



NEWSLETTER

Turning Towards the Future

By Paul R. Puri, M.D., President

The COVID pandemic has changed psychiatric practice and culture in unexpected ways. The traditional “norm” of in-office therapy was disrupted. Teletherapy has exploded. The term “mental health” became part of the common language, as many people were locked away from their social network and felt the repercussions emotionally and psychologically. Many people were cut off from coping strategies they relied upon, leaving them distressed and with few tools to manage. I further imagine that there’s an entire wave of unprocessed grief, delayed during the pandemic, that we are going to have to figure out how to manage as a culture. Psychiatry will be a key piece of the puzzle, and we must decide what part we are willing to play in it.



our Distinguished Psychiatrist Series was moved to online, it was a clear success with Dr. Helena Hansen giving an outstanding lecture. Based off of feedback and interest from residents, the PCFA board began an exploratory process around issues of Justice, Equity, Diversity, and Inclusion.

This was spearheaded by Harrison Lyu and Ashley Covington. They liaised with the JEDI committee within the department which led to new pursuits in expanding our own membership. But we also took strides to engage our membership.

In the last year, I’ve been reaching out to our members, having conversations about the PCFA, what we do, and how we could do it better. I’ve learned that many of our members don’t really understand what we do, which got me thinking about our identity as an organization.

The Psychiatric Clinical Faculty Association is a non-profit entity, comprised solely of psychiatrists who are members of the VCF at UCLA. Our mission has been to support the education of the residents. PCFA is a unique body, in support of UCLA residents but itself not technically governed by UCLA. We’re a group

As an organization, we have carried on as best we can. The PCFA has had to dial back its activities, since many of them were in-person events. We’ve been able to maintain many of our programs, from the mentoring program headed by Tom Blair, to the Hatos prize which awards residents for the writing of an outstanding scholarly article, led by our President-Elect Elizabeth Casalegno. Other endeavors like the Coffey Movie night were put on hiatus. While

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By Alex S. Lin, M.D., Treasurer

of largely private practice psychiatrists who value education, and are entirely voluntary. In fact, many members donate their own money to support the work that PCFA does. It may embody a desire to “give back,” yet not even all members of PCFA were trained at UCLA.

At the same time, PCFA members tend to do more psychotherapy than other psychiatrists. A great many are psychoanalysts, though not exclusively. Members have unique expertise in not only treating severe mental illness, but in doing combined psychotherapy and psychopharmacology management. Our members also have niche areas of expertise as well, from research, clinical training, or developing a clinical subspecialization in their practice.

Typically this expertise is offered in limited capacities, such as supervising individual med students or residents. But as such the wisdom we carry is ephemeral, transient. As supervisors, it exists in the air during the moments we speak with our trainees. We hope that our facilitation of experience aids in clinicians coming into their own, developing their own voice and style and wisdom. And yet it might not.

As we see how swiftly the culture at large can be changed by a virus, I can't help but see the possible existential threat to our organization, and the opportunity for learning lost. Psychiatrists well trained in psychotherapy aren't exactly growing on trees. I like to imagine that more psychiatrists are getting invested in learning psychotherapy, but it might not take much to narrow the opportunities further to access our legacy expertise. Should the department choose to limit opportunities for our involvement, or should a wide swath of our members retire, where will the trainees go?

This thought process has me exploring my personal motivations for participating in the PCFA, and in the UCLA program. I want to be involved with something greater than myself, and I like the idea of working to build institutions that change

Based off of feedback and interest from residents, the PCFA board began an exploratory process around issues of Justice, Equity, Diversity, and Inclusion.

the world, even in small ways. Perhaps I'm naïve, but I choose to put my efforts into contributing my time in ways that could do that. I believe we can be a part of changing the culture of psychiatry, if we choose to embrace it as an organization.

So we're at a turning point. We began the process a couple years ago of becoming independently credentialed, as an organization, to offer CMEs. This came out of necessity, as prior partners were unavailable, and we needed to offer CMEs for some of our core offerings like DPSS. Thanks to the tireless efforts of Lela DeGolia, we were approved, and since renewed.

But in the creation of such a program, there also emerged an opportunity – One that could shift the role of PCFA from merely being a support and source of expertise to the UCLA residency, to one available to the larger psychiatric community. Such a shift doesn't come

lightly, as it redefines the core mission of the PCFA to one of a bastion of expertise offered to the world beyond UCLA.

We have an opportunity to document and create an archive of the collective wisdom of our membership – recording seminars on the expertise of members, offering CMEs for them to the broader psychiatric community, and in the process becoming a beacon for psychiatrists to continue their identity as mental health leaders and more than the commonly reduced role of psychopharmacologists. We would actively participate in the larger cultural changes happening within the field. That means embracing the digital experience, which can involve delivering knowledge and wisdom in an asynchronous form. It means acknowledging our unique role as a group of psychiatrists with independent voices and knowledge that could benefit the field at large. Others have interest in what we have to offer. They just don't know where to go to get it.

Admittedly I'm a bit of a futurist, thinking and imagining about the future and what's possible. Simultaneously I see problems and am dissatisfied with letting negative trends continue unchecked.

We're putting together an entire video CME platform for the PCFA. So anyone interested in learning about domain expertise, such as areas of psychotherapy, can come and get training on our website. Any and all proceeds would be redirected to support the residency program at UCLA, in alignment with our original mission. But here's the thing – it requires your help. We need everyone to contribute, even if you're not sure what you'd want to talk about, there may be areas that others at UCLA or somewhere else in the world could really benefit from. Please reach out to me at paulrpuri@ucla.edu. And thank you.

2021 Distinguished Psychiatrist Seminar Series

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

Beverly J. Stoute, M.D.



The Psychiatric Clinical Faculty Association (PCFA) was founded at UCLA 40 years ago with the goal of supporting the education of Psychiatric residents and fellows. The current moment in our organization's history sees a confluence of factors that highlight a longstanding need to better appreciate the role of racial attitudes in our work, and their implications for training the next generation of clinicians. In responding to the call for more education on topics of race, racial bias, and social justice we are fortunate to have as our 2021 Distinguished Psychiatrist Dr. Beverly J. Stoute MD.

Dr. Stoute is internationally recognized for her expertise on topics of race, discrimination, and ethnic socialization. Dr. Stoute comes to us from Emory University where she is an Adjunct Associate Professor of Psychiatry, and serves as a Training Analyst at the Emory University Psychoanalytic Institute. She holds multiple faculty appointments, including the Southeast Child Analytic Consortium and Morehouse School of Medicine, and maintains a full-time private practice serving children, adolescents and adults.

Dr. Stoute is a founding member of *Black Psychoanalysts Speak*, and also serves on the editorial boards of the *Journal of the American Psychoanalytic Association* and *Psychoanalytic Study of the Child*. She is the current President of the Atlanta Psychoanalytic Society, and Co-Chair of the Holmes Commission on Racial Equality of the American Psychoanalytic Association. In addition to multiple publications on the topics of race, racism, and diversity, she has co-edited the soon to be released book *The Trauma of Racism: Lessons from the Therapeutic Encounter*.

As a Psychoanalyst interested in exposing the conscious and unconscious effects of racism in the psychotherapeutic setting she integrates theoretical, clinical, and developmental perspectives to highlight the importance of a psychodynamic understanding of race differences, and how clinicians can recognize and understand their own conscious and unconscious biases in working with patients. In her lecture titled

How Our Mind Becomes Racialized Across the Developmental Cycle: Does the Black White Binary Define Us?, Dr. Stoute will discuss the evolution of race awareness and the development of racialized thinking with specific attention to racial identity formation and racial trauma across the developmental spectrum. Using clinical material she will show the subtle ways that developmental differences in racial and ethnic socialization impact the treatment of individuals of color, and the developmental factors that influence a clinician's capacity to recognize and discuss racial dynamics in the clinical encounter.

As teachers committed to training the next generation of Psychiatrists, we have a responsibility to them, and their patients, to educate ourselves about racial attitudes and how they influence the clinical encounter. As clinicians we have an opportunity to increase our understanding of unconscious processes in racial dynamics. And, as individuals, we can help address the traumatic effects of racism by exploring our cultural and racial attitudes and the ensuing biases and privileges with openness and humility. I hope you will join me in welcoming Dr. Beverly J. Stoute for what is sure to be an informative and insightful lecture.

Dr. Stoute will discuss the evolution of race awareness and the development of racialized thinking with specific attention to racial identity formation and racial trauma across the developmental spectrum.

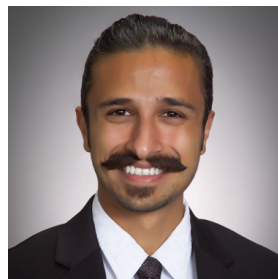
➔ **This year's Distinguished Psychiatrist Seminar will be held virtually on November 6th, 2021 from 10:30-12:30pm. It will be preceded by the PCFA Annual Meeting beginning at 9am.**

Child & Adolescent Psychiatry Fellowship Year in Review



Dr. Nikhil J. Nadkarni

By Ismatt Niazi, MD and Nikhil Nadkarni, MD; known collectively as “BBB”



Ismatt Niazi, MD

Wow, WHAT A YEAR! And honestly, that doesn't start to capture it. July 1st, 2020 marked the start of a new academic year, which felt more new than any other. We had quickly pivoted our training to accommodate the risks of COVID-19 and were launching into unknown territory in regards to onboarding new child fellows, entering into an all virtual recruitment, and navigating a quickly changing job market. But this is UCLA, we are not scared to lead the field.

So lead we did.

We started the year by holding our annual division breakfast, an opportunity for trainees to meet the faculty. And although it was virtual and we were unable to serve bacon and coffee, we were able to connect, even through our Hollywood Squares. This virtual connection set the tone for the rest of our year.

COVID-19 robbed us of many treasured traditions and experiences. Among those, the coveted fellow retreats, occurring twice a year and attended by most. We didn't have the chance for a Spring 2020 retreat, so we made it a priority to find a way to connect for our fall retreat. We kept the agenda short, sweet, and full of love.

The shortness of this session was appreciated by those who quickly realized putting off boards studying was no longer an option and every free minute was an opportunity to work through test-books and power past practice questions. An easy grand and eight hours of testing later,

boards were completed (and passed!) and the year was rolling right into recruitment.

As chiefs, we were heartbroken to learn we would not be able to flaunt our beautiful campus and celebrity sightings at the W. But in line with the year, we made lemonade. With the combined powers of Ismatt's unique (odd) personality and Nikhil's film making skills, we were able to create a short video that showcased UCLA and our program with guest appearances from Bear the Bruin, hospital security, and our fearless leaders, Drs. Jim McCracken, Sheryl Kataoka, and Misty Richards. This among the heroic efforts of our faculty and administrative staff (BIG shout out to Dulce Madrid Gonzalez!) produced one of our best recruitments seasons yet.

Moving into the holiday season, even amidst a tough year, there was much to be thankful for. The fellowship celebrated the holidays with a virtual dance party hosted by BBB's very own DJ Ish Reza and DJ Lil Nik. And even though it sounds like an awkward nightmare, it was LIT, and featured some of the division's best dance moves and guest appearances from Dr. DeAntonio's beautiful singing, head banging parrots.

2021 came with a fast reminder for the second year fellows that one, we need jobs, and two, Grand Rounds were around the corner. As the second years began pondering future careers and finding creative ways to give virtual presentations, it dawned on us that our prolonged professional adolescence was about to blossom into fruitful careers. Some of us have signed to

join group practices, some are pondering staying in academia, while the rest are exploring the exciting new possibilities of tele-psychiatry.

Along with this transition, comes the transition of roles, including the selection of our new program chiefs for the 2021-2022 academic year, Drs. Karina Espana and Ed Castello. In their first role as chiefs, they led the fellowship in an incredible, virtual bonding experience; where fellows were able to reflect on challenges of the past year. In addition to program chiefships, Dr. Manal Khan will serve as the fellowship's first Equality, Diversity, and Inclusion (EDI) chief, Dr. Sneha Venkatraman will serve as the 4W inpatient chief, and Dr. Stephanie Han will take over the outpatient therapy chiefship. And speaking of our rising first year class, this inspiring group deserves special acknowledgement and praise. Not only did they come together during a year where connection was challenged by face masks, zoom rounds, and social distance, they held down our toughest, most acute services, in a time where children and their families were fiercely struggling. And these rising stars did it with absolute grace and competence.

As the year comes to a close, celebrations are in order. Dr. Ismatt Niazi was recognized as this year's Greenblatt recipient for exemplifying the qualities of Dr. Greenblatt's dedication to the

lives of children and their families. Dr. Kunmi Sobowale was a three time award winner, winning the 2021 Ritvo Award for outstanding achievement in child psychiatry research and academic scholarship, the 2021 Friends of Semel Research Scholar Award, and the 2020 AACAP Pilot Research Award. Dr. Juliet Edgcomb also won three awards this past year, the 2021-22 Academic Psychiatry Trainee Editorial Fellowship, the 2020-21 Steven, Sally, and Isabel Grimes Investigator Award, and the 2021 Child Intervention, Prevention, and Services (CHIPS) Fellowship. On the faculty side, Dr. Brandon Ito was recognized as a 2021 Kaiser-Permanente Award for Excellence in Teaching. And lastly, Dr. Misty Richards soared in her first year as program director, spearheading an excellent recruitment season in addition to being a recipient for the 2021 Kaiser-Permanente Award for Excellence in Teaching while also receiving the particularly prestigious Golden Apple Award from second year medical students at DGSOM. Awards aside, we are so incredibly proud of our division and its members.

And lastly, the celebration of graduation, which will unfortunately be virtual this year. But we've learned, virtual does not preclude connection, love, or fun; as long as we're together.

With love and gratitude,
BBB

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* Denotes members serving on the Board's Executive Committee



Psychotherapy 483: Staying Connected in a Changing Landscape

By Carol Pataki, M.D.

Greetings! I want to extend my best wishes for your health and safety once again this year in these continued challenging times. As a UCLA trained child and adolescent psychiatrist, former training director, and faculty member who has devoted much of her career to clinical education, I continue to be grateful for the opportunity to be your faculty liaison to all the UCLA affiliated psychiatry and child and adolescent psychiatry training programs and the coordinator of Psychotherapy 483.

Although landscapes always change, typically changes occur gradually over a long period of time. In the past year, we experienced several unexpected interruptions in the resident-voluntary faculty assignment flow first due to residents seeking assignments more than available faculty, and second due to a university mandated full stop and remodel of Psychotherapy 483. Thankfully, the one constant this year is continued resident interest in Psychotherapy 483 from the Semel-UCLA, and its affiliated psychiatry and child and adolescent psychiatry residency programs: Greater Los Angeles VA, Harbor-UCLA, and UCLA-Olive View. Many psychiatry residents have recently expressed keen interest in the new model of Psychotherapy 483 and are looking forward to its placement in their curriculum.

So why did we remodel Psychotherapy 483?

As some of you may know, UCLA recently updated its Voluntary Clinical Faculty guidelines with respect to teaching requirements and parameters for courses including Psychotherapy 483. The bottom line is that the University no longer permits any form of treatment including psychotherapy to be part of training program curricula. Therefore, instead of a 1:1 combined education and psychotherapeutic experience for a resident and psychotherapist faculty pair, Psychotherapy 483 offers a 1:1, mentor/supervisor/facilitator psychotherapy training experience for the resident, not psychotherapy. The university does not permit fees for individual sessions, because payment is not permitted for educational sessions that are a part of your psychiatric residency training.

The remodel and transition of Psychotherapy 483 has proven to be a rather challenging process. A small "task force" consisting of voluntary clinical faculty: Dr. Casalegno, training directors: Drs. DeBonis and Richards, your liaison, (Dr. Pataki), in conjunction with the Psychiatry Clinical Faculty Association Executive Committee, and in cooperation with the UCLA Vice Chair for education: Dr. Zima, and the interim Chair of the UCLA Department of Psychiatry & Biobehavioral Sciences: Dr. Young, have worked together successfully to modify the components of Psychotherapy 483. Our shared goal was to maintain the spirit of the course while

adhering to UCLA guidelines. Psychiatry 483 now meets all requirements and has received university approval.

I would like to commend everyone who has offered much effort, time, and the wisdom of their experience to accomplish this task. The training directors, UCLA psychiatry voluntary clinical faculty executive committee, and I have all continued to advocate for the wellbeing of their trainees during this process.

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We are grateful to and Lela DeGolia, the administrator of Psychotherapy 483 main and the glue that holds Psychotherapy 483 together, who organizes, maintains, and updates the faculty roster, and keeps track of everything related to Psychotherapy 483. We thank voluntary clinical faculty members Mark Thompson, MD and Van DeGolia, MD who have spent many years in the service of the Psychotherapy 483 program by providing individual meetings with interested residents and

personally arranging their assignments to available Psychotherapy Program.

The Mentorship program continues to provide trainees with guidance and support early in their training when their schedules do not allow for weekly sessions. Trainees in the mentorship program may also participate in the Psychotherapy 483 as their schedules become compatible.

Voluntary clinical faculty members and trainees who may be interested in participating in the Psychotherapy 483 course can learn more about it by contacting me at CPataki@mednet.ucla.edu

Psychotherapy 483 has and will continue to provide a unique training experience for trainees to learn about psychotherapy as they progress in their residency programs and develop as clinicians. We believe that one of the best ways to learn and refine psychotherapeutic skills is to be trained by an expert clinician. We deeply appreciate all who contribute to this program and have made it a great success!

Thank you to all involved in the Psychotherapy 483 update for your thoughtfulness, hard work, and insightful contributions to this course. Your efforts are very much appreciated!

Please find the Psychotherapy 483 Course Description below:

Psychotherapy 483

Goals/Objectives:

Through the process of individual sessions with supervisors who will teach psychotherapy from the perspective of the patient, the trainee will:

- More effectively understand how to establish an alliance that fosters inquiry into a patient's inner life
- Gain increased understanding of the unconscious and its relation to behavior
- More effectively be able to identify and assist patients in working through their resistances and defenses
- Be able to recognize, utilize, and manage aspects of countertransference
- Be able to utilize self-reflection to learn about their own response to patients

Trainee Participation:

- Trainees interested in learning about psychodynamic psychotherapy in depth who elect to participate in this course will contact the Psychotherapy 483 liaison, Dr. Carol Pataki, who will describe the course and answer any questions. Dr. Pataki will then arrange for the trainee to contact either Dr. Van DeGolia, or Dr. Mark Thompson who will assign the trainee to a participating faculty supervisor.

Teaching/Supervision:

- Individual teaching/supervision between a trainee and faculty supervisor will occur on a weekly basis for the duration of the academic year. In some cases, with agreement between the trainee and the faculty supervisor, this course can be extended for more than one year.

Evaluations:

- Evaluations of faculty supervisors by trainees will be generated and completed through the UCLA MedHub system. Training program directors will be aware of individual trainee and faculty supervisor assignments and will review these evaluations when they are completed by trainees. Evaluations will be released to faculty supervisors in aggregate every two years to provide anonymity of the trainees. If evaluations require real-time feedback to the supervisor, the trainee will be incorporated into the decision-making process of how to deliver this feedback.
- Evaluations of trainees by faculty supervisors will be generated and completed through the UCLA MedHub system and trainees will be evaluated based on their attendance.

Psychotherapy 483 Policy:

- Trainees will be made aware at the outset of their participation that the course is designed to train them on the fundamentals of psychodynamic psychotherapy. It does not provide psychotherapy or other forms of treatment.
- Trainee and faculty supervisor interactions in this course will follow all university-wide policy for trainees and faculty supervision.
- Trainees seeking psychotherapy or psychiatric treatment will be assisted in finding local referrals.
- Trainees who experience discrimination or harassment will be directed to report it to the UCLA office of Civil Rights.

The PCFA Psychotherapy Program: Maintaining Thirty Years of Success Under New UC Guidelines

By Richard J. Metzner MD



At the June 2, 2021 meeting of the PCFA Board of Directors President-Elect Elizabeth Casalegno and Faculty-Liaison Caroly Pataki reported on a significant meeting they had just had with Acting Department Chairperson Alexander Young, Director of Residency Education Katrina DeBonis and Child and Adolescent Psychiatry Fellowship Program Director

Misty Richards. The meeting was an outgrowth of the highly publicized and costly sex scandal involving UCLA gynecologist James Heaps, which has led the University of California to try to protect itself from future liability by increasing faculty oversight, including VCF.

PCFA's psychotherapy program (Psychiatry 483) has come under particular scrutiny. In order for the program to continue, Dr. Young said there have to be clear and acceptable teaching goals and a system of oversight with teaching evaluations. Offering treatment to residents is no longer acceptable. Instead, experiential psychotherapy can only deliver a teaching model for providing psychotherapy. A "fee" can no longer be collected for sessions, even one that has been entirely redirected to popular residency activities. Clinical faculty participating in the program will complete evaluations just as is done with any other departmental teaching. Residents requiring actual mental health care will be redirected to Behavioral Health or private psychiatric treatment.

The program directors supported changing the Psychotherapy Program to meet these new requirements, but wanted to make sure that PCFA was on board. Drs. Casalegno and Pataki stated that the take away from the meeting was that PCFA doesn't really have a say in this matter. Either we go along with the modifications to the program or we will have to terminate it.

After considerable discussion, the PCFA Executive Committee voted at its meeting on July 7th to continue the Psychotherapy Program under these new guidelines. Unresolved objections concerning potential confidentiality issues, malpractice liability and reduced quality of care for residents were countered as probably manageable in practice and worth risking to preserve the main strength of the program as an experiential learning process for residents who want to become better psychotherapists. It was the hope and belief of many of us that residents might still learn much that is both professionally and personally valuable from this modified version of our highly successful Psychotherapy Program.

My own contribution to this effort was to spearhead a coalition of PCFA faculty to create our first faculty evaluation form for use by residents in the Psychotherapy Program. We asked Saul Faerstein and the VCFAAAC committee to review it. After receiving their blessings, the form was passed upstream and will be implemented on MedHub for easy access by residents. By having these evaluations in their departmental records, faculty teaching in the Psychotherapy Program will at long last become eligible for much-deserved academic advancement.

Highlights



Zoom group supervision with Dr. Mark Thompson



Margaret L. Stuber, MD

UPDATE ON DGSOM at UCLA Medical Students

What a year this has been! However, we seem to be emerging from COVID, and there is a lot of good news.

First good news from the School of Medicine: DGSOM went through accreditation this year, and received **full accreditation** for 8 years, which is the maximum. Some little things to fix, but no big issues. What a relief after preparing for 18 months!

More good news: the medical students of the class of 2025, one of our most diverse, will arrive in August. Of the 176 new students, **40% are the first in their families to complete college and 36% are from groups traditionally underrepresented in Medicine.** We are terrifically excited about this diverse group of outstanding students.

The new medical school curriculum starts with the class of 2025. The **new curriculum** will somewhat shorten the "basic science" portion of the training, so that students can get to their clerkships earlier. Students will then have a year for "discovery" to do research, get a Master's degree, and work in the community, before the electives, sub-internships and residency application year. We are working on how we can involve students in various aspects of psychiatry during that year! I met with a subset of the students today, and they are amazing. They are the PRIME students, selected for their leadership with underserved populations.

Psychiatry did well in the Match this year, with **13 DGSOM graduates matching into psychiatry.**

We look forward to having an in-person graduation next year...

There is change at the Graduate medical education level as well. As of July 1, 2021, the **psychiatry residency program** traditionally sponsored by the VA came under UCLA sponsorship. The two programs will continue to be independent, and there will not be a change in curriculum or leadership. The primary change is that the Greater Los Angeles VA residents will now have union representation, and receive the "perks" negotiated by the union.

ANNOUNCEMENT

PCFA's 2021 annual event

November 6, 2021

Distinguished Psychiatrist
Lecture and PCFA General Meeting
(CME offered)

PCFA WOULD ALSO LIKE TO CONGRATULATE BOARD MEMBER JOSHUA PRETSKY AND PCFA MEMBER SUSAN DONNER, on receiving last year's Volunteer Clinical Faculty Excellence in Teaching Awards from the Department of Psychiatry and Behavioral Sciences. The awards are given each year to faculty members for their outstanding and consistent contributions to the education of medical students, residents and fellows.

Your Financial Contribution is More Important Than Ever



By Alex S. Lin, MD
Treasurer

Psychiatry 483. To increase our revenue stream, the PCFA is looking at creating enduring CMEs. We are excited the possibility of providing increased educational programming for our members, but creating and maintaining such a platform comes with its own operating costs.

It is vital that all volunteer faculty contribute to the PCFA. Our support in terms of direct teaching activities *and* financial support for events is integral to providing the highest quality education for our trainees.

If you have ideas on how to develop additional revenue streams or how to encourage greater dues payment, please let us know.

Thank you for your continued support.

➔ To learn more about all the work we are doing or to donate, please visit the PCFA website at <https://www.pcfala.net>

➔ You can also mail a check to PCFA, 760 Westwood Plaza, Room 48-149, Los Angeles, CA 90095-1795.

At this point last year, when I mentioned that only 10% of the volunteer faculty paid dues, the response was incredible; the PCFA ultimately earned about 82% of the annual budgeted amount for dues income by the year's end. Thank you so much for your continued support!

However, it's important to realize that "100%" of our annual budgeted amount for dues income still only means that a little less than half of the total psychiatric volunteer clinical faculty pay their dues. Our budget is actually designed to run at a significant deficit, and, if all members paid the annual dues, we would be able to easily cover all of our operating expenses.

We are nearly at the half way point through the year, and we are again struggling to meet our goal for membership dues; only about 14% of the faculty have paid. Our two main sources of income are from dues and from

Thank you!

Voluntary dues to the Psychiatric Clinical Faculty Association

Dr. Alex Lin, Treasurer, would like to thank the following members for their 2020 & 2021 (to date) donations:

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| Irvin Godofsky | Serena Puga | Farzin Yaghmaie |
| Neil Haas | Paul Puri | Lester Zackler |
| Robert Hoffman | John Raiss | Melanie Zermeno |
| Christine Hradesky | Karen Reckamp | Romana Zvereva |
| Mark Hrymoc | William Resnick | |
| Victoria Huang | Vernon Rosario | |