

# Psychoanalytic Center of the Carolinas

## Board of Directors

June 3, 2024

### Draft Minutes

**Present:** Harold Kudler, Scott Warren, Chris Erskine, Josie Sawyer, Tricia Wilson, Vann Pearsall (Executive Director)

**Absent:** John Riley, Dhipthi Brundage, Kendra Surmitis, Burton Hutto

**Guests:** Jill Dunn and Frank Heitman

- I. Welcome
  - a. Harold gave update on PsiAn; Nick Horswill agreed to serve as PCC rep
- II. Procedural Section
  - a. Minutes: The May minutes were approved
- III. Committee reports
  - a. The reports were distributed in advance. (See Appendix 1.)
  - b. The board discussed the success of the Open House as noted in the communications report
- IV. Old business
  - a. Meeting of Members June 29<sup>th</sup>
  - b. Encouraged board members to help rally the troops to participate in the election
    - i. Board Awards/Certificate of Appreciation
    - ii. Committee reports for the annual meeting will be shared with members in July
    - iii. Discussed weekly messaging on the listserv to encourage participation in the election.
  - c. PCC CME changes (distributed in board packet)
    - i. The board stated its approval and commended TEC Director Dhipthi Brundage and TEP manager Kayla Schilke for the research and preparation of the proposal
- V. New business
  - a. The Board discussed and approved the proposed Colleague Assistance Protocol
  - b. Discussed idea of presenting a Professional Will workshop
  - c. APsA Holmes Commission Task Force Survey
    - i. President Kudler will be sent to the board for consideration
- VI. Executive Director's Minute
  - a. July Board meeting cancelled
  - b. Annual board agreements will be distributed next month
  - c. Chris Erskine was recognized for her board service
  - d. Harold Kudler was recognized for three years' service as President
  - e. Next Board meeting will be Monday, August 5, 2024.
- VII. Adjourn 8:39pm

Submitted by Vann Pearsall, Executive Director

## **Circle of Security Committee**

- We are hopeful that we will be able to sponsor an in-person training in Charleston, SC in Feb. or Mar. 2025. Currently waiting for dates from COSI in order to secure a venue. Members of the SC Infant and Mental Health Association (SCIMHA) are assisting with venue selection.
- For the first time, the COS Committee is providing a \$2000 scholarship for a trained COS-Classroom facilitator to receive coaching training beginning in August 2024.
- The PCC will no longer offer CMEs for COSP facilitator training. This was a logical financial decision based on skyrocketing costs to do so. Thankfully, we have had few physicians in the mix over the years.

## **Colleague Assistance Committee**

- A work group consisting of Terrie Baker, Allen Dyer, Chris Erskine, and Lili Sznajdman have updated the policies and protocols and are currently recruiting new members to serve on the committee. Discussion of the updated protocols are on the June Board Agenda.

## **Communications and Marketing**

- On May 14, we held a Virtual Open House with 38 registrants and 18 attendees. Dr. Harold Kudler gave a welcome message and spoke on the history and future of PCC; Dr. Kendra Surmitis spoke about the benefits of membership; Dr. Elissa Murphy spoke about curriculum and programs.
- Over the last 30 days, we have seen:
  - Constant Contact email list increase of 41 contacts
    - 16 contacts were added to our contact lists through the website registration form.
  - 4% social audience growth (LinkedIn and Facebook)
  - A 53% email open rate (increase over previous months)
- For the month of April, we experienced the following interest on our Google Business profile:
  - 17% increase in website clicks from Google Business profile
  - 26% increase in Google Profile views
  - 73% increase in Google searches

## **Fundraising**

- Currently reviewing a grant application to the American Psychoanalytic Foundation to fund the Seasoned Clinician's Notebook
- Planning a year long celebration in 2025 to celebrate the 60 year anniversary

## **Scientific Programs**

- Four of five planned programs are secured for 24-25 year

## **Training and Education Committee**

- Scholarship seats (discounted tuition) to be offered for the two upcoming Calabria courses.
- New CME policy approved by TEC.
- TEC continues to work on developing a grievance policy.

## ***Admissions Committee***

- Five applicants have been accepted to the training program for the fall.

## ***Curriculum Committee***

- Curriculum Committee continues to review Holmes Commission Report.
- We have created a syllabus checklist/template for instructors to use in constructing their syllabi.

## ***Faculty Committee***

- Teaching awards:
  - William Meyer award for seasoned educator awarded to Don Rosenblitt.
  - Heather Craige award for early to mid-career educator awarded to Terri Onstad.

## ***Psychoanalytic Psychotherapy Committee***

- Tyler Beech, Loan Vo, and Christie Hunnicutt are scheduled to present at the Seasoned Clinician's Notebook series this fall.

## ***Psychoanalysis Committee***

- Will be discussing clarifications to TA/SA policy.

Updated Enrollment for 2023-24

- 36% increase in individual students
- 49% increase in registrations

<b>Number of individual students</b>	<b>2022-23</b>	<b>2023-24</b>
Psychoanalytic matriculated students	19	20
Psychotherapy T matriculated students	5	7
Non-matriculated students	85	121
<b>TOTALS</b>	<b>109</b>	<b>148</b>

<b>Number of course registrations (seats)</b>	<b>2022-23</b>	<b>2023-24</b>
Psychoanalytic matriculated students	65	81
Psychotherapy matriculated students	4	17
Non-matriculated students	108	165
<b>TOTALS</b>	<b>177</b>	<b>263</b>

## Finance

Overall, the PCC is on track to end the year with a balanced budget. On the Budget vs. Actuals (page 7 in the packet), note that the Total Income and Net Income includes the \$100K Pearsall Fellowship donation for 24-25 and the recorded unrealized gain of around \$100K (\$99,409). The Pearsall Funds will be used next year.

### Revenues:

- **4010 Contributions: Unrestricted**
  - Annual Fund: \$43,201
- **5100 Program Related Sales/Fees** - Tuition and Registration fees are well over budgeted goals due to increased enrollment. Also, we've met the Scientific Program registration budgeted goals with 1 more program scheduled for the year.
- **5210 Membership Dues** - We're \$3,750 over the budget number with 2 new members in May.
- **5500 Prior Yr Designated Funds** - Now located below expenses under "Other Income"
  - \$200,000 of Scott funds were transferred into our operating account. 100K in December and 100K in January. We will not need to draw down the remaining \$177,321 budgeted.

### Expenses:

- **7000 Scholarships, Grants** - Individuals: \$18,750 is for the approved Supervision Grants. Funds to cover these are the remaining Pearsall Funds from Grants 1,2 & 3.
- **7200 Payroll Expenses** - Received notice of a 6.9% increase in employee health insurance for 2024
- **8530 Org Dues, Subscriptn, Lics** - PEP Web Subscription is a little high because there were more individuals subscribing to PEP than budgeted. The expense is covered, though, since members/students pay for their PEP subscriptions (the revenue PEP Web Fee will increase as members are invoiced for the subscription).
- **8570 Marketing** - Marketing expenses should remain under budget due to the new website platform
  - \$4,000 was budgeted for Memberclicks; annual hosting and maintenance for the new site will cost about half that.
- **8580 Inv, Bank, CC Proc Fees** - Credit Card fee processing is a bit higher than expected/ budgeted due to increased SP and course registrations. Investment fees are a bit higher than budgeted.
- **8600 Contract Services** - Over budget due to the extension on the G3 contract, which ended in September (9/30).

**Psychoanalytic Center of the Carolinas**  
**Budget vs. Actuals**  
July 2023 - June 2024

	Actual	Budget	Total over Budget	% of Budget
<b>Income</b>				
4010 Contributions Unrestricted	49,201	48,000	1,201	102.50%
4020 Contributions Restricted	247,500	217,061	30,439	114.02%
4200 NonGovt Grants, Schlrships	100,000		100,000	
5100 Program-related Sales/Fees	117,914	101,918	15,996	115.70%
5210 Membership Dues	29,750	26,000	3,750	114.42%
5300 Investment Income	138,791		138,791	
5400 CC Rewards [P/Y Mgmt Fees]	700		700	
<b>Total Income</b>	<b>\$ 683,856</b>	<b>\$ 392,979</b>	<b>\$ 290,877</b>	<b>174.02%</b>
<b>Gross Profit</b>	<b>\$ 683,856</b>	<b>\$ 392,979</b>	<b>\$ 290,877</b>	<b>174.02%</b>
<b>Expenses</b>				
7000 Schlrshps, Grants, Flwshp	202,946	200,500	2,446	101.22%
7200 Payroll Expenses	279,276	370,180	(90,904)	75.44%
7540 Faculty & Prgrm Cmpnsation	118,015	179,550	(61,535)	65.73%
8110 Office Supplies & Equipmnt	8,595	7,540	1,055	113.99%
8120 Occupancy	8,855	13,680	(4,825)	64.73%
8300 Travel & Meeting Expense	20,150	29,750	(9,600)	67.73%
8520 Insurance	8,745	8,700	45	100.52%
8530 Org Dues, Subscriptn, Lics	16,152	13,450	2,702	120.09%
8570 Marketing	3,130	4,940	(1,810)	63.35%
8580 Inv, Bank, CC Proc Fees	14,307	10,300	4,007	138.90%
8600 Contract Services	37,592	22,220	15,372	169.18%
<b>Total Expenses</b>	<b>\$ 717,763</b>	<b>\$ 860,810</b>	<b>\$ (143,047)</b>	<b>83.38%</b>
<b>Net Operating Income</b>	<b>\$ (33,906)</b>	<b>\$ (467,831)</b>	<b>\$ 433,925</b>	<b>7.25%</b>
<b>Other Income</b>				
5500 Prior Yr Designated Funds	309,020	467,831	(158,811)	66.05%
<b>Total Other Income</b>	<b>\$ 309,020</b>	<b>\$ 467,831</b>	<b>\$ (158,811)</b>	<b>66.05%</b>
<b>Net Other Income</b>	<b>\$ 309,020</b>	<b>\$ 467,831</b>	<b>\$ (158,811)</b>	<b>66.05%</b>
<b>Net Income</b>	<b>\$ 275,114</b>	<b>\$ -</b>	<b>\$ 275,114</b>	

Wednesday, May 29, 2024 06:54:32 AM GMT-7 - Cash Basis

**Psychoanalytic Center of the Carolinas**  
**Stmnt Fin Activity-Prev Year Comparison**  
July 1, 2023 - May 29, 2024

	Total		Change	% Change
	Jul 1, 2023 - May 29, 2024	Jul 1, 2022 - May 29, 2023 (PY)		
<b>Income</b>				
4010 Contributions Unrestricted	49,201	46,682	2,519	5.40%
4020 Contributions Restricted	247,500	90,734	156,766	172.78%
4200 NonGovt Grants, Schlrships	100,000	115,433	(15,433)	-13.37%
5100 Program-related Sales/Fees	117,914	122,677	(4,763)	-3.88%
5210 Membership Dues	29,750	27,215	2,535	9.31%
5300 Investment Income	138,791	135,998	2,793	2.05%
5400 CC Rewards [P/Y Mgmt Fees]	700	0	700	
<b>Total Income</b>	<b>\$ 683,856</b>	<b>\$ 538,739</b>	<b>\$ 145,117</b>	<b>26.94%</b>
<b>Gross Profit</b>	<b>\$ 683,856</b>	<b>\$ 538,739</b>	<b>\$ 145,117</b>	<b>26.94%</b>
<b>Expenses</b>				
7000 Schlrshps, Grants, Flwshp	202,946	184,643	18,303	9.91%
7200 Payroll Expenses	279,276	261,819	17,458	6.67%
7540 Faculty & Prgm Cmpnsation	118,015	69,891	48,124	68.86%
8110 Office Supplies & Equipmnt	8,595	7,310	1,286	17.59%
8120 Occupancy	8,855	9,034	(179)	-1.98%
8300 Travel & Meeting Expense	20,150	25,431	(5,281)	-20.77%
8520 Insurance	8,745	5,893	2,852	48.40%
8530 Org Dues, Subscriptn, Lics	16,152	10,670	5,482	51.38%
8570 Marketing	3,130	4,578	(1,448)	-31.64%
8580 Inv, Bank, CC Proc Fees	14,307	14,721	(414)	-2.81%
8600 Contract Services	37,592	54,060	(16,468)	-30.46%
<b>Total Expenses</b>	<b>\$ 717,763</b>	<b>\$ 648,050</b>	<b>\$ 69,713</b>	<b>10.76%</b>
<b>Net Operating Income</b>	<b>\$ (33,906)</b>	<b>\$ (109,310)</b>	<b>\$ 75,404</b>	<b>68.98%</b>
<b>Other Income</b>				
5500 Prior Yr Designated Funds	309,020	274,990	34,030	12.38%
5600 Designated Fnds Future Use	0	204,730	(204,730)	-100.00%
5700 Back out P/Y grnts for now	(309,020)	0	(309,020)	
<b>Total Other Income</b>	<b>\$ -</b>	<b>\$ 479,720</b>	<b>\$ (479,720)</b>	<b>-100.00%</b>
<b>Net Other Income</b>	<b>\$ -</b>	<b>\$ 479,720</b>	<b>\$ (479,720)</b>	<b>-100.00%</b>
<b>Net Income</b>	<b>\$ (33,906)</b>	<b>\$ 370,409</b>	<b>\$ (404,316)</b>	<b>-109.15%</b>

Wednesday, May 29, 2024 07:24:06 AM GMT-7 - Cash Basis

**Psychoanalytic Center of the Carolinas**  
**Balance Sheet**  
As of May 29, 2024

	Total
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Bank Accounts</b>	
1010.010 Operating Truist 4016	46,778
1010.015 Checking Truist 2089 (Pearsall)	144,238
1010.200 LOB Rstrctd Svng 5131	463,365
1010.250 LOB Operating Svg 3194	24,099
1020 Payroll Truist 6244	62,888
<b>Total Bank Accounts</b>	<b>\$ 741,368</b>
<b>Other Current Assets</b>	
1010.999 Undeposited Funds	2,845
1520 Securian Investments 779	942,787
<b>Total Other Current Assets</b>	<b>\$ 945,632</b>
<b>Total Current Assets</b>	<b>\$ 1,687,000</b>
<b>Other Assets</b>	
1521 Securian Endowment 266	213,885
<b>Total Other Assets</b>	<b>\$ 213,885</b>
<b>TOTAL ASSETS</b>	<b>\$ 1,900,885</b>
<b>LIABILITIES AND EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
<b>Credit Cards</b>	
2580 Credit Card Pts - Truist	1,308
<b>Total Credit Cards</b>	<b>\$ 1,308</b>
<b>Other Current Liabilities</b>	
7250 Payroll Liabilities	1,459
<b>Total Other Current Liabilities</b>	<b>\$ 1,459</b>
<b>Total Current Liabilities</b>	<b>\$ 2,766</b>
<b>Total Liabilities</b>	<b>\$ 2,766</b>
<b>Equity</b>	
3100 Temp Restr Net Assets	1,309,567
3200 Perm Restr Net Assets	229,017
Unrestricted Net Assets	393,361
Net Income	(33,826)
<b>Total Equity</b>	<b>\$ 1,898,119</b>
<b>TOTAL LIABILITIES AND EQUITY</b>	<b>\$ 1,900,885</b>



## **PCC Fund Management Statement- May, 2024**

### **Virginia Asset Management**

#### **General Account**

Current Balance:	\$979,110
May Change:	\$36,323
May percentage:	3.85%

YTD Capital Appreciation:	\$58,962
YTD % Return:	6.51%

#### **Endowment Account**

Current Balance:	\$223,018
May Change:	\$15,642
May percentage:	4.27%

YTD Capital Appreciation:	\$58,962
YTD % Return:	7.16%

#### **Comparisons**

S&P YTD Return	12.1%
Nasdaq YTD Report	13.36%
Fidelity Zero Large Cap Index	12.7%

#### **Live Oak Bank**

Operating Savings	\$24,175
Restricted Savings	\$464,920
Interest Rate	4%

#### **Notes:**

- **Next review with Bill Bays scheduled for 06/14/24**



# Psychoanalytic Center of the Carolinas

## CERTIFICATE OF APPRECIATION

At the Annual Meeting of Members, June 25, 2022

# TERRIE BAKER

Was honored for her creativity, leadership, and  
dedication to the PCC, our members, students, and  
the psychoanalytic community.

With the profound gratitude of the Board of Directors:

Harold Kudler, President

Christine Erskine, Past-President

Burt Hutto, Secretary

John Henson, Treasurer

Dhipthi Brundage, TEC Director



Scott Warren, Fund-Management Chair  
Tricia Wilson, Community Services Chair  
Vann Pearsall, Executive Director

The Nominating Committee submits the following members to stand for election to the Board of Directors at the Annual Meeting of Members on June 29, 2024:

New Board members

1. Jill Dunn
2. Frank Heitman

Current Directors eligible for re-election

1. Kendra Surmitis – 1<sup>st</sup> full Term (Elected in Jan to fill vacancy)

The Nominating Committee submits the following members to serve as officers, to be approved by the membership at the Annual Meeting of Members on June 29, 2024:

Officers:

President: Jill Dunn

\*President Elect: <vacant>

Past President: Harold Kudler

Treasurer: Scott Warren

Secretary: Tricia Wilson

TEC Director: Dhipthi Brundage

*\*Per PCC Bylaws, this position alternates with the Past President and is not permitted to be filled this year.*

## Summary

The PCC is accredited through a joint providership with APsA to provide Physician Learners with Continuing Medical Education credits (CME). APsA has recently undergone changes in Accreditation leadership roles, and as a result has made several changes to their CME Application process since the start of 2024.

Some of these changes has resulted in restrictions to the # of total CME hours we can apply for per program, as well as the # of program applications we can submit. In previous years, we were able to submit one application form that grouped together several of our learning activities, such as one form for all Advanced Coursework or one form for all Study Groups. The new process now requires us to split up each program individually versus grouping them—so 1 application for Study Groups turns into approx. 13 individual applications. This will increase the # of applications we would submit each year.

In addition to this new procedure, APsA also approved a major increase to their annual fees which will now factor in the # of CME hours we request approval for *and* the # of Applications submitted (penalizing us with fees for every application over a max. of 30).

Based on these changes, a spreadsheet has been produced which breaks down each of the PCC programs from the 2023-2024 reporting period. Due to last year's offerings, APsA has placed us in their highest fee tier as an "extra-large organization" resulting in a 300% increase to our annual fees when paired with the additional fees we would be charged due to the volume of applications.

Our goal with this proposal is to find the best way to reduce: (1) our annual # of CME hours, and (2) the # of Applications, while creating the lowest impact to our Physician Learners.

As one example, in reviewing the detailed spreadsheet our Study Groups were the second largest category from our requested CME hours—accounting for almost 50% of our overall CME hours.

However, only 19 of our 208 Physician Learners for the year came from the Study Groups (7 out of 19 did not complete a program evaluation or request CMEs).

These were the types of calculations and comparisons we looked at while forming our overall program recommendations for the reduction of CME offerings due to this new APsA process.

Please note: While APsA's process has caused us to review and look for ways to reduce the # of CMEs we offer to *physician learners*, other licensures will not currently be impacted by these changes. We can still offer CEs for all programming to all other licensures we have provided CEs for in the past. We will need to be intentional in changing the language in marketing/advertising materials for programs in which we do decide not to provide CMEs to physicians.

*\*Note: This proposal was approved by the Training and Education Committee May 20, 2024*

**Background: Recent APsA Program Changes to CME Applications and Fees**

1. New Annual Fees were approved by APsA’s Board of Directors. Please see approved fee structure below:

Tier 1	Extra-Small organizations	1-15 CME	\$ 1,000.00
Tier 2	Small organizations	16-50 CME	\$ 1,500.00
Tier 3	Medium-sized organizations	51-100 CME	\$ 2,000.00
Tier 4	Large organizations	101-200 CME	\$ 2,500.00
Tier 5	Extra-Large organizations	200+	\$ 3,000.00

2. Based on last year’s numbers, the PCC submitted for approval of **635.5 hours**, placing us in **Tier 5** as an **extra-large organization**.

3. The PCC’s annual fee will increase from **\$950 to \$3,000**.

- a. Additionally, this new fee only includes up to 30 program applications per academic year. Submitting additional applications will incur a **\$100 fee, per application**.
- b. Last year, we submitted for approval of 40 programs, which would’ve resulted in **\$1,000 in additional fees**, bringing our annual total to **\$4,000 ( a > 300% increase!)**

4. APsA requests that CMEs for single programs do not exceed 25 hours of CMEs.

- a. 6 of our program activities last year exceeded 25 hours.

5. APsA claims one benefit of raising the fee is that by July 2026 they will pursue approval of a **Joint Accreditation**, which will include **ASWB (Social Worker Credit) and APA (Psychologist Credit)**.

- a. This doesn’t currently benefit us because **(1)** we just received 5-year approval through the APA and their annual application is much more streamlined; and **(2)** we did the research and the ASWB accreditation does not benefit us unless we’re offering CEs for recorded/asynchronous programming (which are not approved by the NBCC and APA anyway and would require additional approvals for other licensures).
- b. This Joint Accreditation through APsA would also limit the # of programs we can offer CEs for other licensures since we would fall under APsA’s size limitations.

6. We no longer need to submit financial disclosures unless there is a known relationship with an ineligible company (or the content of the activity is related to a product line, such as medications, psychedelics, ketamine, etc.).

7. Every CME program application must include a syllabus or a schedule of events/agenda (something Study Groups does not currently submit).

**Factors to Consider for PCC Changes**

1. Physicians in the state of North Carolina have to complete a total of **60 CMEs every three years**. This could be broken down to approx. **20 hours of CME/year**.  
By attending all 5 Scientific Programs per year, our physicians can earn 10 hours of CME.
2. While we consider condensing the # of CMEs we can offer Physicians, please note that we are still currently approved to provide CE to our Psychologists (APA), Counselors (NBCC), and Social Workers for all programming.
3. We will still need to collect certain paperwork for coursework or Study Groups for the purposes of our website updates/registration/marketing/timely student communications/and for our other accrediting bodies like APA. APA still requires programs evaluations and learning objectives, and paperwork on file such as CVs for the programs we are providing Category A CEs for.

**CME #'s based on the 2023-2024 Program Offerings\***

	Study Groups	Courses (All)	COSP	Scientific Programs
<b>Overall CME hrs applied for</b>	290	302.5	24-48	14
<b># of individual Applications</b>	13	18	1	7*
<b># of Physician Learners</b>	19	123	? - approx. 3	66
<b># of Physicians req. CMEs</b>	12	41	2	49
	<b>Course Breakdown by Group</b>			
	<b>Core Courses</b>	<b>Advanced Courses</b>	<b>Calabria/ PCC Electives</b>	<b>101/Intro</b>
<b>Overall CME hrs applied for</b>	96	130.5	44	32
<b># of individual Applications</b>	7	7	3	1
<b># of Physician Learners</b>	72	20	27	4
<b># of Physicians req. CMEs</b>	27	9	4	1

**Overall # of Registrations for 2023-24 Programs: 847**  
**Overall # of Physician Learners who attended 2023-24 Programs: 208**  
**Population of total Physician Learners was approx. 25%**

**\* Notes on the data:**

- Study Group and Child Integrated Seminar Rosters are based on 22-23 reports, since attendance does not get collected until June/July as the activities wrap up their year.
- We planned 7 Scientific Programs for 2023-24, but we typically average 5 programs per year. We are still waiting on attendance #'s for our 2 remaining programs.
- There was discussion about further breaking down A/B courses like Life Cycle 1a/b and only offering CME for the first 8 weeks/12 hours and not the overall 16-week/24 hour programming. This proposal is not reflected in the Overall Course and Core Course #'s. The course has been viewed by some students and faculty as a full 16 week course with only 1 or 2 students dropping out between the two terms.
- Pearsall Fellows tend to enroll in many of our core courses, as those courses have fewer prerequisites. If the Pearsall fellows are resident physicians with a provisional license, then they are not in need CMEs for license renewal purposes. This could be one reason for the big gap in # of CMEs requested versus # of Physician learners.

## Proposal for Modifications to PCC CME Programming:

For 2024-2025 and beyond (unless APsA changes their stance on CMEs at some point), we are proposing decreasing our CME offerings to the following activities:

**\*Core Courses (200-level and 301)**

**\*Calabria & PCC Electives**

**\*Scientific Programs**

This will **exclude CMEs** for **Study Groups, Advanced Courses/Case Conferences, the 101 Course, and COSP.**

This change would allow us to reduce our APsA Application numbers as follows:

### **# of CME Hours:**

**630.5 hours** reduced to **154 hours**

### **# of Program Applications:**

**40 applications** reduced to **15-17 applications**

This reduction will bring us within the fee structure for **Tier 4** and allow us a little wiggle room for minor changes to the annual schedule such as: offering a second PCC-led elective for the year (as has been offered in the past), or an extra 1 or 2 Scientific Programs beyond the max. of the 5 programs we agree to provide per year.

### **JUSTIFICATION:**

1. Based on the #'s in our CME Table from 2023-24, Study Groups account for the second largest group of CME hours (290 hours total) and # of applications (13). However, the impact of how many Physicians attend (19) and how many request CMEs (12) is low. Four of the Study Groups exceed the new 25 CME Hour limit. Additionally, we do not currently receive the extensive paperwork needed to meet APsA requirements. Study Groups do not submit a detailed syllabus, and the nature of Study Groups do not easily translate to a schedule or agenda broken down by session.

**Cutting Study Groups from our CME offerings will reduce the # of applications and # of CME hours requested by almost 50%.**

2. Scientific Programs, Calabria Electives, and PCC Electives allow for us to reach a more general audience without the prerequisites required of most of our coursework. PCC Core Courses allow some flexibility in admitting physicians outside of matriculation. It also attracts Pearsall Fellows and peers/faculty from local medical programs.

3. The 101 course has recently increased in the # of CME hours (from 24 to 32), and the # of physicians who have attended based on recent rosters is typically low (only 1 physician requested CMEs last year). The 32 hour course brings us above the 25 CME per activity limit, and it also risks leading us into the next APsA tier bracket for fees. <Update: The 101 Course has since been reduced to 24 hours>

4. The Child Integrated Seminar (CIS) meets on a weekly basis for an average of 49.5 hours. That total exceeds the 25 CME per activity limit and is more than double the # of CMEs a physician needs for each year. 3 physicians requested CMEs for the CIS in 2022-23, and they were matriculated students and PCC members who attended other activities such as Scientific Programs.



## PCC Colleague Assistance Committee Protocol - Draft

Purpose: The role of the Colleague Assistance Committee (CAC) is to assist self-identified or referred members of the Psychoanalytic Center of the Carolinas who need the support of colleagues in the case of a perceived impairment or any situation that might require an extended absence from their practice, including unexpected emergencies.

The CAC encourages members to have a trusted colleague to monitor their physical, mental, and cognitive health who could alert and advise them when they observe a potential problem. The CAC also encourages professional members to create a Professional Will in case of sudden illness or death.

### 1. Referral of a Colleague:

- a. If patients, family members, or colleagues become concerned about the ability of a member to adequately perform their clinical, supervising or teaching responsibilities, they can call and speak with a member of the CAC.

### 2. Self-Referral

- a. If a member of the center is concerned about their own level of functioning, they can call and consult with any member of the CAC.

### 3. Absences

- a. If a member will be out of the office for elective surgery, medical illness or parental leave, the CAC can offer helpful suggestions in preparing for the absence.
- b. The CAC has helpful suggestions in preparing one's practice for a vacation.
- c. If a member has a sudden emergency such as a family tragedy or sudden hospitalization, the CAC can assist in arranging coverage for a member's practice. The CAC members will endeavor to assist, for example, making arrangements to cover patient appointments and authorize medication renewals until the member returns to their practice.

### Referral process:

Initial contact with a member of the CAC can be through telephone, direct conversation, email, text, or letter.

### Confidentiality:

1. The name of the person expressing concern about a potentially impaired member of the PCC will be held in strictest confidence.
2. The name of a referred or self-referred colleague will be held in strictest confidence. Any reports of the concerns, including the names of the members involved, will be held in confidence, and not shared with the Board of Directors, members of the TEC, or other PCC members. Once the issue is resolved, the Executive Director will receive a summary of the referral to be filed in the PCC's confidential files.
3. If there are ethical or legal implications, the committee will refer the concerns to the Ethics committee.

### Committee Procedures:

1. The member of the CAC who receives the referral, if not the chair, will contact the CAC chair. The chair and the committee member contacted may choose a second member of the CAC to jointly address the presenting concern.
2. An Assistance Team of assigned committee members will contact the referring colleague to further discuss their concern, gather more information, and explain the process.
3. The Assistance Team may choose to convene the remainder of the CAC members to discuss the concern and consult about the best approaches to resolve it.
4. The Assistance Team will schedule a meeting with the colleague of concern. They will share the observation that was brought to their attention, but they will not reveal the name of the person who made the referral.
5. If the colleague feels there may be a problem and accepts assistance from the Assistance Team, they will collaborate to develop and implement a plan, which may include outside consultation.
6. If the Assistance Team learns that there is no evidence of concern at present, they will conclude their intervention at this time.
7. A situation in which the colleague does not agree to cooperate with the CAC process could be regarded as a violation of the PCC Ethics Agreement and could be referred to the Ethics Committee.

### Structure of the Committee:

1. The core committee will ideally consist of core five members with various ad hoc PCC members previously recruited representing each of the different metal health professions.
2. The committee chair will be chosen by the committee members and approved by the PCC Board.
3. Core members serve renewable one-year terms, July 1- June 30.