



Association of Psychologists in Academic Health Centers

The Voice of Psychology in Academic Health Centers

APAHC Board Meeting Minutes

Thursday, August 4, 2011 9:00 – 11:00 A.M. E.D.T.

Present on Call: Drs. Cynthia Belar, Barbara Cubic, Barry Hong, Jerry Leventhal, John Linton, Lynn Peterson, Bill Robiner, Laura Schaffer, Cathy Schuman

- I. Call to Order: 9 AM
- II. Approval of Minutes of June 6, 2011: Approved
- III. President Report
- IV. Treasurer Report and Financial Matters: Dr. Dixon
 - A. Financial update: \$>19k, \$>10k savings; \$1k in endowment fund
 - B. Endowment/tribute fund in process. It might be possible to name the fund if an exceptional donor is identified. Discussed mechanisms for building this fund, solicitation via the Website, promoting it as a means of recognizing others, to honor somebody. The plan is to invest the funds and let it grow. At some point, after establishing sufficient base, it would fund board activities in a manner that would allow it to preserve principal. Contributions could be acknowledged on the website and in the e-newsletter. We might structure it like APF- discuss how much it can be released (e.g., 6%/year) so that it would sustain itself. Discretionary fund. Also there could be a new membership plus category (e.g., @ \$100) with the rest going to the tribute fund.
 - C. Discussed the need for a budget. The *APAHC Officer's Manual* specifies that there is to be an annual budget reviewed by the Board. When we revised the Officer's manual, we should specify when it needs to be reviewed by the board. Ongoing expenses include support is for AAMC/CAS membership; \$170/month to Lynn P per month. We need to be able to consider requests for research committee and CAS attendance. One possibility is a line item on the budget.
- V. Division 12 Updates: Dr. Hong/Lynn Peterson

Membership n APAHC is growing. There are likely to be changes in APA convention Programming. Divisions are likely to be getting fewer hours of programming at APA conventions in the future phased in over 3 years so that attendance may improve at the actual programs (i.e., to reduce competition among programs). Proposal is for Division 12 to retain only 42% of programming hours it currently gets. This will affect how many hours Division 12 gets a well as its sections, including what APAHC gets. It will be for a 3-year trial. There may be some ways of partnering between sections so co-sponsoring might get be a manner of maximizing our APA programming.
- VI. CAS Update (and other updates from Dr. Belar): Dr. Smith will be on the AAMC programing committee. Dr. Hong had been on it. Dr. Belar nominated

Dr. Smith for the Executive committee. She observed discussions of graduate education addressing similar issues to those that come up in psychology (e.g., people not going into academics; different generation of student- what does it mean for future of generation of knowledge and role models). Cynthia is also working on an upcoming meeting: Patient Centered Primary Care Collaborative. Educational Directorate is struggling to retain and grow training dollars. The Bureau of Primary Care had a good webinar on the value of psychology for primary care centers recently. The Webinar is still available.
<http://bphc.hrsa.gov/technicalassistance/trainings/index.html>. See attachments.

VII. Committee Reports/Discussion

A. Conference Committee: Dr. Schaffer

3 cities were favorites: Chicago led for past 3; Charleston and DC. 60 respondents. 1/4 had never attended a conference. Spring of 2013 was favored in DC. Chicago vs. DC was discussed and DC was recognized as having more opportunities (e.g., AAMC, AAHC, APA and NIH staffers). March was the month favored in the survey. There is a Langham in Chicago. In DC could get people from NIH and from AAMC. Respondents want career development. Discussion about looking for boutique hotels. Candy Wong would be a contact person at APA. Check with AAMC as well to see if rate discounts are available. Can contact Convention bureau. Final decision: Washington DC, Spring of 2013. **Mark your calendars and we will ask Dr. Wryobeck to put an announcement on the website.**

B. Membership Committee: Dr. Schuman Deferred. No news per Dr. Wryobeck.

C. Publications and Communication: Drs. Cubic

1. Journal/JCPMS: Dr Cubic mentioned that she and Drs. Hong, Leventhal, and Robiner would be meeting with Janice Stern
2. Website: Dr. Wryobeck
3. Newsletter: Dr. Moore is working on it and getting contributions.

D. Awards Committee: Dr. Linton brought the excellent plaques for the Awards Ceremony. 11:00 8/6.

E. APA 2011 Conference Schedule

1. Board Dinner: Thursday August 4th after the APPIC reception at 7:30 PM at Birstro D'Oc. Dr Robiner as recommended by Dr. Belar
2. Research Committee scheduled two meetings with Dr. Breckler.

F. Research Committee: Dr. Leventhal. Reviewed handout. There has been a longstanding relationship between APAHC and APA/CWS. There will be a meeting today with Steve Breckler, Ph.D. of the Science Directorate. Dr. Leventhal recognizes that is important for APAHC to be more actively involved in more research on the workforce. It is being restructured/restaffed. Gerry wants also to be working with the AAMC Workforce group. AAMC gets data from the deans of medical schools. Dr. Hong mentioned AAMC is willing to give some data, but we need to be judicious about what we ask for. In 2004, BEA tried to get better data on workforce. APAHC is important in putting pressure on APA to get good data. There is no reason (other than

funding) why APA shouldn't have a stellar workforce analysis. Bill Pate and Jessica Kohout and the rest of the staff are gone. They have provided some excellent data to APAHC in the past. Discussed the issues of private practice vs. integration into care.

Dr. Levenethal is requesting the Board's support for what we are looking for. See handout. APAHC needs to be more engaged. AAMC has improved their website. We need to see how we can help them so that it is a reciprocal relationship. AAMC tracks fulltime faculty. Question of whether volunteers and adjuncts are followed or can be. There are needs to track clinicians, educators and researchers.

Dr. Leventhal requested a budget to permit work to proceed. AAMC wants to track physician education. The timing is good for this due to interprofessional professionalism is an issue. They might be interested in how much behavioral work is going on. There was discussion about the possibility of working with specific physician subgroups (e.g., family medicine, peds, psychiatry). It is essential to determine the most pressing questions and develop target strategies for obtaining and disseminating the data. It is advised that we not focus on salary, but also on other aspects of the workforce (e.g., activities).

The Board decided to support the intent and provide funds. Going forward, the Research Committee chair will be on the board calls. Board will continue to address how to budget (e.g., perhaps a line item).

Dr. Linton discussed the evolution of APAHC. We previously were focused on trying to have the organization continue and should be focused on what are the most critical functions to serve.

In working with partner organizations, can we identify what is in it for APA and for AAMC? APAHC never had primary research role, but rather was more passive. How can the research be better weaved into the fabric of the organization? One way to draw on greater resources it to promotes alliances with APA and AAMC.

Other roles for research committee- topics being taught (behavioral science e.g., one quarter of MCAT test will be behavioral according to Dr. Hong) Geoffrey Young, Ph.D. might be a good contact at AAMC. Daryl Kirch at AAMC is a psychiatrist who was supervised by Carl Zimet. His wife is a psychologist. He may be open to addressing the psychology issues.

Proposal is to formalize Research Committee and the Chair's participation as a non-voting member of the Board.

VIII. Bylaws revision: Plan is to update bylaws and Officer's Manual. Dr Schuman

IX. Next APAHC Board Conference Call: **Monday September 12, 2011 @ 5:00 P.M. E.D.T. Note it is 1 week later than usual.**

X. Adjourn: 11:00 am

Respectfully submitted,

William Robiner, Ph.D.