

PGY-4 PSYCHIATRIC RESIDENCY PROGRAM

DIVISION OF INTRAMURAL RESEARCH PROGRAMS

NATIONAL INSTITUTE OF MENTAL HEALTH

NATIONAL INSTITUTES OF HEALTH

Introduction

The National Institute of Mental Health Intramural Research Program (NIMH IRP) offers an ACGME-approved residency program for **only** the fourth year of post graduate psychiatric training (PGY-4). A brief description of the program and how it differs from a traditional university-based psychiatry residency program follows.

The NIMH IRP is housed in the Warren G. Magnuson Clinical Center and the Mark O. Hatfield Clinical Research Center (CRC) at the National Institutes of Health in Bethesda, MD. The facility is unique in that all patients treated in this hospital are clinical research subjects and it is the largest clinical research facility in the country. The Clinical Research Center encompasses 242 inpatient beds and 90 day-hospital stations with 57,718 inpatient admission days and 105,000 outpatient visits each year. The NIMH IRP manages a clinical research program that includes 23 adult inpatient beds and 8 pediatric beds with a total census of 6,240 inpatient admission days and 6,891 outpatient visits each year.

The NIMH PGY-4 program offers a research experience in the area of biological psychiatry and is conceptualized as an **elective fourth year of residency training**. The PGY-3 residents who seek admission into this program must have completed their basic ACGME psychiatric residency requirements prior to their arrival at the NIMH. PGY-4 residents are treated as research fellows much like fellows who enter at the level of PGY-5 and above; however, they receive additional supervision and evaluation. PGY-4 residents are advised at the time of their interview for admission to the program that this is a highly specialized experience devoted to biological psychiatry research. In this regard, while we do not offer the breadth and depth of a traditional university-based psychiatry residency program, we do feel our program is appropriate for those select senior residents who have completed their basic psychiatric training requirements.

Program Goals and Objectives

The principal goal of this training program is to offer research-oriented psychiatric residents the opportunity to complete their fourth year of psychiatric residency training immersed in an internationally renowned basic and clinical research facility. Residents join specialty programs, Branches or Sections dedicated to the study of major psychiatric illnesses. Emphasis in these programs is on brain imaging, molecular biology, psychopharmacology, neuroendocrinology, and

genetics. PGY-4 assignments over the last decade have included the following clinical research programs: Consultation-Liaison Psychiatry Service (PCLS/psychosomatic medicine), Mood and Anxiety Disorders Program, Behavioral Endocrinology Branch, Childhood Psychiatry Branch, Section on Bipolar Spectrum Disorders (Emotion and Development Branch) and the Clinical Brain Disorders Branch. This training program offers an alternative to Chief Residency positions or an elective fourth year of research at the resident's home institution. The overall objectives for PGY-4 residents in the Program are delineated below:

Clinical Competence

- Refinement of psychiatric diagnostic skills in the context of specialized care of research subjects.
- Enhancement of pharmacologic and psychotherapeutic skills in the management of research subjects.
- Improvement of emergency and routine psychiatric consultations with medically and surgically ill research subjects at the NIH CRC.
- Performance of decision-making capacity assessments for clinical and research participation.

Research Skills

- Active engagement in ongoing research of the Branch, Laboratory, or Service to which the resident is assigned.
- Development of knowledge and skills necessary to design, author and implement a clinical research protocol.
- Development of a familiarity with the scientific review process and Institutional Review Board oversight of human subjects protections.
- Appreciation of research study design, data acquisition and management, statistical analysis, manuscript preparation and scientific presentation.
- Development of skills for applying translational basic research to clinical practice.

Academic Achievement

- Knowledge of general psychiatric literature and research advances in specific areas of interest.
- Appreciation of the central ethical issues inherent in research with human subjects. This includes an understanding of the relevant differences between the provision of medical care and the conduct of clinical research.
- Participation in on-campus educational programs in grant writing, clinical pharmacology, and the Introduction to the Principles and Practice of Clinical Research (IPPCR).

General Competencies in Psychiatry

Since the NIMH PGY-4 resident must complete the basic ACGME psychiatric residency requirements prior to starting the NIMH training program, each resident has already met their general competency requirements. Thus, the primary goal of this elective clinical research year is to cultivate a unique, individualized clinical research experience for the resident in addition to refining general competencies addressed during the first three years of residency training.

The clinical, research and academic objectives described above are taught through a variety of educational methods under the supervision of the resident's primary mentor and the Program Training Director. These objectives include continued instruction in and evaluation of the following six general competencies:

Patient care – NIMH residents care for patient-subjects and healthy volunteers in the NIH CRC. Residents perform diagnostic evaluations and provide psychiatric care to research subjects enrolled in ongoing NIMH research protocols and those medically and surgically ill patients with co-morbid psychiatric disorders who are referred to the NIH Psychiatry Consultation-Liaison Service.

Medical knowledge – The PGY-4 program emphasizes the acquisition of medical knowledge that is relevant to the research focus of each resident. For example, residents assigned to the PCLS focus on general knowledge of psychosomatic medicine and specific expertise in their area of research (e.g., delirium, psychiatric aspects of infectious diseases and their treatments).

Practice-based learning and improvement – Both the critical assessment of standard clinical practice and the identification of limitations in diagnosis and

treatment are inherent in the conduct of clinical research. The process of writing a review article, developing a protocol, or presenting research findings at a professional meeting all require practice-based learning skills (e.g., computer skills for evidence-based medicine and literature reviews; statistical analysis of clinical research data; critical appraisal of scientific literature to inform decision-making and clinical management).

Interpersonal communication skills – The effective practice of clinical psychiatry and clinical research demands clear, consistent and respectful interpersonal communication skills. This is true for fellow clinicians and researchers, administrators and regulators and research participants themselves. This particular competency is emphasized and evaluated in an ongoing fashion in all supervised activities.

Professionalism – The central aim of the NIMH IRP psychiatry training program is the fostering in our trainees of a professional identity as a clinical researcher as distinct from a provider of medical care. A critical aspect of the training experience in patient care at the NIH is an appreciation of the relevant differences between the ethics of medical care and the ethics of clinical research and the inherent tensions between conducting research and taking care of patients.

Systems based practice – The conduct of clinical research demands a sophisticated appreciation of how multiple systems of data acquisition and management, ethical regulatory and oversight activity and information dissemination are mutually dependent on each other. In order to launch a research project and enroll a subject in a clinical study, multiple levels of systems integration is necessary (i.e., science committee protocol review; approval by an Institutional Review Board; and coordination with several entities within the CRC such as the pharmacy, social work, and nursing departments).

Educational and Assessment Methods for General Competencies

The NIMH IRP training program follows a traditional mentorship model. Both the educational methods employed and the primary evaluation methodologies are driven by regular supervisory relationships. Additionally, the NIH offers a wealth of clinical and didactic teaching venues; direct, hands-on clinical teaching; formal and informal performance feedback; Branch/Laboratory clinical and research rounds; journal clubs; Clinical Center Grand Rounds; and special lectures,

seminars and conferences provided by authoritative scientists from both within and outside of the NIH. The core competencies as they relate to PGY-4 psychiatric residency training are assessed through a combination of formal and informal methods including:

1. twice yearly written and face-to-face performance evaluations with the Program Training Director
2. weekly individual supervision with the resident's primary clinical and research mentor
3. formal evaluation of the resident's supervisor
4. focused observation and evaluations by faculty
5. performance of mock Board interviews
6. individualized review of PRITE examination (if requested by resident)
7. structured case discussions in weekly trainee seminar
8. feedback from CRC allied health professionals

Administrative Structure

The administrative structure at the NIMH differs from a traditional university program. The Scientific Director of NIMH is roughly equivalent to a chairman of a large multidisciplinary department, while the Clinical Director (Maryland Pao, M.D.) functions as the psychiatric service medical director. The Deputy Clinical Director assists the Clinical Director in the fulfillment of duties related to residency training and as such functions as the Program Training Director. The Director, Office of Fellowship Training (Barry Kaplan, Ph.D.) functions as the senior administrator of all training programs of the IRP (roughly equivalent to an associate dean of a graduate school). Branch Chiefs correspond to full professors, Section Chiefs to tenured or tenure-track associate professors, Unit Chiefs to assistant professors, Ward Administrators to instructors and Medical Staff Fellows (including PGY-4 residents) are equivalent to research fellows. Our PGY-4 residents function in a similar manner as chief residents on a clinical or research service in a university teaching hospital.

Funding

The NIMH IRP is funded entirely by the Federal Government. Each research Branch has its own budget, administered by the Branch Chief. Additionally, the

Director, Office of Fellowship Training and the Clinical Director both have funds available for training.

Commitment to Teaching

The NIH has a longstanding and exemplary commitment to the education of physicians-in-training. The rigorous research training of PGY-4 residents and other medical staff fellows is an integral part of the academic mission of the NIH. This is a unique educational experience, and thus the NIMH IRP is strongly invested in continuing to offer this program to the future leaders of the academic psychiatric community.

NIMH PGY-4 Education Policy Committee

In 2001, a special committee was created to oversee the objectives and special needs of the PGY-4 residents. Members include the Program Training Director, the Director, Office of Fellowship Training, the NIMH Clinical Director, the Assistant to the Residency Training Director, at least one PGY-4 resident representative, and one member of the faculty. This committee meets annually to oversee and evaluate the overall program goals and objectives, the curriculum and the residents' experience.

NIMH Education and Fellowship Training Committee

This Committee is comprised of ten tenured IRP investigators and three fellow representatives appointed by a committee comprised of staff fellows and basic research fellows (NIMH Fellows' Committee). The functions of the Committee are essentially threefold:

1. To assist the Director, Office of Fellowship Training and the Program Training Director in the establishment of policy and administration of both the clinical and basic research training programs in the IRP.
2. To advise the Director, Office of Fellowship Training on the qualifications, selection and dissemination of Special Memorial Fellowships among IRP trainees.

3. Provide consultation in the resolution of fellow/mentor grievances and/or disputes.

In addition to the above executive committee, the NIMH Fellows' Committee serves to develop fellow-sponsored educational and social events, such as the Annual IRP Scientific Retreat and workshops in professional development and grantsmanship. The NIMH Fellows' Committee also participates in Program evaluation and played a pivotal role in the establishment of an Office of Education and Fellowship Training in the IRP, as well as the recruitment of a Director, Office of Fellowship Training.

Teaching and Training Program

Residents are strongly encouraged to take the NIH Introduction to Principals and Practice of Clinical Research (IPPCR) which is organized annually by Dr. John I. Gallin, Director of the Clinical Research Center. Residents receive formal instruction in the principles and practice of clinical research which includes exposure to the multitude of ethical, legal and regulatory issues in clinical research. Modules of instruction include epidemiology and biostatistics, ethics and regulation, monitoring patient research, and preparation and funding clinical research studies.

Residents are also required to participate in the NIMH Psychiatry Clinical Fellows Seminar Series which includes a seminar in psychiatric research bioethics, presentation and discussions of ongoing IRP research, journal club, special lectures, faculty "fireside chats" and case presentations. To supplement these didactic sessions, programs/branches/sections provide the PGY-4 with additional educational opportunities specific to the resident's learning objectives in teaching and research seminars, journal clubs, clinical case conferences, walk rounds and grand rounds. In addition, we require PGY-4 residents to attend the Clinical Center Bioethic's Department fall course on Bioethics and Clinical Research.

Residents receive multiple supervision sessions each week. In addition to scheduled supervisory sessions with their Branch/Section Chief, residents meet regularly with the Director of the Consultation-Liaison Service to review their consults. Residents also meet semi-annually both with the Program Training Director and as needed with the Director, Office of Fellowship Training to address issues and/or concerns related to program development and administration.

Teaching Staff and Training Resources

The teaching staff includes all tenured and tenure-track investigators of the NIMH IRP, staff physicians, Senior Medical Staff Fellows as well as senior nurses, psychologists, and social workers in the Program. The residents have the opportunity to utilize the resources of the National Library of Medicine (NLM), considered the world's largest and finest medical library, located on the NIH campus. Included in its collection are over five million medical books, journals, pamphlets, and rare manuscripts and films. Extensive computer databases including OMIM, Pub Med, Scopus, Psych Lit, and OVID are available to our trainees. In addition, professional librarians are available as personal data managers to assist trainees (e.g., by conducting literature searches) and offer informational sessions (e.g., End Note/Reference Manager) that will enhance our residents overall academic experiences. The NLM is considered the finest medical library in the world.

Upon entering the PGY-4 psychiatry training program, residents are given a copy of the NIMH DIRP guidelines to clinical care in a research setting. This document (http://intramural.nimh.nih.gov/new_main/ocd/clin-care-info.pdf) refers to useful links concerning "frequently asked questions" regarding clinical issues, human subjects protections, research ethics, medical administrative series policies and guidelines, documentation, manuscript clearance, and graduate medical training. For institute-wide resident support, networking, professional development during NIH-training and post-NIH training, residents are encouraged to participate in NIH Felcom (www.felcom.nih.gov), the NIH Fellows Committee.

Resident Selection

The selection of residents into the Program is based on their academic record, prior residency performance, letters of recommendation, and personal interviews. Many residents become aware of the PGY-4 training year in the NIMH IRP through the NIMH Outstanding Resident Award, which is both a recognition of excellence and a recruitment tool. Interested applicants submit their application packet to the Director, Office of Fellowship Training through the Program Training Director.

These packets are screened and qualified applicants are scheduled for interviews with the Clinical Director, Program Training Director, Director, Office of Fellowship Training, and selected Branch/Section Chiefs.

The interview process assures that residents have completed their basic psychiatric training and specifically addresses the applicant's interest and abilities in biological psychiatric research. The residents then interview with appropriate Branch Chiefs based on their area of research interest. Selection represents an individualized matching process based on the mutual interests of the applicant and Branch/Section Chief. Residents are advised during their interviews that they will not be rotating from one service to another, as is traditional in a university based program, but will spend the year working with one group in a focused area of research. Additionally, PGY-4 residents have clinical responsibilities through the Clinical Center Psychiatric Consultation-Liaison Service (see below).

NIMH ensures that selection of eligible applicants is based on preparedness, ability, aptitude, academic credentials, communication skills and personal qualities such as motivation and integrity. NIMH will not discriminate with regard to sex, race, age, religion, color, national origin, disability or veteran status.

Resident Responsibilities and Supervision

The NIMH IRP at the Clinical Research Center occupies two inpatient units in addition to an active outpatient research program. The majority of the resident's time may be spent working on a research unit, the outpatient clinic or in a laboratory. The resident's clinical duties include the initial evaluation of research subjects (psychiatric history, medical history and physical exam, administration of psychometric instruments and biological procedures), and the supervision and teaching, when appropriate, of visiting medical students and junior residents, nursing staff and other allied health and mental health trainees and professionals. Attention is directed at ensuring that the resident assumes progressive responsibility for patient care in the context of clinical research over the course of the year. For those PGY-4 residents whose primary assignment is in the laboratory, clinical responsibilities pertain to their on-call activities. All PGY-4 residents in conjunction with their primary supervisors and, as needed with the Program Training Director, develop *specific* goals and objectives unique to their individualized training experiences. Additionally, all PGY-4 residents serve as on-call psychiatrists for the Clinical Research Center with their first and second year

clinical research colleagues. All PGY-4 residents are required to maintain a patient care log listing all patients seen on the consult service and within their Branch (including identifiers such as patient initials only; age; gender; medical diagnosis; psychiatric diagnosis; treatment recommendations).

Resident Evaluations

Residents are evaluated on an ongoing basis by their Branch/Section Chief and the Program Training Director. Evaluations are based on the residents' progress as assessed through frequent supervision sessions. Each supervisor completes a web-based evaluation (E-value) twice a year, noting the accomplishments of each resident along with specific recommendations for continued professional development. Typically residents who satisfactorily complete their PGY-4 year are given certificates of completion of residency training and promoted to a second year of research fellowship training. Occasionally the resident is interested in completing their residency at the NIMH IRP but not staying on at the NIMH for continued research fellowship training.

If a Branch Chief feels that a resident is performing in an unsatisfactory manner, the Program Training Director will facilitate a review of the resident's performance and identify specific remedial assignments. If the resident's performance is not improved such that he or she is in jeopardy of not satisfactorily completing the year of training, the issue is taken to the Clinical Director and Director, Office of Fellowship Training. The Directors then meet with the resident to discuss the problem and determine appropriate action. The Directors will review the supporting documentation submitted by the Branch Chief along with any information the resident feels is appropriate for review and pertinent to the case. The resident is assured the opportunity of due process through the NIH Ombudsman's Office, NIH Office of Education, and federal grievance guidelines (See NIMH Residency Agreement, item # 17). All meetings are held in confidence. Instances of professional misconduct and/or substandard performance of clinical care or research duties are brought to the attention of the Medical Executive Committee for consideration of disciplinary action including suspension of clinical privileges and dismissal.

Resident Duty Hours

Part of the responsibilities of PGY-4 residents is emergency on-call duty for the NIH Clinical Center. Residents serve as "officer of the day" on the call schedule in

a rotating fashion. Call is taken from home and call frequency is determined by the number of residents and fellows in the program at any given time. Call responsibilities are in compliance with ACGME duty hour guidelines as specified in the “Program Requirements for Residency Training in Psychiatry” (section 6B). These guidelines are reviewed with the resident by the Program Training Director.

The NIMH psychiatry training program subscribes to the NIH Institutional GME policy on moonlighting and duty hours. Outside activities, including patient care activities not required by the educational program and occurring at healthcare sites external to NIH or its affiliated clinical sites (a.k.a. "moonlighting"), are permitted in accordance with Federal Government and HHS regulations and procedures (form HHS 520 available at <http://ethics.od.nih.gov/forms/HHS-520-1-06.pdf> and form NIH-2657, Part D, Supplemental Information to HHS-520 available at <http://ethics.od.nih.gov/forms/nih-2657.pdf>) and with prospective approval for the activity from the Clinical Director/Department Chief, and the Deputy Ethics Counselor, in addition to written approval from the Program Training Director which will be made part of the resident's or fellow's file. Program Training Directors must be aware of a resident's or fellow's outside activities so that they can monitor resident/fellow well-being and performance, and to ensure that the activities do not interfere with the ability of the resident/fellow either to provide safe and effective clinical care to patients or to achieve the goals and objectives of the educational program. Approval for the activity(ies) may be denied or withdrawn in the event of compromised patient care quality or safety, or inability to meet the goals and objectives of the educational program. A copy of the NIH GME duty hours and moonlighting policy can be found at the following link: <http://www.training.nih.gov/medicaleducation/gme/policies/dutyhours.pdf>.

Attending Responsibilities for NIMH PGY4 Residency Program

The NIMH PGY-4 Residency Program is based on an individualized mentorship model. Supervisors of PGY4 residents assume the primary responsibility for the residents’ training experience and should structure the PGY-4 educational program to accomplish clearly defined goals and objectives for each resident. Although the NIMH PGY-4 program is “elective” in the sense that all residents who enter the program have met all the core ACGME psychiatry residency requirements, individual supervisors should communicate to residents and fully support the following basic programmatic requirements:

1. Residents are required to fulfill emergency on-call duty for the NIH CRC throughout their PGY-4 year as described above.
2. Residents are required to attend a weekly clinical and didactic seminar organized by the Office of the Clinical Director.
3. Supervisors should hold regular individual meetings with residents.
4. Supervisors are responsible for providing written (e-value) and verbal evaluations of the resident's performance in the program twice during the PGY-4 year.

Medical Record System and Quality Assurance (Q/A)

The medical record system (CRIS) at the CRC is computer based. All residents are trained in the use of this system. The Clinical Director's office is responsible for quality assurance at NIMH. The residents are instructed in the review process and are required to participate via chart audits. Monthly meetings are held to review all incident reports and Q/A issues. Residents attend these meetings and submit a audit of a medical record. Additionally the Psychiatry Consultation-Liaison Service conducts weekly administrative rounds and bimonthly case conferences to ensure the provision of excellent clinical care to NIH Clinical Center patients.