

APA Assembly Notes

November 6-7, 2021

This digest of events summarizes the business conducted by the APA Assembly during the April virtual meeting held via Zoom. Many other reports presented in written form can be found in the Assembly Packet found [here](#). It is best to download or read these abbreviated notes online, but they may also be printed and distributed in hardcopy (without access to the web links). You may use it as is, or edit and modify the content to suit your particular needs. Any errors or omissions should be considered unintentional. Corrections and suggestions may be sent to [James A. Polo, M.D.](#)



Speaker's Welcome — Mary Jo Fitz-Gerald, MD



Dr. Mary Jo Fitz-Gerald, MD welcomed everyone to the 95th Meeting of the APA Assembly. She noted that this was the third (and hopefully last) Assembly Meeting being held in a virtual format as a result of the COVID-19 pandemic. She reminded everyone that officer reports during the plenary sessions would be abbreviated to allow for maximal time for Assembly business. Full reports from all of the officers can be found in the Assembly Packet. (Speaker's Report on pages 35-36.) The Territorial Acknowledgement was presented by Dr. H.K. Blaisdell-Brennan, MD (M/UR Rep, Area 7) honoring the Kanaka Maoli (or Kanaka 'Oiwī) the indigenous native people of the island territories that we commonly refer to as the Hawaiian Islands. A Moment of Silence was observed for Dr. Paul J. O'Leary, MD who recently passed away while serving as the Speaker of the Assembly.

Presentation on Inclusive Language — Kenneth Ashley, MD



Dr. Kenneth B. Ashley, MD, Associate Professor of Psychiatry at the Icahn School of Medicine at Mount Sinai, Mount Sinai Beth Israel provided the Assembly an overview on, *Respectful and Inclusive Use of Language*. The key principle to understand is that conversations in America have tended to center on the experience of people who are white, heterosexual, and cisgender as the prevailing norm. Acknowledging and affirming difference honors and invites multiple perspectives which celebrates diversity. Given that words matter, the more we understand about language, descriptors, and their meaning, the more we can be intentional with how we speak. Key concepts include:

- Identity is personal, people have a right to be described as they wish.
- Respect for privacy is important, others should be allowed to be considered as they chose to be.
- Ask others how they wish to be referred which demonstrates respectful intent.
- Be specific with language to avoid confusion.
- Be thoughtful and intentional about when to use personal attributes.
- Be kind and affirming, avoid labels, and focus on strengths.
- Use inclusive language that is gender neutral.
- Acknowledging the importance and intent of using respectful language shows and invites humility.

Additional information can be found at the following references:

1. [OHSU Inclusive Language Guide](#)
2. [Advancing Health Equity: A Guide to Language, Narrative, and Concepts](#)
3. [Health Equity Style Guide \(CDC\)](#)

Report of Speaker-Elect — Adam Nelson, MD



Dr. Adam Nelson, MD also welcomed everyone to the November Assembly Meeting. He mentioned that his full report was available in the meeting packet (pages 46-48). He then focused on the Joint Reference Committee (JRC) noting that it is not described nor highlighted on our organization's website. He noted that there are 7 Assembly members on the JRC to include himself who serves as the Vice Chair. Recently, the JRC was tasked to update and revise Position Statements, to include some that had been rejected by the BOT secondary to formatting issues. This will be a one-time task as all future Position Statements brought before the Assembly will need to conform to the prescribed format. Additionally, he serves as an ex-officio member of the Board of Trustees. In both capacities he advocates for issues that are important to the Assembly.

Report of Recorder — Vasilis K. Pozios, MD



Dr. Vasilis K. Pozios, MD declared that despite the absence of registration by members from 7 District Branches, sufficient members were present in the virtual Assembly Meeting to constitute a quorum. Minutes & Summary of Actions from the April 24-25, 2021 meeting were approved by the Assembly (pages 157-161). He highlighted that, members should refer to the written reports in the meeting packet for a list of members and invited guests (pages 170-184), information on voting strength (pages 185-187), and reports from the Assembly Executive Committee (pages 188-209).

Report of the Rules Committee — Daniel Anzia, MD, Chair



Dr. Dan Anzia, MD (chair of the Rules Committee) presented the Special Rules of the Assembly for approval. He highlighted that the special rules were essentially the same as those adopted for the April 2021 Assembly Meeting. He noted that the 'Respond to Everyone' function in the Meeting Chat should only be used to indicate PRO (support for issue on the floor), CON (opposition to issue on the floor), POO (Point of Order), or POI (Point of Information). All other responses would be considered OOO (Out of Order). The Special Rules were approved by the Assembly.

Report of the Nominating Committee — James R. Batterson, MD, Chair



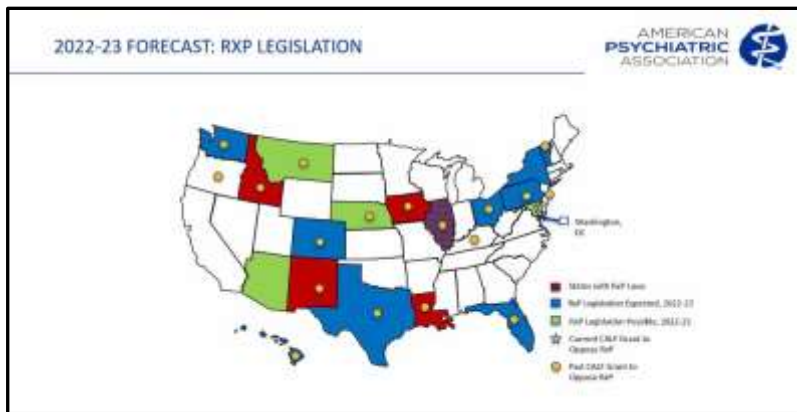
Dr. James R. Batterson, MD (chair of the Nominating Committee) presented the slate of candidates for 2022-2023. For Speaker-Elect, the current Recorder, Dr. Vasilis (Bill) K. Pozios, MD, was nominated. For Recorder, Dr. Kenneth B. Ashley, MD (New York County Psychiatric Society) and Dr. Steven M. Starks (Texas Society of Psychiatric Physicians) were nominated. Dr. Batterson provided the opportunity for additional members to be nominated from the Assembly floor, but no nominations were presented or submitted.

Report of the APA CEO/CMO — Dr. Saul Levin, MD



Dr. Saul Levin, MD announced the new Executive Director for the APA Foundation, Mr. Rawle Andrews, Jr., JD who previously served as a Vice President at AARP, and the new APA CIO (new position), Ms. Stefanie Keuser, CISSP, who previously served as the CIO & VP for MOAA. He provided a summary of his CEO/CMO Report (full report found on pages 17 -34) . Highlights discussed for the Assembly included:

- 1. RxP Legislation** – The forecast for the 2022-2023 season includes an expectation of increased proposals that support prescriptive authority for psychologists. Members should take every opportunity to connect with their respective legislators to express concern on the impact that this will have on the mental health care of their constituents. See the following map:



- NP & PA Scope Expansion** – Similarly, it is expected that Nurse Practitioners and Physician Assistants will seek legislative support for expansion of their scope of practice into the field of psychiatric medicine for which their training is insufficient. The APA is working with the AMA and specialty medical associations to oppose scope expansion. Members should also address concerns about this with their respective legislators.
- Annual APA Meeting** – The 2022 annual meeting is currently scheduled to be in-person in New Orleans, May 21-25, 2022. Accommodations will be made to reduce the number of sessions so that social distancing measures can still be observed. A new DEI-focused plenary session will be presented with numerous focused sessions that will address diversity and equity. There will also be an opportunity to participate in a reduced virtual program 2 weeks after the in-person meeting. Pre-recorded sessions from the Annual Meeting will be live streamed followed by live Q/A with the presenters.
- APA Joint Accreditation** – The timeline for interprofessional joint accreditation was presented. See the following chart:

Milestone	Timeline
Determination of eligibility application - Intent to Apply (eligibility questions) - Eligibility Review Fee	October 1, 2021
APA informed of eligibility	Submitted November 25, 2021
APA deadline to submit: - List of educational activities - Payment of Application Fee	November 15, 2021
APA informed which activity files, as a minimum, will be reviewed	January 2, 2022
Establish Joint Accreditation Interview date	February 15, 2022
APA deadline to submit: - Self-Study Report - Activity files	April/May 2022
Joint Accreditation Interview	July 1, 2022
Joint Accreditation Review Committee (ARC) Meeting	August/September 2022
APA notified of final decision no later than	October 2022
	December 31, 2022

Dr Levin highlighted that some of these actions would be occurring behind the scenes.

- DSM-5-TR** – the text revision of the DSM-5 is due for release on March 18, 2022. Enhancements have been made for ease of use, as well as proprietary protection of this edition. At the present time it is anticipated the next version, DSM-6, will be released in 5-6 years.
- PsychiatryOnLine Usage** – Full text usage of PsychiatryOnLine has continued to increase over the past 3 years with monthly usage now remaining above 1M hits consistently. Despite increased usage, the website has not experienced any crashes or significant interruptions of service.
- Division of Diversity & Health Equity** – Numerous grants (MOORE Equity in Mental Health) were provided to support diversity and health equity work. The LEAD Institute expanded its offering with several new courses addressing Social Determinant of Health, Structural & Institutional Racism, Cultural Competence, as well as other topics. All SAMHSA fellows were successfully matched with an APA Leader mentor in the inaugural Advocate/Protégé Program.
- PsychPRO** – PsychoPRO has continued to have strong participation with ~70 practices (1,200 clinicians) active accounting for over 300K unique patient records covering 4.5M patient encounters. Starting in 2022 ArborMetrix will host the platform.

9. **APA & District Branch Relationships** – An ad hoc work group has been formed that will explore the fiscal and administrative relationships; respective roles and responsibilities; and future strategic concerns with a report with recommendations due to the BOT. Co-chairs will be Dr. Renée Binder, MD and Dr. Adam Nelson, MD.
10. **Collaborative Care (CoCM)** – The Group of 6 led by Dr. Vivian B. Pender, MD has had strong coalition support to include consumers, providers, payers, and employers to advance the Collaborative Care Model. Recently, HR 5128 was introduced with bipartisan support by Reps. Lizzie Fletcher (D-TX) and Jamie Herrera Beutler (R-WA) to advance mental health care.
11. **APAPAC** – Dr. Levin encouraged everyone to consider donating to the APA PAC (“just enough that it hurts a little”) to support APA advocacy efforts on Capitol Hill.

Report of the APA President – Dr. Vivian B. Pender, MD



Dr. Vivian B. Pender, MD opened her comments by highlighting the complex interactions of the COVID-19 pandemic, structural racism, and mental health inequities meet the criteria for a ‘syndemic’. ([Publication](#)) She noted that while this does present many challenges, it also provides opportunities. She mentioned that at the macro-societal level we have been shifting from an individual-based approach to mental health outcomes to one that is public health-based. Dr. Pender highlighted the leadership, task force workgroups, APA Staff, and tools that have all contributed to her Presidential Task Force on Social Determinants. Dr. Pender reviewed the success of the Mental Health Services Conference that was held October 14-15, 2021. The top topics attended included: Integrated & Collaborative Care, Structural Racism/Anti Racism, and Sociopolitical Issues. Attendee feedback included the comment, “This conference was an outstanding example of ‘outside the box’ thinking.” She thanked those who participated in the November 3rd, 2021 virtual Town Hall supporting the Presidential Task Force on Social Determinants of Health which addressed clinical practice, research, and education. She encouraged members to attend the next one scheduled on Dec 1st, 2021 which will address policy and public health. She noted the official launch of the Congressional Social Determinants of Health Caucus chaired by Reps Bustos (IL), Cole (OK), Butterfield (NC), and Mullin (OK) and introduction of HR 2503 (Social Determinants Accelerator Act) supported by the AHA. Dr. Pender highlighted other APA Advocacy Activities, in particular joint lobbying by the ‘Group of Six’ (APA, AAP, AACOG, AAFP, AOA, and ACP). Dr. Pender closed by highlighting the important work on started by Dr. Jeffrey Geller, MD as part of the Presidential Task Force on Structural Racism noting that the BOT SR Accountability Committee chaired by Dr. Felix Torres, MD and Dr. Mary Roessel, MD will ensure that recommendations are implemented, successes are monitored & evaluated, and further recommendations are made.

Report of the APA President-Elect – Dr. Rebecca W. Brendel, MD, JD



Dr. Rebecca W. Brendel, MD, JD, opened her comments by thanking members for the chance to address the Assembly. She noted that as the President-Elect she has responsibilities for the JRC and Component Appointments. She also touched on the fact that the APA website does not provide information about the JRC, joking that some members feel, “It is the place where good Action Papers go to die”. In light of that, she discussed “getting back to basics”. She highlighted the purpose of Position Statements, brief statements on where the APA stands on an issue relevant to the practice of psychiatry and the health of our patients, noting that they are for external communication and advocacy, not for clinical practice. She also reviewed the JRC Workgroup membership and progress, highlighting the intent of increasing both transparency and accountability. She mentioned that the JRC also has responsibility to ensure progress on the work of the Structural Racism Task Force. Dr. Brendel reviewed the efforts of the BOT to increase awareness, information, and nominations for involvement by Assembly members. She noted the significant increase of nominations overall (77%) in 2021 over 2020. Dr. Brendel closed by highlighting that explicit attention in applying the ‘dimensions of diversity’ has been intentional for all ongoing work.

Report of the Treasurer – Richard Summers, MD



Dr. Richard Summers, MD presented a brief high-level review of the APA’s finances, emphasizing the desire to increase transparency with the entire APA membership. He reviewed the 5 key metrics that are tracked to assess the financial health of our organization. Those metrics include: total revenue, Net Income/Loss (from operations compared to budget), Net Investment Income (compared to market), Liquidity Ratio (cash and receivables divided by liabilities, goal is 1 or better), and Unrestricted Net Assets (compared to previous year). Our current performance is very strong:

FIVE KEY METRICS		AMERICAN PSYCHIATRIC ASSOCIATION	
	ACTUAL	BENCHMARK	
Total Revenue <i>Income from programs and services compared to budget</i>	\$ 36.0M	\$ 32.1M	●
Net Income (Loss) <i>Profit from core business functions less Board initiatives compared to budget</i>	\$ 6.8M	\$ 3.1M	●
Net Investment Income <i>Investment earnings, net of fees compared to market</i>	11.7%	10.1%	●
Liquidity Ratio <i>Cash plus receivables divided by current liabilities</i>	1.23	1.00	●
Unrestricted Net Assets <i>Reserves without use restriction compared to prior year</i>	\$ 71.3M	\$ 55.7M	●

Dr. Summers did provide financial details (revenue/expense) for 2021 compared to budget, as well as 2020. These are not yet year-end figures. Overall revenue is well ahead of expense, despite the impact of the continuing COVID-19 pandemic.

FINANCIAL FLASH REPORT		AMERICAN PSYCHIATRIC ASSOCIATION		
	YTD 21 Actual	% of Budget	% Inc (Dec) vs 20	Notes
Revenue				
Publications	\$ 18,202,500	69%	4%	DSM and books driving growth
Membership	9,191,000	99%	(3)%	Decline consistent with budget
CME/Annual Meeting	5,511,100	76%	329%	No annual meeting in 2020
Federal Grants	2,979,500	58%	(10)%	Research grant spend decline leads to lower revenue
Expense				
Revenue generating	\$10,789,400	57%	(1)%	Ann Mtg and expected pubs.
Programs	4,542,793	58%	(1)%	Grants and expected DHE
Support functions	6,630,141	58%	8%	Timing of expenses
Governance	772,000	34%	(22)%	Impact of travel ban

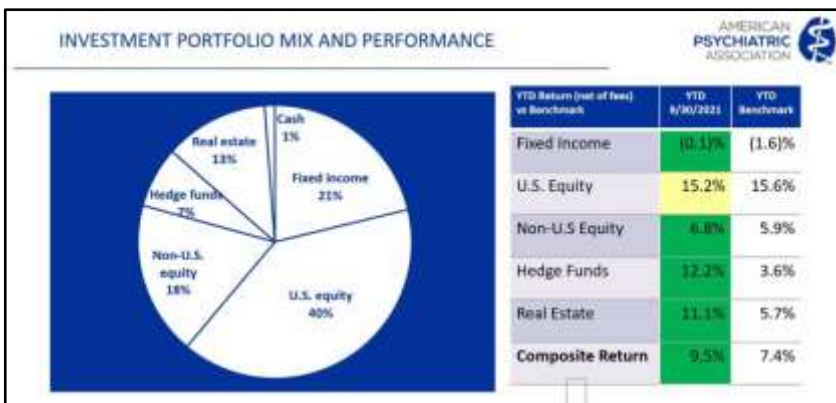
Dr. Summers provided a year-end forecast for 2021n which demonstrates that the APA is on track with the budget.

2021 FORECAST SUMMARY		AMERICAN PSYCHIATRIC ASSOCIATION	
	2021 Budget	2021 Forecast	
Revenue generating activities, net margin <i>Programs operated at a profit to fund other activities</i>	\$ 23,925,600	\$ 23,916,200	<ul style="list-style-type: none"> Annual meeting revenue down \$1.5M Registry expense increase \$800K due to ArborMetric conversion
Operations, net margin <i>Member service programs, support functions, governance</i>	(26,361,300)	(25,906,500)	
Reserve investment funding <i>Amount defined by board policy- 50% of past 3 years gains</i>	4,085,900	4,085,900	
Net operating income	1,650,200	2,095,600	
Non operating items <i>Longer term, Board approved initiatives</i>	(1,654,600)	(2,099,600)	<ul style="list-style-type: none"> Member dues revenue increase \$600K Travel reductions \$800K New APBN grant \$950K
APAF building option payment	750,000	750,000	
Net income	\$745,600	\$746,000	

The APA's investment portfolio has performed very well, with total assets of \$195.9M.



The APA's Investment Portfolio is well diversified and performed better than market.



Planning for the 2022 Budget is well underway. Some uncertainty still exists with respect to funding for the 2022 Annual Meeting (in person versus virtual), federal grant funding, impact of DSM-5-TR, and changes associated with office footprint/hybrid work environment. Investments will need to be made in cybersecurity, expanded diversity and mental health equity funding, and increased Registry participation. New opportunities exist to revise our reserve funding policy.

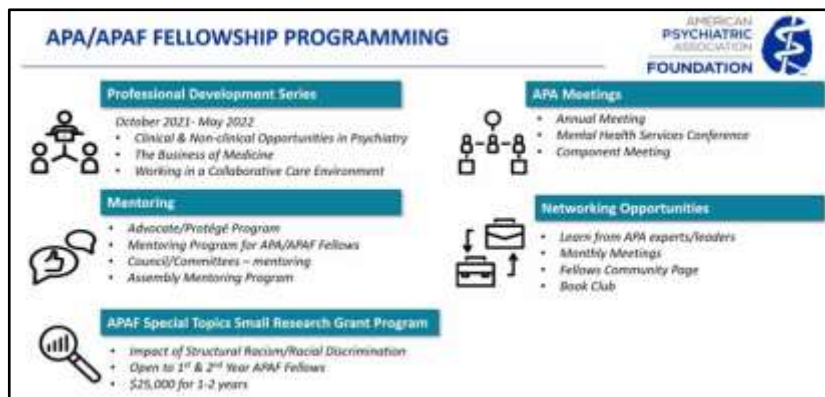
Dr. Summers closed by emphasizing the amount of cross coordination that occurs relative to the decision-making process prior final approval of the budget by the BOT



Report of the APA Foundation Executive Director – Dr. Rebecca W. Brendel, MD, JD



Mr. Rawle Andrews, Jr. JD, opened his comments by reminding the Assembly that the mission of the APA Foundation is easy to understand but complex to execute. It's important that the Foundation's efforts make a difference based on, "who we are, what we do, and why we do it". At the same time, we must reflect the full diversity of the organization to expand and amplify the social impact by the APA, familiarity with the APA, and revenue for the APA. He highlighted the importance of the Fellowship Programs such that the APAF will develop a new position, Director of Psychiatric Training and web portal for the 2022 APA/APAF Fellowship Application Cycle. Programing is comprehensive given that 2 in 5 fellows remain in the APA for their full career. It includes:



Mr. Andrews emphasized the synergistic interrelationship of the APA and APAF through the concept of “nothing about you without you”. He noted that the APA “needs to win in the media”, but more importantly, “through word of mouth” underscoring the companion concept of “nothing about us without us”. Mr. Andrews closed by commenting that while others encourage “giving until it hurts”, he prefers that members to “give till feels right”.

APA Position Statements

The following Position Statements were approved by the Assembly: (by consent)

- 4.B.1. Revised** Position Statement: Location of Civil Commitment Hearings
- 4.B.2. Revised** Position Statement: Sexual Harassment
- 4.B.3. Retired** Position Statement: Patient Access to Electronic Mental Health Records
- 4.B.4. Proposed** Position Statement: Transitions from Hospital-Based Care to the Community for Substance Use Disorders
- 4.B.5. Proposed** Position Statement: Police Interactions with Children and Adolescents in Mental Health Crisis
- 4.B.6. Revised** Position Statement: Position Statement on Off-Label Treatments
- 4.B.7. Revised** Position Statement: College and University Mental Health
- 4.B.8. Proposed** Position Statement: Position Statement on Immigration, Children, Adolescents, and their Families
- 4.B.9. Proposed** Position Statement: Mental Health Impact of Public Health Emergencies on Young People
- 4.B.10. Proposed** Position Statement: Racism and Racial Discrimination in the Psychiatric Workplace
- 4.B.11. Revised** Position Statement: Psychiatric Services in Adult Correctional Facilities
- 4.B.12. Proposed** Position Statement: Moral Injury Among Healthcare Workers During a Public Health Crisis
- 4.B.13. Revised** Position Statement: Core Principles for Alternative Payment Models for Behavioral Health
- 4.B.14. Proposed** Position Statement: Medical Supervision of Psychiatry Residents and Fellows
- 4.B.15. Revised** Position Statement: Telemedicine in Psychiatry
- 4.B.16. Retained** Position Statement: Any Willing Physician
- 4.B.17. Revised** Position Statement: Trial Sentencing of Juveniles in the Criminal Justice System
- 4.B.18. Proposed** Position Statement: Civil Commitment of Minors

Assembly Action Papers

Action Papers approved during this meeting included:

- ✓ **12A** – Peer Review Organization Professionalism & Fairness
- ✓ **12B** – Resource Document to Support Advocacy Efforts Aimed at Destigmatizing Mental Health Treatment in Licensing/Credentialing Applications and Promoting Physicians Seeking Timely Care
- ✓ **12D** – Removing Barriers to Improve Healthcare Access in Puerto Rico
- ✓ **12E** – Statement in Support of Decriminalizing Drug Use
- ✓ **12H** – Establishing a Mentorship/Sponsorship Program for Early and Mid-Career IMG Psychiatrists
- ✓ **12I** – Changes to Improve MOC
- ✓ **12J** – Addressing Structural Racism in the APA: Eliminating Race Based Tokenism within the APA Assembly
- ✓ **12K** – Racial-Ethnic Minority Representation on the APA BOT Executive Committee
- ✓ **12N** – Assembly Representatives Responsibility to Report
- ✓ **12O** – To Make the APA Annual Meeting Carbon Neutral by 2030

Action Paper approved after the meeting with Vote by Strength

- **12M** – Addressing Structural Racism in the APA: White Dominant Culture in the APA Assembly

Final versions of all Action Papers with delineated resolutions will be available soon.

You can view all current and previous Action Papers and track their current status at Action Paper Central on AITS [here](#).

Items from the DSM Steering Committee

The following item was approved:

- ✓ **10.B** – Deletion of Suicidal Behavior Disorder from Section 3 of the DSM-5

Memorial for Dr. Paul J. O’Leary, MD

Assembly members met after the formal meeting to pay tribute to Dr. Paul J. O’Leary who was a great visionary and servant leader within the APA Assembly for many years. Most importantly, he was a friend and mentor to all. His greatest pride and joy was his family – Malinda (wife), Sophia & Sylvia (daughters) who were present to hear the many accolades and stories that endeared him to us. We will all miss him.



Next Assembly Meeting

May 20-22, 2022 (New Orleans, LA)