

## **DEPARTMENT OF PSYCHIATRY AND BEHAVIORAL SCIENCES**

### **Mission**

Mindful of the pervasive importance of mental, emotional and social health, the Department of Psychiatry and Behavioral Science advances the well being of Oklahoma's citizens through teaching, research, service and patient care.

### **Vision**

The Department will:

Provide excellent didactic and clinical teaching that prepares clinicians to

- Understand the biopsychosocial aspects of health and illness
- Be adept at early recognition and appropriate treatment of mental disorders
- Provide ethical treatment interventions
- Understand the scientific basis of evidence based medicine

Provide community education that will support prevention, identification and treatment of mental illness and dispel stigma, making Oklahoma a model for other states.

Pursue scholarly endeavors that enhance understanding of basic scientific mechanisms and clinical and educational outcomes, bringing national recognition for excellence to OSU.

### **Core Values**

**Excellence** - We seek excellence in all our endeavors, and we are committed to continuous improvement.

**Integrity** - We are committed to the principles of truth and honesty, and we will be equitable, ethical, and professional.

**Service** - We believe that serving others is a noble and worthy endeavor.

**Intellectual Freedom** - We believe in ethical and scholarly questioning in an environment that respects the rights of all to freely pursue knowledge.

**Diversity** - We respect others and value diversity of opinion, freedom of expression, and other ethnic and cultural backgrounds.

**Stewardship of Resources** - We are dedicated to the efficient and effective use of resources. We accept the responsibility of the public's trust and are accountable for our actions.

## **Strategic Goals, Critical Success Factors, Objectives, and Strategies**

**Goal One. Expand didactic and clinical educational offerings in medical school and residency that prepare trainees to recognize and treat the psychiatric and behavioral aspects of health.**

### **Critical Success Factors:**

- Develop a mental health teaching service that will enhance Family Medicine trainees' ability both to identify and to treat psychiatric and behavioral disorders.
- Hire 1 additional psychiatrist to provide clinical teaching in the new teaching service to Family Medicine Residents and medical students.
- Develop elective clinical 1-month rotations in palliative medicine and geriatric medicine available during MS III-IV and residency.
- In collaboration with the Family Medicine department
- Present four hours of lecture on issues of aging and palliative care during Family Medicine residency.
- Establish a requirement of observation and direct individual feedback regarding medical interviewing skills of 1 patient encounter for each medical student during the primary care clerkship at the Health Care Center.
- Establish a requirement of observation and direct individual feedback regarding medical interviewing skills of 2 patient encounters per year for each Family Medicine resident.
- Add more medical interviewing skills teaching, (e.g., motivational interviewing, psychiatric diagnostic interviewing).
- Increase from two credit hours to three credit hours of psychiatry in the MS II year.
- Add a 1-2 credit hour elective in medical Spanish for medical students and residents.
- Assess, publish and disseminate information about our innovative stress management program, which helps students develop coping skills for the transition into medical school.

### **Objectives:**

**Objective 1.1:** Expand clinical teaching services for medical students and residents in consult liaison and outpatient psychiatry and behavioral science.

#### Strategies:

- Collaborate with Family Medicine department to develop a new Teaching service. This may include:
- An outpatient mental health clinic operating in the OSU-CHS clinic system.
- A psychiatric consult liaison teaching service operating in an area hospital.
- Develop and present to the Curriculum Committee the teaching service, seeking approval and support of that committee.

- Explore mechanisms for funding additional faculty and staff positions for the new service. Strategies could include:
  1. Expand managed care and insurance panel coverage to cover costs of faculty and staff in clinical settings.
  2. Hire clinical faculty with payment potential intact, (i.e., bring with them an established practice.)
  3. Obtain grants for indigent mental health care.
  4. Secure foundation funds directed to mental health teaching and patient
  5. care at OSU-CHS.
  6. Apply for GME money for hiring faculty for consult liaison position.
  7. Obtain funding from OSU for development of these projects.
  8. Collaborate with community mental health programs to house
  9. a satellite clinic.

**Objective 1.2:** Expand clinical and didactic teaching for medical students and residents in aging and end-of-life care.

Strategies:

- Survey other departments to determine what is being taught on aging and end-of-life at the College.
- Identify current recommendations and guidelines for medical school curricula about aging and end-of-life.
- Present the findings to the Curriculum Committee and seek their support and guidance on how to increase material in the curriculum.
- Seek financial and conceptual support from the Administration for such a change.
- Work with appropriate departments to incorporate more education on aging and end-of-life care. This may include such activities as locating sources for curriculum development such as the EPEC (Education for Physicians in End-of-Life Care) program and hiring a geriatrician to provide some of these additional educational opportunities.
- Arrange lectures in aging and end-of-life care as part of the Family Medicine-Psychiatry and Behavioral Science lecture series already in existence.
- Consult with the residency directors on the feasibility of developing and incorporating elective rotations in palliative medicine and geriatric medicine.

**Objective 1.3:** Develop and strengthen interviewing skills for medical students and Family Medicine residents.

Strategies:

- Determine the extent to which the current curriculum prepares students to be successful in medical interviewing.
- Seek more information on the interviewing component of COMLEX 2.

- Develop and adapt the curriculum to accomplish proficiency in medical interviewing skills. This might include a 1-hour course in medical interviewing skills.
- Develop and present to the Curriculum Committee the described courses, seeking approval and support of that committee.
- Develop, in conjunction with the Family Medicine faculty, a schedule of observation and feedback to medical students and residents in clinical settings.
- Seek financial support from the Administration, where indicated, for these changes.
- Publish data on the stress management program and furnish to other medical schools through regional and national conferences.

**Objective 1.4:** Increase didactic teaching in psychiatry in order to attain curricular predoctoral objectives.

Strategies:

- Define and prioritize areas needing expansion in psychiatry lectures.
- Expand time for teaching in diagnosis and management of such topics as primary care counseling, children's mental health, anxiety, mood and psychotic disorders.
- Develop and present to the curriculum committee rationale for an additional hour of credit and the described course changes.
- Assess increased costs of supporting an additional hour credit and seek Administrative support of this change.

**Objective 1.5:** Increase educational offerings in medical Spanish for medical students in order to enhance student ability to serve a broader cultural base.

Strategies:

- Increase educational offerings in medical Spanish for medical students.
- Present to the Curriculum Committee information about the success of the voluntary medical Spanish classes held for MSII's and the desire by the students for more extensive instruction in medical Spanish.
- Develop a proposal to the Curriculum Committee for offering medical Spanish, taking into account community resources.
- Receive direction from the Committee as to how an elective is added to the curriculum.
- Seek financial support from the Administration for such as addition.

**Goal Two. Increase scholarly activity.**

**Critical Success Factors:**

- Add personnel to assist with and/or conduct scholarly activity.
- Add laboratory and office space to allow an increase in research endeavors.
- Develop new scholarly products resulting from current and new research pursuits.
- Inform public relations and library of all completed and published scholarly activities.
- Annual departmental participation in community outreach and service.

**Objectives:**

**Objective 2.1:** Increase resources and infrastructure to support scholarly activity, thus enhancing the number of products and the efficiency of their development.

Strategies:

- Hire a master's level research associate.
- Hire a faculty member with research emphasis in the behavioral aspects of primary care and rural medicine.
- Request additional laboratory space as more research space becomes available at OSU-CHS.
- Pursue intramural and extramural funding for scholarly activities.
- Collaborate with colleagues at OSU and other institutions to pool resources and develop viable research projects.
- Establish a program whereby graduate students from other programs and institutions can participate in departmental research projects.

**Objective 2.2:** Promote community awareness regarding mental health issues and current research while enhancing OSU-CHS image and recognition.

Strategies:

- Faculty will participate in such activities as Mini-Medical School, Tulsa Mental Health Association, National Alliance for Mentally Ill and other public forums.

**Goal Three. Increase faculty and clinical trainee development through inservice programs.**

**Critical Success Factors:**

- Provide site visits and/or educational development to each clerkship site every two years.
- Provide instruction through distance learning to statewide sites.

**Objective 3.1:** Expand training to clerkship preceptors.

Strategies:

- Arrange site visits to all preceptors to explain course teaching objectives.

**Objective 3.2:** Offer training in psychiatry and behavioral health to distant sites via the Internet and telemedicine.

Strategies:

- Assess needs for course work at distant sites in collaboration with Rural Health.