stream over long distances through hospital walls and doors. (Fig. 2)

Following playback, we talked about what we had seen and heard. The discussions with the interns, residents and medical students have been as lively, honest and clinically relevant as any I've experienced at UCLA, especially when facilitated by

PCFA attendings. (Fig. 3) There have typically been 12 to 16 trainees present.

The class members have been supportive of each other's work, made useful suggestions and spoken openly about counter-transference feelings and other reactions occurring with patients. Dr. Rosseel has taken the lead in offering valuable guidance to her peers, but others have also taken active rolls. At one of the later classes, I asked the residents to pass along their favorite "pearls" about psychiatric interviewing to the medical

students. Their contributions reflected a level of sensitivity and understanding that has been all too rare among UCLA psychiatric residents in recent decades. After another class in April, one of the PGY-IIs said that "It's in the resident culture now. We are always thinking about whether patients we see would be good to interview for class." How gratifying is that? The interview class has been getting into the psychiatric clinical faculty culture as well. The number of involved PCFA teachers keeps growing as are commitments to participate regularly. Dr. Allen Pack, for example, has agreed to attend monthly. Other guest faculty have included Dr. Wayne Sandler, Dr. Shirah Vollmer, Dr. Joshua Pretsky, and Dr. Paul Puri. All the teachers have received high praise from class members. From the faculty perspective, it's a unique opportunity to sit with a resident interviewing an unfamiliar patient and to model asking pertinent questions. In addition, after watching the recorded interview with the resident and the rest of the class, it's a chance to lead a supportive discussion of the interview focusing on the resident-patient interaction from a psychodynamic and/ or any other preferred perspective. With only 25 minutes for the joint interview and only an hour to watch and discuss the recording, the experience is a mandatory exercise in clarity and focus. Facilitating discussion among these trainees is a pleasure given the level of enthusiasm and



Figure 3. Dr. Allen Pack (right) watching recorded interview with class before discussion. Left to Right: Dr. Namjas Enman PGY-II, Dr. John Lee PGY-IV, Dr. Jobert Poblete PGY-II, Dr. Laura Obler PGY-II, Dr. Brittany Irshay PGY-I, Dr. Evelyn Nelson PGY-II, and Georgia Lill MS3. Across table (not shown) Dr. Sophie Rosseel PGY-II, Dr. Anna Zhu PGY-II, Dr. Michael Mensah PGY-II, Philip Bulterys MS4 and Dr. Samuel Lee PGY-II.

motivation in the room. If you are a PCFA member interested in volunteering your expertise to this Wednesday 11:30-1:00 process, please contact me at rmetzner@ gmail.com. Just remember that you'll need

None of this would matter. of course, without the impact of these residents' improved interviewing skills on their patients.

to apply for Resnick NPH "teaching only" credentials, including a UCLA picture ID badge, if you don't already have them. We can all be grateful that Dr. Rosseel and her colleagues reached out to us to provide the kind of clinical training that we are uniquely able to provide. Those of us who are old enough to remember the first version of this interviewing class at UCLA forty years ago might especially appreciate the dialectic process whereby today's residents are as interested in pursuing the psychological and interpersonal foundations of psychiatry as were their 20th century forebears the ones with whom they bookend the excessive number of residents in between

who were taught to rely almost exclusively on meds.In conclusion I want to convey special thanks to Director of Residency Education Dr. Katrina DeBonis and to RNPH Medical Director Dr. Tom

> Strouse. Without their active encouragement and support, this exciting collaboration of residents and clinical faculty would not have succeeded. In addition, a tip of the hat goes to our able president, Dr. David Sones, who responded to every e-mail generated by this project in a way that kept all the wheels turning as smoothly

as possible. Finally, congratulations to the department as a whole for attracting residents like Dr. Rosseel and her peers and for helping us to provide them with the kind of high value/high tech clinical training that they are asking for.

None of this would matter, of course, without the impact of these residents' improved interviewing skills on their patients. A young schizophrenic male with paranoid delusions provided a touching illustration of this fact when he thanked the resident who had just interviewed him in this class and then said quietly, "No one has ever listened to me like that before."

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* Denotes members serving on the Board's Executive Committee

Continuing to Shine

By Drs. Erin Samplin, M.D., and Adrienne Grzenda, M.D., Ph.D., co-chief residents

Reflecting back on 2018-2019, we feel so fortunate to have been given the opportunity to play a role in leading such a fantastic group of residents! Working with Drs. Katrina DeBonis, Yvonne Yang, and Enrico Castillo has been an absolute pleasure.

The commitment of the program directors to resident well-being is refreshing. At the beginning of the year, we proposed a paid internal coverage system to alleviate rising consult burden in the emergency department. Within weeks, facilitated by emergency department directors Drs. Erick Cheung and Ariel Seroussi as well as RNPH medical Dr. Tom Strouse, the system launched. Feedback from PGY1-2s has been one of gratitude as the additional senior resident allows increased time for patient care and learning. The coverage system also facilitated an overall reduction in call duty hours.

The residency program, largely lead by resident initiative, continues to expand and innovate its curriculum to meet the everchanging needs of the field. Drs. Jonathan Heldt and Elizabeth Moore have developed a clinician-educator track to foster the next generation of medical educators. The two-year curriculum includes training in advanced techniques for educational content delivery and a scholarly project. Additionally, PCFA support has facilitated a significant expansion in psychotherapy training offerings. Dr. Sophie Rosseel, under the supervision of Dr. Richard

Meztner developed a supervised course in interviewing that benefits not only our junior resident but sub-interns and medical students. Dr. Meztner's scholarship fund, supporting psychotherapy offerings at other institutes, such as the Academy of Cognitive Therapy, is deeply appreciated.

Our residents continue to distinguish themselves as leaders at the local and national level. We had record representation among APA fellowships this year, including: Dr. Nicolas Barcelo (SAMHSA Minority), Dr. Juliet Edgcomb (Child and Adolescent), Dr. Nicole Goodsmith (Public Psychiatry), Dr. Adrienne Grzenda (Research), Dr. Laura Halpin (Leadership), Dr. Isabella Morton (Public Psychiatry), and Dr. Michael Mensah (SAMHSA Minority). Dr. Mensah was additionally elected as Resident-Fellow Member Trustee. Resident representation at the upcoming APA annual meeting, from posters to symposiums, is the highest in recent memory.

The graduating class thanks the PCFA for its support over the last four years. The countless hours of psychotherapy supervision and individual therapy have left an indelible impression on our training. All members, whether entering community practice or research, have vocalized confidence in embarking on their post-residency trajectories, owing in no small part to the dedication and support of the UCLA and PCFA faculty. We look forward to continued partnership in the years to come!



Adrienne Grzenda, M.D., Ph.D.



Erin Samplin, M.D

2019 Chief Child Fellows' By Siddarth Puri, M.D. and Amy Woods, M.D.

hief year has been an amazing experience! It's been full of A hysteria, tears, panic, but mostly laughs. In the summer, we had the opportunity to welcome an awesome new class of fellows to UCLA. We wanted to create a bonding experience between both the incoming fellows and also between the classes. To start the year off right, we hosted a gluttonous Sunday brunch at Sid's place and he filled it

with buttery baked french toast, vegetarian quiche, homemade cinnamon of rolls, and course mimosas. Most of the time at the brunch was spent talking about our lives and

listening to Britney Spears music, which everyone loved. After that, the fellows hit the ground running.

The incoming fellows did a great job of adjusting to the sometimes chaotic schedule at UCLA. After the first few months, there were fewer late night pages about what to do on call, and people began understanding the workflow of the ER and their respective rotations. In August, with the generous support of PCFA, we had our Fall Retreat. We started out by doing an art project on the grass of the sculpture garden at UCLA where we used a variety of colored papers, cut outs, glitter, and pictures that reflected our hopes in child and psychiatry fellowship. Then embarked to the Getty museum for a scavenger hunt. Amy was particularly excited about this adventure because even though she's an LA native, she had never been to the Getty. Through this scavenger hunt, we discovered that there are quite a few art historians among us, and that fabulous day was not complete without a celebrity sighting in the gardens! It was a true "welcome to LA!"

This year has been a wonderful experience and we are sad to say goodbye to our child training, but have made some great friendships and look forward to making an impact in the communities we serve.

> Following retreat, the second years went into hibernation as they studied for BOARDS, only to reemerge in time for recruitment. This was by far the best part of the year for the chiefs! We had the opportunity to showcase our fellowship program in a way that was unique to us by putting a lot of energy into making sure that our applicants loved our program as much as we do. While it was definitely exhausting, we tried to keep it fun. We went on walking interviews with applicants to highlight the beauty of our campus, we wore matching outfits, and made sure our ice breakers always ended in a laugh. We owe an immense amount of gratitude to our co-fellows who showed

up for the recruitment happy hours with enthusiasm. Ultimately our efforts paid off and we recruited an amazing group for next year and are so excited for them to join the UCLA team!

Soon after recruitment ended, the second years realized they were mere months away from actually launching, stirring up some panic in most of us. It didn't last long, though, as people easily started finding their way and critically thought about what they wanted to do with their career and how they were going to make that happen. With the anxiety of graduation looming and the first years having completed probably the most rigorous year of fellowship our spring retreat was a well placed and much needed escape. We packed into 4 cars and headed to Oceanside. We are so thankful for the DeGolia family for generously allowing us to use their beachfront home in Oceanside. We spent the weekend relaxing by the beach, reading in the sun, and doing yoga on the sand. Most of all we bonded over Sid's amazing food and Beyonce. Retreat was not only a time to bond but for some of us to also say goodbye. This year has been a wonderful experience and we are sad to say goodbye to our child training, but have made some great friendships and look forward to making an impact in the communities we serve. Thank you again UCLA!

Mentoring Program Brings Residents and PCFA Members Together

By Thomas R. Blair, MD, MS



t the 2016 program retreat, UCLA-Semel residents expressed desire for more faculty mentoring. In response to this request, the PCFA has developed a program that matches faculty members with

The vision of the program, which was conceived by Drs. Matt Koury and Josh Pretsky, is to enable residents and their faculty mentors to connect flexibly, in a manner that accommodates the busy schedules of PGY1 and PGY2 trainees.

residents, based on their mutual interests, for long-term personal and professional support.

As of April, 2019, twenty-five residents are matched with PCFA mentors, and eight additional faculty members have enrolled in the program. The program was advertised to residents over email and enrollment is opt-in, so that only residents who feel the relationship would be a worthwhile use of their limited time are signed up. Due to mentor availability, the PCFA Board decided in 2019 to expand

the program to residents in the West LA VA program, of whom three have enrolled.

The vision of the program, which was conceived by Drs. Matt Koury and Josh Pretsky, is to enable residents and their faculty mentors to connect flexibly, in a manner that accommodates the busy schedules of PGY1 and PGY2 trainees. Inperson meetings are supplemented by phone, email, or Face Time, and frequency of contact varies with residents' needs – and the demands of their current rotations.

Since the goal is mentoring, the relationship is not for therapeutic treatment or clinical supervision, although some of the supportive elements of those roles may come into play. Rather, the idea is for a friendly, professional relationship between people with shared interests, which serves to advance the development of the junior member, probably using caffeine and/or glucose as cofactors.

Resident-mentor matches are based on a short survey, and utilize

personal interests (popular ones include hiking, dining in LA, and the fine arts) as well as professional ones. Feedback on the matches been overwhelmingly positive, as residents celebrate the chance to meet faculty members they otherwise might never encounter, and benefit from personalized career guidance from clinicians in the community, outside of the clinical training environment. Faculty mentors have been no less enthusiastic. As one commented: "Earn your VCFA credits while enjoying a pleasant beverage with a pleasant person – what could be better?"

→ Dr. Blair is a member of the PCFA Board of Directors and the coordinator of the PCFA Mentoring Initiative.

Demand for faculty mentors is ongoing: PCFA members interested in earning teaching credits and building a rewarding relationship with a resident protégé through this initiative are warmly invited to email him at trwblair@gmail.com to begin the simple enrollment process.

The Psychotherapy Program: How do we help our residents become better therapists?

By Andrew T. Russell, M.D.

continuing pleasure Lto serve as teaching supervisor Psychotherapy Program and as faculty liaison to the Psychiatry Clinical Faculty Association (PCFA). The psychotherapy program was founded 28 years ago by Robert Pasnau, M.D. and it continues to be at the heart of the mission of the PCFA to serve our



We are trying to recruit some additional faculty to meet the demand.

residents. Fifty clinical faculty provide a personal, educational and affordable psychotherapy experience to residents and fellows from the UCLA Westwood, Veterans Administration, Olive View and Harbor programs. As their "reward" our faculty receive teaching credit and meet the requirements for serving on the UCLA Clinical Faculty. The availability of individual psychotherapy at a reasonable cost sets the UCLA programs apart from the vast majority of training programs in the country – it continues to help us recruit the best and the brightest.

Once again, I need to express my thanks to three key individuals. The first is Lela DeGolia, Executive Director of the PCFA. She is the glue that holds it all together, keeping us organized while maintaining our faculty roster and the financial books. Amongst the faculty, Mark Thompson, MD and Van DeGolia, MD continue to

be essential to the program's success. Mark or Van schedule individual meetings with all the residents interested in the program, and then they arrange their assignment to available PCFA faculty. Many thanks to Drs. Thompson and DeGolia for the many hours they contribute to the program!

Demand for the program remains robust. This year we are serving 49 residents, which I believe is an all time high. During the incoming resident orientation in June, we suggested that most PGY-1 residents should involve themselves in the new mentoring program and wait to participate in the psychotherapy program until the second or third year of their training, when their schedules could better accommodate weekly sessions. This suggestion has led most of the applicants this year to be more senior residents. We are trying to recruit some additional faculty to meet the demand. If you enjoy seeing patients in longer-term

individual psychotherapy, and might be interested in joining the program, please let me, Mark or Van know! The residents pay \$40 per session to their therapist, which in turn is donated to the PCFA. These monies have been used to support a variety of training related initiatives and activities. In 2017 -2018 we collected over \$42,000 to that purpose. Faculty currently seeing more than one resident include Philip Cogen, John Donlou, Robin Frasier, Jim Rosenblum, Heather Silverman-Gales, Sarah Watkin, and Samuel Wilson. Welcome to new faculty Candace Cotlove, Michael Gales, Nancy Wolf and Charles Portney.

For faculty participating in the program, please continue to let us know as soon as a resident leaves therapy and/or if you are available to see a new resident. Be on the alert for our annual request to indicate your availability for the 2019-2020 year. The Department of Psychiatry continues to look more closely at teaching hours as a requirement for voluntary faculty status and it is important for everyone to remain active throughout the year to meet the teaching requirements. If a faculty member does not have a resident assignment for two years and does not have other teaching hours, the Department will likely begin the process of dropping the faculty member from the voluntary faculty rolls.

In summary the psychotherapy program continues to thrive and provide a very special experience for our residents and faculty. It provides important clinical support to our residents during what can be a stressful time in their lives. We also believe that one of the best ways to learn psychotherapeutic skills is to be treated by an expert clinician. It has been a great pleasure to help coordinate the program this year. Many thanks to all who have contributed to the program's success!

Unfortunately, all good things must come to an end. After 42 years at UCLA and 9 years coordinating the psychotherapy program, I will be fully retiring in July. I wish my successor all the best!

VCFAAAC Report:

Ad Hoc Committees

By Saul Faerstein, M.D., VCFAAAC Chair

Trom time to time (and it shouldn't H be more than about once every two years) you may get a call or email from the Office of Academic Personnel (OAP) asking you to serve on an Ad Hoc Committee to evaluate a colleague who has asked to be advanced to a higher academic rank. Many of you have participated in the past and we are grateful for that. And you would know from that experience that it is not the daunting and onerous task some fear. In fact, the feedback we get is that it is a worthwhile and interesting experience and an opportunity to make a contribution to our department.

When faculty members are considered for advancement to the rank of Associate Clinical Professor (Voluntary) or Clinical Professor (Voluntary) there are several steps that must be followed. The first step is a recommendation by your Clinical Teaching Supervisor who is familiar with your participation in the teaching program. You are then asked to provide a personal statement and CV.

When that material is received, the VCFAAAC appoints an Ad Hoc Committee of three members to review the application and make a recommendation to the VCFAAAC to promote or not based on the dossier and the departmental criteria for advancement. If the VCFAAAC recommends advancement, you will be then asked to provide a list of intramural and extramural colleagues who are familiar with your professional work, teaching and reputation. Their letters go to the OAP. Thematter then goes to the department chair and then to the VolCAP Committee (a subcommittee of the FEC

which deals with the VCF), and then to the Faculty Executive Committee which makes the final decision. You can see why it takes as long as it does for your application to gain approval.

The review by the Ad Hoc Committee is an important step, and

in some cases becomes a rate-limiting step because of the reluctance of faculty members to serve on Ad Hoc committees. Serving in this capacity is one of the responsibilities that come with the privilege of having a position on the UCLA faculty and it is actually not a difficult responsibility to fulfill. Each Ad Hoc Committee is comprised of three faculty members, one of whom is at or above the rank that is being applied for. You receive the paperwork for the application and confer with the other members of the committee, usually by phone, and assess the qualifications of the applicant in light of the criteria for advancement. Then the chair of the committee, with input from the



members, writes a letter setting forth the opinion of the committee. You are provided with sample letters to guide you in drafting the letter which includes quotes from the letters from colleagues and teaching evaluation reports. The time commitment is not onerous; you can do it at the desk in your

office. And you may not be asked to do it again for years.

The most frequent question I get asked each year at the October PCFA meeting is "Why is my application for advancement taking so long?" The next time you get a call to serve on an ad hoc committee, think about the role of the ad hoc committee and hope that when it's your turn for advancement, your colleagues will do their part to speed the process by participating enthusiastically.

→ If you have any questions, please call me or contact Marisa Vela in the OAP (Semel B7-405) at 310.825.0125

Please watch for announcements of PCFA's 2019 annual events

October 19, 2019 Distinguished Psychiatrist Lecture

and PCFA General Meeting (CME offered)

December 2019 PCFA Resident and Faculty Holiday Party

(date and location TBD)

ACULTURE OF GIVING

By Wayne C. Sandler, M.D., Ph.D., Treasurer

In order to maintain the growth in programming provided by the Volunteer Clinical Faculty we need the support of the full membership. Historically only one third of the membership contribute their annual dues. Our revenue comes from two sources, the Psychotherapy

> The payment of your dues enhances that contribution, making UCLA one of the best psychiatric programs in the country.

483 program and annual dues. If we were to approach **full** membership participation in the payment of annual dues we would be able to stay in the black and expand resident support. The Board of the PCFA invites any suggestions of different ways of increasing our revenue.Fortunately we have had two significant gifts, from two of our members. The funds from both the David Coffey estate and Dick Metzner and the Metzner family trust and the earnings from the investment of these funds have covered the short

fall the past two years. If we rely on these gifts to support the funding requests from the residency programs the funds will eventually dwindle affecting our ability to operate. Hoping for future benefactors is also not prudent. The giving of your time in the teaching of medical students, residents and fellows is the foundation of the clinical faculty's contribution to the Psychiatric Program at UCLA. The payment of your dues enhances that contribution, making UCLA one of the best psychiatric programs in the country. To facilitate your continued support you can pay your dues by:

- → Signing up to make a recurring credit card payment by going to the website of pcfala.net and click on For Faculty to access pay membership dues.
- → Making a one-time credit card payment on the website
- > Sending a check by mail to: PCFA · 760 Westwood Plaza. Rm. 48-149. Los Angeles, CA 90095-1759

Thank you to all who participate fully in our mission.

Thank you!

Voluntary dues to the Psychiatric **Clinical Faculty Association**

Dr. Wayne Sandler, Treasurer, would like to thank the following members for their 2018 & 2019 (to date) donations:

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