APA Official Actions

Reports to the Membership

The following are edited versions of the annual reports of the APA Secretary-Treasurer, Medical Director, Speaker, and Speaker-Elect and the chairpersons of the APA Committee on Bylaws, Membership Committee, Committee of Tellers, and Elections Committee. The reports of the Secretary-Treasurer, Medical Director, and Membership Committee have been abbreviated; full versions of most can be obtained from the Central Office or APA web site, as indicated in each report. The full reports were presented at the APA annual business meeting in Toronto on May 21, 2006.

Report of the Secretary-Treasurer: Actions of the Board of Trustees

Carolyn B. Robinowitz, M.D.

It is my constitutional duty and personal privilege as Secretary-Treasurer of APA to report to the membership on the actions taken by your Board of Trustees over the past year. Following are some of the highlights.

Membership

Membership in APA continues to rise. The total number of members in dues-paying categories increased by 1,400 from January 2005 to December 2005, with increases in the General Member, Fellow, and International Member categories. The Membership Committee has explored many new strategies for recruitment and retention, including paying dues month-by-month automatically by credit card, automatic advancement for Members-in-Training to General Member status, and an automatic district branch transfer process, and has worked with the district branches to support membership recruitment initiatives. We are monitoring the Centralized Membership Pilot Project, to which 92% of district branches have subscribed. Ancillary benefits for members have expanded (new features include discounts on electronic payment services, on E-Pocrates products, and on DHL shipping services).

District Branch Support

With the support of APA staff, administrators of district branches and state associations are actively sharing expertise and developing new resources. The central organization continues to provide both financial and operational support for membership, advocacy, and other priority district branch activities.

Finances

APA budget and finances have become increasingly transparent, with details available to members on our web site. APA's Financial Oversight Committee confers with staff on a monthly basis to assure that income and expenditures stay within budget. The board selected new investment advisers and reviewed and revised, as appropriate, investment policies. The board also reviewed the results of the audit of APA and its subsidiaries conducted by newly appointed auditors. These results documented APA's strong financial health and sound operational policies.

Organizational Structure

The board approved appointing the Member-in-Training Trustee and Member-in-Training Trustee-Elect as ex officio members of the Committee of Residents and Fellows, and it encouraged the committee and the Assembly Committee of Area Member-in-Training Representatives to develop a proposal for the most effective structure and interaction of these groups to strengthen representation and participation of residents in association governance.

Liaisons

APA has become a member of the Ambulatory Care Quality Alliance and the Commission on Accreditation of Rehabilitation Facilities. Both will address issues of quality improvement in psychiatric services. APA continues to be active in the American Medical Association/National Medical Association Commission to Eliminate Health Care Disparities, and APA has developed its own public and professional education efforts in this regard. We continue to work closely with the National Alliance on Mental Illness and other advocacy groups. An ad hoc work group of the board has been charged to review APA liaisons and make recommendations for related organizational structure.

Information Technology

Implementation of the new association management system continues on schedule. The APA web site has been modified to enhance availability of up-to-date information. Our members seeking continuing medical education and preparation for recertification can find the information they need and track their own progress on the web site.

Education and Professional Development

The journal *FOCUS* remains very successful, as does Grand Rounds On-Line. A video course has recently been added to our online offerings. The Curriculum Resource Guide for Cultural Competence is available in its entirety on APA's web site (http://www.psych.org/psych_pract/clin_issues/populations/elderly_toc.cfm). Our annual meeting in May is the largest scientific psychiatric meeting in the world and offers a broad array of educational activities. Attendees' evaluations remain highly positive.

Public Education

In 2005, APA launched an exciting new public information campaign: "Healthy Minds, Healthy Lives." Informed by the findings of focus groups with target audiences, this campaign has been visible through public service announcements and its own web site (http://www.healthyminds.org/). The next phase of the campaign begins in late April.

Government Relations

The leadership and staff of APA have contributed APA's expertise, time, and funds in states all over the country to counter attempts to legislate permission to practice medicine for practitioners who have not attended medical school. Spearheaded by dedicated district branch and state association members, and in spite of huge sums and efforts invested by our opponents, our efforts have, for the most part, been highly successful. APA has joined the American Medical Association (AMA) Scope of Practice Partnership to address issues affecting all physicians and patients.

APA has responded actively to Food and Drug Administration hearings on selective serotonin reuptake inhibitors (SSRIs), stimulants, and other issues, providing expert testimony and preparing informational documents for the press and the public. We have also testified, by invitation, about several bills in Congress, and we have worked to end the discriminatory Medicare copay-

ment for psychiatric services. Advocacy Day, held in March, provided an excellent experience for the attendees, including a number of residents who have been active in advocacy issues as well as in APA's political action committee.

APA has been active in addressing the issues raised by Medicare part D, and in particular, problems faced by persons who have "dual eligibility" for both Medicaid and Medicare, joining a coalition of health and mental health organizations (http://www.mentalhealthpartd.org) to work with the Department of Health and Human Services, Congress, and appropriate state agencies.

Publishing

American Psychiatric Publishing, Inc. (APPI), is the largest and finest psychiatric publishing house in the world. Many of our books and journals are translated into other languages. APPI continues to contribute financially to APA while at the same time publishing less profitable books that are important to psychiatric clinical care, teaching, and research. Dr. Robert Freedman has been appointed Editor-in-Chief of *The American Journal of Psychiatry*, succeeding Dr. Nancy Andreasen; Dr. Daniel Pine was appointed Deputy Editor.

Hurricane Katrina

APA worked closely with the many government agencies and nongovernment organizations to address the impact of Hurricane Katrina, with a special focus on clinical needs of persons with preexisting psychiatric disorders, the response to trauma, and the impact on psychiatrists, devoting a special section on APA's web site to disaster issues (http://www.psych.org/disasterpsych). The board established a Disaster Recovery Fund for psychiatrists and residents, providing grants to Tulane University and Louisiana State University to support recovery efforts. The board also invited presentations from district branch leaders in the affected areas.

Position Statements

The board authorized an ad hoc work group composed of Board of Trustees and Assembly members to develop a draft position statement on psychiatric participation in interrogation of detainees, for presentation to the Assembly and board in May 2006.

Newly approved position statements include the following:

- 1. Mentally Ill Prisoners and Death Row.
- 2. Death Sentences for Persons With Dementia or Traumatic Brain Injury.
- 3. Publication of Findings From Clinical Trials.
- 4. Use of the Concept of Recovery.
- Adjudication of Youth as Adults in the Criminal Justice System.
- 6. Support of Legal Recognition of Same-Sex Civil Marriage.
- 7. College and University Mental Health.

The board approved implementation of the action plan for the Assembly action paper "Independent Appeals Mechanisms for Disputed Managed Care Denials of Treatment" and distributed model legislative language to the district branches or state associations in the six states that have no formal independent appeals process. The board also approved "Changes to Procedures for Handling Complaints of Ethical Conduct" and reviewed the work of the task force charged to edit ethics annotations.

Task Force Reports

The board accepted the report of the Task Force on Prevention of Mental Disorders and Promotion of Mental Health and approved a corresponding committee with the same title and charge. The report of the Task Force on Research Ethics was also accepted for publication in an issue of *Schizophrenia Bulletin* devoted to research ethics.

Practice Guidelines

The following practice guidelines were approved: Practice Guideline for the Psychiatric Evaluation of Adults, 2nd ed. [published as a supplement to the June 2006 issue of the *Journal*]; Practice Guideline for the Treatment of Patients With Eating Disorders, 3rd ed. [supplement to the July 2006 issue of the *Journal*]; and Practice Guidelines for the Treatment of Patients With Substance Use Disorders, 2nd ed. [supplement to the August 2006 issue of the *Journal*].

Mental Health on College Campuses

The board authorized continued funding for the Presidential Task Force on Mental Health on College Campuses.

In closing, I would like to thank the hardworking and skilled APA staff and my colleagues on the board, in the Assembly, and in the membership, for their support and their invaluable contributions.

Actions taken by the board can be viewed at the Members Corner of the APA web site (www.psych.org); click on "APA at a Glance" and then "Board of Trustees," or use the address http://www.psych.org/members/download.cfm?file=1033. Financial reports are also available in this section of the Members Corner (click on "Financial Information").

Report of the Secretary-Treasurer: Financial Status

Carolyn B. Robinowitz, M.D.

Overview

The financial position of the Association (American Psychiatric Association, American Psychiatric Publishing, Inc., American Psychiatric Institute for Research and Education, and American Psychiatric Foundation) continued the positive trend seen in 2004, finishing 2005 with a surplus and with no borrowing needed. This trend can be attributed to a strategic focus on strengthening APA's financial position through management's stringent spending controls, pursuit of other streams of revenue, and leadership oversight of financial matters. In 2005, the net results were positive, primarily because of higher revenue from annual meeting registration, publishing, and federal awards. During the year, the Board of Trustees voted to commit any surplus for the year to the Reserve Replenishment Fund, demonstrating APA's commitment to building reserves.

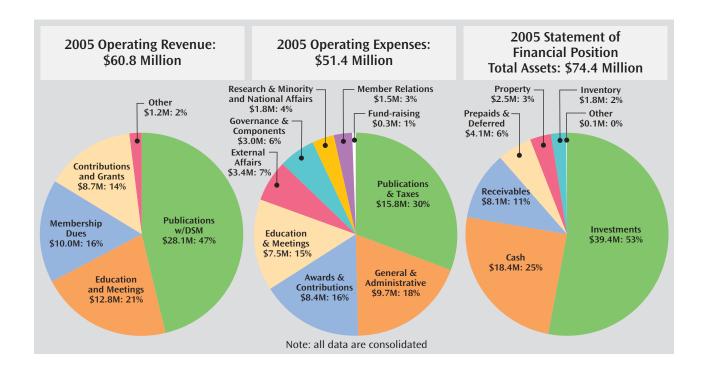
December Statements

In 2005, the Association experienced a net surplus from operations, before investment income and transfers to and from reserves, of \$6.7 million. Audited financial statements are available on request from the Finance and Business Operations department (703-907-7343 or CWilliams@psych.org) and at the Members Corner of the APA web site (www.psych.org) under "Financial Information" in the "APA at a Glance" section.

The investment income for 2005 of \$2.7 million includes \$379,000 in unrealized gains attributable to stock market performance, \$1.3 million in interest and dividends, and \$1.2 million in realized gains since Dec. 31, 2004.

Membership Dues

The receipts from membership dues of \$10 million in 2005 slightly exceeded the budget. The total number of members in dues-paying categories increased by 1,400 from January 2005 to December 2005 with increases in the General Member, Fellow, and International Member categories.



Cash and Investments

As of Dec. 31, 2005, cash and cash equivalents totaled \$18.4 million, which was slightly less than the prior year's balance of \$18.6 million. The investment in marketable securities on Dec. 31, 2005, was \$6.2 million higher than on Dec. 31, 2004, because of a transfer of \$4 million into the investment pool as well as an increase in investment portfolio performance. Borrowing to cover cash flow needs was not necessary in 2005 and is not anticipated in 2006.

Fiscal Management

The Financial Oversight Committee continued to meet regularly during 2005 to review current financial activity. The committee was established at the end of 2001 to oversee the implementation of the annual financial plan of the organization. The Financial Oversight Committee is charged with reviewing the year-to-date financial results, the year-end projections, the cash position, cash forecasts, borrowing activity, and the use of investments. The committee also establishes and approves course corrections to ensure that budgetary goals are achieved; such corrections include reallocating budget line items, reviewing staff proposals to reduce or eliminate expenses, and approving the implementation of a contingency plan should one be necessary.

Audit Report

The results of the 2005 audit resulted in a "clean" opinion and indicators of positive financial health stronger than the industry average. There were no reportable conditions or material weaknesses. The auditor rated APA to be in the top five of the 400 non-profit organizations reviewed by that auditing firm.

Funding From Industry

We are completing an analysis of industry financial support for APA activities. Such revenue derives from display advertising and exhibits, as well as support for educational fellowships and industry-supported symposia at the annual meeting.

Financial Data

The figure displays APA's financial position and revenue and expenses for 2005.

Conclusions

The 2005 year-end results are positive and exciting, and the 2006 budget is balanced with a line item for a contribution to the Association's reserves. Several years ago, the APA Board of Trustees established a preliminary reserve target of 40% of operating expenditures. I am pleased to report that APA has met this target as of January 2006. Overall, the Association's financial condition continues to improve. Net income from revenue-producing activities, which funds many of the Association's initiatives, remains stable. With increased oversight and accountability mechanisms, spending is steady and focused. The cash situation is the strongest it has been in years. Levels of long- and short-term debt are minimal. I am confident that by continuing to follow prudent spending policies and building up the reserve, while seeking alternative revenue sources, the Association is building a solid foundation for the future.

Report of the Medical Director and CEO

James H. Scully, Jr., M.D.

Our many accomplishments in 2004 formed the foundation of our projects, activities, and achievements during the past year, which are highlighted in this report.

Finance and Administration

Financial trends for the Association have been positive for the past three consecutive years, resulting in a budget surplus each year. These surpluses have allowed us to build up critical reserves, which will help to provide long-term financial stability for the Association. Although we ended with a surplus, we faced several revenue challenges in 2005. Display advertising revenue was down as well as attendance at the annual meeting in Atlanta.

The Association Management System went live on July 2—on time and under budget. During phase I, the staff of the membership, answer center, association governance, and accounts receivable departments began using The Integrated Membership Services Solution (TIMSS) as their primary member management system. Phase II involves the American Psychiatric Foundation and the education, advocacy, and HIV/AIDS departments.

The Office of Information Systems completed the extension of the Association Management System to the offices of the district branches and state associations by means of a new web portal. This new portal allows the staff in those offices to manage member data, marking the first time that they are able to bypass manual processing of address changes and data extractions.

Education

APA received the status of "Accreditation With Commendation," the highest level of approval from the Accreditation Council for Continuing Medical Education. APA satisfied the council's requirements for each essential area and policy and achieved exemplary compliance in areas of educational planning, evaluation, and administration.

The Division of Education convened a meeting with colleagues from the American Academy of Family Physicians, the American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, the Alliance for Academic Internal Medicine, and the American College of Surgeons at APA headquarters in December. This was a follow-up to the APA President's education summit, "Educating a New Generation of Physicians in Psychiatry," held earlier in the year. A collection of papers from the summit will be published in an upcoming special issue of *Academic Psychiatry*.

Staff worked in collaboration with the Medical and Professional Society of St. Elizabeths Hospital to celebrate the hospital's 150th anniversary. Staff coordinated registration and documentation of continuing medical education for a two-day educational symposium that boasted a roster of national experts with presentations on the history of psychiatry, psychiatric research, forensics, and the role of public mental hospitals. Over 200 participants attended the symposium and gala reception, and the very well-received program has been preserved on audio CD-ROM.

Research

The Committee on Psychiatric Diagnosis and Assessment established work groups to assist in the development of a research planning agenda for the next edition of DSM. These groups have begun their work to explore future research directions to better accommodate a variety of issues in diagnosis and treatment of mental illness.

International Affairs

The Office of International Activities helped create APA's response to the Asian tsunami crisis. The national response involved working closely with APA leadership, district branches, the Council on Global Psychiatry, and all APA departments and subsidiaries. Contact was made with external groups, including representatives from the U.S. Department of State, the Department of Health and Human Services, the Centers for Disease Control and Prevention, the Substance Abuse and Mental Health Services Administration, and the National Center for Post-Traumatic Stress Disorder. Internal efforts were coordinated through a partnership of the World Psychiatric Association, APA leadership, and the Committee on Psychiatric Dimensions of Disasters.

Minority and National Affairs

Staff of the Office of Minority and National Affairs (OMNA) launched "OMNA on Tour" at Howard University Hospital in Washington, D.C., during the winter meeting of the American Association of Community Psychiatrists, held on Jan. 22, 2005. The

goal of "OMNA on Tour" is to bring together key stakeholders to mobilize communities around the nation to take action to eliminate disparities in mental health care among minorities. OMNA staff worked with district branch and state association staff to plan "OMNA on Tour" meetings in Chicago and Philadelphia.

The "Real Psychiatry: Doctors in Action" recruitment video, created and produced by OMNA and the Division of Education, received the 2005 CINE Award of Excellence. CINE provides awards for excellence in documentary and other informational film and video production. Since its release, over 400 orders have been received from the United States and abroad. The video was shown at meetings of the American Association of Directors of Psychiatric Residency Training and the Student National Medical Association.

Advocacy

Advocacy Day was held in Washington, D.C., on March 13–16, 2005. APA again hosted the Academic Consortium meeting in Washington, D.C., on April 13–14. Leading researchers joined by patient advocates participated in a 2-day program of education, information, and lobbying.

APA is one of several specialty societies that has joined with the American Medical Association (AMA) to establish the Scope of Practice Partnership, an unincorporated association of the AMA and the national medical specialty societies organized to coordinate advocacy efforts related to scope of practice issues that concern the federation of medicine.

Last year the Centers for Medicare and Medicaid Services issued final regulations on the new part D prescription drug program for Medicare that was slated to go into effect on Jan. 1, 2006. This had major implications for access to clinically appropriate medicines for over 40 million Americans covered under Medicare, especially those people who are dually eligible for both Medicare and Medicaid. Staff worked with a coalition of other mental health groups to create a web site (www.mentalhealthpartd.org) where psychiatrists and other mental health clinicians can obtain educational materials about the new Medicare prescription drug benefit.

The national public information campaign was designed to heighten the profile of psychiatry and to improve public awareness of mental illness. In early 2005, the research phase—phase I of APA's major campaign—was completed. Through focus group sessions, the public relations firm Porter Novelli tested messages that will resonate with the public and help define the profession of psychiatry and reduce stigma. Phase II, the brand-positioning phase, took place during February and March and included translating the research findings into public messages. The campaign was launched in May 2005.

American Psychiatric Foundation

Olympic gold medal diving champion Greg Louganis was the featured guest and speaker at the fourth annual "Conversations" event in Atlanta during the 2005 APA annual meeting. Louganis, who is HIV positive, has battled depression throughout his life and has attempted suicide three times.

Implementation of the pilot phase of the Teen Mental Health Education Program, called "Typical or Troubled," continued in Denver in conjunction with the Colorado Psychiatric Society. The goal of the program is to encourage the development of a model school environment that fosters early detection of mental illnesses and referrals to appropriate services and treatment.

For the last few years, the foundation has been involved with the "Elimination of Barriers Initiative," which is an antistigma public education program sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The program hosted an awards reception in July at the Hollywood Entertainment Museum in Los Angeles, and the foundation was an event sponsor. The awards recognize entertainment writers, producers, and directors who positively portray persons with mental illness in movies and on television along with individuals who have overcome the stigma of mental illness to seek care.

American Psychiatric Institute for Research and Education

"Mental Illness Public Education Campaigns: Do Psychiatrists Believe They're Effective?" is the title of an electronic survey that was mailed to a random sample of 2,000 APA members. In addition to assessing psychiatrists' general attitudes toward mental health public education campaigns and the credibility of campaigns sponsored by different groups and organizations, it specifically asked the respondents how they would prioritize several different general campaign themes and specific disorders of interest to the American Psychiatric Foundation for future public education campaigns.

APA implemented an initiative to improve treatment of depression in primary care and psychiatric practice settings in collaboration with the American Academy of Family Physicians and the American College of Physicians. With direct support from the American Psychiatric Foundation, \$1.14 million was committed from six pharmaceutical companies to fund this study. The specific aims of this collaboration are to 1) assess the clinical utility of a simple quantitative instrument, i.e., the nine-item Patient Health Questionnaire (PHQ-9) to measure the severity of depression and 2) test office systems and management strategies that optimize monitoring of depression in routine clinical practice.

"The Future of Psychiatric Diagnosis: Refining the Research Agenda" is the public title of a 5-year, \$1.1 -million research planning project designed to 1) assess existing scientific knowledge relevant to psychiatric diagnosis and classification systems and 2) promote research that will expand and strengthen the science base for DSM-V and upcoming revisions of other international classifications, including ICD.

American Psychiatric Publishing, Inc. (APPI)

Dr. Howard Goldman, Editor of *Psychiatric Services*, worked with representatives of SAMHSA's Center for Mental Health Services to finalize a \$70,000 contract between the journal and that agency. Dr. Goldman asked the center to subsidize the journal's publication of a series of 15 articles that describe efforts at the federal and state levels to implement the recommendations of the New Freedom Commission on Mental Health.

Foreign translations for APPI publications have grown significantly over the last 5 years. In 2000 foreign translations brought in \$283,000, and in 2004 that revenue grew to \$477,000. Although the majority of APPI books are translated into Spanish, Italian, Japanese, Dutch, and German, recent translations have been done in Slovak, Croatian, Farsi, Turkish, Portuguese, Hungarian, and Czech

APAPAC

The APA political action committee (APAPAC) enjoyed its most successful year in 2005. APAPAC received \$246,000 in voluntary contributions from 1,690 APA members and staff, surpassing its goal of "Two Hundred Five in 2005." In comparison, 1,450 APA members and staff contributed \$182,000 to APAPAC in 2004. The 2005 contributions are a 35% increase over 2004 and a 17% growth in membership, a great record for any political action committee. APAPAC contributed \$233,500 to 122 candidates for Congress (representing 43 states) and other party-affiliated political committees in 2005. APAPAC hosted events for 67 members of Congress and enabled APA members to meet personally with 24 members of Congress to deliver contributions.

Report of the Speaker

Joseph E.V. Rubin, M.D.

We have just concluded yet another Assembly meeting in the service of our patients and our profession. We have made progress in many ways. Yet despite tremendous effort and work,

many of the problems we face remain unresolved, and others we never dreamed of are joining them. There is plenty for us to do.

Consider the ways the mentally ill have been treated throughout history, and it is not hard to find much to feel proud of. We have training programs that teach young doctors how to identify and treat a variety of specific disorders of the mind, and disorders of the body that affect the mind. We have research institutions and techniques that help us learn the causes of psychiatric afflictions, and the strategies that work most effectively to treat them. What changes there have been in those capabilities! To various psychotherapies, themselves increasingly supported by research evidence, have been added a tremendously powerful and rapidly expanding armamentarium of biologically based treatments. Furthermore, there is no doubt that the fear and loathing with which the mentally ill have been confronted in the past are markedly diminished. Stigma still exists, and it prejudices much of the way provision and payments for psychiatric treatment are structured, to the detriment of our patients. Yet most in society today would agree that the mentally ill are entitled to humane care, to being treated with dignity and respect, and to access to the best and most effective treatments available. We must continue to work to bring those ideals to fruition.

APA is a huge and diverse organization. Its goals are those I have just mentioned. Structured to incorporate the views and talents of our members, district branches, state associations, earlycareer psychiatrists, members in training, minority groups, and allied organizations, it may at times seem cumbersome and its governance intricacies arcane. Nevertheless, it is a determined force for good in our field, and we of the Assembly constitute one of its driving engines. We ask, we demand, we advise, we quarrel, we initiate ideas, we support the board, and we take the board to task. Sometimes I wonder, could we do all this as well if we were ourselves the body with fiduciary responsibility, as some among us would like to see come to pass? Maybe, and maybe the boardlike body should be elected from the Assembly membership, sort of as the Assembly Executive Committee now is. It surely would save some money and a lot of time and effort in electioneering. It is something to think about.

As for the Assembly now, we've kept as busy as we should be. The actions before us over the last year covered the spectrum of psychiatric subjects. Some were governance related, but not too many, and there is plenty of substance to go around. Our Association's relationship with the pharmaceutical industry has remained a hot topic. There is no doubt that we all need to better understand our interdependency. Perhaps it needs to be restricted, but only if we know what would be lost by doing so. Also on the agenda this year were papers related to access to treatment, advocacy, and membership recruitment and retention and a proposed position paper on the ethics of psychiatric participation in interrogations.

This meeting has differed from the November 2005 meeting in that we had 29 action papers to consider. They ranged from the simple to the complex and the inexpensive to the optimistic. They all have merit but cannot all be done. There is no doubt that the Assembly is the engine of ideas for APA. The challenge is to understand the papers' ideas, push for those we value most highly, and advocate approval and funding by the board where necessary. We must not be distracted by an excessively process-oriented agenda, but we cannot ignore the need to make changes in our governance when those will result in better service to our members and patients. The call for patient-oriented action papers has been successful and is laudable; let us be aggressive in the interest of membership needs as well.

We had a presentation by the chairperson of the Committee on Public Affairs, updates from the membership retention and recruitment work groups, an important presentation on Medicare part D, and a status report on psychiatric services in Iraq, among others.

We are meeting in Toronto, an exciting and cosmopolitan city, a Canadian city. It is a good time to renew our awareness as an organization that we have many Canadian members. Much of the work we do in response to the outrageous insults we and our patients suffer south of the border is related to our indefensibly flawed systems of reimbursement. We have to remember that our Canadian members have needs of us too, and they may differ sub-

stantially from those we are most used to addressing. Let us use this Toronto meeting as a new opportunity to talk to and, more important, listen to our Canadian members.

At this meeting, past Speaker (and past President) Richard Harding and I asked all Assembly members to renew the Assembly's historic support for the Assembly Profile of Courage Award. This important award, founded a decade ago, has always been the Assembly's to fund and confer. There is no better place within APA to honor heroic actions of members in the presence of a large number of their assembled colleagues. The fund, never large, has been gradually diminishing and must now be replenished.

Unfortunately, another fund requires an infusion of APA member donations at this time. The Disaster Recovery Fund for Psychiatrists, the idea for which originated last fall in the Assembly, has been depleted in support of APA members' needs in the states stricken by the hurricanes of last summer and fall. This fund, now managed by the American Psychiatric Foundation, offers grants of up to \$2,500 to psychiatrists who are putting their lives and practices back together. Right now the requests for assistance far outweigh the available monies. For this and for the Profile of Courage Award, I have asked all Assembly members to give generously.

We are approaching the end of the APA year and with it the end of the terms of all APA officers, myself included. I have mixed feelings about this. There never is enough time to do all the work we would like to do and never enough money either. On the other hand, it has been an exhausting year for me and to a degree for the other Assembly officers as well. I'll get a rest, a little one anyway, but the Speaker-Elect will be challenged as he advances, and the new Speaker-Elect and Recorder, whom we elected at this meeting, will barely have time to catch their breath. Their first full Assembly Executive Committee meeting in their new positions is just 6 weeks away.

Ironically, the part of Assembly work that I like the best has been the most demanding. This is traveling to the area councils' fall and spring meetings. Given the demanding APA meeting schedules, some of them are inevitably scheduled on the same dates, so deciding where to go when that happens is not always easy. As I have said before, these meetings are where the best work of the Assembly is done. There is something about the small group settings-familiarity with one another and mutual trustthat is conducive to productivity. Although I have not made it to every meeting, I have visited every APA area, most more than once, and a couple of district branches to boot. I am grateful to so many APA members for their generous hospitality to me and to my wife June, when she has been able to travel with me. And while I am on the subject of gratitude, the single most unexpected aspect of this position for me has been the widespread expressions of support I have received from Assembly and other APA members all over the map. I feel blessed with more friendship than I could have ever imagined.

I have been lucky to be supported this year by Speaker-Elect Michael Blumenfield, Recorder Jeffrey Akaka, Parliamentarian and past Speaker Al Herzog, and the rest of the Assembly Executive Committee. I also am indebted to the Association Governance staff at APA; I now know so much better how invaluable they are.

We all know how much work there is to do, and we all have dedicated ourselves to doing what we can. This is what makes our Association strong, and I'm proud and grateful for having had the opportunity to be your Speaker. Thank you all.

Report of the Speaker-Elect

Michael Blumenfield, M.D.

It has been an honor and a privilege to have served as Speaker-Elect. I have had the opportunity to work closely with Dr. Joseph Rubin, who has been an outstanding Speaker and a mentor to me. I have also been fortunate in collaborating with President-Elect Dr. Pedro Ruiz, with whom I have cochaired the Joint Reference Committee and whose vast knowledge of APA and creative approach to solving problems I have come to appreciate. I look forward to becoming Speaker of the Assembly and serving APA with Dr. Ruiz as he becomes President.

As Speaker-Elect I served on several important APA committees as well as the Board of Trustees. I continue to be impressed with the dedication and skills of so many psychiatrists, both in and out of the Assembly. I believe that the working relationship between the Assembly and the Board of Trustees is at an all-time high. The creativity and the relevancy of the actions coming from the Assembly are able to shape and speak for the varied concerns and interests of American psychiatry.

I have visited all the seven area councils at least once and have come to appreciate the varied styles and leadership approaches across the country. There was a unifying theme that they all had in common, and that was an enduring interest in improving the mental health care of our patients and maintaining the highest ethical standards of our profession. The thoughtfulness of the numerous action papers that were presented at the Assembly, the hard work of our reference committees, and the passion of some of the debates should make us all proud to be psychiatrists.

For the past few years I have worked on the project of allowing APA members to best understand the workings of the Assembly and develop a communication channel with their Assembly representatives. Thanks to the assistance of our APA staff, this year the Member's Corner of the APA web site (www.psych.org) will continue to have user-friendly access to all pending action papers in advance of the Assembly, but members will now also have an easy method on the web site for direct communication between themselves and their Assembly representatives. This development is being widely publicized in *Psychiatric News* as well as in district branch newsletters.

As an officer of the Assembly, I served as a member of the APA delegation to the American Medical Association (AMA). I had the opportunity of observing the use of electronic voting in the AMA House of Delegates. I am working with APA staff to investigate the feasibility of bringing this impressive modern technology to the Assembly. I am sure that in the near future, this time-saving, efficient instrument for democracy will become part of our Assembly.

The concerns about terrorism and disaster are of great interest to the members of the Assembly, who are leaders in the psychiatric community throughout the United States. It was for this reason that I chose the theme of "Crisis Communication in Disaster" for the Speaker-Elect Forum and invited Dr. Ann Norwood, former chairperson of the Committee on Psychiatric Dimensions of Disasters, and Lydia Sermons Ward, Director of the APA Office of Communications and Public Affairs, to join me for presentations. We all have been acutely aware of the impact of Hurricanes Katrina and Rita on the country, which affected many of our members in Louisiana, Mississippi, and Texas. I am sure that we are proud and appreciative of the efforts of APA and individual members of the Assembly during this difficult time.

During my year as Speaker, I will work very hard to be responsive to my colleagues in the Assembly. I will work together with other Assembly officers to develop and shape APA policy and actions that will serve our patients and our members who care for them. We are fortunate that we have an outstanding APA staff, including Lori Klinedinst, Margaret Dewar, Carol Lewis, Ardell Lockerman, and so many others who are part of the APA team led by Dr. Jay Scully.

I cannot predict which will be the specific challenges of the next year, but I am optimistic and confident that the Assembly will be up for the task. I appreciate the trust given to me as incoming Speaker, and I will do my best to serve the Assembly and APA.

Report of the Committee on Bylaws

William C. Wood, M.D., Chairperson

The members of the Committee on Bylaws are Dr. William C. Wood, chairperson, and Drs. Robert A. Kimmich, Louis A. Moench, Ramaswamy Viswanathan, D. Blake Woodside, and Isabel K. Bergman.

This has been another relatively quiet year for the bylaws committee. The Board of Trustees asked the committee to prepare amendments to four sections of the APA bylaws. Bylaws amendments approved by the Board must be ratified by a two-thirds vote by strength of Assembly members present at a meeting at

which a quorum is present. The Board of Trustees approved these changes at its March 2006 meeting and forwarded them to the Assembly for ratification at its May 2006 meeting. [The Assembly ratified the first three amendments but did not ratify the fourth amendment to create a new Chapter Six, Section 3.]

The amendments are presented in the following with brief histories of their origins. Deletions appear in brackets, and additions are underlined.

The first and second amendments are to Chapter Five, Section 5, and Chapter Five, Section 10, to change the name of the Budget Committee to the "Finance and Budget Committee" and to change the name of the Reference Committee to the "Joint Reference Committee." The first change was made on recommendation in October 2005 from the Finance and Budget Committee that there be only one committee with the composition, tenure, and functions as defined for the Finance and Budget Committee in the APA Operations Manual. The second change was made in keeping with the current practice of calling the Reference Committee the Joint Reference Committee.

Chapter Five. Councils, Committees, Boards, and Other Organizational Entities

Section 5.5, Identification of Standing Committees; Designation. There shall be the following standing committees: Ethics, Membership, Nominating, Bylaws, Budget, Finance and Budget, Tellers, Elections and Joint Reference. The functions and procedures of such standing committees shall be established from time to time by the Board and published in the Operations Manual. The Board, upon the recommendation of the President, shall establish or eliminate such other committees, councils, commissions, boards and other special organizational entities as may be necessary to implement the objectives of the Association. The Board, upon the recommendation of the President, shall designate the chairperson and members of each standing committee and each other committee, council, commission, board or other organizational entity from among the voting members, provided that any committee, council, commission, board or other organizational entity exercising the authority of the Board of Trustees in the management of the Association shall consist only of trustees.

Section 5.10, <u>Joint</u> Reference Committee. The <u>Joint</u> Reference Committee shall act upon the concerns of the several councils and commissions and refer matters from the councils and commissions to the Board and/or the Assembly and from the Board or Assembly to them. It shall be comprised of the President-Elect, who shall be the chairperson; the Speaker-Elect of the Assembly, who shall be vice-chairperson; two members of the Board of Trustees; two members of the Assembly; and the Medical Director. Ex-officio nonvoting members shall be the chairpersons of the councils and commissions.

The third amendment is to Chapter Two, Section 5, to ensure clarification of the dual membership requirement. This amendment was made on recommendation in December 2005 from the Ad Hoc Work Group on APA/DB Dual Membership Policy.

Chapter Two. Members

Section 2.5, Good Standing. [To maintain membership in good standing, all members,] No person, except as exempted by the Board or as otherwise provided in these bylaws, shall become or remain a member of the Association unless that person is a member [are required to maintain membership in] of a District Branch and [to] participates in continuing education according to the standards of the Association.

The fourth amendment, also on recommendation from the Ad Hoc Work Group on APA/DB Dual Membership Policy, creates a new Chapter Six, Section 3, to further reaffirm the dual membership requirement and to allow future changes in criteria governing district branches. The current sections 6.3–6.5 would be renumbered 6.4–6.6, respectively.

Chapter Six. The Assembly And The District Branches

Section 6.3, Membership Requirement. No organization shall be recognized, or retain its status, as a District Branch unless all of its members are members of the Association. The Board may set additional requirements for organizations seeking to be recognized or to retain their status as District Branches.

Report of the Membership Committee

Mary Marrocco, M.D., Chairperson

Following are highlights of APA membership changes in 2005:

- New Medical Student Members totaled 724 for 2005, a decrease from the 886 new Medical Student Members in 2004.
- New and reinstating Members-in-Training totaled 1,229 for 2005, a slight decrease from the 1,431 Members-in-Training in 2004.
- New and reinstating General Members totaled 1,025 for 2005, a slight decrease from the 1,138 new and reinstating General Members in 2004.
- New and reinstating International Members totaled 341 for 2005, a 15% increase over the 295 new and reinstating International Members in 2004.
- Member class advancements from Medical Student to Member-in-Training totaled 194 for 2005, more than double the 71 advancements in 2004.
- The number of Members-in-Training advancing to General Member status totaled 683 for 2005, a slight increase over the 662 in 2004.

New (N=1,419) and reinstating (N=1,257) dues-paying members totaled 2,676. Dues-paying members who were dropped (N=2,105) or resigned (N=158) totaled 2,263, for a net gain of 413 in 2005. This compares to 2,929 gains and 1,895 losses in 2004, which was a net gain of 1,034 members.

The 2005 dues year is the second dues cycle in which there was no longer a 90-day grace period in which to pay one's dues. Members were required to pay 2005 and prior dues by Dec. 31, 2005, or their membership was terminated. The member retention program began in October 2005, when the first mailing was sent to members still owing 2005 dues and rosters were sent to district branches. Approximately 4,100 members still owed 2005 dues at that time. Postcard reminders and subsequent letters were sent over the following months. The final drops were processed on Jan. 30, 2006, with a final drop count of 1,664. Several hundred members who were dropped paid their 2005 dues in order to administratively reinstate their membership by the end of March 2006.

Calling program information was sent to the district branch executives, Assembly members representing branches, and Board of Trustees members in November 2005. This packet included strategies for calling members, speaking points, sample scripts, frequently asked questions and answers, and fax-back forms to report member contacts to APA. The district branches played a very critical role in the retention efforts again this year. They established calling programs, conducted e-mail and letter campaigns, and posted notices in their newsletters or on their web sites requesting members to pay dues.

At its May 2005 meeting, the Membership Committee designated two new ad hoc work groups, one for membership recruitment and another for member retention. At the committee's request, representatives from the Assembly and the Council on Member and District Branch Relations were also appointed. The charge for each work group is to discuss strategies and develop an overall plan for recruitment and retention for APA and the district branches.

A draft of the recruitment and retention plan will be distributed to the Assembly and district branch presidents and executives for feedback before a final report is submitted to the Board of Trustees. Once the recruitment and retention plan is finalized, the work groups will continue to monitor and evaluate the outcome of the action items for their effectiveness and modify the plan accordingly.

At its July 2005 meeting the Board of Trustees approved the procedures for automatic district branch transfers and advancements. APA staff identified over 2,500 members who appeared to be eligible for an automatic transfer to a new district branch, and staff requested the district branches review the names to determine which members are exempt from the process (e.g., because of retirement or because the member still lives or practices in the district branch's jurisdiction but the preferred mailing address does not reflect this). The list for the first mailing was narrowed to approximately 1,230 members. These members were contacted in early January 2006, and about 300 have responded that they are exempt from the process. Most of the other members on the list (85%) have been transferred to their new district branches; the other transfers are still pending for various reasons (e.g., dues owed in the old district branch, inability to verify licensure, open dues-relief application pending in the old district branch). As members' addresses are changed in the membership database, each member will be contacted about automatic transfer if the new address is outside of the member's current district branch.

It should be noted that the automatic advancement process also began in January. Membership coordinators are advancing members when the Membership Department has all the documentation necessary to do so. Efforts have begun to verify training and licensure for all Members-in-Training who have completed training, and planning is under way for automatically advancing the Members-in-Training who will complete their training in 2006.

The Centralized Member Processing Pilot Project, designed to streamline all membership processing actions and to offer uniformity throughout the organization, has been operating effectively for over 4 years. The procedures have been revised several times to incorporate suggestions from the district branches and APA staff. With the recent approval by the Board of Trustees to implement automatic district branch transfers and automatic advancements of Members-in-Training to General Members, the centralized membership processing procedures now focus only on new member enrollments and reinstatements. The pilot has expanded from the original six district branches to now include 68 branches.

In December 2005, the Board of Trustees approved a recommendation from the Membership Committee to expand the automatic monthly payment plan to all members, and a promotional insert was included in the January 2006 mailing of dues invoices. Through March 2006, just under \$26,000 was collected for 364 members who have elected the payment plan option. This is up from \$18,300 for 310 members who were in the payment plan for the last quarter of 2005. The number of those enrolling the payment plan continues to increase, reaching over 420 in April.

On Jan. 20, 2006, APA started offering members the option to pay their dues online through the APA web site (www.psych.org). Through April 10, 2006, over 660 payments, totaling approximately \$250,000, were made online for national, district branch, and state association dues. This represents about 8.2% of all membership dues collections in that time period.

The Online Membership Directory is being expanded to better serve our members' needs. The Online Member Profile Update will allow members to change contact, biographical, and practice data as the need arises (a print version will also be available). The new and improved online directory will make it easier to get in touch with other members and to make dependable patient referrals by using the most current and up-to-date information. The data may also be used to help develop programs and initiatives to meet members' needs and to guide APA's long-range strategic planning. The Online Membership Profile Update was scheduled to be launched in April 2006, and promotion of the new update form was to start shortly thereafter.

Last year was the first time that a rebate program was offered whereby all psychiatrists in the United States or Canada who paid the full-time registration fee for the annual meeting and who never previously belonged to APA were potentially eligible for a rebate by applying for membership on-site at the meeting. The difference between the nonmember and member annual meeting registration fees (\$515) was credited toward the prorated 2005 national and local dues, with the remaining balance of the rebate amount sent directly to the new member. A total of 24 people applied, and 21 have been enrolled.

The Membership Outreach Program was created in 2004 to provide new district branch executive staff with an orientation of APA membership policies and processes. Training is conducted in the local district branch office. Materials pertinent to district branch membership operations are provided to give the staff member an overview of all facets of processing. Training is modified according to the experience and background of the staff. The end result is quick and accurate processing of all membership actions and better service to all current and new members. Approximately 15 district branch site visits have been conducted since the program's inception, and the feedback from the branches has been very positive.

In July 2005, the Board of Trustees approved a new member benefit program with DHL. The DHL member discount program offers air and ground shipping services at rates discounted up to 60%, with a rebate allowance (payment to APA) of 2%.

In December 2005, the Board of Trustees approved a new member benefit program with Solveras Payment Systems, Inc., a company that offers discounted rates on credit card payment equipment and reduced transaction fees. This member benefit program is comprehensive in nature and includes access to customer care representatives and standard equipment warranties.

There were 111 applications for Fellowship in 2005. Copies of the applications and letters of reference were sent to the district branches in July for the 90-day comment period. The district branches that responded had positive, supportive comments on the applicants. Therefore, the Membership Committee voted that all applications for Fellowship be approved. This list included three deferred nominees for Distinguished Fellowship, who were approved for Fellowship, for a total of 114 members.

In 2005 the committee received 112 nominations for Distinguished Fellowship from 30 district branches. Of these, 108 were approved, three were approved for Fellowship, and one was deferred. The committee reviewed and approved the nominations of seven individuals for International Fellowship. There were 255 new Life Members and 26 new Life Fellows. There are 202 new Distinguished Life Fellows, and the total for new 50-Year Life Members/Fellows is 250.

The full report of the Membership Committee can be obtained by contacting the Membership Department at skuper@psych.org (e-mail) or 703-907-7348 (telephone).

As of the end of this year's annual meeting, Joseph E.V. Rubin, M.D., is the new chairperson of the Membership Committee.

Report of the Committee of Tellers

Liza H. Gold, M.D., Chairperson

The Committee of Tellers met on Feb. 22, 2006, at APA head-quarters to certify the results of the 2006 election. Present were Dr. Liza H. Gold, chairperson, Drs. Daniel Hicks and Bhagwan Bahroo, members, and Carol Lewis, APA staff.

Ballots were mailed on Dec. 22, 2005, to 30,397 eligible voting members. Ninety-one undeliverable ballots were deducted from that number; the adjusted number of eligible voting members was 30,306. The number of ballots included in the final tally was 9,830 (32.4% of the eligible voting members).

The Committee of Tellers confirmed that all candidates had verified the accuracy of their biographical statements and had submitted the required statements of compliance with election guidelines.

Online voting was used for the sixth time in the 2006 election. Members for whom APA had e-mail addresses were sent online voting information by e-mail. Of the members who voted, 28.3% used the online ballot, an increase of 4.7% over the 23.6% who voted online in 2005.

The Committee of Tellers certified that the following individuals were elected to office and so reported to the Board of Trustees: President-Elect: Carolyn B. Robinowitz, M.D. (76.1%); Secretary-Treasurer: Donna M. Norris, M.D. (51.4%); Early Career Psychiatrist Trustee-at-Large: Amy M. Ursano, M.D. (67.4%); Member-in-Training Trustee-Elect: Abigail L. Donovan, M.D. (50.3%); Area 1 Trustee: Jeffrey L. Geller, M.D., M.P.H. (59.6%); Area 4 Trustee: Sidney H. Weissman, M.D. (52.0%); and Area 7 Trustee: William M. Womack, M.D. (69.7%).

On the recommendation of the Committee of Tellers, the Board of Trustees accepted the results of the 2006 election at the board's March 5–6, 2006, meeting. The board also approved the committee's recommendation to dispose of the ballots from the 2006 election after the 2006 annual meeting.

Report of the Elections Committee

David S. Wahl, M.D., Chairperson

The members of the Elections Committee are Dr. David S. Wahl, chairperson, and Drs. William Cardasis, Robert E. Kelly, and Kathleen M. Mogul. The committee met briefly at the 2005 annual meeting in Atlanta but otherwise conducted its business primarily through fax and e-mail during the 2005–2006 year.

In July 2005, the Board of Trustees approved the committee's recommendation to once again reduce election costs by using nonprofit mail to send the paper ballots, a savings of approximately \$13,000. To offset possible delays in the delivery of paper ballots, the Elections Committee recommended changing the mail date from Jan. 5, 2006, to Dec. 22, 2005. Our efforts to increase online voting continued; Intelliscan, Inc., our election management firm, sent three e-mail "blasts" to members with e-mail addresses, resulting in use of the online ballot by 28.3% of those voting in 2006, an increase of 4.7% over the 23.6% who voted online in 2005.

In March 2006, the committee recommended that the earlier mailing date, with ballots sent by nonprofit mail, be used in the 2007 election, so as to have a 3-year experience with this system. Additionally, the committee reported to the board that with the new membership database, we have the capacity to indicate on a member's record that the member wants to always receive an online ballot and no paper ballot. Each year these members will receive an e-mail providing them with their ballot control number and online voting instructions. The APA staff liaison will be noti-

fied of any e-mails that bounce back to Intelliscan, Inc., and will either provide Intelliscan with a new e-mail address or request that a paper ballot be sent. Members who do not choose the online ballot option will have a paper ballot mailed to them, and in line with current procedure, if they have an e-mail address, they will receive the e-mail "blast" with online voting information. The Elections Committee believes that this innovation will reduce mailing costs even more as over time more and more members move to online voting.

There were only minor violations in the 2006 election, primarily instances in which candidates or supporters sent campaign emails that did not include "APA Campaigning" in the subject line. There was also one instance in which "APA Campaigning" was included in the subject line along with the candidate's name and office. The committee noted that the guidelines do not restrict the subject line to only those words, but in order to clearly alert recipients that the e-mail is about campaigning, the committee advised candidates and supporters to start the subject line with the words "APA Campaigning" so that if a long subject line is truncated, the recipient still knows that the e-mail is about campaigning. The Elections Committee recommended, and the Board approved, the following revision to Section A.3 of the election guidelines in order to formalize this in the guidelines (additions shown with underlining; deletions shown in brackets): "E-mail used for campaign purposes must comply with the intent of the guidelines with regard to content and must [contain] start with the words 'APA Campaigning' in the subject line."

The inclusion of "APA Campaigning" in the subject line allows members who do not wish to receive such messages to delete them or set up filters to block them.

Recognizing the importance of online communication between candidates and supporters, the Elections Committee recommended, and the Board approved, an addition to Section A.3 of the election guidelines to allow the creation of a list serve by a candidate to communicate with supporters: "Candidates may create their own list serves to facilitate communication with and among their supporters."

The Elections Committee continued to utilize its own list serve, ElectCom, for the committee members and the candidates to communicate during the election period. Candidates, committee, and staff alike find this to be a very useful and efficient way to share information, particularly since questions can be posed and answered in a way that everyone receives the same information.

The Elections Committee thanks the candidates and their supporters for their compliance with the guidelines.