



Components of the American Psychiatric Association
****as of 2-21-2017****

Council on Addiction Psychiatry

Administration Contact: Beatrice Eld

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Council Chair: Frances Levin, MD

Assembly Rep on the Council: Annette Matthews, MD

Charge:

The American Psychiatric Association's Council on Addiction Psychiatry is charged with:

- liaison with the American Academy of Addiction Psychiatry (AAAP) to address mutual interests and priorities and advance shared goals
- providing psychiatric leadership in the growing field of prevention and treatment of addictive disorders;
- developing and clarifying the role of the psychiatrist in the prevention and treatment of addictive disorders;
- formulating policy recommendations related to prevention, education, treatment, and research in addictive disorders;
- considering important developments in basic knowledge, treatment, methodology, treatment systems, and related matters in the field of addictive disorders, and dissemination of that knowledge;
- in cooperation with other appropriate APA components, enhancing the quality and quantity of medical education in addictive disorders, at all educational levels, including undergraduate, residency, fellowship, and continuing medical education;
- providing additional liaison to medical, educational, consumer interest, and governmental organizations interested in alcohol and other drug problems;
- collaborating with other councils and components of the APA on common issues related to the role of psychiatry in addictive disorders; for example, to improve the quality of care and risk management for addictive disorders, to foster adequate research efforts and funding, and to foster adequate reimbursement for treatment.

APA members can be contacted using the APA's online component directory:
<http://apps.psychiatry.org/componentdirectory/>

Council on Advocacy and Government Relations

Administration Contact: Denea McRae

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Council Chair: Debra Pinals, MD

Assembly Rep on the Council: Craig Zarling, MD

Charge:

- advocating at the state and federal governments on all issues of importance for the APA and the field of psychiatry as articulated and defined by the Board of Trustees;
- proactively analyzing problems and anticipating needs for policies and planning strategies regarding current and anticipated legislative and political situations;
- serving as the APA's coordinating body for all legislative activities, and acting as a conduit for efforts by other components and Area Councils to interact with the federal legislative process;
- assisting the association to bring to fruition resolutions of issues critical to patients and psychiatrists traditionally functioning within public sector psychiatry, and keeping the association abreast of emergent public psychiatric issues and next generation issues;
- actively collaborating with allied groups with shared goals to progressively move towards improved quality of care and treatment;
- working with agencies that set policy on funding, access and quality of psychiatric services at the federal, state, and local level to affect legislation, regulations, and guidelines;
- defining and recommending action to meet the mental health needs of veterans and military personnel and their families;
- educating members on:
 - the identification of and the unique challenges facing military personnel, veterans, and their family members in community settings and existing barriers to their care;
 - normal patterns of individual and family adjustments to the stress of the deployment cycle with special attention to the needs of military children;
 - accurate assessment of psychiatric and morbidities and co-morbidities (including but not limited to posttraumatic stress disorder (PTSD), traumatic brain injury (TBI), major depression and substance abuse) and;
 - best practices available for the management of these and related concerns regarding resilience and recovery;
- promoting the involvement of members across the full range of military, veteran and community practice in DoD/VA/State and Community Partnerships in service to returning military personnel, veterans and their family members to be rolled out nationally through the District Branches;
- recognizing, promoting and supporting the efforts and expertise of Department of Defense and Department of Veterans Affairs psychiatrists in clinical, research, academic and administrative roles and develop methods for increasing their participation and leadership; and
- reviewing and stimulating research to implement the aforementioned.

APA members can be contacted using the APA's online component directory:

<http://apps.psychiatry.org/componentdirectory/>

Council on Children, Adolescents and their Families

Administration Contact: Ranna Parekh, MD

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Administration Contact: Tatiana Claridad

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Council Chair: Joseph Penn, MD

Assembly Rep on the Council: Mary Ann Schaepper, MD

Charge:

- The Council will work to advance issues related to the diagnoses and treatment of mental health needs of children and adolescents with special attention to vulnerable populations.
- The Council keeps psychiatric issues involving children, adolescents, and their families in the forefront of APA policy
- The Council works to assist general psychiatrists in learning more about the diagnoses and treatment of mental illness and the effects of physical illness on mental health in children and adolescents.
- The Council works with other APA components to advise and assist on matters that impact the emotional lives of children and adolescents such as substance abuse and matters related to juvenile justice
- The Council works to help maintain effective communication and collaboration between the APA and the American Academy of Child and Adolescent Psychiatry
- The Council addresses the clinical care and provision of services of children and adolescents with developmental disabilities including autistic spectrum disorders and intellectual disabilities.
- The Council will work to increase the awareness of the prevalence and promote the prevention of all types of violence including the physical and sexual abuse of children and spouse as well as other types of domestic abuse.
- The Council works to promote policies aimed at improving the awareness of mental health issues and the effectiveness of school based treatments within schools across all age ranges and settings.
- The Council helps to promote the identification, treatment, and prevention of mental health issues of infants, toddlers, and pre-school aged children in collaboration with other professional organizations and related programs.
- The Council oversees the activities of the Blanche F. Ittleson Research Award Corresponding Committee.
- The Council oversees the activities of Agnes Purcell McGavin Awards Selection Corresponding Committee.
- The Council oversees the activities of the Council-appointed Child and Adolescent Fellowship Program Work Group

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Council on Communications

Administration Contact: James Carty

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Council Chair: Christopher Ramsey, MD

Assembly Rep on the Council: Jeffrey Borenstein, MD

Charge:

Transform public attitudes towards psychiatry by

- Connecting the public emotionally to psychiatrists,
- Creating excitement about psychiatrists' ability to prevent and treat mental illness,
- Branding psychiatrists as the mental health and physician specialists with the most knowledge, training, and experience in the field.

To achieve the Council's goals, the Council will carry out the following strategies:

- Advise and assist the Office of Communications and Public Affairs in the development, implementation, and promotion of its advocacy initiatives and strategies, as they relate to public affairs.
- Understand the many diverse attitudes toward psychiatry among all cultural groups, and work to create approaches to improve attitudes about psychiatry.
- Review, advise, and cooperate with other Association components regarding issues affecting the public image of psychiatry and public understanding of mental illnesses and advocacy issues.
- Expand the Public Affairs Network both within and outside the APA and ensure bi-directional communications.
- Build coalitions at local & national level.
- Develop recommendations for the Board and the Assembly on public affairs implications of psychiatric practices, policies, communications, and developing public attitudes and trends.
- Recommend ways to achieve a uniform, exciting and culturally relevant image of the APA through a new branding effort.
- Contribute consumer-oriented materials to Healthy Minds Web site and campaign, providing a caring and diverse "public face" to psychiatry in order to reduce stereotypes about psychiatrists.
- Collaborate and work constructively with the Assembly Committee on Communications.
- Identify and plan responses to 'teachable moments' that occur during and after crises, news stories, and other psychiatrically-relevant public situations.

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Council on Geriatric Psychiatry

Administration Contact: Sejal Patel

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Council Chair: Robert Roca, MD, MPH

Assembly Rep on the Council: Robert Roca, MD, MPH

Charge:

The Council focuses on the special needs of older adults and thus stands at the interface of psychiatry with other medical specialties. It recognizes that integration of care is vital to the well-being of our patients. The council accomplishes its goals by initiatives related to education, research and clinical care in geriatric psychiatry. The specific areas that continue to require significant input by the APA, as embodied by the Council on Geriatric Psychiatry, include:

- Provide leadership in geriatric psychiatry
- Work collaboratively with other professional and advocacy groups to develop best practices in geriatric psychiatry
- Provide education and training to other physicians (including, but not limited to psychiatrists), residents, and medical students at scientific meetings and in other settings about the special needs of geriatric populations with mental illness.
- Evaluate existing public policy, services and third-party funding mechanisms for psychiatric care of older adults;
- Develop educational materials on the needs of persons who are mentally ill older adults and about the role of psychiatrists in meeting those needs. These materials may be targeted for medical and non-medical audiences.
- Support and/or lead ongoing efforts to improve the recruitment of psychiatrists into geriatric psychiatry fellowship programs.
- Identify and implement research into end of life issues and advance care planning, especially for people with mental illness, including populations of cultural, racial, and religious diversity.
- Work with other components and/or organizations on health care policy initiatives in geriatric psychiatry:
 - the evaluation and design of delivery systems, models of care, and payment mechanisms aimed at promoting high degrees of quality and cost-effectiveness for geriatric populations;
 - help the APA advocate at the federal and state level, and in public forums, for greater attention to excellence in end of life care, which includes psychiatric and psychosocial interventions;
 - develop APA position papers on geriatric psychiatry;
 - collaborate with the APA Council on Medical Education and Lifelong Learning to identify and/or create curricula for trainees and practicing psychiatrists on psychiatric aspects of palliative care; and
 - create mutual objectives and work collaboratively with other professional and advocacy societies to develop recommendations for quality geriatric psychiatric care end of life care.

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Council on Healthcare Systems and Financing

Administration Contact: Becky Yowell

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Council Chair: Harsh Trivedi, MD

Assembly Rep on the Council: Joseph Mawhinney, MD

Charge:

- The Council will work to foster parity and other non-discriminatory policies for mental health coverage, an activity that will require active monitoring and participation in activities generated through federal and state agencies, private commercial insurance carriers, and other fiscal intermediaries and the business community.
- The Council will articulate and advocate for adequate funding and reimbursement for psychiatric and other mental health services in all settings, commensurate with the burden of disease and disability.
- The Council will monitor and evaluate emerging trends in healthcare delivery and financing, including trends in both the public and private sector.
- The Council will work closely with the APA and its components in proposing changes or modifications in public and private policy affecting access, funding and quality of psychiatric and mental health services nationally and regionally.
- The Council will articulate and promote adequate resources for appropriate standards of care including identifying both regions and patient populations lacking in access to psychiatric and mental health services and recommending strategies and/or mechanisms for addressing manpower shortages and other barriers to accessing quality care.
- The Council will work to foster the integration of the delivery of psychiatric and mental health services with the delivery of primary care services, which will involve the development of multiple models of care.
- The Council will collaborate with other APA components involved in carrying out effective educational programs in the area of healthcare delivery and finance.
- The Council will disseminate broadly information to the membership on developments relating to healthcare systems and financing through articles in *Psychiatric News* and other APA publications as well as through programs at the Annual Meeting and at regional meetings, as appropriate

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Council on International Psychiatry

Administration Contact: Ricardo Juarez

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Council Chair: Bernardo Ng, MD

Assembly Rep on the Council: Kenneth Busch, MD

Charge:

The purpose of the Council is to facilitate understanding of problems facing international psychiatrists and their patients. It will do so by focusing on international membership in the APA, and through increased membership in the APA, avail all members of the opportunities in education, advocacy, prevention and clinical care that membership in the APA provides.

- 1) The Council works in collaboration with the Membership Committee to recruit international members.
- 2) The Council assists APA in ensuring that APA policies and positions on international issues are current and appropriate.
- 3) The Council, working in collaboration with the Council on Research, provides recommendations and strategies to enhance the scientific base of international psychiatric care and global mental health.
- 4) The Council identifies opportunities for partnership with other organizations to foster the creation of financially self-sustaining international programs that will benefit all members of the APA and their patients.
- 5) The Council will assist APA in establishing mutually beneficial relationships between the APA and other internationally focused psychiatric organizations. The Council may facilitate collaborative development of clinical, research, training, and forensic guidelines by these various organizations, including the APA, for use by psychiatrists globally, with appropriate modifications for specific countries or regions. The Council may facilitate publication of news about these organizations and their activities in Psychiatric News.
- 6) The Council promotes engagement to enhance shared learning and leadership to achieve participation of all APA members

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Council on Medical Education and Lifelong Learning

Administration Contact: Tristan Gorrindo, MD

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Administration Contact: Kristen Moeller

E: kmoeller@psych.org / Tel: 703-907-8637

Council Chair: Mark Rapaport, MD

Assembly Rep on the Council: Marshall Forstein, MD

Charge:

The Council monitors emerging issues and facilitates the development of resources and programs for psychiatric education at every level in the United States and globally. It includes premedical education, medical education, and graduate medical education for residents and fellows in psychiatry (both basic education and subspecialty areas), psychiatric aspects of graduate medical education for other medical specialists and post-graduate continuing medical education and lifelong learning. The Council advises and assists the APA Division of Education in the development, implementation, and promotion of its education programs and initiatives.

1. The Council has oversight for planning, coordinating, directing, and evaluating all continuing medical education efforts and activities of the Association, meeting the requirements for Category 1 CME credit. (The Annual Meeting Scientific Program Committee has responsibility for CME programming at the Annual Meetings.)

- recommend general policy and standards for continuing education of the APA including the CME mission of the Association;
- through a variety of processes, assess the educational needs of APA members; identify the key learning gaps for psychiatry; and assist in identifying appropriate quality measures and topics for educational programming;
- review and evaluate all CME programs of the APA such as APA meetings, books and journals, online programs, etc.;
- promote the development and distribution of new types of effective continuing medical education; and
- work closely with the Division of Education to provide educational programs that are relevant, and that demonstrate an outcome that impacts professional practice and adds to members' foundation of knowledge in a rapidly changing field.

2. The Council identifies emerging issues related to undergraduate medical education and assists in developing effective, appropriate psychiatric education for all future physicians, as well as facilitating and supporting medical student recruitment into psychiatry.

3. The Council reviews and develops recommendations regarding all aspects of graduate medical education in psychiatry, including but not limited to development and maintenance of the highest quality psychiatric training program planning, curriculum development, career development, residency teaching, interface with medical student education, primary care and other medical specialty education and post residency fellowship training. The Council is charged with facilitating the APA's response to proposed changes in the ACGME Essentials and the Special Requirements for Psychiatry and subspecialty programs.

4. The Council works with other APA components and Divisions to advise and assist on issues related to all levels of psychiatric education.

5. The Council maintains effective communication and collaboration with other associations and organizations such as : the American Board of Psychiatry and Neurology (ABPN) and its subspecialties; the Liaison Committee on Medical Education (LCME); the Accreditation Council for Graduate Medical Education and Continuing Medical Education (ACGME) and the Residency Review Committee for

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Psychiatry (RRC); the Accreditation Council for Continuing Medical Education (ACCME); the American Medical Association (AMA); the Council of Medical Specialty Societies (CMSS); the American Board of Medical Specialties (ABMS); the Association of American Medical Colleges (AAMC); the American Association of Directors of Psychiatric Residency Training (AADPRT); the Association for Academic Psychiatry (AAP); American Association of Chairmen of Departments of Psychiatry (AACDP); the Association of Directors of Medical Student Education in Psychiatry (ADMSEP); the American Medical Student Association (AMSA); the Student National Medical Association (SNMA); as well as other medical specialty and medical student organizations.

6. The Council will serve as advisors and mentors to the student leaders of PsychSIGN, the Psychiatry Student Interest Group Network.

7. The Council will disseminate relevant education information to all members.

8. Finally, the Council is charged with oversight of various APA awards, fellowships, and components that fall within its purview.

Portions from the charge to the former Council on Global Psychiatry are to be subsumed into the Council on Medical Education and Lifelong Learning. These tasks will be shared with this Council and the Council on Research and Quality Care.

1. facilitate the development of resources to improve education in developing countries.

2. participate with international mental health agencies in the promotion of culturally appropriate mental health educational initiatives.

Council on Minority Mental Health and Health Disparities

Administration Contact: Ranna Parekh, MD

E: rparekh@psych.org / Tel: 703-907-8584

Administration Contact: Omar Davis

E: odavis@psych.org / Tel: 703-907-7324

Council Chair: Christina Mangurian, MD

Assembly Rep on the Council: Felix Torres, MD

Charge:

The council has the responsibility for the representation of and advocacy for both minority and underserved populations and psychiatrists from minority and underrepresented groups. The council seeks to reduce mental health disparities in clinical services and research, which disproportionately affect women and minority populations. The council aims to increase awareness and understanding of cultural diversity and to foster the development of attitudes, knowledge, and skills in the areas of cultural competence through consultation, education, and advocacy within both the APA and the field of psychiatry and public policy. The council aims to promote the recruitment into the profession and into the APA and retention/leadership development of psychiatrists from minority and underrepresented groups both within the profession and in the APA. The council has the responsibility for selection of persons for the following awards subject to the APA approval process: Kun-Po Soo, Solomon Fuller Carter, Fryer, Simon Bolivar, Alexandra Symonds, and Tarjan. The Council will constitute workgroups of members to implement its charge.

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Council on Psychiatry and Law

Administration Contact: Alison Crane

E: acrane@psych.org / Tel: 703-907-7306

Council Chair: Steven Hoge, MD

Assembly Rep on the Council: Cheryl Wills, MD

Charge:

The Council's principal responsibility is to evaluate legal developments of national significance, proposed legislation, regulations, and other government intervention that will affect the practice of psychiatry, including the subspecialty of forensic psychiatry. The council focuses on legislation, regulation, and case law that has the potential to influence the provision, quality or availability of mental health care and services, alter the psychiatrist-patient relationship, affect confidentiality or the rights of patients, or that will otherwise regulate the practice of psychiatry in the public or private sector. Additional areas of attention include child forensic psychiatry, corrections, assessment of violence risk, and psychiatric issues that reflect international concerns (e.g., abuse of psychiatry and psychiatrists, violence, terrorism, and human rights). In fulfillment of this charge, the Council is responsible for making recommendations concerning pending legislation that may affect effective psychiatric treatment, research and training; preparation of model statutes for district branch use; monitoring regulations (and other forms of implementation of legislation); and drafting appropriate statements, resource documents, and recommendations for APA policy.

A function of the Council is to make recommendations to the Board of Trustees regarding appellate cases in which the APA should participate as amicus or support DB/SA participation as amicus, based on input from the Committee on Judicial Action. When there are time constraints, requests from the Committee on Judicial Action may go directly to the Board of Trustees after consultation with the chair of the Council on Psychiatry and Law. If an issue must be acted upon prior to the next meeting of the Board, the President may consider the issue through the Executive Committee. (See Appendix L-1, "Guidelines for Approval of District Branch Requests to the Council on Psychiatry and Law," of this manual.)

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Council on Psychosomatic Medicine

Administration Contact: Michelle Dirst

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Council Chair: David Gitlin, MD

Assembly Rep on the Council: Maria Tiamson-Kassab, MD

Charge:

The Council focuses on psychiatric care of persons who are medically ill and thus stands at the interface of psychiatry with other medical specialties. It recognizes that integration of bio-psychosocial care is vital to the well-being of patients and that full membership in the house of medicine is essential to the well-being of our profession. It accomplishes its goals by initiatives related to research, clinical care, education, and health care policy. The Council is charged to:

- Provide leadership at the interface of psychiatry with other medical specialties.
- Provide training and education to psychiatrists and other physicians, residents (including psychiatric residents), and medical students at scientific meetings and in other settings about the special needs of those with psychiatric illness in medically ill and complex medically ill populations.
- Advocate for the enhancement of training in Psychosomatic Medicine (Consultation-Liaison Psychiatry) in medical schools and residency training programs.
- Create educational materials about the needs of those with psychiatric illness in medically ill and complex medically ill populations and the role of psychiatry/psychiatrists in meeting those needs—for medical and non-medical audiences
- Work with other components and/or organizations on health care policy initiatives: the evaluation and design of delivery systems, models of care, and payment mechanisms aimed at promoting high degrees of quality and cost-effectiveness in those with significant medical-psychiatric co-morbidity.
- Support APA's advocacy efforts to increase the funding of research in these areas
- Support and/or lead ongoing efforts to improve the recruitment of psychiatrists into Psychosomatic (Consultation-Liaison Psychiatry) fellowship programs.

Council on Quality Care

Administration Contact: Samantha Shugarman

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Council Chair: Grayson Norquist, MD

Assembly Rep on the Council: Robert McCarron, DO

Charge:

The Council on Quality Care is charged to monitor developments and carry out activities to ensure that the highest standards and quality of care remain integral parts of the APA mission. This includes but is not limited to monitoring, participating in initiatives and disseminating information in the following areas:

- Quality Indicators (national quality measurement enterprise)
- Standards & Survey Procedures (national accrediting bodies)
- Psychotherapy by Psychiatrists
- HIV/AIDS
- Patient Safety
- Practice Guidelines (Steering Committee on Practice Guidelines)
- Electronic Health Records (Committee on Electronic Health Records)

Finally, the Council is charged with overseeing various APA awards, fellowships, and components such as committees, task forces, and workgroups that fall within its purview. Specific content areas of

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importance to the quality of psychiatric care may be represented by membership on the Council in the absence of a formal APA component.

Council on Research

Administration Contact: Jennifer Shupinka

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Council Chair: Dwight Evans, MD

Assembly Rep on the Council: Glenn Martin, MD

Charge:

The Council on Research monitors developments and carries out activities to ensure that the substance and significance of research on mental health/illness remains an integral part of the APA mission. The Council reflects the Association's commitment to advance the scientific basis of psychiatric medicine and mental health care, disseminate this knowledge to APA members and mental health care clinicians and ensure that such research informs APA policies, and positions. The areas of research include but are not limited to:

- Basic Science
- Clinical Diagnosis and Assessment
- Treatment Research
- Research Training
- Health Services
- Prevention Research
- Research Awards
- Research Ethics
- ECT & Other Electromagnetic Therapies

Additionally, the Council is charged with facilitating the development of resources to improve education, clinical programs, research and the organization of mental health systems in times of disaster and to advance global psychiatry. This is accomplished through coordination between the Council and the Medical Director's Office in times of national disaster to provide consultation and identification of resources for local and national responses. The Council also acts as a resource for educational and scientific materials, program evaluation and treatment of persons with mental illness in times of disasters. In addition, promotion of global psychiatry is pursued by participating with international mental health agencies in the promotion of culturally appropriate mental health educational initiatives. Finally, the Council is charged with overseeing various APA awards, fellowships, and components such as committees, task forces, and workgroups that fall within its purview. Areas of focus may be added or deleted in response to emerging issues in the field. Specific content areas of importance to psychiatric research may be represented by membership on the Council in the absence of a formal APA component.

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Assembly

Administration Contact: Allison Moraske

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Purpose:

The Assembly of the American Psychiatric Association is a deliberative body which recommends action to the Board of Trustees. The Assembly is composed of representatives elected from the district branches; representatives of other groups of members; and the Assembly officers.

- a. The Assembly establishes and supports forums for discussion of the issues facing our profession. These forums include the District Branch, State Associations, Area Councils, Reference Committees, the special groups identified by the Assembly, and the Assembly meeting as a whole.
- b. The Assembly receives reports from the President of the APA, the Treasurer, the Medical Director/CEO, the chair of the APA delegation to the AMA, and others.
- c. District Branches of the APA are established, continued, or dissolved by The Assembly. (see Bylaws - District Branches shall be established, continued, or dissolved according to the procedural code of the Assembly.)
- d. The Assembly shares responsibility with the Board for developing and reviewing official Position Statements of the Association.
- e. The Assembly establishes awards for outstanding contributions and selects recipients.
- f. The Assembly has a formal process for leadership development and provides opportunities for representatives to the Assembly to exercise those skills.
- g. The Assembly, representing the members, can ratify proposed amendments to the by-laws of the Association. (bylaws 11.2)
- h. The Assembly reviews and endorses Practice Guidelines developed by the Association.

Bylaws Committee

Administration Contact: Chiharu Tobita

E: ctobita@psych.org / Tel: 703-907-8527

Functions:

- (1) Maintain a continuing study of the structure of the organization.
- (2) Receive from the Board, or from the Secretary, proposed amendments to the Bylaws.
- (3) Propose amendments to the Bylaws to the Board.
- (4) Exercise an advisory function on meaning and interpretation of a proposal or resolution.

The committee has no authority to interpret the Bylaws or to adjudicate on the constitutionality of a proposal but is often consulted by reason of its familiarity with those documents. The Board has requested the committee to continue to actively examine the Bylaws, bringing it into conformity with current practice. The Board has also adopted a policy that, whenever possible, the chair or a member of the Committee on Bylaws should be included in component discussions that might lead to changes in the Bylaws. Information regarding amendments to the Bylaws can be found in Bylaws Chapter 11 and in Appendix F 1 of the Operations Manual, "Election Procedures and Guidelines."

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Elections Committee

Administration Contact: Chiharu Tobita

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Functions:

Establish (with Board approval) procedures for equitable voting of the membership.

(1) Inquiries about possible violations from the campaign guidelines (See Appendix F-2, "APA Election Guidelines," of the Operations Manual) can be made verbally or in writing by an identifiable APA member to the chairperson of the Elections Committee or the staff liaison. The committee may investigate any potential violation of which it becomes aware, with or without a complaint. The committee makes inquiries, notifies relevant parties, contacts the candidate and/or supporter for more information, and gives the candidate/supporter opportunity to respond to the alleged violation.

(2) The committee reports to the Board and, if appropriate, recommends Board action. The Elections Committee, with Board approval, reports in Psychiatric News, on an annual basis, a summary of violations of the campaign guidelines.

(3) The Elections Committee makes no official referrals to the Ethics Committee, but any member may file a complaint of unethical conduct. The Principles of Medical Ethics with Annotations Especially Applicable to Psychiatry refer almost exclusively to a physician's ethical conduct vis a vis patients. However, Section Two might apply to a violation of the campaign guidelines: "A physician shall deal honestly with patients and colleagues, and strive to expose those physicians deficient in character or competence, or who engage in fraud or deception." If a complaint about a campaign violation is filed with the Ethics Committee, the usual procedures for investigating complaints of unethical conduct shall be followed.

Ethics Committee

Administration Contact: Colleen Coyle, JD

E: ccoyle@psych.org / Tel: 703-907-8695

Functions:

(1) Ensure that ethical complaints are handled in accordance with the Bylaws Chapter 7 and with The Principles of Medical Ethics With Annotations Especially Applicable to Psychiatry (also see Appendix E of this manual, "Boards and Special Components,");

(2) Draft "Procedures for Handling Complaints of Unethical Conduct" and present for approval to the Assembly and to the Board of Trustees;

(3) Draft annotations to update The Principles of Medical Ethics With Annotations Especially Applicable to Psychiatry and present for approval to the Assembly and to the Board of Trustees;

(4) Respond to members' inquiries about ethical issues and publish as The Opinions of the Ethics Committee on The Principles of Medical Ethics With Annotations Especially Applicable to Psychiatry;

(5) Publish An Ethics Primer;

(6) Maintain contact with the "ethics network", i.e., the chairpersons of district branch ethics committees by means of mailings, meetings, workshops; and

(7) Work with appropriate components to develop educational materials.

(8) Administers Carol Davis Ethics Award for the best District Branch newsletter article on ethics.

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Joint Reference Committee

Administration Contact: Laurie McQueen

E: lmcqueen@psych.org / Tel: 703-907-8523

Functions:

- (1) Serve as a clearinghouse between the Board and/or Assembly and the councils. The JRC refers matters to and from the Board and/or Assembly. Referrals may be made directly from the Assembly to the Board only in rare instances and at the request of the Assembly Executive Committee. Such referrals should be reported to the JRC to enable it to track where issues are in the governance process.
- (2) Refer problems to the appropriate council for assignment and study by a component. Issues may also be referred to the Assembly, district branches and/or area councils for study and reporting back.
- (3) Serve as a judicial body for the solution of administrative problems arising between councils.
- (4) Authorize the disbursement of funds from the JRC Contingency Fund to councils either to support new programs or supplement ongoing ones. (Requests for monies from this fund are prioritized and voted on during meetings of the JRC; if necessary a mail or telephone ballot may be used between meetings.)
- (5) Receive position statements that have been approved by a council and make recommendations to the Board and Assembly for discussion and/or adoption; and receive directly reports by councils that do not involve policy without additional referral to the Board and/or Assembly (as councils have authority to operate within existing Association policy.)
- (6) Consider the merits of a project or problem referred by the Board and/or Assembly and reach a conclusion without further reference to other APA components.
- (7) Consolidate the reports of two or more of its councils or of overlapping task forces with a recommendation for policy and action to the Board and/or Assembly.
- (8) Define areas and functions of the various task forces when more than one council is involved, handling the overlapping concerns of several councils.
- (9) Monitor and evaluate functioning of components with annual reports to the Board (see also Appendix U of the Operations Manual, "Component Activity Plan" for the instrument used to monitor and evaluate components.
- (10) In 2009, the JRC subsumed the charges of the Award and Award Lecture Corresponding Committee:
 - (a) Receiving reports/award nominees from all components that administer the awards given by the Association and forwarding these to the Joint Reference Committee (JRC) for review prior to formal approval by the Board of Trustees;
 - (b) Reviewing the funding mechanisms for all awards on a periodic basis;
 - (c) Maintaining, overseeing and revising the Award Rotation Schedule. Changes to the Award Rotation Schedule must be approved by the Board of Trustees;
 - (d) Receiving proposals for new awards from the JRC, the Assembly and the Board as well as individual members;
 - (e) Establishing a protocol for reviewing new award proposals and then evaluating the proposal;
 - (f) Reviewing the process by which a name is selected for the new award and for determining the name's appropriateness;
 - (g) Reviewing periodically the selection process utilized for selection of awardees for each award;
 - (h) Determining a schedule by which these awards are reviewed; and
 - (i) Establishing a calendar to carry out its responsibilities.Final responsibility for the creation and continuation of awards remains with the Board of Trustees.

APA members can be contacted using the APA's online component directory:

<http://apps.psychiatry.org/componentdirectory/>

Membership Committee

Administration Contact: Jon Fanning

E: jfanning@psych.org / Tel: 703-907-8656

Functions:

- Each committee member serves as an informal liaison to one or more components (Board of Trustees, Assembly, ECPs, MITs, DB execs etc.)
- Within the Membership Committee, there are several ad hoc work groups to carry out specific assignments (e.g., member benefits, recruitment, Fellowship).
- Recommend plans, procedures, and policies related to membership matters to the Board.
- Identify and develop strategic plans and materials for membership recruitment and retention; monitor implementation of such plans; evaluate the outcomes.
- Work with district branches on membership programs and activities of mutual interest and benefit.
- Review proposed new APA benefits and affinity programs or other initiatives to determine their appropriateness for the APA membership: Review and evaluate existing programs; Make recommendations for implementations to the Board.
- Apply the criteria for membership contained in the Bylaws and the Operations Manual.
- Receive applications for any class of membership or for advancement or transfer from one class of membership to another where no district branch exists.
- Receive nominations for Fellows, Distinguished Fellows and Honorary Fellows and recommend actions to the Board.
- Receive applications for International Membership and International Distinguished Fellowship and recommend actions to the Board.
- Review list of members whose dues are in arrears and recommend appropriate actions to the Board.
- Periodically review the criteria for membership categories and propose changes as appropriate to the Board.
- Monitor the dues structure for the APA and recommend changes as appropriate to the Board.
- Carry out other actions, as needed, in the interest of the membership and the organization.

APA members can be contacted using the APA's online component directory:

<http://apps.psychiatry.org/componentdirectory/>

Nominating Committee

Administration Contact: Chiharu Tobita

E: ctobita@psych.org / Tel: 703-907-8527

Functions:

- Solicit suggestions for nominees from the district branches and from the membership via a notice in Psychiatric News inviting recommendations.
- Ask potential candidates to (1) submit a c.v. with emphasis on current professional activities; (2) sign APA's conflict of interest statement (instead of after official nomination); and (3) disclose to the committee whether there is an ethics complaint pending against them at either the district branch or national level (all above information is held in confidence and reviewed by the Nominating Committee as it makes its final selection of candidates at its September meeting).
- Select at least two candidates for each of the following offices: President-Elect, Secretary or Treasurer in alternate years, Trustee at Large, (or Early Career Psychiatrist Trustee-at-Large every 3rd year), and Member in Training Trustee Elect.
- Secure the acceptance to serve, if elected, of each designated candidate.
- Report its nominations to the Board by 15 September for immediate dissemination to the members.

APA AMA Delegation

Administration Contact: Becky Yowell

E: byowell@psych.org / Tel: 703-907-8593

Mission and Purpose: The APA AMA Delegation represents the APA in the AMA House of Delegates. The delegation advocates on behalf of patients and psychiatry for the priorities of the APA. The delegation meets with other psychiatry-related medical specialty societies in the Section Council on Psychiatry, established by the AMA as part of the House of Delegates.

APA members can be contacted using the APA's online component directory:

<http://apps.psychiatry.org/componentdirectory/>