# Integrative Psychiatry Elective Track

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This Track is open for PGY 4 residents in general psychiatry, as well as CAP fellows.

ACGME Milestones for Psychiatry training emphasize competency in the area of patient care, medical knowledge, practice-based learning and improvement, and professionalism. One goal for training is to become a psychiatrist who serves as a role model and teacher of compassion, integrity, respect for others, and sensitivity to diverse patient populations. A goal under medical knowledge includes knowing drug-supplement/herb interactions. One milestone that is evaluated for residents is "accountability to **self**, patients, colleagues and the profession" with subsection for fatigue management and work balance.

Integrative Medicine broadly defines a clinical paradigm that is patient-centered, healing-oriented, health promoting, and embracing of appropriate therapeutic approaches whether they originate in conventional or complementary medicine (Dodds et al, 2013). It reaffirms the importance of the therapeutic relationship, focuses comprehensively on the whole person, and renews attention to healing (Institute of Medicine, 2009b). Practitioners are called to exemplify and commit themselves to self-exploration and self-development. Mind body medicine, which is an important component of integrative medicine, particularly emphasizes and provides skills for provider wellness, self-awareness, reflection, and compassion toward the self and others.

# **IMR-Psychiatry I**

Didactics: Mondays 1-3pm (see Clinical Practice for additional times for patient care) Location: Behavioral Health Pavilion 3<sup>rd</sup> floor Group Room or online

# Goals of the IMR-Psychiatry I:

# Goal 1: Improve resident knowledge of evidence-based Integrative Medicine in Psychiatry

The primary goal of the curriculum is to introduce the resident/fellow to the field of evidence-based integrative medicine as it relates to mental health. Many patients have questions about integrative therapies. It is important for psychiatrists in training to have an understanding of this emerging field, and to have familiarity with evidence-based

integrative medicine research and resources, whether they will use integrative medicine or not. As the resident participates in the curriculum, he/she will see that some areas of integrative medicine have strong supporting research and other areas may not. We will delineate the boundaries of the current research.

#### Goal 2: Improve Resident Wellness and Self-Awareness of Their Own Wellbeing

A second essential goal of the IMR-Psychiatry curriculum is to raise awareness about the importance of resident health and wellness. For this reason, the resident will find a blend of pediatric and adult evidence-based integrative curriculum throughout the IMR-Psychiatry, especially in the areas of preventative health, integrative mental health and mind-body medicine. A core philosophy of the Arizona Center for Integrative Medicine is self-care for the physician-learner, with an eye to helping them become better role models and more effective counselors to their patients and families.

During IMR-Psychiatry the resident/trainee will also receive an introduction to evidencebased mind-body medicine with a strong foundation in mindfulness in medicine. This topic is emphasized deliberately in large part due to the emerging literature in mindfulness in medicine, and in response to the newly revised core competencies in training in the areas of personal and professional development. This new core competency specifically calls for the development and evaluation of resident skills in self-awareness, effective stress management, and self-regulation. The IMR-Psychiatry curriculum in this area is designed to provide a robust research background in addition to experiential exercises. This was done to provide a multi-dimensional approach to a topic that may be new to many in the medical field.

#### Goal 3: Incorporating Knowledge of Integrative Medicine in the Clinical Setting

Finally, IMR-Psychiatry has the goal of training residents/fellows in incorporating their emerging knowledge of integrative medicine in the clinical setting. Therefore, in addition to case-conferences, journal clubs, online interactive modules, and experiential didactics, residents also participate in patient care using integrative medicine principles. This will provide a multi-dimensional, hands-on training for these residents to gain clinical experience in this expanding field.

### In-person Didactic & Experiential Sessions (Mondays 1-3pm):

*Mind-Body Skills Groups:* Each resident/fellow will participate in a series of mind-body skills groups (2-hour group weekly for 10 sessions). The skills include deep breathing techniques, meditation, biofeedback, guided imagery, mindful eating/nutrition, and the therapeutic use of creative arts, music and movement. The goal of the group is to give hands-on experience within a small group to the participants, enhancing knowledge of various evidence-based techniques; even more importantly, the goal is to encourage gaining experience in the practice of self-care, self-awareness, and to enhance a sense

of well-being and resiliency.

**Experiential sessions:** Trainees will participate in interactive didactic sessions with various community-based integrative medicine practitioners in order to gain knowledge about a wide array of modalities. These may include but are not limited to motivational interviewing, biofeedback, Tai Chi, meditation, clinical hypnosis, Traditional Chinese Medicine, Reiki, Qi Gong/Chi Nei Tsang, environmental health, accelerated resolution therapy (ART), internal family systems therapy (IFS), supplement/herb store visit, and aromatherapy.

**On-line Interactive Modules**: Provided through the University of Arizona Center for Integrative Medicine (azcim.org), this unique on-line interactive curriculum provides information on evidence-based interventions applicable to psychiatric care.

**Scholarly Project**: This will include two writing assignments. One is a reflection paper about a personal or professional awareness, realization, or deeper understanding regarding integrative medicine. The reflection paper will provide an opportunity for the trainee to reflect on his/her own process of personal and professional growth through participation in the curriculum. The second is a research paper based on a literature review of any topic in integrative medicine related to mental health, chosen based on interest.)

*Case Conference and Journal Club Presentations:* Resident/fellow will present 3 to 4 times over the course of the year during didactic sessions.

# **Clinical Practice:**

Flexible number of hours; intakes with integrative psychiatry faculty and follow-ups at the Banner-University Medicine Integrative Psychiatry Clinic (adult and/or child), and weekly supervision.

**Clinical group supervision:** Mondays 8-9am or Tuesdays 8-9am or Wednesdays 8-9am

#### Educational Patient Intakes with Group Case Discussion:

Residents will participate in 8 educational intakes done through a one-way mirror in July-August, on Mondays and Tuesdays, 8am-noon. These educational intakes will involve one of the residents/fellows interviewing the patient with Dr. Ranjbar, integrative psychiatry faculty through a one-way mirror, with other residents/fellows observing. This session will be followed by a discussion session (without patient present), when a comprehensive biopsychosocial case formulation and treatment plan will be discussed.

**Online Interactive Modules:** Protected time one hour per week will be built into resident/fellow schedules. A unique online interactive curriculum provides information on evidence-based interventions for psychiatric care. The online curriculum has been

carefully chosen to provide an introduction to integrative medicine from a psychiatric perspective. In order to graduate, residents/fellows must complete 80% of the required online modules. Residents are expected to read on a regular basis and progress will be checked monthly by course directors. As the online material provides foundational material that will be needed to create integrative treatment plans. It is expected for residents to complete 60% of the online material by January 1<sup>st</sup>. Residents who are not consistent with online reading will be expected to create a reading plan and present it to course directors.

**Reflection Paper:** This will include two writing assignments. One is a reflection paper about a personal or professional awareness, realization, or deeper understanding regarding integrative medicine (2 pages single spaced, Arial font 12, 1-inch margins). The reflection paper will provide an opportunity for the trainee to reflect on his/her own process of personal and professional growth through participation in the curriculum.

#### Reflection Paper DUE DATE: June 4th

**Scholarly Project:** The second is a PowerPoint presentation on any topic of interest in integrative medicine related to mental health, chosen based on interest. The purpose is to examine an area closely to gain a sense of competency. Integrative medicine literature is vast and expanding rapidly, and learners can often feel a sense that they know a little bit about lots of things but nothing in depth. This is an opportunity to really deepen knowledge in one area. Length: 10-minute presentation and 5 minutes for discussion/questions about the topic with the group.

**PowerPoint Presentation DUE DATE:** Please email the PowerPoint presentation to Dr. Ranjbar by April 27, 2021.

*Evaluation:* A Pre- and Post-evaluation survey of the knowledge base of trainees in the field of integrative medicine, as well as assessments of self-care, quality of life, stress management, and level of career satisfaction will be performed.

Completion of 80% of online course materials, participation in 80% of in-person sessions and passing the final exam is required; participants meeting this requirement will receive a completion certificate from the Arizona Center for Integrative Medicine and the University of Arizona Department of Psychiatry.

#### **IMR-Psychiatry II**

Time requirement to be set up in advance with course director and may range from 2-8 hours per week. Location: Behavioral Health Pavilion (adult and/or child)

This elective is open for trainees who have completed IMR-Psychiatry I.

## Goals of IMR-Psychiatry II:

- 1. To apply knowledge of evidence-based integrative medicine in the comprehensive psychiatric evaluation of child and/or adult psychiatry patients
- 2. To apply knowledge of evidence-based integrative medicine in the biopsychosocial case formulation of intakes in child and/or adult psychiatry
- 3. To apply knowledge of evidence-based integrative medicine in the comprehensive treatment planning and follow-up of child and/or adult psychiatry patients
- 4. To enhance adult and/or child psychiatry patient care based on up-to-date literature searches of integrative approaches for the treatment of mental health conditions.
- 5. To enhance the resident/fellow's ability to refer to community providers for appropriate evidence-based integrative medicine approaches
- 6. To continue to practice integrative medicine approaches to enhance resident/fellow well-being, self-awareness, and mindfulness in medical practice

#### **Components:**

*Mind-Body Skills Groups (Optional):* Each resident/fellow will have the option to participate in a series of mind body skills groups (2-hour group per week for 10 sessions July-September). Since all IMR-Psychiatry II resident/fellows have already completed IMR-Psychiatry I, this will be a repeated experience, with opportunity to deepen knowledge and practice of mind-body medicine. Participation allows for IMR-Psychiatry II resident/fellows to share their knowledge and experience of mind-body medicine with their colleagues who may be new to the experience.

Adult and/or Child Patient Intakes (Optional): The intake frequency may vary from 1-3 per month depending upon scheduling needs. 1.5 hours are allotted for each adult intake. For child and adolescent intakes, two-hour slots are set aside to allow for interviewing child and parent, with ample time for treatment planning and psychoeducation.

*Group Supervision:* Residents/fellows can participate in weekly group supervision where new and follow-up cases are presented and discussed with supervising attending. Options include Monday 8-9am, Tuesday 8-9am, or Wednesday 8-9am.

**Teaching opportunities**: Each trainee must participate in some form of teaching; this will vary from trainee to trainee and a plan is to be developed in conjunction with Dr. Ranjbar. Resident/fellow will have the opportunity to conduct one or more of the experiential didactic sessions for IMR-Psychiatry I participants. This may involve giving an interactive case presentation, designing and facilitating an experiential session based on one of the integrative medicine modalities, leading a journal club, or case presentation session for IMR-Psychiatry I participants in collaboration with the supervising attending.

**Scholarly project:** Each trainee must participate in some form of a scholarly project; this will vary from trainee to trainee and a plan is to be developed in conjunction with Dr. Ranjbar. With approval of elective directors, resident/fellow may take part in the data gathering, analysis, and/or publication of a quality improvement program related to the IMR-Psychiatry I curriculum; may also include a resident-initiated research project, literature review, case report, etc.

**Reflection Paper:** This will include two writing assignments. One is a reflection paper about a personal or professional awareness, realization, or deeper understanding regarding integrative medicine (2 pages single spaced, Arial font 12, 1-inch margins). The reflection paper will provide an opportunity for the trainee to reflect on his/her own process of personal and professional growth through participation in the curriculum.

#### Reflection Paper DUE DATE: June 4th

Category of Program	Year of Resident	Prior elective experience	Curriculum	Integrative Psychiatry Clinic
IMR- Psychiatry I	4 <sup>th</sup> , 1st & 2 <sup>nd</sup> year child fellow	None	95 hours of on-line interactive modules + 2 hours/week of experiential didactics	Up to 6 hours/week
IMR- Psychiatry II	4 <sup>th</sup> , 2 <sup>nd</sup> year child fellow	Completed IMR- Psychiatry I	Tailored to participant interest and clinical cases	Up to 8 hours/ week

#### Table: IMR-Psychiatry I & II Requirements