

Nebraska Psychiatry



Winter 2018

A Publication of the Nebraska Psychiatric Society

Talk Amongst Yourselves - Reception

NPS will be hosting our social event February 2 and we hope to see you there. We have a lot to discuss--new psychiatrists joining our community, national trends in mental health parity, and changes in the entire health care system are a few hot topics. Of course we also want to get reacquainted with friends and colleagues, especially those who can still regale us with stories of working at Richard Young in Omaha, St Joseph Center for Mental Health, and the Nebraska Psychiatric Institute. We hope that NPS will be a topic of discussion--our professional society is working hard to advocate for you and your patients, and the future of our profession.

So come to the meeting, and talk amongst yourselves--Nebraska's statewide electronic medical health information system (NeHII--it's free for you to access, by the way, go to <https://nehii.org/>) is now live: should mental health records be sequestered from the rest of the medical record when primary care providers are delivering more and more mental health care? Is psychotherapy more like physical therapy or more like a primary care office visit? How can NPS support APRN's specializing in psychiatry to provide best practice care, especially in underserved areas of the state? We have a new University of Nebraska football coach--what does the future hold for sports like

football that can permanently damage young brains?

We are a thoughtful profession and an erudite group--we look forward to hearing your contributions to the conversations. Please join the fun! And as always, thank you for all you do and for your support of NPS.



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Authors' opinions do not necessarily reflect the official opinion of the Nebraska Psychiatric Society.

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Join Us.
Winter Social Open House

Friday, February 2, 2018
5:30 - 8:30 PM

Beverages and dinner buffet.

Please RSVP by January 31
to Halie Smith at
hsmith@omahamedical.com.

Ethics & Legislative Updates

I continue to attend monthly NABHO (Nebraska Association of Behavioral Health Organizations) meetings as your NPS representative, as well as meetings of providers contracting with Nebraska's three managed care organizations through Nebraska's Heritage Health Medicaid program. It appears many of the start-up problems have been resolved, with significantly fewer complaints in the past few months. If you are experiencing bureaucratic challenges in providing services to Heritage Health Medicaid members, please let me know.

Psychologist Prescribing Proposal

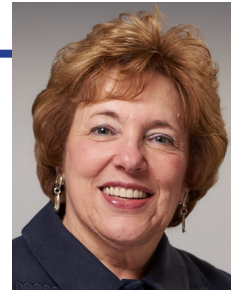
The third step of Nebraska's DHHS Technical Review Process of psychologist prescribing has concluded, with the

opinion of the DHHS Public Health chief medical officer that the application did not meet any of the required criteria. Even so, the psychologist group is free to seek a senator to sponsor a bill, and we do not know if they will attempt this for the 2018 January-March "short" legislative session, or will wait until the 2019 January-May session. We continue to work with our Radcliffe and Associates lobbyist, Korby Gilbertson, J.D., and were pleased to receive continued support from the APA Committee on Advocacy and Litigation Funding to extend our lobbying efforts into 2018 and 2019. The wave of psychologists seeking prescribing privileges continues to extend across the country, but most state legislatures have not passed bills.

Connecticut is the next state to watch because DHHS there has agreed to sponsor legislation despite opposition from physician, nursing, and hospital associations.

Although this report is a brief one, stay tuned because it's certain there's more to come!

Respectfully submitted,
Beth Ann Brooks, M.D., M.S.A.
Ethics and Legislative Chair



Beth Ann Brooks, M.D.

Innovative Treatment Model for Substance Use Disorders

Nebraska Medicine Behavioral Health is now offering a new model of treatment for substance use disorders. Dr. Alëna A. Balasanova is leading the Nebraska Medicine Addiction Services (NMAS) integrated treatment continuum, with additional clinical support from residents and licensed clinical therapists. In contrast to the traditional SUD therapeutic models most psychiatrists in Nebraska are accustomed to (which included, as one veteran SUD counselor once described, "Detox that was like tearing bark from the tree,") NMAS is built on a foundation of harm reduction, motivational interviewing, and medical integration.

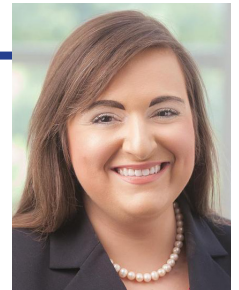
At NMAS the treatment continuum includes a spectrum of integrated outpatient services designed to provide long term management of patients. Services offered include Medication-Assisted Treatment (MAT) of opioid and alcohol use disorders, psychopharmacology services for co-

occurring psychiatric disorders as well as individual and group psychotherapies.

The integrated treatment format aims to treat both SUD and psychiatric illness concurrently by the same treatment team. The NMAS approach to addictions emphasizes SUD as a chronic, relapsing medical illness with potential for long-term remission and recovery. Prospective patients must initiate the process for entry by personally calling to schedule an Orientation Group session.

These sessions are offered every week, eliminating waiting lists and increasing access to care.

Orientation group is currently held on Tuesdays at 3pm.



Alëna Balasanova, M.D.

MARK YOUR CALENDARS

NPS MEETINGS

Executive Committee Mtg

January 10 - 5:30 PM

MOMS Board Mtg

Winter Social Open House

February 2 - 5:30-8:30 PM

Metro Omaha Medical Society

7906 Davenport St

APA MEETINGS

2018 Annual Meeting

May 5-9

New York, NY

2018 IPS: The Mental Health Services Conference

Oct 4-7

Chicago, IL

A Sample of History in Psychiatry in Omaha

The first known physician that engaged in any psychiatric training was Dr. G. Alexander Young, who after completing his medical education at the Chicago Homeopathic Medical College in 1900, initially practiced at the Norfolk State Hospital and the Lincoln State Hospital. In 1909-1910, he spent a year abroad in London, England and Zurich, Switzerland to study neurology and psychiatry with an emphasis on psychoanalysis. Upon his return to the states he opened a private practice, started teaching at Creighton as a professor of Nervous and Mental Diseases, and became chairman of the Creighton Department of Neurology and Mental Diseases from 1913-1916. He subsequently became chairman of Neurology and Mental Diseases at the UNMC in 1921, where he practiced until 1947.

In 1948, the Nebraska Psychiatric Unit, a 20 bed facility at Douglas County Hospital was founded jointly by the Nebraska State Board of Control and the University of Nebraska College of Medicine. Concurrently, the Veteran's Administration opened the Veteran's Administration Hospital on 42nd and Dewey, with the existing staffs of both UNMC and Creighton committed to providing psychiatric services. The following year in 1949, St. Joseph Hospital expanded its previous 30-bed mental health annex to a 150 bed unit, The Our Lady of Victory Pavilion.

In 1950, Dr. Cecil L. Wittson was recruited to the Nebraska Psychiatric Unit. A graduate of the University of South Carolina in 1931, he had served as a naval psychiatrist during WWII. When Dr Wittson was told in 1951 that UNMC would have to vacate the premises, Dr. Wittson proposed construction of the Nebraska Psychiatric Institute, a 100 bed facility with combined roles of treatment, training and research. This was a \$1.5 million alternative to the previously proposed \$18 million dollar, 1800 bed mental hospital in Omaha currently on the table, and was received as both advantageous and "ahead of it's time".

In 1955, the Nebraska Psychiatric Institute opened, with 60 adult beds, 10 for geriatric research, and 26 for children. In addition, arrangements were made for outpatients, a day hospital, and the first telemedicine service in the country. It was in this setting that Dr. Wittson and his team practiced, with the establishment of the state's first psychiatric residency program, a five year course of study, including two years at one of the state's mental hospitals. Subsequently in 1964 Dr. Wittson became Dean of the University College of Medicine. By 1972, the year that Dr. Wittson retired from the UNMC, there were fewer than 1400 people in Nebraska mental hospitals.

With the close of NPI in 1985 the care of Omaha and eastern Nebraska psychiatric patients fell to St. Joseph Hospital, Immanuel Medical Center and Richard Young Hospital. Dr. Frank Menolascino became the chairman of the UNMC Department of Psychiatry the year NPI closed and subsequently became chairman of the Combined Creighton-Nebraska Department of Psychiatry in 1987. A dedicated advocate for the "dually diagnosed", i.e. the intellectually disabled and psychiatrically challenged, Dr. Menolascino also was the energy behind combining the Nebraska and Creighton psychiatric residency programs and the development of the St. Joseph Center for Mental Health. By 1990 the addition of a 60 bed unit and an intensive care unit were in place. Despite his early demise in 1992, psychiatric services in Omaha had prospered.

In 1998 St. Joseph hospital closed, and subsequently Richard Young Hospital closed in 1999, and the community of

Omaha was under siege. Immanuel Hospital became the fall back for the psychiatric inpatients during this time and it was not until 2007, when the Alegent system opened (or rather re-opened) Richard Young Center that the bed shortage in Omaha somewhat lessened.



Dr. Cecil L. Wittson



Dr. Frank J. Menolascino

Currently the Omaha community has four hospitals available for psychiatric inpatient care: Immanuel, Lasting Hope, Douglas County, and the Veterans Administration. Creighton University is the site of the current psychiatry residency program of Nebraska with Dr. Thomas Svolas as its chairman. Stay tuned for future developments.

Nebraska and US Psychiatry Residency Trends

It is interview season for medical students seeking a position for 2018-19. Along with recent increases in the number of local medical students choosing

psychiatry as a career, there is a national trend of growing interest in the field. As more applicants are seeking Nebraska psychiatry residency positions, the application process is also becoming more rigorous. This year, for example, any applicants who are out of medical school longer than 12 months must have completed Step 3 in order to apply. To be considered for an interview, the candidates must now meet higher minimum acceptable scores on the United States Medical Licensing Examination (USMLE) and Comprehensive Osteo-

pathic Medical Licensing Examination of the United States (COMLEX). The 2017 Residency Match was the largest on record, with 35,969 US and international candidates applying to 31,757 positions. Psychiatry offered 1,495 first-year positions, 111 more than in 2016, and filled all but four. The overall fill rate was 99.7 percent, and 61.7 percent were filled by U.S. seniors. Since 2012, the number of Psychiatry positions has increased 378, or 34 percent, and the number of positions filled by U.S. allopathic seniors has increased by 307.

Nebraska Psychiatric Society wishes success to those seeking a residency or fellowship and to the Creighton-Nebraska Residency Program for finding the best talent to represent and care for us in the future. (Source:<http://www.nrmp.org/press-release-2017-nrmp-main-residency-match-the-largest-match-on-record/>, and thanks to Adrienne Van Winkle, Senior Residency Coordinator, and Spencer Gallner PGY-4 for their contributions to this article).

Creighton-Nebraska Residency									
	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Applications Received	627	603	623	728	781	964	936	925+	965
Applicants Interviewed	51	70	73	70	80	68	52	67	80

Assembly Report

NPS Assembly Representative Syed Faiz Qadri attended the November 2017 APA meeting in Washington, DC. For his comprehensive coverage of the events, visit the link listed below. Highlights include national initiatives underway by your APA to support membership, enhance psychiatry through innovation, and promote provider well-being. An interesting recommendation from the workgroup on wellbeing: promote the development of leaders in healthcare that have extensive clinical experience. Note also that APA headquarters will be moving the first week in January.

View full report at:
www.nebraskapsych.org,
Click on "Information Items"
[http://www.nebraskapsych.org/ew_library_file/
AssemblyRepresentativeReport%20Winter%202017.pdf](http://www.nebraskapsych.org/ew_library_file/AssemblyRepresentativeReport%20Winter%202017.pdf)