## Q1 What CME Topic Would You Need The Most?

Answered: 101 Skipped: 47

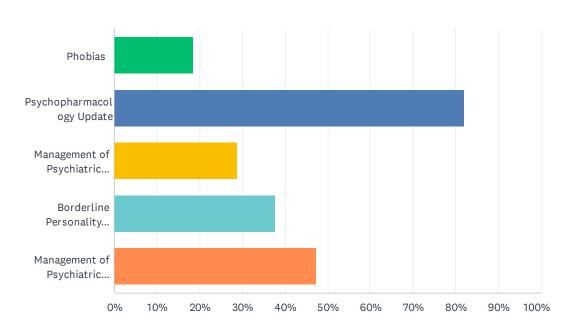
#	RESPONSES	DATE
1	Transgender and Non-binary practice guides Hypnosis Perinatal psychiatry	8/19/2023 8:14 AM
2	interface between psychiatry and rheumatologic disease	8/15/2023 8:37 PM
3	psychopharm of newer medications	8/15/2023 9:43 AM
4	Billing requirements	8/15/2023 9:05 AM
5	Psychopharmacology	8/15/2023 7:13 AM
6	Neurodevelopmental disorders in adults	8/15/2023 6:33 AM
7	Assessing elementary aged children for suicidal comments	8/14/2023 6:44 PM
8	Child and adolescent psychiatry	8/14/2023 5:47 PM
9	Child Psychiatry topics	8/14/2023 4:57 PM
10	injectable medication	8/14/2023 3:32 PM
11	Management of neuropsychiatric patients	8/14/2023 2:08 PM
12	Addiction psychiatry	8/14/2023 1:59 PM
13	Regulatory Issues, Psychopharmacology (non-traditional: ECT, ketamine, TMS, etc.)	8/14/2023 1:41 PM
14	ADHD and Adolescent Bipolar disorder diagnosis and treatment.	8/14/2023 1:33 PM
15	none	8/14/2023 1:26 PM
16	Integrative Psychiatry, including neutraceuticals, neurofeedback and biofeedback options.	8/11/2023 6:44 PM
17	Use of newer Type 2 diabetes medications for weight gain due to psychotropic drugs	8/7/2023 3:35 PM
18	Opiate Prescribing	8/5/2023 5:11 PM
19	Recognizing types of dementia	8/2/2023 2:58 PM
20	Treating anxiety disorders when mono therapy fails.	8/1/2023 10:38 AM
21	Opioid prescribing	7/31/2023 10:30 PM
22	ADHD in adults: DX and Med Options	7/31/2023 2:05 PM
23	new treatment updates	7/26/2023 10:59 PM
24	At this point — opiates due to the new DEA requirement	7/26/2023 5:58 PM
25	Psychotherapy	7/26/2023 5:01 PM
26	Innovations in psychopharmacology	7/26/2023 4:24 PM
27	psychpharmacology	7/26/2023 3:49 PM
28	Community Psychiatry Behavioral Health Crisis System	7/26/2023 2:36 PM
29	More violence and suicide risk assessment and management.	7/26/2023 2:35 PM
30	interpersonal neurobiology	7/10/2023 12:52 PM
31	Personality disorders	7/5/2023 1:19 PM
32	Psychotherapy	7/4/2023 10:18 AM
	·	

34	Disaster psychiatry, forensic psychiatry	6/30/2023 11:35 PM
35	Treatment resistant bipolar depression.	6/30/2023 5:17 PM
36	Mood and anxiety disorders	6/30/2023 2:25 PM
37	Psychopharmacology	6/29/2023 10:56 AM
38	Psychotherapy, approaches to sexual problems, psychodynamic	6/21/2023 4:43 PM
39	physician wellbeing	6/21/2023 4:30 PM
40	Practice management	6/6/2023 3:45 PM
41	psychopharmacology	6/5/2023 10:17 AM
42	1. Opioid related for MATE 2. Medication and Therapy for Gender Dysphoria	6/3/2023 11:46 PM
43	psychopharm	6/2/2023 5:50 PM
44	Suicide Risk Assessment and Prevention	6/1/2023 12:57 PM
45	legal aspects of psychiatry	5/31/2023 12:21 PM
46	Neurostimulation treatments (ECT/TMS/etc)	5/31/2023 10:30 AM
47	Substance Abuse, Opioid, Medical Marijuana	5/30/2023 10:14 AM
48	Opioids—to fulfill the 8 required CMEs for DEA renewal	5/27/2023 11:06 PM
49	interpersonal neurobiology	5/24/2023 10:42 PM
50	updates on various treatment algorithms	5/24/2023 3:59 PM
51	LSD	5/24/2023 2:06 PM
52	ADD	5/24/2023 1:27 PM
53	psychopharm	5/24/2023 12:29 PM
54	Addictions Psychiatry	5/23/2023 9:05 PM
55	Psychopharmacology	5/23/2023 3:48 PM
56	new medications	5/23/2023 9:59 AM
57	personality disorders	5/22/2023 12:10 PM
58	Psychopharmacology	5/21/2023 8:00 PM
59	Newest medications	5/21/2023 5:06 PM
60	Psychopharmacology	5/20/2023 5:07 PM
61	Psychopharm update	5/20/2023 9:31 AM
62	Updates	5/19/2023 2:09 PM
63	Psychopharmacology for difficult to treat schizophrenia	5/19/2023 12:37 PM
64	New meds	5/19/2023 9:31 AM
65	Mental Health Parity or how medical visits are reimbursed in comparison to mental health visits.	5/18/2023 2:36 PM
66	Psychopharmacology update	5/18/2023 1:13 PM
67	substance abuse	5/18/2023 12:31 PM
68	medical complications and management in psychiatric patients	5/18/2023 12:08 PM
69	psychopharmacology	5/18/2023 10:14 AM
70	Precision therapeutics	5/18/2023 10:05 AM

71	Catatonia, ECT, Athelas access and use with Clozaril	5/18/2023 9:29 AM
72	Ethics	5/18/2023 9:20 AM
73	psychopharmacology	5/17/2023 9:34 PM
74	Evidence based Psychotherapy	5/17/2023 7:34 PM
75	Anxiety management and reducing benzodiazepine use	5/17/2023 7:10 PM
76	SUD comorbid with other psychiatric disorders	5/17/2023 6:54 PM
77	Psychopharmacology; but I take care of my CMEs myself.	5/17/2023 6:43 PM
78	Adult ADHD New treatments for depression	5/17/2023 4:59 PM
79	Geriatric psychiatry	5/17/2023 4:42 PM
80	1-telehealth updates - what can we do vs not do? can we treat any patients in other states? 2-maybe a psychopharm update on various diagnoses ex: what's new in MDD treatment? Or bipolar treatment? any actual practical use of some of the new meds with Pearls for when to consider. (I am tired of seeing drug adds on TV and not knowing if any of these meds are worth giving a shot)	5/17/2023 4:31 PM
81	Any Adolescent topics	5/17/2023 4:12 PM
82	Suicide prevention	5/17/2023 2:24 PM
83	Substance Use Disorders	5/17/2023 1:55 PM
84	Psychedelics, ketamine	5/17/2023 1:40 PM
85	Mental Health Legislation	5/17/2023 1:40 PM
86	Nothing specific	5/17/2023 1:24 PM
87	LAI	5/17/2023 1:18 PM
88	some suggestions - disaster psychiatry/climate change, trauma focused treatment, LGBTQIA+ health	5/17/2023 1:00 PM
89	retirement	5/17/2023 12:46 PM
90	diagnosis and management of adult ADHD	5/17/2023 12:40 PM
91	Schizophrenia	5/17/2023 12:32 PM
92	telemedicine changes	5/17/2023 12:27 PM
93	Addictions	5/17/2023 12:26 PM
94	What's new in treating depression	5/17/2023 12:26 PM
95	psychopharmacology updates, treatment of adult ADHD	5/17/2023 12:24 PM
96	Update on psychopharmacology / recently approved treatments	5/17/2023 12:24 PM
97	Opioid training	5/17/2023 12:23 PM
98	New pharmacology	5/17/2023 12:21 PM
99	child psychiatry	5/17/2023 12:20 PM
100	pharm	5/17/2023 12:20 PM
101	Pharmacology	5/17/2023 12:20 PM

# Q2 What CME Events Would You Be Most Likely To Attend? (Check All That Apply)

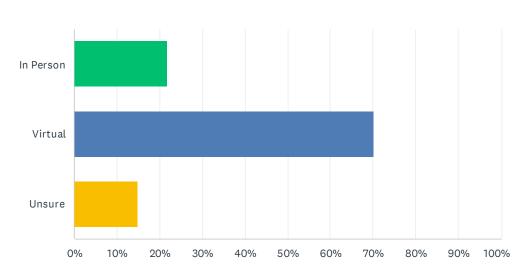




ANSWER CHOICES	RESPONSES	
Phobias	18.49%	27
Psychopharmacology Update	82.19%	120
Management of Psychiatric Disorders in Children	28.77%	42
Borderline Personality Disorders	37.67%	55
Management of Psychiatric Disorders in Pregnant Patients	47.26%	69
Total Respondents: 146		

## Q3 What Type of CME Meeting Are You Most Likely To Attend?

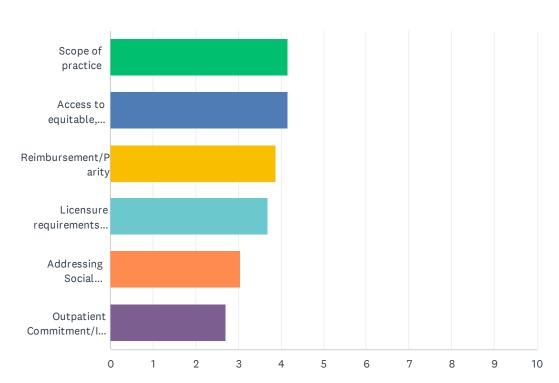




ANSWER CHOICES	RESPONSES
In Person	21.77% 32
Virtual	70.07% 103
Unsure	14.97% 22
Total Respondents: 147	

# Q4 Please Rank Your Legislative and Advocacy Priorities in Order of Preference: (1=most important)

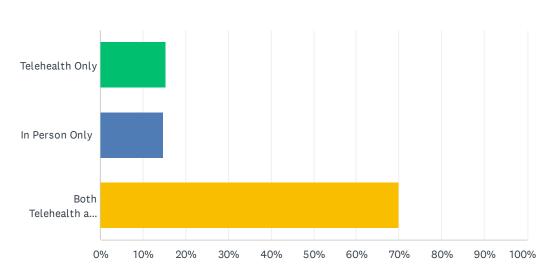




	1	2	3	4	5	6	TOTAL	SCORE
Scope of practice	33.60%	17.60%	13.60%	12.00%	12.00%	11.20%		
	42	22	17	15	15	14	125	4.15
Access to equitable, quality care	24.79%	23.14%	16.53%	17.36%	14.05%	4.13%		
	30	28	20	21	17	5	121	4.15
Reimbursement/Parity	18.11%	25.98%	20.47%	11.81%	9.45%	14.17%		
	23	33	26	15	12	18	127	3.89
Licensure requirements/mandatory training	21.26%	11.81%	19.69%	19.69%	17.32%	10.24%		
	27	15	25	25	22	13	127	3.69
Addressing Social Determinants of Health	8.47%	15.25%	13.56%	17.80%	24.58%	20.34%		
	10	18	16	21	29	24	118	3.04
Outpatient Commitment/Involuntary Treatment	5.60%	10.40%	16.00%	16.80%	18.40%	32.80%		
	7	13	20	21	23	41	125	2.70

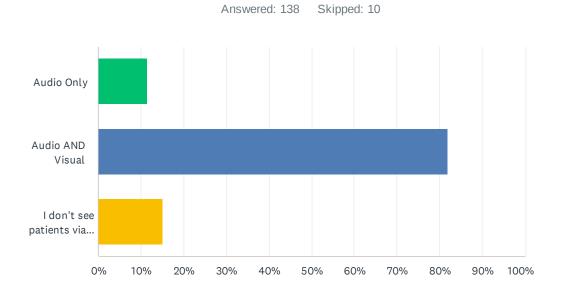
## Q5 Are You Currently Seeing Patients Via:





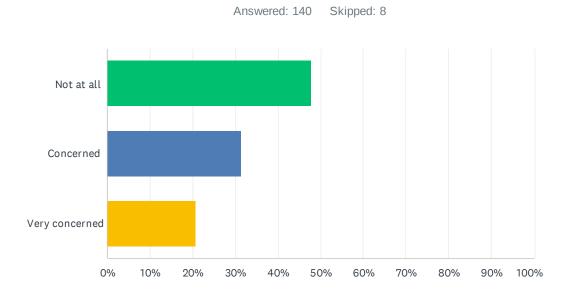
ANSWER CHOICES	RESPONSES	
Telehealth Only	15.44%	21
In Person Only	14.71%	20
Both Telehealth and in Person	69.85%	95
TOTAL	1	.36

# Q6 When Seeing Patients Via Telehealth Which Do You Use? (check all that apply)



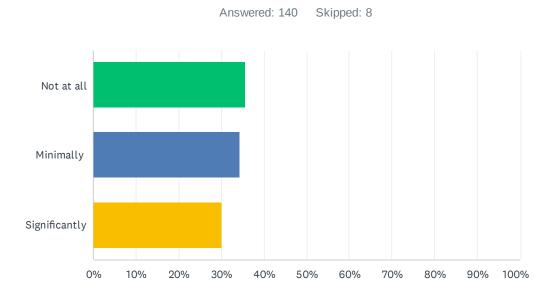
ANSWER CHOICES	RESPONSES	
Audio Only	11.59%	16
Audio AND Visual	81.88%	113
I don't see patients via telehealth	15.22%	21
Total Respondents: 138		

# Q7 How concerned are you about possibly needing an in-person visit to prescribe controlled substances via telehealth?



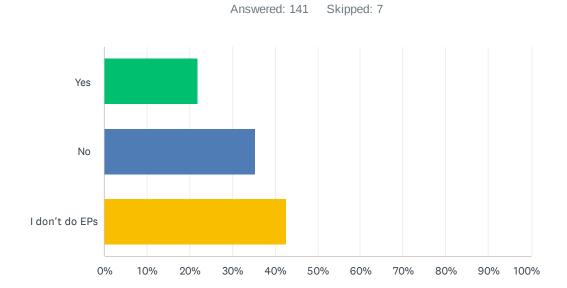
ANSWER CHOICES	RESPONSES	
Not at all	47.86%	67
Concerned	31.43%	44
Very concerned	20.71%	29
TOTAL		140

Q8 Future changes may have audio-only telehealth reimbursed less than audio-visual or in person visits – how much would this limit access for your patients



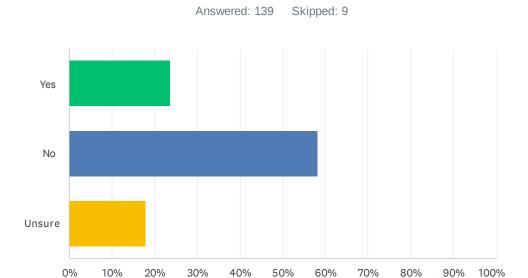
ANSWER CHOICES	RESPONSES	
Not at all	35.71%	50
Minimally	34.29%	48
Significantly	30.00%	42
TOTAL		140

# Q9 Have you seen an increase in problems with police executing emergency petitions?



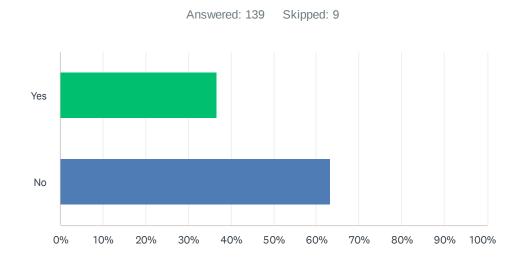
ANSWER CHOICES	RESPONSES	
Yes	21.99%	31
No	35.46%	50
I don't do EPs	42.55%	60
TOTAL		141

# Q10 Would you like to participate in an MPS Interest Group focusing on psychedelics?



ANSWER CHOICES	RESPONSES	
Yes	23.74% 33	3
No	58.27%	1
Unsure	17.99%	5
TOTAL	139	9

# Q11 Do you have any interest in being a paid collaborative care model psychiatrist to a PCP (and their care manager) for at least one hour per week?



ANSWER CHOICES	RESPONSES	
Yes	36.69%	51
No	63.31%	88
TOTAL		139

## Q12 How can MPS increase or retain members?

Answered: 105 Skipped: 43

#	RESPONSES	DATE
1	I'm not sure, still in training and I appreciate the society and it's events.	8/19/2023 8:16 AM
2	provide career workshops for psychiatry residents and mentoring programs between older and new members (big brother/ sister)	8/15/2023 8:42 PM
3	continued engagement and show direct benefits to members	8/15/2023 9:50 AM
4	I'm not sure. I experienced burnout (like many others) and I'm looking to diversify so that I don't leave psychiatry altogether	8/15/2023 7:18 AM
5	Lower dues	8/15/2023 6:36 AM
6	Vitalize and Increase the curbside consult offering you already have in place. Continue the personal and warm responses from the MPS administrative staff Offer even more help dealing with insurance company audits and reimbursement problems Consider small support groups to discuss cases	8/14/2023 6:50 PM
7	Increase social activities	8/14/2023 5:55 PM
8	more active engagement with members and networking opportunities	8/14/2023 4:59 PM
9	Lower fees? Increase awareness of results in advocacy	8/14/2023 2:29 PM
10	Increase focus on: trainees and early career members, community psychiatry, diversity&inclusion (for SES, geographic, ethnic, etc.)	8/14/2023 1:52 PM
11	Creating more support groups.	8/14/2023 1:37 PM
12	don't know	8/14/2023 1:28 PM
13	Lower fees, more varied CME opportunities, more accessible CME w APA (Hard to navigate)	8/11/2023 6:48 PM
14	More CME offerings	8/7/2023 3:39 PM
15	Excite the Residents early	8/5/2023 5:14 PM
16	Address the terrible mental health laws. Demand parity.	8/2/2023 3:00 PM
17	More cme	7/31/2023 10:33 PM
18	This is difficult as it is an issue with professional organizations in general. Members continue because they get benefit from the organization and/or they support the mission of the organization.	7/31/2023 2:09 PM
19	offer things of value to the membership cointinue legislative priorities, monitoring, lobbying and reporting on efforts to membership.	7/26/2023 11:09 PM
20	Vigorous advocacy.	7/26/2023 5:04 PM
21	Be clear on their role	7/26/2023 4:26 PM
22	More involvement of residents and fellows.	7/26/2023 3:51 PM
23	Continue legislative efforts!	7/26/2023 3:06 PM
24	Offering free or very low cost CME. This is often important to those not in academia.	7/26/2023 2:57 PM
25	More great, low cost CME	7/26/2023 2:42 PM
26	Return to in-person events so we can actually meet each other.	7/26/2023 2:37 PM
27	remain as wonderfully responsive as you are, emphasize to member the importance of the legislative advocacy work you do	7/10/2023 12:55 PM

28	Cheaper fees for trainees	7/5/2023 1:21 PM
29	More social events building community	7/4/2023 10:21 AM
30	Not sure	7/2/2023 7:07 AM
31	Increased variety of events— leadership-building events? Maybe doing cme events in interesting locations/venues?	6/30/2023 11:39 PM
32	I am new and I think you are doing a good job	6/30/2023 5:20 PM
33	not sure	6/30/2023 2:27 PM
34	More activities. I don't feel like there are currently enough opportunities to participate in events/activities.	6/29/2023 11:43 AM
35	make it relevant to a variety of members. Welcoming, inviting approach to minorities and immigrants	6/21/2023 4:48 PM
36	Continue offering CMEs, continue MPS News and Listserv	6/21/2023 4:44 PM
37	make dues cheaper for younger members	6/21/2023 4:40 PM
38	put members interest as high priority	6/21/2023 4:24 PM
39	more social events	6/21/2023 4:21 PM
40	Lower your fees for membership, APA as well. Give members a discount not just new members give us ALL a discount.	6/9/2023 1:10 PM
41	Keep up the great work.	6/9/2023 1:06 PM
42	This is a problem in professional organizations across the board. Maintaining visibility. I don't see MPS mentioned in media coverage for psychiatric issues. Why?	6/9/2023 1:03 PM
43	More in person CME events for collegial get togethers. With nametags.	6/9/2023 12:53 PM
44	Continue to provide educational programs. Collaborate in research opportunities.	6/9/2023 12:47 PM
45	lower dues	6/9/2023 12:42 PM
46	Reduce your fees.	6/9/2023 12:39 PM
47	Keep doing what you are doing.	6/9/2023 12:37 PM
48	Keep membership costs manageable. Get more early career members.	6/9/2023 12:31 PM
49	Continue what you are doing. Have more CME meetings in person.	6/9/2023 12:28 PM
50	Better advocacy for members. More communication and education.	6/9/2023 12:22 PM
51	remain relevant	6/9/2023 12:17 PM
52	reduce the rates	6/8/2023 1:57 PM
53	1. Doing CME related to mandatory polices (ie. MATE, diversity) 2. Have contacts in each county/community	6/3/2023 11:55 PM
54	I don't know	5/31/2023 12:26 PM
55	continue strong advocacy work	5/31/2023 10:40 AM
56	Isn't "Food and Drink" the answer to most things?	5/29/2023 3:59 PM
57	More educational events	5/27/2023 11:14 PM
58	keep dues modest, continue being vigilant about maintaining the quality of the listserv, keep members informed of the amazing legislative work you facilitate	5/24/2023 10:47 PM
59	direct engagement activities	5/24/2023 4:03 PM
60	Lower fees	5/24/2023 2:09 PM
61	Communication Reaching out	5/24/2023 1:33 PM

60		E/04/0000 40 00 DV:
62	engage residents	5/24/2023 12:32 PM
63	not sure	5/23/2023 9:07 PM
64	More direct contact with trainees.	5/23/2023 4:00 PM
65	not sure	5/23/2023 10:01 AM
66	Representatives at residency program events/meetings	5/22/2023 12:12 PM
67	Promote collegial meetings/ focus groups	5/21/2023 8:07 PM
68	Letting people know that MPS can answer questions about changes in requirements for psychiatrists, dealing with insurance companies, etc	5/21/2023 5:11 PM
69	I wish I knew.	5/20/2023 5:10 PM
70	Have more freqent meetings	5/20/2023 9:33 AM
71	Greater online marketing presence	5/19/2023 2:13 PM
72	Be intentional in inviting members to join committees. Schedule meetings during non-working clinical hours.	5/19/2023 12:41 PM
73	Take away the power of the ABPN	5/19/2023 9:35 AM
74	Engage ECP in advocacy and have them lead interest groups	5/18/2023 2:42 PM
75	Promote listserve and informal curbside consult program, these are valuable and engaging	5/18/2023 1:20 PM
76	focus on younger psychiatrists' participation	5/18/2023 12:34 PM
77	decrease fees	5/18/2023 12:11 PM
78	put out information about legislative committee work	5/18/2023 10:18 AM
79	More social events.	5/18/2023 10:10 AM
80	no big ideas, sorry	5/18/2023 9:34 AM
81	free CME	5/18/2023 9:22 AM
82	maintain high-level of advocacy work	5/17/2023 9:38 PM
83	Control membership dues	5/17/2023 7:36 PM
84	Remain current and relevant in terms of legislation changes	5/17/2023 7:13 PM
85	proactive contact with psychiatric residents and early career psychiatrists, showing them how a professional society directly helps them and their patients	5/17/2023 6:58 PM
86	I am not sure; many of my colleagues do not belong to MPS; I think they're just cheap & not sure how it would help them.	5/17/2023 6:46 PM
87	Not sure	5/17/2023 4:44 PM
88	I think you do a good job already. the newsletter always has good info - I just need to take more time to read it.	5/17/2023 4:35 PM
89	More collaboratio	5/17/2023 4:16 PM
90	More events	5/17/2023 1:57 PM
91	Highlight how MPS is advocating for increased reimbursement rates.	5/17/2023 1:43 PM
92	Get more institutions to pay for membership for their psychiatrists	5/17/2023 1:43 PM
93	Have more events through the state, not just in Baltimore. There are many psychiatrists in Montgomery County	5/17/2023 1:25 PM
94	Represention continues in legislative affairs	5/17/2023 1:20 PM
95	More events geared towards younger/early career psychiatrists and trainees.	5/17/2023 1:02 PM
96	not sure	5/17/2023 12:49 PM

97	creating some sort of ongoing mentoring model? Like pairing early career docs with more experienced clinicians. Or if 1 on 1 isn't feasible, maybe like small groups of clinicians (4-6 people) each group is a mix of early, middle, later career. And encourage a quarterly meeting? Imagine a lot of docs crave professional community and personal relationships so could be interesting selling point to draw people in	5/17/2023 12:40 PM
98	More appeal to your younger colleagues	5/17/2023 12:35 PM
99	Additional efforts to recruit and provide free membership to residents and fellows. The goal should be for all psychiatry residents and fellows in Maryland to be members. On-site recruitment events for residents and fellows seem to be effective.	5/17/2023 12:33 PM
100	Continue to provide useful CME activities and legislative advocacy.	5/17/2023 12:31 PM
101	don't know	5/17/2023 12:28 PM
102	lower the dues	5/17/2023 12:25 PM
103	more events, more cme, more info about the advocacy work details	5/17/2023 12:24 PM
104	Lower cost i think :(	5/17/2023 12:22 PM
105	being inclusive	5/17/2023 12:22 PM

# Q13 What additional efforts can we make to improve diversity within the MPS?

Answered: 100 Skipped: 48

#	RESPONSES	DATE
1	Have events that emphasize and/or focus on diversity.	8/19/2023 8:16 AM
 2	develop outreach programs targeting minority psychiatrists.	8/15/2023 8:42 PM
3	show diversity in leadership	8/15/2023 9:50 AM
	I'm not sure	8/15/2023 7:18 AM
4		
5	Diversity in leadership	8/15/2023 6:36 AM
6	Excellent concern. Perhaps there is a way to start in residency programs?	8/14/2023 6:50 PM
7	Outreach to minority providers and engagement on interest groups/leadership	8/14/2023 2:29 PM
8	events that celebrate and educate issues related to diversity, e.g. seminars/webinars about the impact of culture in treatment, support or co-sponsor events by other organizations that focus on diverse populations, support and recognize research (quantitative/qualitative) around topics of DEI, etc	8/14/2023 1:52 PM
9	Having in person meetings to improve net working among clinicians.	8/14/2023 1:37 PM
10	don't know	8/14/2023 1:28 PM
11	Seems diverse, maybe more mentoring opportunities, lower membership cost	8/11/2023 6:48 PM
12	Reach out to residency programs by year, a small group at a time	8/7/2023 3:39 PM
13	Encourage/Promote leadership roles within the organization.	8/5/2023 5:14 PM
14	Diverse board	7/31/2023 10:33 PM
15	Try not to take political stances. It is always about the patient.	7/31/2023 2:09 PM
16	don't know how you do this without being "discriminatory" now a days. "Affirmative Action" seems to be out. Are we not diverse enough? do we have any discriminatory practices? I'm not aware of any. Cost of membership is likely a barrier for some new docs - maybe free or minimal dues (\$25/yr) for new docs / graduates and a gradually increasing dues after completing residency, to attract more members, which presumably would be diverse.	7/26/2023 11:09 PM
17	None	7/26/2023 5:04 PM
18	Recruitment	7/26/2023 4:26 PM
19	mentorships	7/26/2023 3:51 PM
20	Consider a person of color to replace Heidi.	7/26/2023 2:57 PM
21	DEI related CME activity. Increased diversity on the Council	7/26/2023 2:42 PM
22	I think MPS is already doing a good job with this.	7/26/2023 2:37 PM
23	this is hard, wish I knew	7/10/2023 12:55 PM
24	not sure	7/4/2023 10:21 AM
25	Not sure	7/2/2023 7:07 AM
26	not sure	6/30/2023 11:39 PM
27	Not sure	6/30/2023 5:20 PM

28	not sure	6/30/2023 2:27 PM
29	Not sure	6/29/2023 11:43 AM
30	Individual, personal attention, reaching out, providing a forum for unsure and hesitant participants. Senior leadership call them.	6/21/2023 4:48 PM
31	The Holmes Commission on racial equality is worth reading	6/21/2023 4:44 PM
32	Have more leaders and board members that are diverse	6/21/2023 4:34 PM
33	including diverse members in mps committees	6/21/2023 4:24 PM
34	in general, support more URM/pipeline programs like SNMA, LMSA, APAMSA, etc	6/21/2023 4:21 PM
35	Groups to discuss/share experiences with diversity/bias to raise awareness	6/9/2023 1:10 PM
36	Ongoing outreach attempts	6/9/2023 1:03 PM
37	Continuing to target bright psychiatrists of all backgrounds and offer opportunities that come with membership. (contests, leadership, committees, etc.)	6/9/2023 12:58 PM
38	reach out to residents	6/9/2023 12:56 PM
39	Invite residents in training to join	6/9/2023 12:53 PM
40	Reach out to residents.	6/9/2023 12:47 PM
41	not sure	6/9/2023 12:42 PM
42	Lower fees	6/9/2023 12:39 PM
43	Keep reaching out.	6/9/2023 12:37 PM
44	Make sure residents know about the advantages of being a member. Is it possible to advertise the existence and use of MPS in any publications read by black, asian, etc.	6/9/2023 12:28 PM
45	Advancement and promotion of minorities	6/9/2023 12:22 PM
46	Ads?	6/9/2023 12:17 PM
47	I'm not sure	6/8/2023 1:57 PM
48	1. Every committee to make diversity a priority, not just in membership but in events. 2. Each committee should have policies that are regarding issues of diversity.	6/3/2023 11:55 PM
49	I'm not sure	5/31/2023 12:26 PM
50	collaborate with minority-focused organizations like SNMA, Black Psychiatrists of America?	5/31/2023 10:40 AM
51	It would be good if there were more diversity with psychiatrists! Food and drink (and outreach from others who they would relate to ) .	5/29/2023 3:59 PM
52	We could offer reduced membership rates to minority members and have a DEI committee	5/27/2023 11:14 PM
53	listen to psychiatrists from diverse backgrounds to ascertain what needs you can meet	5/24/2023 10:47 PM
54	direct outreach	5/24/2023 4:03 PM
55	Lower fees	5/24/2023 2:09 PM
56	Continue to reach out and be more inclusive	5/24/2023 1:33 PM
57	reach out to organzantions that treat minority populations, for example hospitals in Baltimore and PG county	5/24/2023 12:32 PM
58	Not sure	5/23/2023 9:07 PM
59	More direct contact with trainees.	5/23/2023 4:00 PM
60	not sure	5/23/2023 10:01 AM
61	?	5/21/2023 8:07 PM
62	Not sure	5/21/2023 5:11 PM

63	You are doing a good job so far.	5/20/2023 5:10 PM
64	Ask for volunteers	5/20/2023 9:33 AM
65	Marketing	5/19/2023 2:13 PM
66	Utilize MPS members of color to invite other non-members to meetings. Hold a reception / fellowship to discuss the importance of their input. People have to feel a part of something in order to maintain membership.	5/19/2023 12:41 PM
67	Connect more to the AMA—focus on burnout being a structural not an individual issue	5/19/2023 9:35 AM
68	Racial representation in leadership was adequate based on membership. MPS could look at diversity as more than racial diversity.	5/18/2023 2:42 PM
69	Continue efforts to increase diversity in council, executive board	5/18/2023 1:20 PM
70	Diversity programs.	5/18/2023 12:34 PM
71	virtual events at no cost to members	5/18/2023 12:11 PM
72	I think we are doing a good job	5/18/2023 10:18 AM
73	Continuing efforts to recruit early career members.	5/18/2023 10:10 AM
74	build collegiality and a sense of community. I think it comes down to having a diverse core group that are cheerleaders for the involvement of others.	5/18/2023 9:34 AM
75	provide updates on diagnosis and medications	5/18/2023 9:22 AM
76	continue with programming about diversity for CME credit	5/17/2023 9:38 PM
77	None	5/17/2023 7:36 PM
78	I feel you are doing well	5/17/2023 7:13 PM
79	continue to address institutional racism with psychiatry and MPS	5/17/2023 6:58 PM
80	unsure	5/17/2023 6:46 PM
81	I think that you are doing a lot. I appreciate the effort.	5/17/2023 5:02 PM
82	Not sure	5/17/2023 4:44 PM
83	selecting speaker or presentation content that reflect diversity in terms of where patient practice is located from a socio-econ stance. and also selecting docs of varying ages, ethnicity etc	5/17/2023 4:35 PM
84	Additional non psychiatrist presentations	5/17/2023 4:16 PM
85	Nomination Committee can put forth more diverse group of candidates for elections.	5/17/2023 1:57 PM
86	Asking current MPS council members to reach out to other minority members and recruit them to the council and other leadership positions.	5/17/2023 1:43 PM
87	Personal invitations	5/17/2023 1:43 PM
88	Not sure	5/17/2023 1:25 PM
89	Dont know	5/17/2023 1:20 PM
90	Unsure at this time.	5/17/2023 1:02 PM
91	not sure	5/17/2023 12:49 PM
92	not sure what is meant by 'diversity' here but regardless, imagine it'd make sense to start by asking members who are from underrepresented groups their thoughts?	5/17/2023 12:40 PM
93	Outreach to and partnering with other groups such as BPA. Diverse candidates for Council and key positions	5/17/2023 12:35 PM
94	Setting a goal of recruiting all psychiatry residents and fellows in Maryland and providing free membership during training would, I think, improve diversity of MPS in multiple ways.	5/17/2023 12:33 PM

95	Continue reaching out to local residencies for new membership.	5/17/2023 12:31 PM
96	don't know	5/17/2023 12:28 PM
97	make the dues free for state employees or employees of nonprofits	5/17/2023 12:25 PM
98	show that we are invested by diversity in leadership and events/cme/advocacy.	5/17/2023 12:24 PM
99	Continue good work !	5/17/2023 12:22 PM
100	start with the newsletter	5/17/2023 12:22 PM

## Q14 What kinds of articles would you like to see in The Maryland Psychiatrist

Answered: 87 Skipped: 61

#	RESPONSES	DATE
1	What the careers of different psychiatrists in Maryland look like, especially if they have a diversity of practice.	8/19/2023 8:17 AM
2	Articles about the experiences of current psychiatric residents.	8/15/2023 8:51 PM
3	I honestly don't take much time to read it	8/15/2023 7:20 AM
4	Challenging cases	8/15/2023 6:37 AM
5	relevant evidence based	8/14/2023 8:55 PM
6	Case studies with children if that were possible Address the relationship we as physicians have with issues such as money/financial dealings with patients, our patients' and our own mortality, dependency that develops between our patients and our selves, the interface between social issues and the fall-out that leads to psychiatric issues, the interface between philosophy and psychiatry	8/14/2023 6:59 PM
7	Reflecting the rich humans of members	8/14/2023 6:02 PM
8	professional opportunities	8/14/2023 3:36 PM
9	Practice guidelines?	8/14/2023 2:31 PM
10	Information of major developments in treatment or care.	8/14/2023 2:24 PM
11	Related to Psychopharmacology.	8/14/2023 1:38 PM
12	none	8/14/2023 1:29 PM
13	Integrative Psychiatry	8/11/2023 6:51 PM
14	How to respond to patients wanting to replace psychotropic medications with medical marijuana, psychedelics	8/7/2023 4:02 PM
15	Variable	8/5/2023 5:17 PM
16	Child psych topics	7/31/2023 10:34 PM
17	Haven't been a reader in awhile. Sorry.	7/31/2023 2:13 PM
18	doing good now	7/26/2023 11:12 PM
19	Thought provoking pieces	7/26/2023 4:29 PM
20	psychopharmacology "pearls"	7/26/2023 3:52 PM
21	Articles reflecting current work of psychiatrists in the state in different settings	7/26/2023 2:43 PM
22	More about legislation and advocacy.	7/26/2023 2:38 PM
23	case studies	7/10/2023 12:57 PM
24	varied articles and opinion pieces	7/4/2023 10:23 AM
25	Comments regarding updates from Sheppard, Umms and JHH regarding clinical services and referral options so we can better utilize them	7/2/2023 7:11 AM
26	Editorials, psychodynamic-related articles, features on members, perhaps multiple- perspectives on complicated/controversial issues (like the euthanasia laws/issues— 3 or more different perspectivesetc)	6/30/2023 11:47 PM

27	Private practice billing and marketing issues. How to optimize your website to have a bigger audience	6/30/2023 5:24 PM
28	n/a	6/30/2023 2:28 PM
29	Articles relevant to the practice of psychiatry in the state of Maryland	6/29/2023 11:47 AM
30	Expanding, enlarging our lanes, scopes, overarching cultural educational literacy art, music and local medial personalities and politicians	6/21/2023 4:51 PM
31	Our plans for diversity, equality and inclusion	6/21/2023 4:46 PM
32	more articles advocating the mps/apa take a position on something	6/21/2023 4:41 PM
33	climate change	6/21/2023 4:22 PM
34	reviews of legislative actions to keep us apprised.	6/9/2023 1:04 PM
35	Necessary CME listings. State law changes, CRISP	6/9/2023 12:54 PM
36	Profiles of members.	6/9/2023 12:38 PM
37	member clinical/medical/legal experienes	6/9/2023 12:34 PM
38	Obituaries, About what is happening in psychiatry in the public sector (community clinics, state facilities, etc.)	6/9/2023 12:29 PM
39	advances in psychedelics	6/9/2023 12:25 PM
40	Practical case related info/treatment	6/9/2023 12:23 PM
41	Excellent as is!	6/9/2023 12:19 PM
42	Legislative Updates	6/5/2023 10:19 AM
43	NA	6/4/2023 12:05 AM
44	features on various MPS members	5/31/2023 10:44 AM
45	Honestly, I think TMP should go back to hard copy. Yes, it's expensive, but otherwise it is just one more newletter of many that are emailed, and it's nice for members to get something from MPS that can be touched and felt.	5/29/2023 4:02 PM
46	More articles on psychotherapy	5/27/2023 11:18 PM
47	I think the current mix is great	5/24/2023 10:49 PM
48	Continue with new regulations etc	5/24/2023 2:12 PM
49	more information about activities of National APA	5/24/2023 12:39 PM
50	Happy with previous article selections	5/23/2023 9:10 PM
51	more about what kinds of practice people are doing. "a day in the life," etc.	5/23/2023 10:02 AM
52	qualitative, psychotherapy	5/22/2023 12:13 PM
53	More stories personal experiences/ clinical vignettes/ focus on younger members Shorter obits	5/21/2023 8:13 PM
54	New medications, new requirements	5/21/2023 5:14 PM
55	I don't read it that often, sorry!	5/20/2023 5:13 PM
56	Updates on new laws, plus suggestions for what the MPS should do.	5/20/2023 9:35 AM
57	Good ones	5/19/2023 2:18 PM
=0	More articles on mental health concerns affecting our society (Maryland and U.S.).	5/19/2023 12:45 PM
58		
58 59	Psychiatrists doing different types of jobs	5/19/2023 9:37 AM
	Psychiatrists doing different types of jobs  When other psychiatrists are featured. Articles by the local forensic psychiatrists on current and relevant issues. The president's column.	5/19/2023 9:37 AM 5/18/2023 2:45 PM

62	current articles are excellent	5/18/2023 12:36 PM
63	scope of practice news	5/18/2023 12:14 PM
64	Personal interviews.	5/18/2023 10:12 AM
65	I find it informative. Most interested in making sure that I am well informed about statewide information. I think the academic settings are important sources of info.	5/18/2023 9:41 AM
66	Treatment resistant tx	5/18/2023 9:24 AM
67	No specific recommendations -articles continue to be well-written & worthy of reading	5/17/2023 9:42 PM
68	National & State legislative updates	5/17/2023 7:39 PM
69	Narratives by local pschiatrists	5/17/2023 7:16 PM
70	history of Maryland psychiatry profiles of prominent Maryland psychiatrists updates on laws and regulations relevant to psychiatric practice	5/17/2023 7:02 PM
71	I think the range of articles is currently good.	5/17/2023 6:48 PM
72	Legal and policy news and changes	5/17/2023 4:46 PM
73	not sure	5/17/2023 4:44 PM
74	Current research updates	5/17/2023 4:19 PM
75	Local events, advocacy	5/17/2023 1:58 PM
76	Articles related to psychedelics and ketamine.	5/17/2023 1:45 PM
77	Articles outlining specifics about Maryland treatment programs, which insurances, cost, etc	5/17/2023 1:45 PM
78	Research briefs	5/17/2023 1:27 PM
79	Maybe more spotlights on members?	5/17/2023 1:03 PM
80	positive stories, stories about community engagement. Articles about key legislative issues. articles about big picture things: future of psychiatry, debate points/counterpoints about topics like psychedelics, euthanasia,	5/17/2023 12:42 PM
81	First person narratives	5/17/2023 12:37 PM
82	Current case examples of priority issues (involuntary commitment, reimbursement, scope of practice) and how they impact patients.	5/17/2023 12:35 PM
83	telemedicine changes and advocacy	5/17/2023 12:30 PM
84	don't know	5/17/2023 12:28 PM
85	?	5/17/2023 12:27 PM
86	n/a	5/17/2023 12:26 PM
87	more transition age	5/17/2023 12:24 PM

# Q15 What Is Your Overall Level Of Satisfaction With The MPS? (Select One)

Very satisfied

Satisfied

Neutral

Unsatisfied

Very Unsatisfied

0%

10%

20%

30%

40%

50%

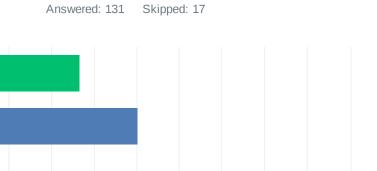
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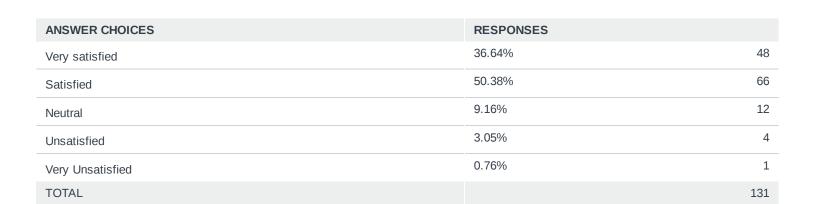
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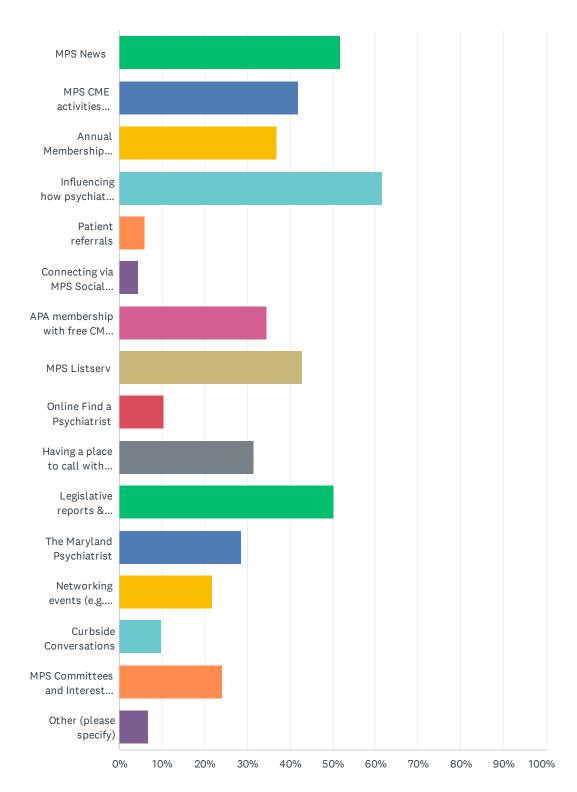
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# Q16 What Do You Value Most About Being A MPS Member? (Please check benefits that are important to you.)





ANSWER CHOICES	RESPONSES	6
MPS News	51.88%	69
MPS CME activities (discounted for members)	42.11%	56
Annual Membership Directory	36.84%	49
Influencing how psychiatry is practiced in Maryland	61.65%	82
Patient referrals	6.02%	8
Connecting via MPS Social Media Accounts	4.51%	6
APA membership with free CMEs, reduced meeting fees, MOC tracking, etc.	34.59%	46
MPS Listserv	42.86%	57
Online Find a Psychiatrist	10.53%	14
Having a place to call with questions	31.58%	42
Legislative reports & representation with state government	50.38%	67
The Maryland Psychiatrist	28.57%	38
Networking events (e.g. Career Night, Annual Dinner)	21.80%	29
Curbside Conversations	9.77%	13
MPS Committees and Interest Groups	24.06%	32
Other (please specify)	6.77%	9
Total Respondents: 133		

#	OTHER (PLEASE SPECIFY)	DATE
1	Heidi and Megan	8/15/2023 8:51 PM
2	The relationship of staff at MPS to members	8/14/2023 6:59 PM
3	no particular valuation	8/14/2023 1:29 PM
4	Too many to list.	7/26/2023 2:38 PM
5	Book club One day will organize film group	6/30/2023 11:47 PM
6	You all do a GREAT job!	5/29/2023 4:02 PM
7	The people	5/18/2023 2:45 PM
8	I only do it since it is required for APA. The community needs to be more active to be more rewarding	5/18/2023 12:14 PM
9	I do find comfort in the idea that the organization is keeping track of what is going on in the state for psychiatrists. Perhaps increasing outreach to other organizations interested in mental health would enhance this aspect. I would be interested in participating in building those relationships	5/18/2023 9:41 AM

# Q17 What Are Your Main Concerns About Psychiatry in Maryland?

Answered: 96 Skipped: 52

#	RESPONSES	DATE
1	The increased need but difficulty with access for patients.	8/19/2023 8:17 AM
2	the rapid expansion of poorly trained psychiatric nurse practitioners.	8/15/2023 8:51 PM
3	The prior authorization process has become quite onerous	8/15/2023 7:20 AM
4	Access to care	8/15/2023 6:37 AM
5	availability of resources	8/14/2023 8:55 PM
6	Insurance Commissioner seems to be unable to address concerns and difficulties with insurance companies, such as their focus on their own economic gain and audits. The way different CPT codes are reimbursed is greatly skewed to seeing changes in, side effects from, and management in general as the only way to measure "how much work" is done in a session. I have grave concerns about the attitude of who represents psychiatrists as the reimbursements for CPT codes are being decided. As a psychiatrist who still practices psychotherapy, I would like that to be recognized as valuable.	8/14/2023 6:59 PM
7	Increasing electronic, dependency, virtual communications	8/14/2023 6:02 PM
8	I am concerned about the poorly trained and monitored nurse practitioners in the community who are mismanaging patients without any accountability.	8/14/2023 3:36 PM
9	Scope of practice for other providers, parity in payment	8/14/2023 2:31 PM
10	Equitable access to care.	8/14/2023 2:24 PM
11	Practice taken over by mid levels.	8/14/2023 1:38 PM
12	none	8/14/2023 1:29 PM
13	Not enough psychiatrists, too heavy emphasis on meds nay approach	8/11/2023 6:51 PM
14	Being able to provide higher priced medications and treatments such as ketamine to those without insurance or with poor coverage	8/7/2023 4:02 PM
15	Lack of AOT and not enough fellow colleagues who seem to be concerned about the poor care our chronic mentally ill patients receive.	8/5/2023 5:17 PM
16	Reimbursement	7/31/2023 10:34 PM
17	Continued inclusion of more non-MD providers. With all due respect, their training is subpar for anything but stable patientsbut they don't remain stable for long.	7/31/2023 2:13 PM
18	We are often too isolated and too many patients in need don't have good access to the care they need.	7/26/2023 11:12 PM
19	That it is being taken over by psych NPs.	7/26/2023 5:05 PM
20	Access to care	7/26/2023 4:29 PM
21	fair treatment for all	7/26/2023 3:52 PM
22	scope of practice	7/26/2023 3:07 PM
23	The shortage of psychiatrists and shortage of inpatient beds.	7/26/2023 2:59 PM
24	Recruiting and retaining great new members	7/26/2023 2:43 PM
25	Encroachment by nurse practitioners.	7/26/2023 2:38 PM
26	access to care, administrative hurdles created by insurance companies and PBMs that	7/10/2023 12:57 PM

demoralize psychiatrists and reduce the available workforce

	demoralize psychiatrists and reduce the available workforce	
27	Not enough hospital beds for patients	7/4/2023 10:23 AM
28	Prior authorization burdens; er. Wait times and lack of hospital beds fort patients	7/2/2023 7:11 AM
29	not sure	6/30/2023 11:47 PM
30	How Marijuana is going to impact our patients.insurance reimbursement.	6/30/2023 5:24 PM
31	n/a	6/30/2023 2:28 PM
32	Changing laws	6/29/2023 11:47 AM
33	Bio-Bio-Bio model, seems predominate. Shrinking bio psych social stance. Not expanding scopes to encompass cultural economic literacy	6/21/2023 4:51 PM
34	The erosion of psychotherapy provided by psychiatrist	6/21/2023 4:46 PM
35	The reduction in our role so we are seen as just "writing prescriptions"	6/21/2023 4:41 PM
36	payments that discourage psychiatrists from participating in medicare and medicaid	6/21/2023 4:35 PM
37	child abuse reporting laws - not clear if applies just to current or former victims, board of medicine,	6/21/2023 4:33 PM
38	The lack of collaboration between primary care and specialists. Lack of funding for prevention and wellness approach.	6/9/2023 1:11 PM
39	NPs running loose!	6/9/2023 1:06 PM
40	NP and PA are increasingly seeing patients who believe they have a similar level of training as physicians	6/9/2023 1:04 PM
41	Constantly changing laws post COVID. Telemedicine regulations.	6/9/2023 12:54 PM
42	Managed care	6/9/2023 12:38 PM
43	Need current, available list of psychiatrists to provide second opinions.	6/9/2023 12:34 PM
44	Scope of practice, telepsychiatry	6/9/2023 12:32 PM
45	Attention to the indigent. Patients who do not have good insurance coverage often fall through the cracks.	6/9/2023 12:29 PM
46	prior authorization	6/9/2023 12:23 PM
47	CME Mandates	6/5/2023 10:19 AM
48	1. The loss of telehealth 2. MPS does not have a diverse populations of representatives - not fully connected to rural, BIPOC, and LGBTQ communities	6/4/2023 12:05 AM
49	waitlists for patients court-ordered to state hospitals	5/31/2023 10:44 AM
50	Prior Authorization is killing medicine. Privacy issues with EMRs in hospital systems. Access issues.	5/29/2023 4:02 PM
51	Lack of equity. Poor insurance reimbursement, especially for psychotherapy.	5/27/2023 11:18 PM
52	access to care	5/24/2023 10:49 PM
53	self-isolation	5/24/2023 4:06 PM
54	Prior authorizations and rules and regulations	5/24/2023 2:12 PM
55	inadequate workforce to address the needs of Marylanders. inadequate number of psychiatrists who participate in insurance, which makes treatment difficult for folks to afford.	5/24/2023 12:39 PM
56	Prior authorization issues for patient medications	5/23/2023 9:10 PM
57	Ethics not being considered more strictly in psychiatric cases	5/22/2023 12:13 PM
58	. We get no respect	5/21/2023 8:13 PM
59	Parity. Not allowing the judicial branch to make medical decisions	5/21/2023 5:14 PM

60	It is impossible to take insurance as a private practitioner.	5/20/2023 5:13 PM
61	Competition from other mental health clinicians.	5/20/2023 9:35 AM
62	Nurse practitioners	5/19/2023 2:18 PM
63	The extended reach within scope of practice. Nurse practitioners should not be medical directors.	5/19/2023 12:45 PM
64	No outpatient commitment	5/19/2023 9:37 AM
65	Scope of practice Lack of coordination of services Lack of a multi-level approach to mental health Unclear what state behavioral health services are doing and their plans.	5/18/2023 2:45 PM
66	Lack of access to care for uninsured or underinsured patients, especially for inpatient treatment	5/18/2023 1:26 PM
67	access for all	5/18/2023 12:36 PM
68	Scope of practice. Insurance coverage and limited resources for patients needing help	5/18/2023 12:14 PM
69	Reimbursement models.	5/18/2023 10:12 AM
70	The treatment landscape for those individuals with the most complex and serious mental illnesses.	5/18/2023 9:41 AM
71	none	5/18/2023 9:24 AM
72	maintaining autonomy in private practice	5/17/2023 9:42 PM
73	Involuntary admissions & out of control retention hearings	5/17/2023 7:39 PM
74	Ongoing practice incursions by mid level practitioners	5/17/2023 7:16 PM
75	insufficient influence on state and local governments to improve access to and quality of care	5/17/2023 7:02 PM
76	That minimally trained nurses are providing more & more psychiatric services.	5/17/2023 6:48 PM
77	Parity Pharm benefit manager hurdles	5/17/2023 5:04 PM
78	Reduce prior authorization burden	5/17/2023 4:46 PM
79	there are not enough psychiatrists, and we are expensive to employ. Concern that I see more hospital based psych services leaning more to NPs with a view that Psych MD and psych NP are interchangeable. Inpatient services often see the sickest of the sick so I think we have to find and retain majority presence of MDs trying to help these patients. Also, concerning that I can hardly find any colleague to refer to for med mgmt pts that need to use insurance. It just must be too much hassle for not enough compensation, so every one I know in private practice is self pay and then patient has to submit and try to get reimbursed. Seems psych is the main field where this occurs and I don't understand why we are in this boat.	5/17/2023 4:44 PM
80	Lack of more available services	5/17/2023 4:19 PM
81	Undervalued	5/17/2023 2:29 PM
82	Scope of practice, access to care	5/17/2023 1:58 PM
83	Scope of practice, transparency issues (NPs calling themselves doctors)	5/17/2023 1:45 PM
84	limited access to care for patients	5/17/2023 1:45 PM
85	Not enough quality psychiatrists and therapists that take insurance. Lack out outpatient commitment laws.	5/17/2023 1:27 PM
86	potential legislative changes	5/17/2023 1:03 PM
87	creeping scope of practice from NPs/PAs, and in the future pharmacists, psychologists. Also legalization of things like MJ, psychedelics, role of psychiatrists in euthanasia	5/17/2023 12:42 PM
88	Accessible psychiatric care for everyone	5/17/2023 12:37 PM
89	Decreasing reimbursements, lack of access for patients with Medicare, ongoing scope of practice concerns with NPs providing bulk of psychiatric care. Lack of inpatient beds, lack of	5/17/2023 12:35 PM

state hospital beds, poor quality care and lack of access to long term care facilities for patients with dementia.  $\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left( \frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left( \frac{1}{2}$ 

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90	Parity, reimbursement, equitable access to psychiatric care	5/17/2023 12:34 PM
91	continuing telemedicine with minimal interference by regulations	5/17/2023 12:30 PM
92	growth of NP	5/17/2023 12:28 PM
93	need more treatment centers (inpt beds, ACT, outpt, therapy w meds for middle-income	5/17/2023 12:27 PM
94	n/a	5/17/2023 12:26 PM
95	Need to step up on advocacy for physician care over nurse practitioners who can bill the same with less training. It is unacceptable that some local programs push physicians to train NP's.	5/17/2023 12:24 PM
96	Non M.D. prescribers	5/17/2023 12:22 PM
90	Non w.D. prescribers	5/1//2023 12.2

## Q18 How Can The MPS Better Serve You Now and In the Future?

Answered: 77 Skipped: 71

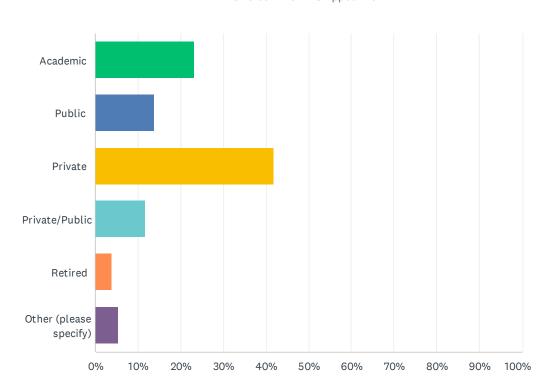
#	RESPONSES	DATE
1	Keep doing what you're doing.	8/19/2023 8:17 AM
2	I have never understood why MD APA members are divided into MPS and WPS. In my view this dilutes the political power of MPS and the PAC. All MD APA members should belong to MPS	8/15/2023 8:51 PM
3	I'm not sure	8/15/2023 7:20 AM
4	I'm not sure	8/15/2023 6:37 AM
5	Continue to develop the curbside conversations More resources to interface with insurance company Help keep psychotherapy by psychiatrists vibrant	8/14/2023 6:59 PM
6	More activities to include retired psychiatrist	8/14/2023 6:02 PM
7	Free virtual CMEs and board maintenance options	8/14/2023 2:31 PM
8	Improving communication among physicians.	8/14/2023 1:38 PM
9	don't know	8/14/2023 1:29 PM
10	Increase parTicipation	8/11/2023 6:51 PM
11	Provide ways for providers who have not been well connected with the MPS group and it's members a way to join in easily	8/7/2023 4:02 PM
12	Doing a good job.	8/5/2023 5:17 PM
13	Cme	7/31/2023 10:34 PM
14	Keep doing what you do. Remain visible to the State legislators and safeguard the practice of psychiatry in Maryland.	7/31/2023 2:13 PM
15	support Medicare for Now locally and get the APA to do the same so we reduce the barriers to care.	7/26/2023 11:12 PM
16	More forceful advocacy.	7/26/2023 5:05 PM
17	More clarity about what they are doing	7/26/2023 4:29 PM
18	You're doing very	7/26/2023 3:52 PM
19	It is serving me well	7/26/2023 2:43 PM
20	Nothing to improve on.	7/26/2023 2:38 PM
21	keep up the good work as you go through your transitions!	7/10/2023 12:57 PM
22	Build social community	7/4/2023 10:23 AM
23	Having CME events offered besides Saturdays for observant Jewish members.	7/2/2023 7:11 AM
24	Not sure. Doing a good job.	6/30/2023 5:24 PM
25	I'm happy with it	6/30/2023 2:28 PM
26	More activities and events	6/29/2023 11:47 AM
27	divers forums and gathering places about overarching issues	6/21/2023 4:51 PM
28	continue to advocate for parity, fair reimbursement from insurance and medicare	6/21/2023 4:46 PM
29	more explicit engagement with residents and medical students interested in psychiatry	6/21/2023 4:35 PM

30	providing specialty referrals lists	6/21/2023 4:33 PM
31	Keep doing what you are doing. Legislative and lobbying efforts are very important to Maryland psychiatrists.	6/9/2023 1:04 PM
32	I really like the paper newsletters that were mailed to my home.	6/9/2023 12:54 PM
33	Continue to do a good job	6/9/2023 12:48 PM
34	Organize events not only in Baltimore	6/9/2023 12:40 PM
35	Have more CME programs	6/9/2023 12:29 PM
36	Advance psychiatric practice further	6/9/2023 12:23 PM
37	<ol> <li>Having a more diverse populations of representatives - not fully connected to rural, BIPOC, and LGBTQ communities 2. Having events occur in different counties not just Baltimore city or Annapolis.</li> </ol>	6/4/2023 12:05 AM
38	continue strong advocacy work	5/31/2023 10:44 AM
39	More educational events	5/27/2023 11:18 PM
40	keep up the great work!	5/24/2023 10:49 PM
41	direct engagement and continued engagement with MedChi and other professional organizations	5/24/2023 4:06 PM
42	not sure	5/24/2023 2:12 PM
43	when I was a member of the NY County District branch there were monthy meetings in evenings with dinner served first; they were well attended. many topics; scientific and organzational. i know we are not that big but perhaps quarterly? Interaction with colleagues is what organization is all about.	5/24/2023 12:39 PM
44	continued policy advocacy	5/23/2023 9:10 PM
45	?	5/21/2023 8:13 PM
46	not sure	5/21/2023 5:14 PM
47	Protect oyr boundaries better	5/20/2023 9:35 AM
48	No comment	5/19/2023 2:18 PM
49	Increase diversity in the leadership of MPS. The board members of the Maryland Foundation for Psychiatry needs an overhaul. The same officers have been in place too long. The mission and vision are stagnant.	5/19/2023 12:45 PM
50	You are doing a good job.	5/19/2023 9:37 AM
51	It's doing a great job now	5/18/2023 2:45 PM
52	More in-person CME offerings	5/18/2023 1:26 PM
53	serves me well already	5/18/2023 12:36 PM
54	present advocacy measures more clearly. More frequent virtual or hybrid events at no cost for members	5/18/2023 12:14 PM
55	More networking events.	5/18/2023 10:12 AM
56	see above	5/18/2023 9:41 AM
57	more free webinars	5/18/2023 9:24 AM
58	continue excellent advocacy work	5/17/2023 9:42 PM
59	Advocacy with legislatores	5/17/2023 7:39 PM
60	Continue doing what you do!	5/17/2023 7:16 PM
61	currently doing a good job offer online/virtual CME on weekdays	5/17/2023 7:02 PM

62	I think you're doing a good job now.	5/17/2023 6:48 PM
63	Keep doing what you are doing.	5/17/2023 5:04 PM
64	Representation for policy making	5/17/2023 4:46 PM
65	cont to advocate to solve some of the issues listed above. I have about 10-15 years til retirement, but seems like there are more requirements/demands (outside of actual patient care) being added and managed care wanting to cut reimb. Wish some sort of balance could be found here.	5/17/2023 4:44 PM
66	Continue doing a good job	5/17/2023 4:19 PM
67	Communication	5/17/2023 1:58 PM
68	Continuing to advocate for scope of practice and transparency issues.	5/17/2023 1:45 PM
69	N/A	5/17/2023 1:45 PM
70	Continue having yearly events that allow for networking	5/17/2023 1:03 PM
71	helping me keep up to date on critical legislative changes that impact clinical practice. Providing sense of professional community	5/17/2023 12:42 PM
72	No particular improvements. Great for networking. Appreciate committees	5/17/2023 12:37 PM
73	MPS is doing a great job.	5/17/2023 12:35 PM
74	don't know	5/17/2023 12:28 PM
75	doing same	5/17/2023 12:27 PM
76	n/a	5/17/2023 12:26 PM
77	advocate to give psychiatry the place it deserves.	5/17/2023 12:24 PM

## Q19 Please Describe Your Practice

Answered: 129 Skipped: 19

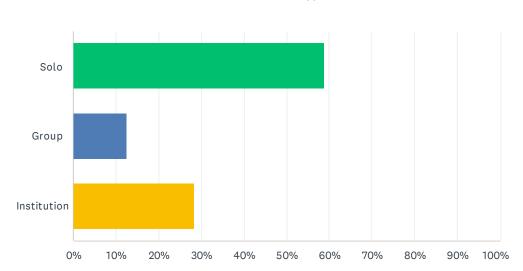


ANSWER CHOICES	RESPONSES	
Academic	23.26%	80
Public	13.95%	.8
Private	41.86%	54
Private/Public	11.63%	.5
Retired	3.88%	5
Other (please specify)	5.43%	7
TOTAL	12	9

#	OTHER (PLEASE SPECIFY)	DATE
1	not for profit private psychiatric hospital	8/14/2023 8:56 PM
2	Semi-retired	6/9/2023 12:34 PM
3	research	5/18/2023 12:14 PM
4	Government	5/18/2023 9:42 AM
5	Both private and academic	5/17/2023 4:21 PM
6	Private non-profit hospital; academic	5/17/2023 1:46 PM
7	trainee	5/17/2023 1:03 PM

## Q20 If You Work In Private Practice, Is It

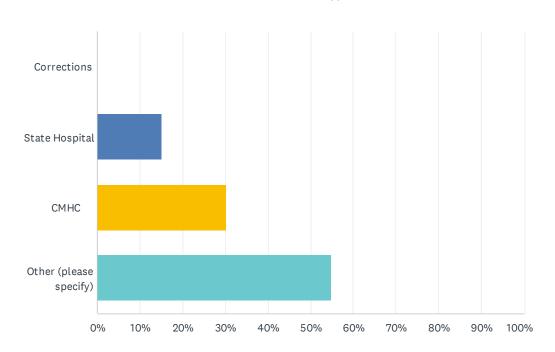




ANSWER CHOICES	RESPONSES	
Solo	58.95%	56
Group	12.63%	12
Institution	28.42%	27
TOTAL		95

## Q21 If You Work In The Public Sector, Is It





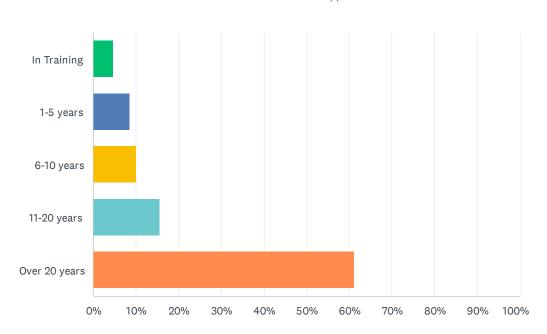
ANSWER CHOICES	RESPONSES	
Corrections	0.00%	0
State Hospital	15.09%	8
СМНС	30.19%	16
Other (please specify)	54.72%	29
TOTAL		53

#	OTHER (PLEASE SPECIFY)	DATE
1	I'm in fellowship	8/19/2023 8:18 AM
2	not public sector	8/15/2023 8:51 PM
3	Government	8/14/2023 2:31 PM
4	Non-profit	8/14/2023 1:39 PM
5	Academic Institution/Hospital	8/5/2023 5:18 PM
6	I don't work in public sector	7/31/2023 10:36 PM
7	Univ of M Student Counseling	7/26/2023 3:09 PM
8	None	6/30/2023 2:29 PM
9	N/A	6/29/2023 11:48 AM
10	federal	6/21/2023 4:24 PM
11	National	6/9/2023 12:48 PM

12	VA	6/9/2023 12:40 PM
13	n/a	5/27/2023 11:18 PM
14	dont work in public sector	5/24/2023 12:39 PM
15	Non public Level V school and residential treatment center.	5/23/2023 4:02 PM
16	VAMC	5/21/2023 5:15 PM
17	Not applicable	5/20/2023 9:36 AM
18	Not applicable	5/19/2023 2:19 PM
19	government	5/18/2023 12:14 PM
20	N/A	5/18/2023 10:13 AM
21	DDA HQ	5/18/2023 9:42 AM
22	University	5/17/2023 7:02 PM
23	N/a	5/17/2023 4:47 PM
24	National/academic	5/17/2023 4:21 PM
25	N/A	5/17/2023 1:46 PM
26	University/Community Psychiatry	5/17/2023 12:38 PM
27	N/a	5/17/2023 12:36 PM
28	na	5/17/2023 12:29 PM
29	mult sites	5/17/2023 12:28 PM

# Q22 How Long Have You Been In Practice?

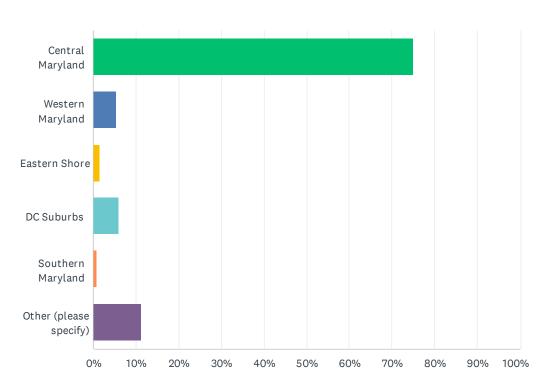




ANSWER CHOICES	RESPONSES
In Training	4.65%
1-5 years	8.53% 11
6-10 years	10.08% 13
11-20 years	15.50% 20
Over 20 years	61.24% 79
TOTAL	129

## Q23 Where Is Your Primary Place Of Practice?





ANSWER CHOICES	RESPONSES	
Central Maryland	75.00%	99
Western Maryland	5.30%	7
Eastern Shore	1.52%	2
DC Suburbs	6.06%	8
Southern Maryland	0.76%	1
Other (please specify)	11.36%	15
TOTAL	1	132

#	OTHER (PLEASE SPECIFY)	DATE
1	retired	8/14/2023 1:30 PM
2	Baltimore City	8/5/2023 5:18 PM
3	Baltimore	7/31/2023 10:36 PM
4	retired	7/27/2023 8:24 AM
5	Baltimore county	6/30/2023 2:29 PM
6	National	6/9/2023 12:48 PM
7	VA/WV	6/9/2023 12:40 PM
8	Baltimore	5/22/2023 12:13 PM

9	Baltimore City	5/20/2023 5:13 PM
10	statewide	5/18/2023 9:42 AM
11	National	5/17/2023 4:21 PM
12	ра	5/17/2023 3:44 PM
13	Baltimore City	5/17/2023 1:03 PM
14	From home, Frederick	5/17/2023 12:30 PM
15	Baltimore County	5/17/2023 12:23 PM