

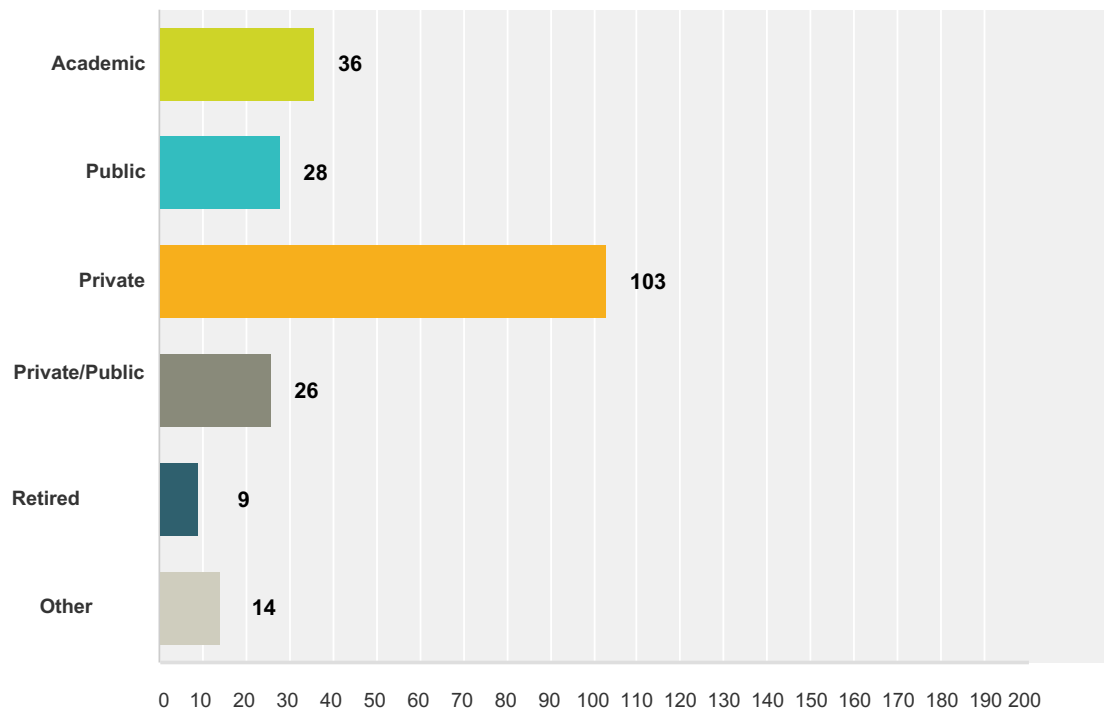
## 2014 Maryland Psychiatric Society Annual Survey

Thank you to members who completed the annual MPS survey online or returned the survey enclosed with the FY14 dues mailing. As of September 29th, we received 224 responses! Three respondents were chosen at random to receive a \$100 credit toward MPS dues or events. The lucky recipients are: David Cowie, M.D., Carmen Lopez, M.D. & Brian Siegel, M.D.

Member input through the survey is essential, and is shared with MPS leadership and committees so it can inform decision-making during the year.

### Q1 Please describe your practice:

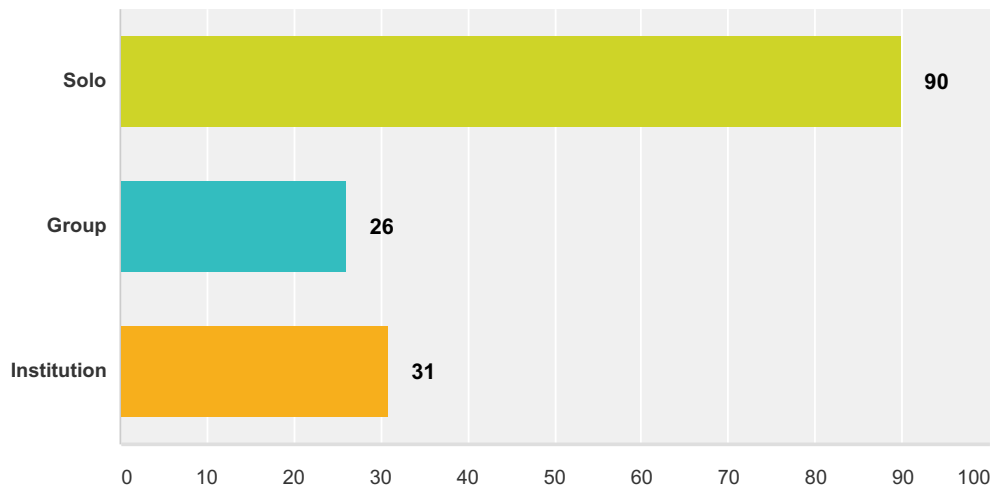
Answered: 216 Skipped: 8



Answer Choices	Responses	Count
Academic	16.67%	36
Public	12.96%	28
Private	47.69%	103
Private/Public	12.04%	26
Retired	4.17%	9
Other	6.48%	14
<b>Total</b>		<b>216</b>

**Q2 If you are in private practice, please select one:**

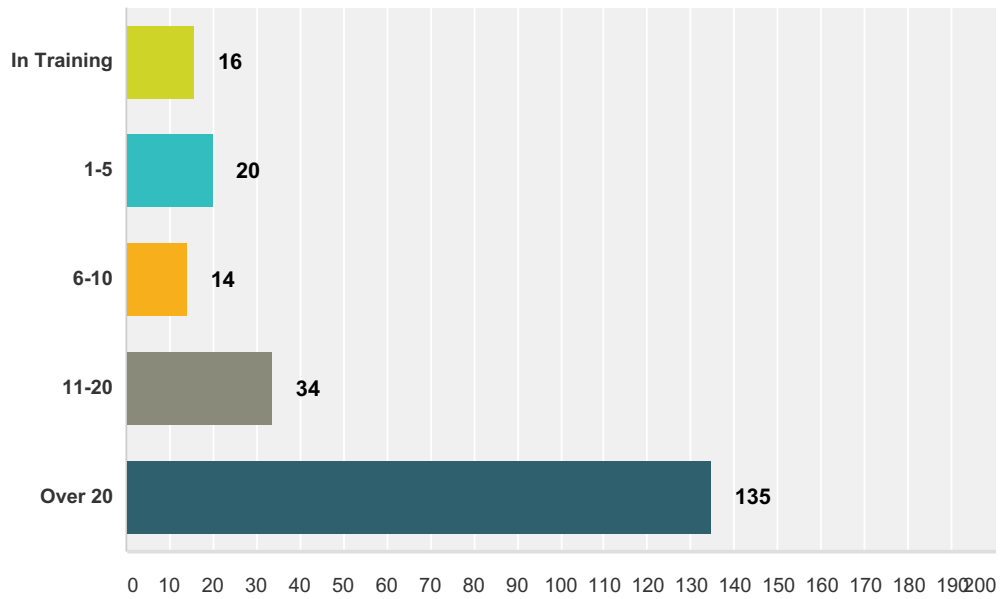
Answered: 147 Skipped: 77



Answer Choices	Responses
Solo	61.22% 90
Group	17.69% 26
Institution	21.09% 31
<b>Total</b>	<b>147</b>

### Q3 How long have you been in practice?

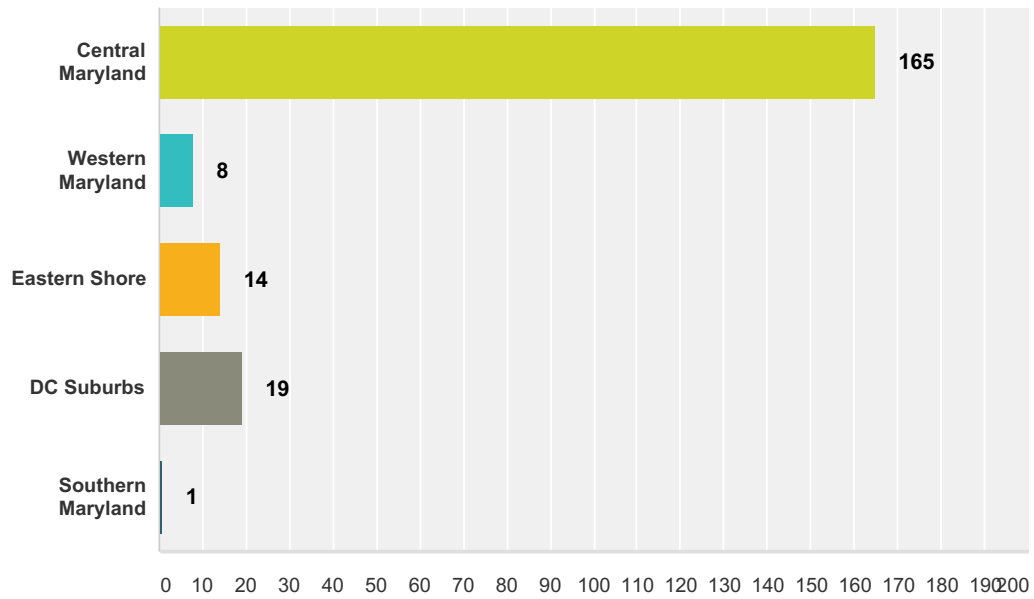
Answered: 219 Skipped: 5



Answer Choices	Responses	
In Training	7.31%	16
1-5	9.13%	20
6-10	6.39%	14
11-20	15.53%	34
Over 20	61.64%	135
<b>Total</b>		<b>219</b>

### Q4 Where is your primary place of practice?

Answered: 207 Skipped: 17



Answer Choices	Responses
Central Maryland	79.71% 165
Western Maryland	3.86% 8
Eastern Shore	6.76% 14
DC Suburbs	9.18% 19
Southern Maryland	0.48% 1
<b>Total</b>	<b>207</b>

#	Other (please specify)
1	Baltimore co
2	Baltimore
3	National
4	montgomery co and howard county
5	DC
6	Baltimore
7	Baltimore
8	Johns Hopkins Bloomberg School of Public Health
9	Baltimore City
10	Baltimore
11	entire state

## 2014 Maryland Psychiatric Society Annual Survey

12	baltimore city	
13	Towson	
14	baltimore	
15	National	
16	Baltimore City	

## Q5 What Is Your Top CME Need?

Answered: 138 Skipped: 86

#	Responses	Date
1	How to make CPT-10 and DSM5 useful	
2	Mailed CME credit case based concerning management of geriatric patients.	
3	Psychopharmacology Interface of Pediatrics / Medical psychiatry Psychosomatics , psychological factors affecting medical illness . Child and adult abuse / patient advocacy	
4	Legal aspects, Medical record keeping, Dealing with difficult cases,	
5	NA right now. In training	
6	REVIEW of DSM5	
7	genetically-based therapies with promise for effective relief of some symptoms, so we can offer hope to patients and families burdened with schizophrenia-spectrum illnesses	
8	Psychopharmacology	
9	Substance Abuse topics	
10	Psychopharmacology, disability determination	
11	None at the moment	
12	For MoC	
13	DSM-V update, psychopharm update.	
14	Addictions	
15	N/a in training	
16	New DSM-5 diagnoses	
17	Quality of Care, Limits of Evidence Based Medicine especially in Psychiatry	
18	Child Psychiatry, Child Abuse	
19	How to bill PQRS	
20	Bipolar disorder	
21	Information regarding patient centered medical home and psychiatry	
22	Ethics, MOC	
23	Child/Adolescent	
24	Psychopharmacology	
25	Psychopharmacology	
26	Child Psychiatry, Culture, Internet	
27	Psychopharmacology	
28	Substance Abuse Issues	
29	personality disorders	
30	Psychopharmacology	
31	Dual Diagnosis, Drug Addiction and Mental Illness	
32	Psychopharmacology updates	

## 2014 Maryland Psychiatric Society Annual Survey

33	When treating adolescent in therapy, interfacing with parents to maintain patient privacy and meet parents' need to know.	
34	Treatment resistant depression and variant bipolar disorder	
35	Psychopharmacology	
36	Psychopharmacology	
37	Substance abuse related CME	
38	Psychopharmacology	
39	Administrative Topics, Psychopharmacology, Evidenced Based Treatment and Maintenance of Certification (General Psychiatry and Child/Adolescent Psychiatry)	
40	90 credits every 3 years	
41	Psychopharmacology, DSM5	
42	Psychopharmacology, Mood Disorders, PTSD	
43	Psychopharmacology updates	
44	Pharmacology, and updates to evidence based practices(changes)	
45	Substance Abuse	
46	Geriatric Psychiatry	
47	Update on Medications	
48	Resistant Depresssion	
49	Psychopharmacology, Risk Management	
50	Addiction	
51	Psychopharmacology	
52	Psychopharmacology	
53	medication management	
54	Basic neurophysiological principles as related to clinical practice	
55	For MOC requirements, renewal of license	
56	Information about regulatory requirements Updates about clinical concerns	
57	psychodynamic topics. pharmacology updates.	
58	psychopharmacology	
59	psychopharmacology PTSD-military/VA suicides	
60	MOC requirements Ethics Specialty areas like sleep, geriatrics, ADHD	
61	good programs on psychotherapy and psychopharm	
62	None	
63	I am actually Professor Emeritus at Hopkins Public Health School and don't need CME	
64	Psychopharm, Assessing violence,	
65	Pharmacology	
66	Changes in treatment guidelines, review of new medications and therapies	
67	Psychopharmacology	
68	none	
69	Psychotherapy (Brief(	

## 2014 Maryland Psychiatric Society Annual Survey

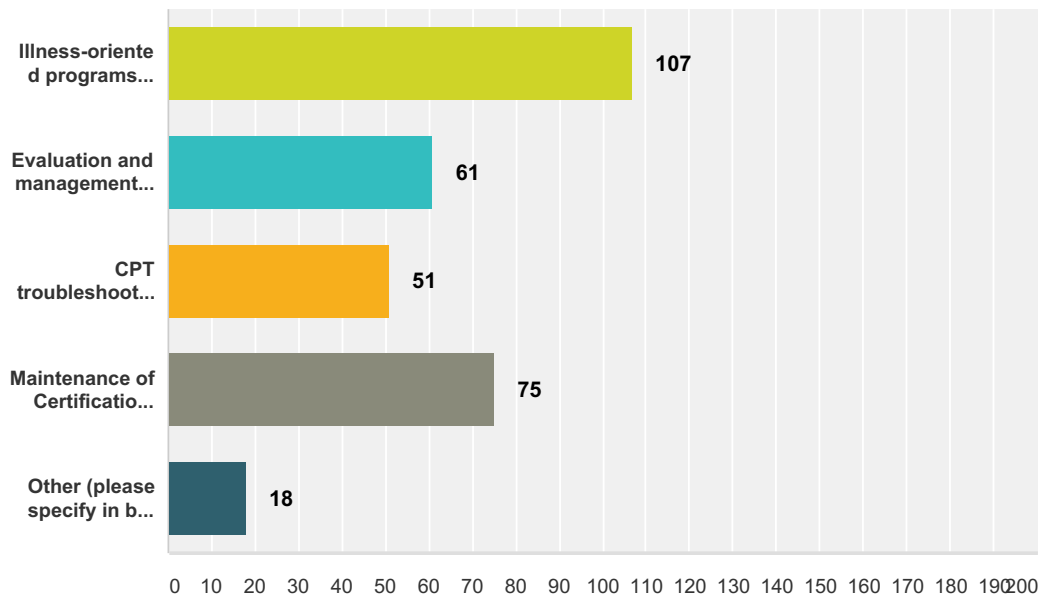
70	psychotherapy	
71	practice improvement	
72	DBT primer	
73	psychopharm and other innovative medical treatments of psychiatric disorders	
74	CPT CODING	
75	1. Administrative Psychiatric--joint commission and CMS regs 2. Adjusting to DSM 5	
76	Depression	
77	most interested in neuropsychiatric illnesses	
78	Updates about psychopharmacology	
79	New meds	
80	drug-drug interactions	
81	Certification workshops	
82	psychopharmacology	
83	new medications	
84	PIP units for board recertification	
85	psychopharm	
86	Self Assessment credits Genetic evaluation in Autism Spectrum Treatment of DMDD	
87	Forensics	
88	Legal aspects Addictions	
89	psychopharm for children	
90	Updates in pharmacology Forensics	
91	100	
92	substance abuse and dual diagnosis	
93	Updates on new medications, research etc.	
94	Psychopharm	
95	new medications	
96	whatever that can be used as part of the MOC	
97	Personality disorders	
98	good cme	
99	MOC	
100	Maintenance of certification	
101	New meds	
102	psychopharmacology	
103	Variety of psychiatric subjects and new treatment approaches .	
104	Understanding what need for the MOC requirements	
105	Psychopharmacology	
106	psychopharmacology forensics--dangerousness, suicide	
107	Forensic Issues	



108	MOC	
109	training in substance abuse, PTSD	
110	self-assessment cmes to be easily available. or on webinars	
111	Psychopharm	
112	routine	
113	Advances in Neurobiology	
114	None currently in training	
115	new medications in the pipeline	
116	Psychopharm updates	
117	Ethics	
118	Advances in medication treatments; EMR implementation	
119	C & A Psychiatry Neuropsychiatry updates	
120	forensic issues	
121	don't know	
122	A priority, mostly in medical / legal areas, medical record keeping areas.	
123	just getting enuf hours	
124	Updates on psychopharmacology.	
125	300	
126	Practice business, regulatory compliance issues, ethics Psychopharmacology Psychotherapy	
127	not sure	
128	Ethics in Psychiatry	
129	PSYCHOPHARMACOLOGY	
130	MOC certification	
131	UpDates on psychopharmacology	
132	MOC	
133	Information on how to fill in the new Medicare forms, etc.	
134	new treatment options	
135	Interesting scientific conferences.	
136	none	
137	To acquire sufficient hours	
138	MOC part 2 (self assessment) credits	

### Q6 What CME events would you be most likely to attend? Please mark all that apply.

Answered: 189 Skipped: 35



Answer Choices	Responses
Illness-oriented programs (please specify in box below)	56.61% 107
Evaluation and management workshop	32.28% 61
CPT troubleshooting and problem solving	26.98% 51
Maintenance of Certification workshop	39.68% 75
Other (please specify in box below)	9.52% 18
<b>Total Respondents: 189</b>	

#	Other (please specify)	Date
1	Mailed CME that I can do at my convenience. Not something on-line.	
2	Treatment resistant,	
3	Affective disorders, Anxiety disorders, Trauma disorders, Cognitive disorders, Psychoses.	
4	Geriatric populations	
5	Real Experts talking about government regs and government (especially State of MD) role in treatment of psychiatric patients.	
6	Self Improvement, Early childhood	
7	eating disorders	
8	Inpatient, management of psychotic and affective disorders	
9	Major depression	
10	Therapy oriented dilemmas and skill building	

## 2014 Maryland Psychiatric Society Annual Survey

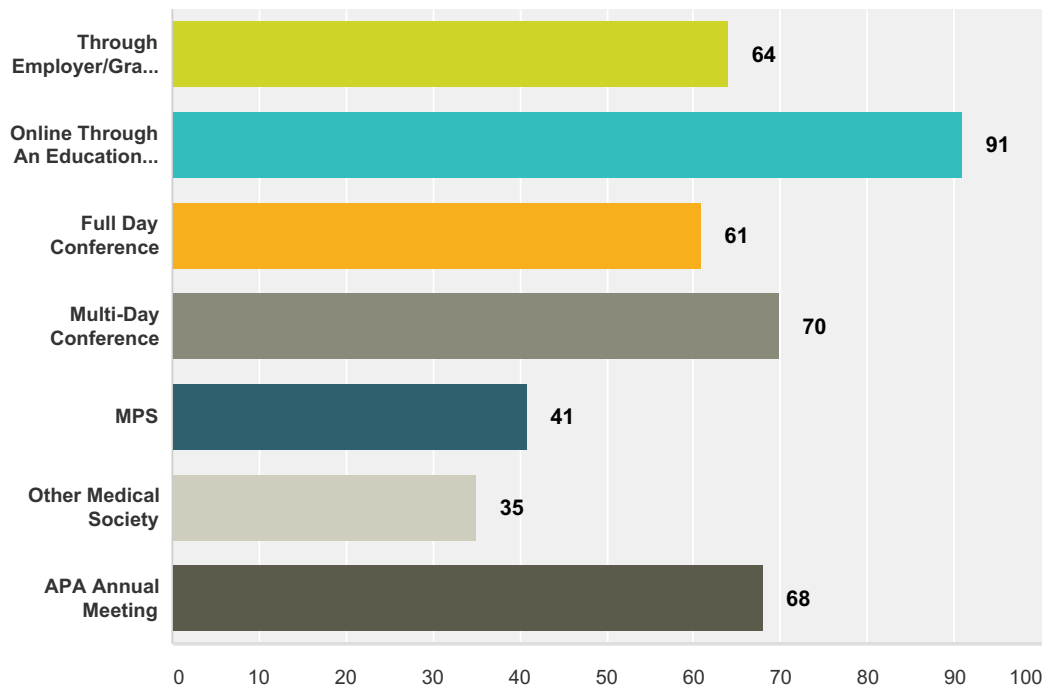
11	college psychiatry	
12	Controversial speakers in psychiatry	
13	Online CME activities	
14	Mood disorders, anxiety disorders, substance use disorders, adult ADHD	
15	Childhood disorders	
16	Depression	
17	PTSD, Major Depression, Anxiety Disorders	
18	Borderline PD	
19	lectures on the topics mentioned above.	
20	Diabetes;cancer;headaches;insomnia	
21	programs that focus on the clinical use of medications	
22	ADhD, Bipolar disorder, Autism Spectrum	
23	Treatment for mood and anxiety disorders, substance use disorders	
24	Online course	
25	Anxiety disorder	
26	psychotherapy workshop(s)	
27	practice and quality improvement	
28	Borderline patients	
29	bipolar disorder treatment resistant depression post traumatic stress disorder sleep disorders comorbidity with medical disorders especially thyroid	
30	See #1 above	
31	depression	
32	Discussion of systems issues and what would incentivize psychiatrists to work with underserved DD population	
33	Depression .Bipolar illness	
34	treating depression in auto-immune illnesses.	
35	psychopharm OCD Bipolar d/o suicide/violence assessment	
36	webinars	
37	perinatal psychiatry	
38	addictions;pschopathy	
39	Schizophrenia, bipolar	
40	almost any common psychiatric condition	
41	Addictions Medical co-morbidity	
42	substance abuse and dual diagnosis	
43	Mood, psychotic and anxiety disorders. Sleep and addictions.	
44	Personality disorders	
45	Clinical issues and treatment of difficult Psychiatric problems .	
46	bipolar depression treatment resistant depression dementia	
47	DSM-5	

## 2014 Maryland Psychiatric Society Annual Survey

48	see above	
49	PTSD Treatment/Attachment issues in development of personality disorders / Effects of marijuana on brain .	
50	Refractory depression	
51	Neurobiology Conference	
52	treatment-resistant depression and bipolar depression	
53	Psychopharm updates	
54	Ethics	
55	Schizophrenia and other psychoses Bipolar Disorder Borderline Personality Disorder Antisocial Personality	
56	Unlikely to attend	
57	Panel discussion of ethics topics and/or cases	
58	emphasis to the younger members on the inestimable value of dynamic long term psychotherapy.	

### Q7 Where do you primarily obtain your CME credit? (Check all that apply)

Answered: 199 Skipped: 25



Answer Choices	Responses
Through Employer/Grand Rounds	32.16% 64
Online Through An Education Company	45.73% 91
Full Day Conference	30.65% 61
Multi-Day Conference	35.18% 70
MPS	20.60% 41
Other Medical Society	17.59% 35
APA Annual Meeting	34.17% 68
<b>Total Respondents: 199</b>	

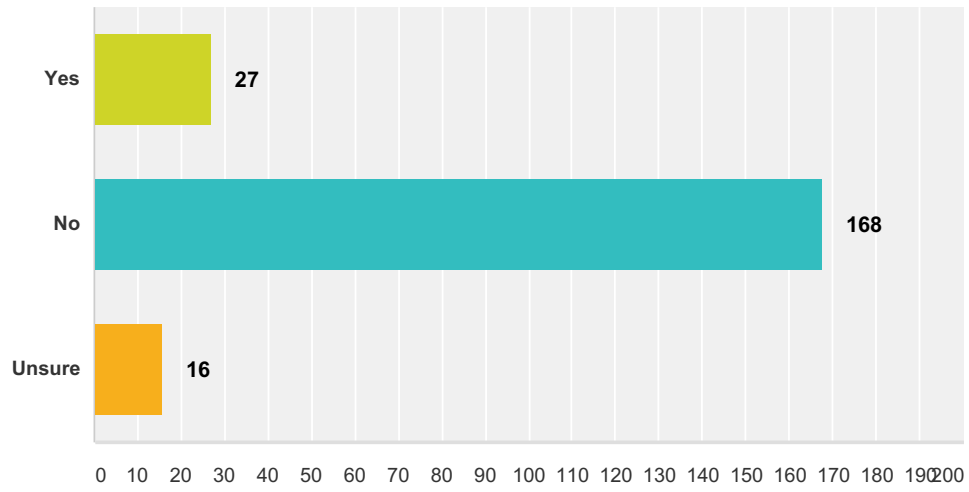
#	Other (please specify)	Date
1	CME on Western Shore - Baltimore area.	
2	AACAP	
3	NA - in training	
4	AACAP FOCUS Carlat Report	
5	Audio CD	
6	N/A. I'm currently a trainee	

## 2014 Maryland Psychiatric Society Annual Survey

7	AACAP	
8	online through APA and JHU	
9	Association with psychoanalytic institute	
10	AAAP, AMA, ASAM, AAMRO, ASCP	
11	APA via FOCUS CME program	
12	audio digest psychiatry	
13	I buy CME courses	
14	MED-Chi	
15	American Psychoanalytic Mass General	
16	public health and prevention science meetings and implementation of services meetings	
17	AACAP mtgs.	
18	ACP	
19	Other annual meetings as well as the APA	
20	on-line	
21	AAPL annual meeting	
22	FOCUS program of APA	
23	BCMA MED CHI APsaA IPA	
24	FOCUS	
25	online	
26	Free. APA journal and others. Med chi	
27	APA online	
28	AAPL conference	
29	apa and acaap modules	
30	AACAP Annual Meetings	
31	audio-digest: cd's I listen to in the car, and then take tests on	
32	Audiodigest	
33	online thru medscape.	
34	Biological Therapies in Psychiatry	
35	AACAP Annual Meeting	
36	AACAP sponsored activities	
37	FOCUS APA publication	
38	Carlat newsletter, Psychoanalytic Film festival	

### Q8 Do you have difficulty obtaining enough CME credits before licensure renewal?

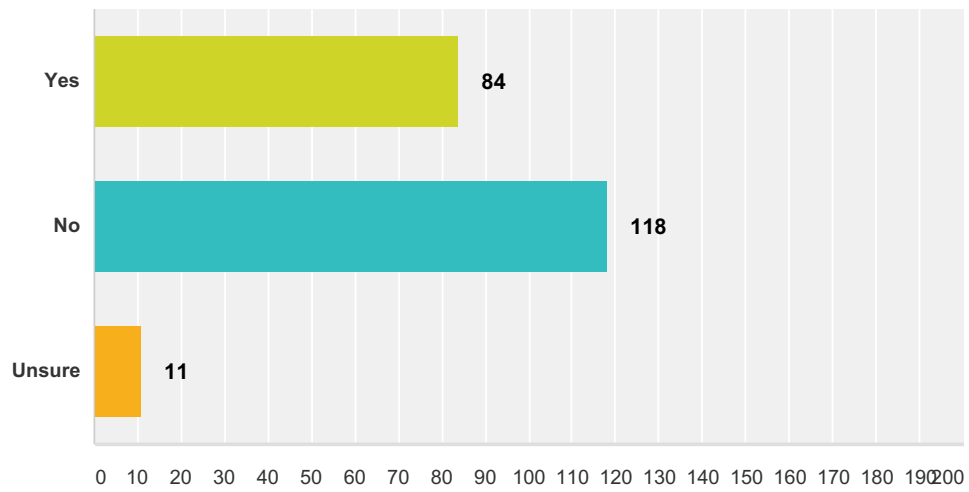
Answered: 211 Skipped: 13



Answer Choices	Responses
Yes	12.80% 27
No	79.62% 168
Unsure	7.58% 16
<b>Total</b>	<b>211</b>

### Q9 Have you attended a MPS sponsored education activity in the past year?

Answered: 213 Skipped: 11

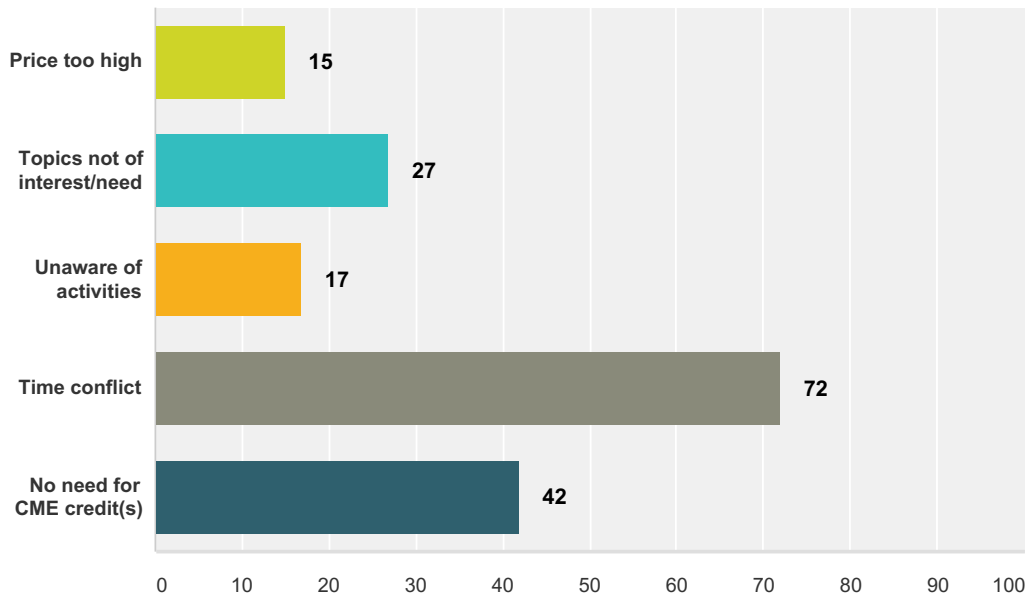


Answer Choices	Responses
Yes	39.44% 84
No	55.40% 118
Unsure	5.16% 11
<b>Total</b>	<b>213</b>



### Q10 If no, why not? (Check all that apply)

Answered: 123 Skipped: 101

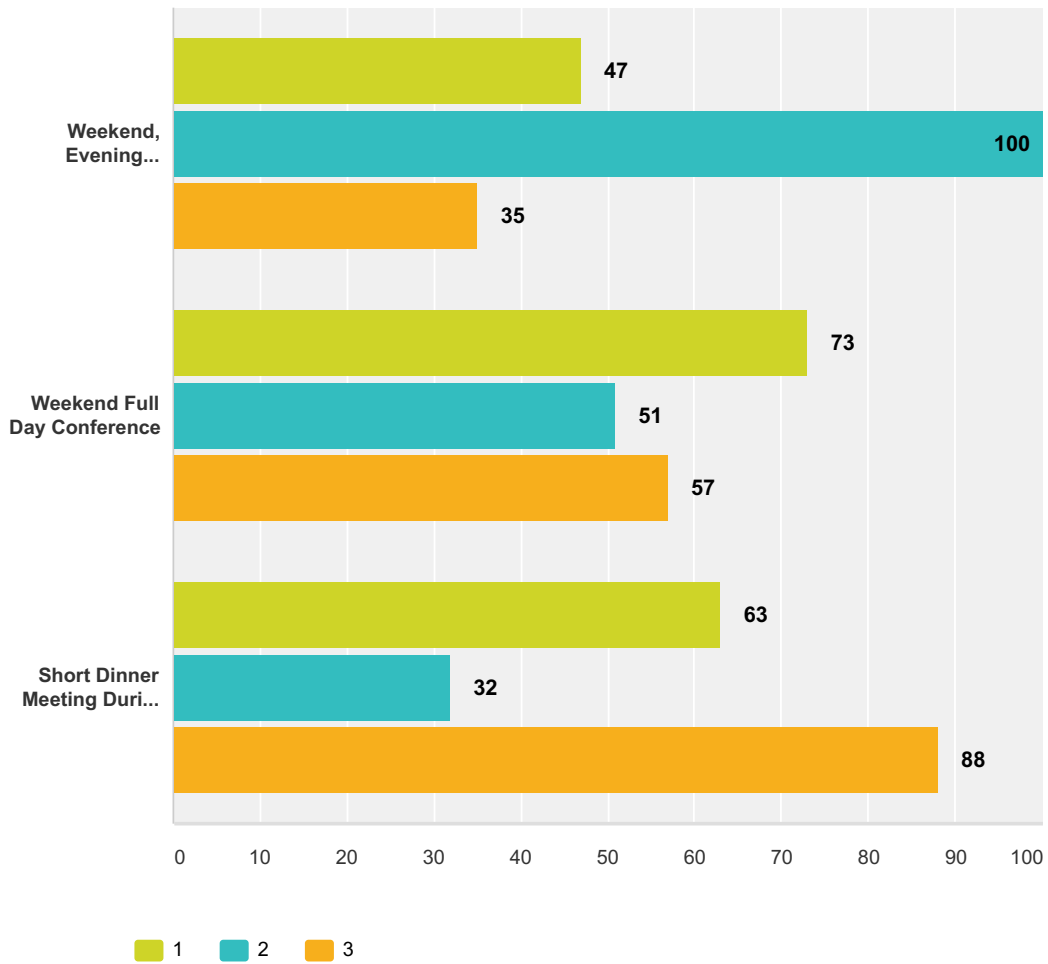


Answer Choices	Responses	
Price too high	12.20%	15
Topics not of interest/need	21.95%	27
Unaware of activities	13.82%	17
Time conflict	58.54%	72
No need for CME credit(s)	34.15%	42
<b>Total Respondents: 123</b>		

#	Other (please specify)	Date
1	As an older physician (age 70), I prefer not driving to Baltimore and leaving a CME program at 10PM or 11 PM to drive 3 hours to get home.	
2	location of activity often in/near Baltimore	
3	other	
4	Meagan, question #11 won't allow changing of numbers to rank. Should be 3-1-2	
5	Evening events are difficult but usually the only time I can attend; topics that I have seen (not seen too many) have not been of great interest.	

### Q11 Which type of CME activity are you most likely to register for/attend? (Please rank highest to lowest, with 1=highest)

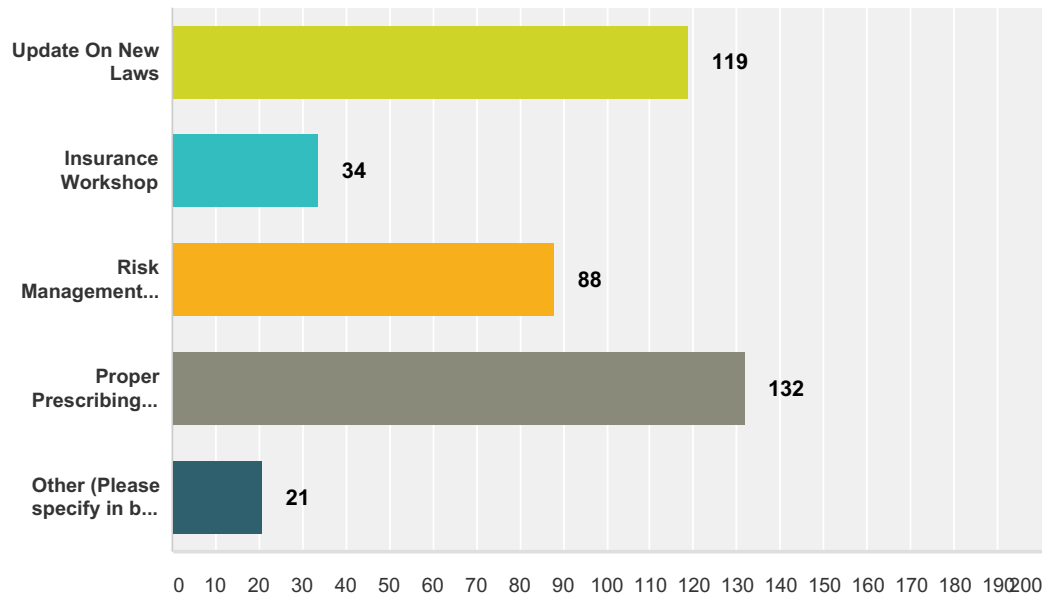
Answered: 183 Skipped: 41



	1	2	3	Total	Average Ranking
Weekend, Evening Play/Movie Event	25.82% 47	54.95% 100	19.23% 35	182	2.07
Weekend Full Day Conference	40.33% 73	28.18% 51	31.49% 57	181	2.09
Short Dinner Meeting During Work Week	34.43% 63	17.49% 32	48.09% 88	183	1.86

### Q12 Which meeting topics/opportunities are you most interested in attending? (Check all that apply)

Answered: 193 Skipped: 31



Answer Choices	Responses
Update On New Laws	61.66% 119
Insurance Workshop	17.62% 34
Risk Management Workshop	45.60% 88
Proper Prescribing Guidelines	68.39% 132
Other (Please specify in box below)	10.88% 21
<b>Total Respondents: 193</b>	

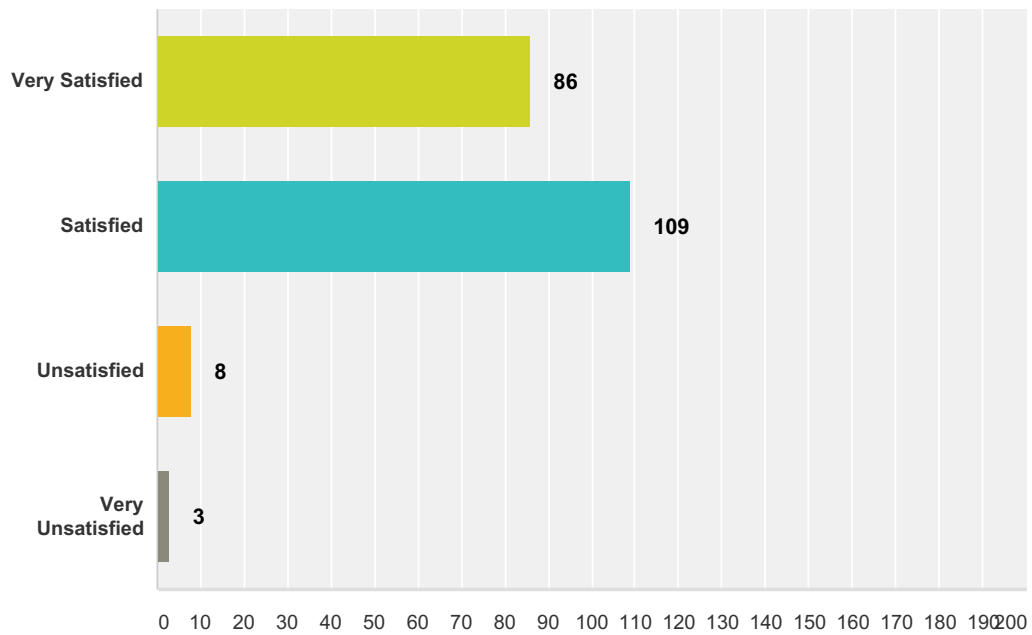
#	Other (please specify)	Date
1	Using DSM-V and billing with DMS V	
2	case studies	
3	Diagnosis and treatment - disease specific	
4	update on dsm5 new psychopharm updates	
5	Clinical meeting	
6	New medications and where they fit into practice	
7	DSM5	
8	psychotherapy - adolescent, ask the expert	
9	Practice management and eprescribing software	
10	Future of psychiatry/career paths and economics of psychiatry	

## 2014 Maryland Psychiatric Society Annual Survey

11	Evidence based medicine, DSM5, New CPT Coding	
12	Analysis of Shakespeare plays	
13	topics mentioned above: psychodynamic discussions, pharmacology updates.	
14	Prevention science and implementation services programming	
15	psychotherapy workshop	
16	Administrative/sytems issues	
17	New rx	
18	Medical co-morbidity addictions-prescription abuse	
19	clinical	
20	Psychotherapy, personality disorders	
21	Neurobiology	
22	Ethics	
23	filling in medicare forms for psychotherapy	

### Q13 What is your overall level of satisfaction with the MPS?

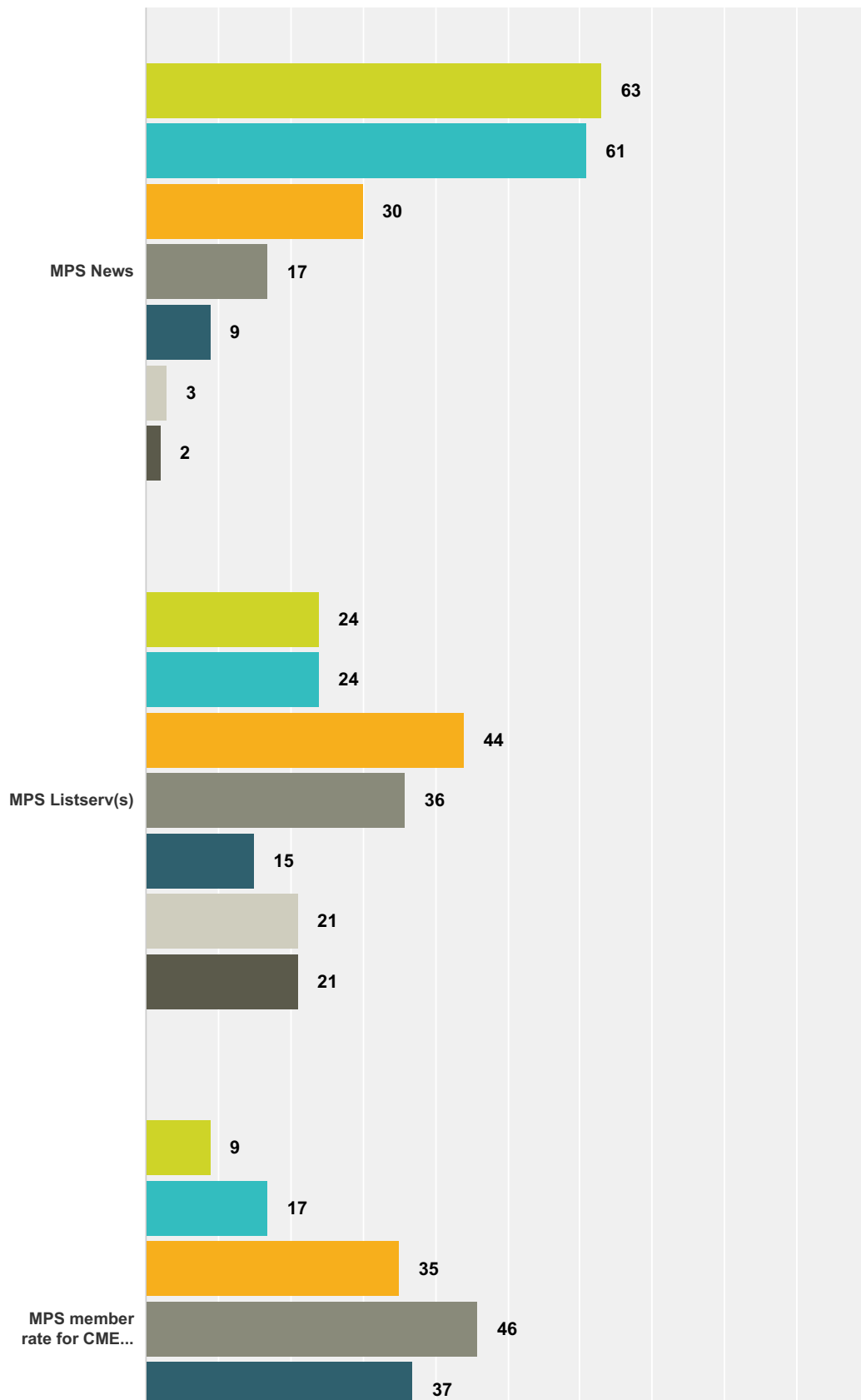
Answered: 206 Skipped: 18



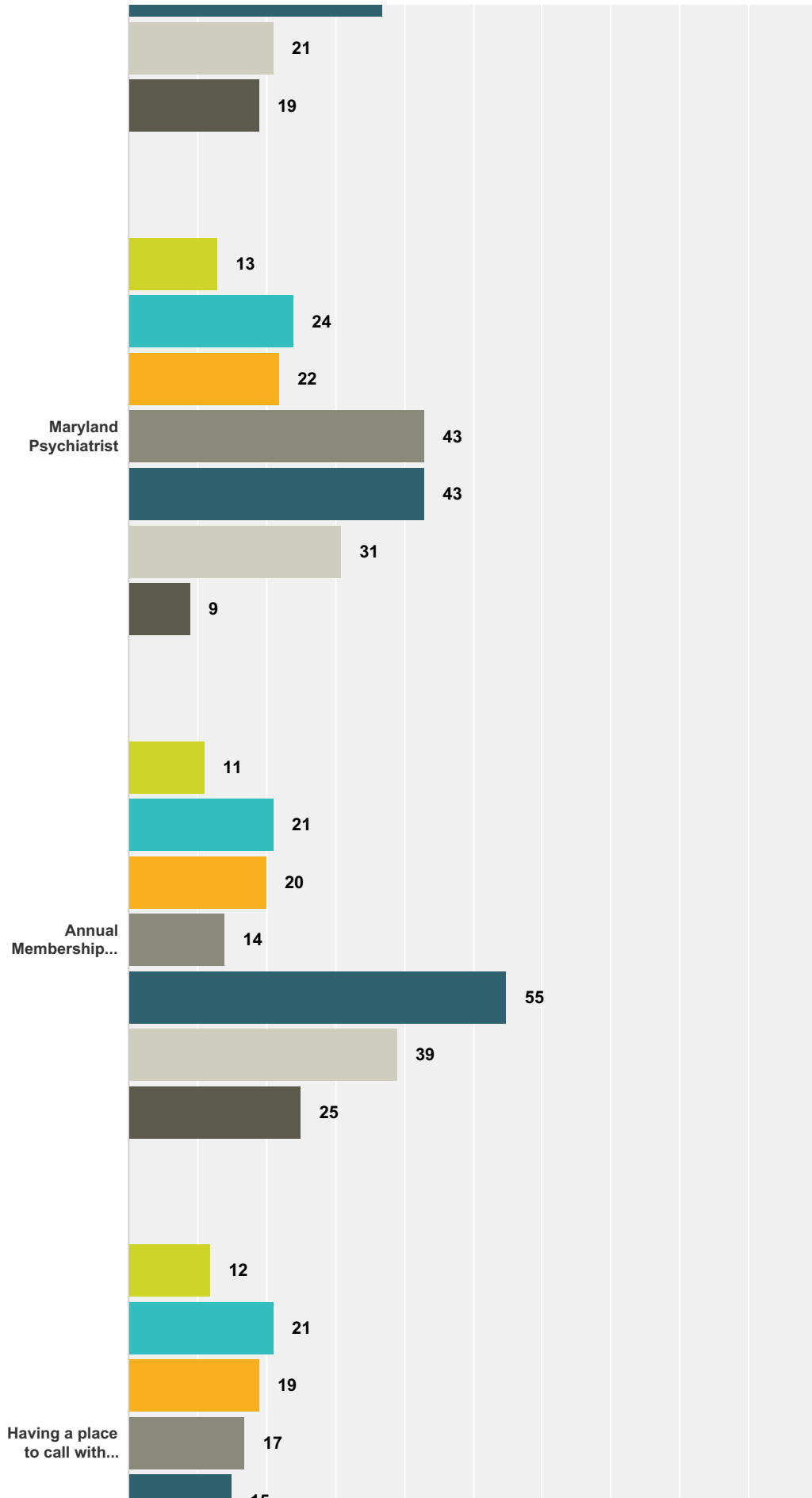
Answer Choices	Responses	Count
Very Satisfied	41.75%	86
Satisfied	52.91%	109
Unsatisfied	3.88%	8
Very Unsatisfied	1.46%	3
<b>Total</b>		<b>206</b>

### Q14 What do you value most about being a MPS member? (Please rank, 1=highest)

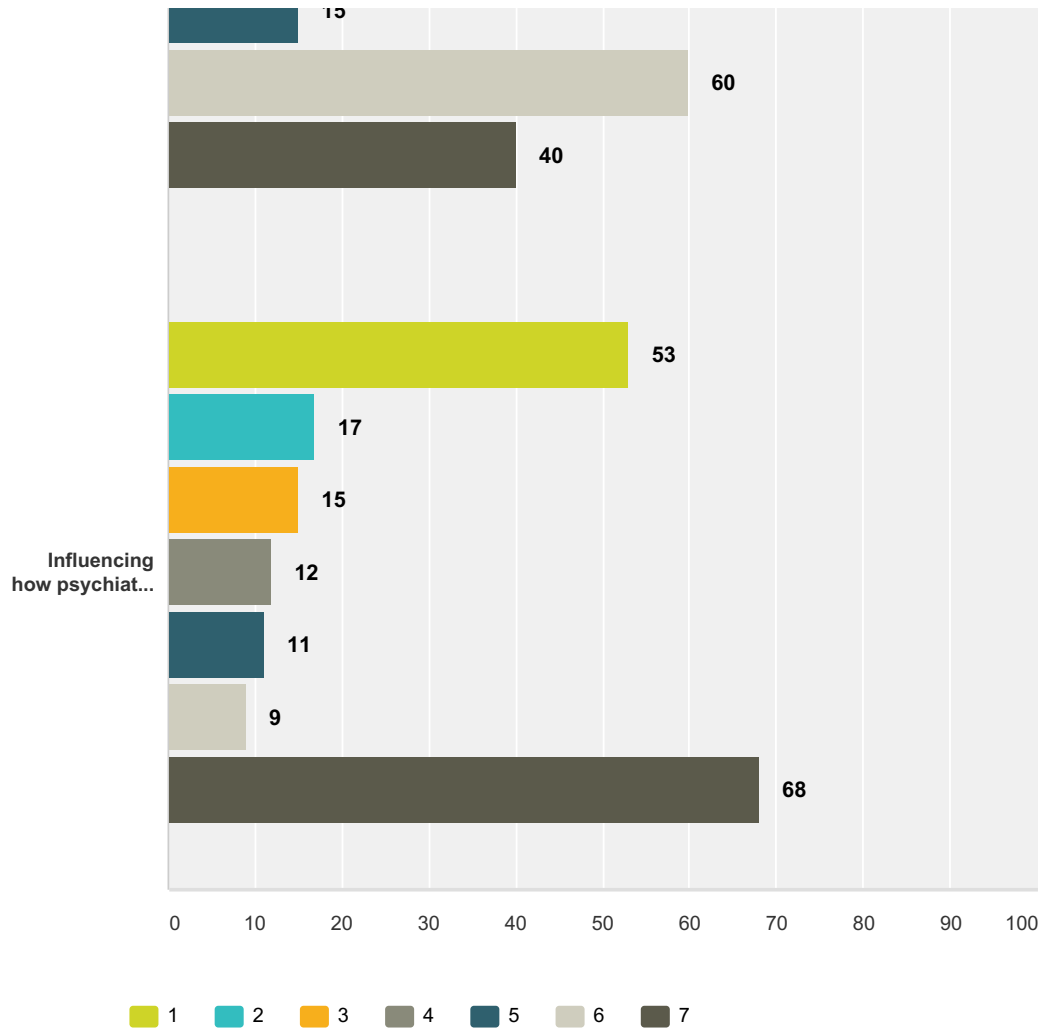
Answered: 185 Skipped: 39



2014 Maryland Psychiatric Society Annual Survey



# 2014 Maryland Psychiatric Society Annual Survey



	1	2	3	4	5	6	7	Total	Average Ranking
MPS News	34.05% 63	32.97% 61	16.22% 30	9.19% 17	4.86% 9	1.62% 3	1.08% 2	185	5.73
MPS Listserv(s)	12.97% 24	12.97% 24	23.78% 44	19.46% 36	8.11% 15	11.35% 21	11.35% 21	185	4.24
MPS member rate for CME activities	4.89% 9	9.24% 17	19.02% 35	25.00% 46	20.11% 37	11.41% 21	10.33% 19	184	3.78
Maryland Psychiatrist	7.03% 13	12.97% 24	11.89% 22	23.24% 43	23.24% 43	16.76% 31	4.86% 9	185	3.88
Annual Membership Directory	5.95% 11	11.35% 21	10.81% 20	7.57% 14	29.73% 55	21.08% 39	13.51% 25	185	3.39
Having a place to call with questions	6.52% 12	11.41% 21	10.33% 19	9.24% 17	8.15% 15	32.61% 60	21.74% 40	184	3.14
Influencing how psychiatry is practiced in Maryland	28.65% 53	9.19% 17	8.11% 15	6.49% 12	5.95% 11	4.86% 9	36.76% 68	185	3.86



## Q15 Is there anything we are not doing that we should be doing? Any areas for improvement?

Answered: 44 Skipped: 180

#	Responses	Date
1	Networking and collaborating with local diverse cultural groups. Working with local media to promote and educate.	
2	Consider doing mailed CME. I would be willing to pay for this alternative to travelling to Baltimore,.	
3	None comes to mind	
4	No, I am satisfied. I am too busy, just like all of you..	
5	NA	
6	N/A	
7	Coordinating better with other Societies, such as MedChi	
8	Charge less for membership. Offer more CME activities.	
9	Organization and advocacy are superb!	
10	NA	
11	Offer more administrative support for committee officers. consider separating from the APA so that APA dues are not necessary for local branch membership (similar to Med Chi not requiring AMA membership). I see very little value coming from APA membership these days. Consider a task force to determine why Maryland does not even want to consider outpatient commitment when 45 of 50 states have it.	
12	Doing a great job!	
13	More CME events	
14	More promotion of members and the Society on the web. Your website is awful! Need referral on the website again!	
15	Promote universal single payer in Maryland and National	
16	doing great	
17	The website is quite difficult to find actually... perhaps improving access to this.	
18	try to have a list of psychiatrists who are willing to provide coverage for solo practitioners.	
19	no	
20	Also, #14 won't allow ranking. Maybe old version of internet explorer? 1-2-7-5-3-4-6	
21	Despite good wishes I do not feel that psychiatrists who do a FULL practice (psychotherapy and meds) are given much of an ear.	
22	no	
23	Explore emerging prevention science and tested prevention programs	
24	Perhaps its just me, but I often don't know about activities, CME events until its close to the time to register, etc. and then I often have time conflicts. Perhaps earlier and more frequent advertising of events would be helpful.	
25	I would like more CME opportunities in the Eastern Shore	
26	Keep up the great work!	
27	Keep up the good work.	

## 2014 Maryland Psychiatric Society Annual Survey

28	I was previously a member of the NY County district branch of APA. There were many more scientific meetings in evenings at an Academic Medical Center (Cornell) often with faculty from the Depts of Psychiatry at Cornell, NYU, etc. It would be great if folks from the depts of psychiatry in our State (and NIMH, which is also in our state did more to help educate us. they are doing amazing things it would be great for them to tell us about it more!	
29	You are doing a great job!	
30	I would like our organization to take a stand with Physicians for a National Health Plan and lobby for single payor (medicare for all) as it is crystal clear that nothing else will stop health care from bankrupting this country.	
31	arrange for coverage for psychiatrists on vacation or sick Have a 'on call list'	
32	I could use a reminder about what membership has to offer. I'm not familiar with "Maryland Psychiatrist" or the listerserv, or what kinds of questions your staff are equipped to handle	
33	We should be offered some free CMEs the membership rate is high enough that some CME options (Including electronic/internet CMEs) should be available. I would waive all other benefits since I do not really use them, or need them.	
34	No	
35	No	
36	Clarify the unmet needs of undocumented, non-English speaking residents	
37	No	
38	Questions 11 and 14 did not allow ranking and automatically ranked the answers as above!	
39	Don't know	
40	Conflict of interest between DHMH (directive contractors, etc) and clinical practice.	
41	Networking with local furfural group to make us visible and contribute to promoting culture in Baltimore	
42	No	
43	just rejoined...	
44	In 14 I could not control the numbers. I value no 1, 2, 4, all at 1.	