

1. Administration

Revised 6/19/2008

There are three MUSC psychiatry residency programs:

- General **Psychiatry Residency** program (4 years)
- Combined **Psychiatry/Medicine Residency** program (5-years)
- Combined **Psychiatry/Neurology Residency** program (6 years)

There are four sub-specialty programs (fellowships):

- **Child and Adolescent Psychiatry** (2-years after 3-years of general psychiatry training)
- **Geriatric Psychiatry** (1-year after 4-years of general psychiatry training)
- **Addiction Psychiatry** (1-year after 4-years of general psychiatry training)
- **Forensic Psychiatry** (1-year after 4-years of general psychiatry training)

For information specific to these programs, some which are administered separately please see the designated administrative officers listed below:

<u>Program</u>	<u>Director</u>	<u>Coordinator</u>
Psychiatry Residency	Dr. Al Santos	Ms. Liz Puca
Psychiatry & Neurology Residency	Dr. Ben Weinstein	Ms. Liz Puca
Psychiatry & Internal Medicine Residency	Dr. Bob Albanese	Ms. Liz Puca
Child & Adolescent Psychiatry (Fellowship)	Dr. Markus Kruesi	Ms. Judith Rubin
Forensic Psychiatry Residency (Fellowship)	Dr. Susan Hardesty	Ms. Caitlin Norfleet
Geriatric Psychiatry Residency (Fellowship)	Dr. Ed Weiss	Ms. Liz Puca
Addiction Psychiatry Residency (Fellowship)	Dr. Himanshu Upadhyaya	Ms. Christine Horne

Governance Philosophy: The MUSC General **Psychiatry Residency** program (4 years) has a long-standing commitment to operating a resident-responsive program through a fully participatory management system where programmatic decisions are driven by consensus. This system has provided a stable platform for program evolution for many years. There are many examples of creative curriculum development initiated through this process. Effective program administration demands flexibility, high levels of collaboration among residents and faculty, and quick response systems to address emerging concerns. We encourage flexibility in curriculum design and can usually accommodate requests for individualized educational experiences. These are now highly valued traditions considered essential to maintaining a high level of satisfaction and morale in our residents. We are committed to making your time both educational and enjoyable, and we welcome your input towards the continuing development and evolution of our program. The program administration will ensure that your curriculum meets national standards set forth by the Accreditation Council for Graduate Medical Education (ACGME) and the American Board of Psychiatry & Neurology (ABPN), and that changes in the program will be managed in accordance with the governance traditions described above.

Program Administration: Executive responsibility for day-to-day program management resides with the Training Directors, Program Coordinators, and Chief Residents.

Training Directors: Al Santos, M.D. Program Director	Staff: Liz Puca Program Coordinator	Sherrie Osbourne Recruitment Coordinator
Jeff Cluver, M.D. Associate Director Chair, Resident Selection Com	Chief Residents: Drs. Rebecca Payne, Nicole Post, & Beth Canepa	
Chris Pelic, M.D. Associate Director Chair, Curriculum Com	Class Representatives: PGY1's: Drs. Nicole Franklin & James Fox PGY2's: Drs. Andrea Fritschle & Andrea Maxwell PGY3's: Drs. Kari Law & Tal Herbsman PGY4's: Drs. Payne, Post, & Canepa (Chiefs)	

The **Chief Residents** are appointed each year through input of residents, faculty, and staff. They divide their responsibilities according to their strengths and preferences. The duties of the 2008-2009 Chief Residents are outlined below:

Dr. Rebecca Payne: Leads resident administrative meeting Noon-Tuesdays
Post match communication.
Coordinates new resident orientation (with Dr. Cluver)
Coordinates PGY 1 seminars (with Dr. Levy)
Monitors/advocates for resident resource needs (call rooms, offices, lounge, meal vouchers)

Dr. Nicole Post: Schedules PGY 1-2 rotations and PGY 2 VA clinics
Schedules Night Float & Surge shifts (enters and updates in AMION)
Coordinates PGY 4 board review series (with Dr. Gray)

Dr. Beth Canepa: Coordinates/schedules 3rd year curriculum (IOP adult/child, CAPS, VA, CMHC).
Leads PGY-3/SAR orientation
Coordinates 3rd year seminars/case conferences (with Dr. Steele & Ms. Riddle)
Screens clinic referrals and monitors PGY3 supervision and evaluation system.
PGY4 VA clinic schedules
Monitors/advocates for PGY3 resource needs and oversees system for resident psychotherapy (see benefits)

Two class representatives are elected by their classmates each year. They are members of the Residency Education Committee (REC).

Committee Structure

- Executive Committee (Chiefs' meeting with Chair and Training Directors). This serves as a program executive committee. The agenda ranges from routine reports, identification of needs, or discussion of pressing/emerging problems. The group will develop a preliminary understanding of issues raised, develop a consensus of opinion, brainstorm possible solutions, and refer policy issues to the REC.
- Residency Education Committee (REC). The monthly meetings (2nd Thursday 12:30 to 2:00) of the REC provide a public forum for consensus building, decision-making and revising program policies and procedures. The REC represents the official body used to assess program components, balance competing ideas, and formalize, revise, and ratify program policies and procedures. The Chief Residents and Class Representatives are in attendance. Proposals for change are taken back to the residents for comment before decisions are finalized at a subsequent meeting thus giving an opportunity for review by the entire group before moving forward. Meeting minutes are available from Ms. Puca.
- Resident Selection Committee (RSC). Dr. Cluver (Chair) - Responsible for inquiries, screening, interviewing, and match procedures.
- Residency Curriculum Committee (RCC). Dr. Pelic (Chair) - Responsible for content of curriculum (i.e., seminars, assignment of longitudinal mentor/supervisors, etc.). The Seminar Coordinators for AY 08-09 are:
 - PGY1: Dr. Levy
 - PGY2: Dr. Wright
 - PGY3: Drs. Canepa and Steele
 - PGY4: Dr. Gray

Suggested Channels of Communication: To maximize program effectiveness, we suggest using the following channels of communication:

- There are no hierarchical structures in place for communication about the program. Program administrators have an open-door policy for residents and you are encouraged to be curious and ask questions about how things work and how to best meet your evolving educational needs. If we don't know the answer to your question, we will get back to you with the information requested. If we don't, please remind us.
- Residents wishing to call attention to concerns about the program are encouraged to contact Dr. Santos directly (330-2783) and/or one of the Chief Residents to begin the process of consensus building through informal discussions. If the consensus suggests that a given issue should receive formal attention and action, it will be placed on the Residency Education Committee's meeting agenda.
- Residents seeking assistance with individual concerns should contact Dr. Santos directly (330-2783).
- Residents seeking information about benefits should first contact Ms. Puca.
- Faculty or staff wishing to express concern about an individual resident should contact Dr. Santos directly (330-2783).