Child & Adolescent Psychiatry
Fellowship Program

To prepare the next generation of leaders in behavioral health care;
to support trainees & staff in delivering the highest quality care
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BOSTON CHILDREN’S HOSPITAL

Boston Children’s is the #1 ranked children’s hospital in the national by U.S. News & World Report for 5 years in a row. It is the primary pediatric teaching hospital for Harvard Medical School and is home to the world’s largest research enterprise based at a pediatric medical center.

Boston Children’s is a 404-bed comprehensive center for pediatric health care. As one of the largest pediatric medical centers in the United States, Boston Children's offers a complete range of health care services for children from birth through 21 years of age. That said, Boston Children’s services can begin at 15 weeks gestation and extend into adulthood for many chronic pediatric illnesses we manage.

It is home to close to 500 residents and fellows, over 1500 faculty members, and nearly 1500 nurses. It is a place of clinical innovation and research excellence. More than 1,000 scientists comprise the Boston Children’s research community, including members of the National Academy of Sciences, the Institute of Medicine and the Howard Hughes Medical Institute. Current initiatives attract more than $200 million in annual funding, including more federal funding than any other pediatric facility.

Boston Children's has a long history of innovation including the launch of pediatric surgery in 1920, the world’s first successful surgery to correct a congenital heart defect in 1938, and the successful culture of polio and the measles viruses, making way for the development of vaccines, to name but three remarkable innovations.
THE DEPARTMENT OF PSYCHIATRY (DEPARTMENT)

OUR VISION
Working Together To Help Children & Families Achieve Healthy Development

OUR MISSION
Promoting the well-being of children & families through excellence in behavioral health care, education, innovation, & advocacy

OUR EDUCATION PRIORITIES
To prepare the next generation of leaders in behavioral health care; to support trainees & staff in learning how to deliver the highest quality care

OUR DEPARTMENT OVERVIEW
Boston Children’s Department of Psychiatry (Department) is focused on the development and implementation of a responsive behavioral health care continuum so as to provide children and adolescents with the right services in the right setting at the right time. To do so, the Department has embraced a stepped-care approach to mental health care whereby patients are grouped into mild, moderate, or severe levels of functioning as a means of determining the most effective care setting. The Department embraces that the establishment of an effective behavioral health care continuum will require successful collaborative care partnerships with primary care providers, school professionals, and community mental health providers.

Department research is focused on understanding, diagnosing, and treating children at risk of mental health problems. The research efforts integrates psychiatry, neuroscience, genetics, stem cell science, bioinformatics, and brain imaging together with a goal of unlocking psychiatric disease through early detection, prevention, and intervention to protect and treat the most vulnerable community of children and young adults.

The Department has been committed to educating the next generation of child and adolescent psychiatrists, clinical child psychologists, and psychiatric social workers. The Department advocates at national, regional and local levels for the highest quality mental health services for children and families.
OUR CHAIRMAN

David R. DeMaso, MD
Psychiatrist-in-Chief and Chairman of Psychiatry,
Leon Eisenberg Chair in Psychiatry at Boston Children’s Hospital;
Gardner - Monks Professor of Child Psychiatry and
Professor of Pediatrics at Harvard Medical School

“Each and every day I am guided by the memory of my mentor, Dr. Leon Eisenberg, who argued for the significance of biological context long before others, argued for the significance of social context when others found biological context, and mentored colleagues across the globe regarding the importance of returning humanism to the field of medicine. As psychiatrist-in-chief and chairman, I work to instill this same approach to our faculty and the next generation of child and adolescent psychiatrists that join us each year.”

As a child and adolescent psychiatrist, the underlying essence of Dr. DeMaso’s work has been to understand what facilitates or hinders an individual’s ability to cope with adversity. His career has encompassed research, administration, and advocacy. He has over 220 papers and chapters reporting the findings from his clinical and research innovations, including two textbooks on pediatric psychosomatic medicine (Textbook of Pediatric Psychosomatic Medicine and Clinical Manual of Pediatric Psychosomatic Medicine) and multiple chapters on pediatric behavioral health in leading textbooks, including the Nelson Textbook of Pediatrics and Mental Health Care of Children and Adolescents – A Guide for Primary Care Clinicians. Dr. DeMaso has held top leadership positions at the American Academy of Child and Adolescent Psychiatry, has earned multiple awards from AACAP for his clinical, educational, research, and advocacy efforts in child mental health (Simon Wile Leadership in Consultation Award, Outstanding Mentor Award, Klingenstein Third Generation Foundation Award for Research in Depression or Suicide, Catcher in the Rye Advocacy Award), and has earned the honor of Distinguished Life Fellow of AACAP.

He completed a pediatric internship at Massachusetts General Hospital, general psychiatry training at Duke University Medical Center, a child and adolescent psychiatry residency at Judge Baker Guidance Center- Children’s, and a pediatric psychosomatic medicine fellowship at Boston Children’s.
Oscar Bukstein, MD, MPH

Fellowship Director, Associate Psychiatrist-in-Chief for Academic Affairs & Vice Chair of Psychiatry; Boston Children’s Hospital; Professor of Psychiatry, Harvard Medical School

“At this stage in my career, helping to train the next generation of child and adolescent psychiatrists is my most important goal. We continue to plan and develop innovative ways to teach child and adolescent psychiatry. We also try to have a good time. At Boston Children’s we have a great institution, wonderful clinical programs, great faculty, and, of course, great fellows. I hope that you might be one of them next year.”

Prior to coming here in March 2016, Dr Bukstein was Medical Director at DePelchin Children’s Center in Houston Texas. He assumed this position in 2013 following several years at the University of Texas (UT) Health Science Center in Houston where he was Professor of Psychiatry and Chief of the Division of Child and Adolescent Psychiatry. He attended medical school at the University of Texas Medical Branch in Galveston and has a master’s degree in public health from UT- Houston. Prior to returning to Texas in 2010, Dr. Bukstein spent 28 years at the Western Psychiatric Institute and Clinic (WPIC) and the University of Pittsburgh School of Medicine where he received his general and child and adolescent psychiatry training, eventually becoming Professor of Psychiatry. At WPIC and the University of Pittsburgh, he led the development of a number of clinical and research programs.

Dr. Bukstein has over 30 years of practice experience with clinical and research expertise in treating youth with substance use disorders, and other disruptive behavior disorders. Dr. Bukstein has a substantial academic record, having authored or co-authored over 150 papers, chapters, or books and has received funding by the National Institute of Mental Health, the National Institute on Drug Abuse, the National Institute of Alcohol Abuse and Alcoholism, and the National Institute on Child Health and Human Development.

Dr. Bukstein has a record as a teacher at all levels, including medical students, residents, fellows, psychology interns, nursing students, and post-doctoral students as well as mentoring many junior faculty and pre- and post-doctoral students.
Chase Samsel, MD
Associate Fellowship Director, Boston Children’s Hospital;
Instructor in Psychiatry, Harvard Medical School

“Child and Adolescent Psychiatry training is critical in providing patients, families, teams, and systems with strong clinicians, team members, and leaders. CAPs provide relief to workforce shortages wherever they go and must be dynamic with a diverse skillset to make the most difference in the lives of children and families. Our first year of training provides a great foundation in outpatient and acute psychiatry while work in the second-year hones skills and empowers individuals in their specific niche interests with an incredible array of flexible electives.”

Dr. Samsel is an attending psychiatrist and psychosocial oncologist on the Psychiatry Consultation Service (PCS), Pediatric Transplant Center, and the Dana-Farber/Boston Children’s Cancer and Blood Disorders Center. He completed his pediatrics, adult psychiatry, and child psychiatry training at Brown University’s Triple Board Program and is board certified in all three specialties. On the PCS, Dr. Samsel provides teaching and supervision for Child Psychiatry Fellows, Psychology Post-doctoral Fellows, Psychology Interns, and Medical Students. As part of his expertise in interdisciplinary care and systems work, Dr. Samsel has developed a curriculum to train Fellows on adult learning, communication, and effective teaching. He also directs the Transition to Practice seminar, which is taught during the second year of training, with seminars in physician personal finance literacy, private practice and “side-gigs”, job searches and negotiations, amongst other topics.

The majority of his scientific contributions to date has been in the psychiatric care of seriously medically ill children and their families and in the interface of pediatric and psychiatric care. He additionally teaches at Harvard Medical School in the pediatric rotation block and is the Co-Chair for the Psychiatry Student Interest Group at Harvard Medical School.
Special Announcement

Zheala Qayyum, MD

Associate Fellowship Director, Boston Children’s Hospital; Instructor in Psychiatry, Harvard Medical School

Joining the Department in the fall 2018, Dr. Zheala Qayyum will be an attending psychiatrist on the Psychiatry Emergency Service as well as a new associate training director joining together with Drs. Bukstein and Samsel to overseeing the fellowship. She joins us after being an Assistant Professor of Psychiatry at the Yale University of Medicine and the Yale Child Study Center. While there she selected four consecutive years for the Yale Psychiatry Resident Association’s Teaching Award (2014-2017). Her passion for teaching and education is further epitomized in her current enrollment in the Masters in Medical Education program at Harvard Medical School.
OUR CHILD AND ADOLESCENT PSYCHIATRY FELLOWSHIP

Our philosophy is that medical education is a graduated process in which child and adolescent psychiatrists, over a period of several years, gain experience with and assume responsibility for increasingly difficult patients and problems within their area of expertise. At the conclusion of training, fellows must be prepared to practice independently. Therefore, to serve the public well in our training mission, we must train child and adolescent psychiatrists who by their final year of training are prepared to manage complex patients and problems. Performance evaluation and feedback is critical in helping fellows manage progressively more difficult problems, so that they will be able to function independently after graduation; then we will have served the public in our training mission.

We provide timely, relevant instruction and supervision around the fundamentals of child and adolescent psychiatry that are responsive to the fellows’ growth as developing professionals and acknowledge the challenges of entering a new field.

The organization of our clinical rotations and our experiential approach to supervision lend themselves to a flexible approach across our training sites. This allows us to provide hands-on supervision when and where it is needed, taking full advantage of critical teaching moments, as well as flexing to allow increasing autonomy as each fellow demonstrates their emerging competencies.

**We want our fellows to develop skills to:**

- Improve the quality of life & reduce the burden of suffering for children & families that face disabling mental illnesses
- Evaluate by identifying both strengths & deficits of children & their families
- Develop knowledge & skills in both psychotherapies & somatic therapies
- Treat child psychopathology in a bio-psycho-social context of development
- Emphasize family-centered & culturally competent care
- Utilize community-based settings & systems of care
- Advocate for youth & their families
- Develop leadership skills and work effectively in interdisciplinary teams

The Fellowship is structured so that the majority of required ACGME training experiences are completed in the first year, allowing substantial discretionary time in the second year for personal pursuits whether clinical, education, or investigation. Our fellows are encouraged and supported to follow their interests and passions in the field of child and adolescent psychiatry.
Reflective of this breadth of experience available, the Department’s fellowship program has graduated over 300 child and adolescent psychiatrists who have gone on to successful careers in clinical, educational, administrative, advocacy, and research realms. We are strongly committed to training the next generation of child and adolescent psychiatrists who will work in the nation’s evolving health care system to reach children and families.

Graduating Fellows Class of 2018 (left to right):
Eleni Maneta, Kyle Stephens, Gino Mortillaro, Vyoma Acharya, Amanda Schlesinger, and Oscar Bukstein
CHILD & ADOLESCENT FELLOWSHIP PROGRAM DESCRIPTION

The BCH CAP Fellowship is a traditional two year fellowship, following 3-4 years of general (adult) psychiatry training, which is required for CAP Board Certification. We have 5 positions per year.

Year I Outline

- 4 months Inpatient Psychiatry Service
- 4 months Psychiatry Consultation Service
- 4 months Outpatient Psychiatry Service

Inpatient Psychiatry Service (IPS). The unique training goals of the IPS rotation are to teach fellows to evaluate and manage children, adolescents, and their families, who present with severe psychiatric illnesses, or co-morbid medical-psychiatric illnesses, requiring care in a more restrictive inpatient setting. In this setting, our fellows function as the psychiatrist on four patients and work collaboratively with the multidisciplinary team. This involves all aspects of patient care, from family, to individual, to pharmacotherapy. During this four-month rotation, fellows receive supervision from the attending and staff social workers, as well as from the medical director. In keeping with our experiential model of training, attending staff, social work staff and fellows routinely see patients and families jointly. Rotation-specific didactics are also provided. A dedicated resource specialist is available to assist in planning for aftercare following discharge from the inpatient psychiatric service to free up time so that fellows can focus on clinical care and learning.

Psychiatry Consultation Service (PCS). The unique training goals of the PCS rotation are to teach fellows to evaluate and manage children, adolescents, and their families, who present with a range of psychiatric needs on inpatient medical settings. Working on the interface between psychiatry and pediatrics challenges fellows to refine their differential diagnostic and systems management skills and to develop and implement comprehensive treatment plans in a non-psychiatric milieu. During this four-month rotation fellows work closely with their assigned consult attendings to evaluate and follow patients during their medical hospitalization and often collaborate with PCS psychology attendings and social work staff. Rotation-specific didactics are also provided. A dedicated resource specialist is available to assist in planning for follow-up care following discharge from the medical service to free up time so that fellows can focus on clinical care and learning.
### Outpatient Psychiatry Service (OPS)

Fellows perform clinical duties and training in a variety of outpatient settings, on/off the OPS, including Emergency Psychiatry Service (BCH Emergency Department), Adolescent Substance Abuse Program, Pediatric Neurology, and Martha Eliot Health Center.

Throughout the course of the first year, fellows maintain a continuity clinic one afternoon each week in the OPS. The unique training goals of the OPS are to teach fellows to conduct comprehensive evaluations, and to formulate and carry out related evidence-based disposition and treatment plans for children, adolescents, and their families who present with a wide range of psychiatric needs. Attendings review cases individually with fellows in a traditional supervisory format as well as directly observing/assisting in select evaluations and/or follow up appointments.

### Year II Outline

- Outpatient Psychiatry Service - three sessions/week
- Family Therapy/Group Therapy – one afternoon a week
- Forensic - (3 months)
- Community Mental Health - Martha Eliot Health Center – one afternoon/week (5 months)
- Elective Time (16-20 plus hours/week)
With the transition to the second year of training comes the expectation that our fellows will show increasing autonomy and independence in the expression of their developing skills and competencies as child psychiatrists. We continue to provide an experiential teaching model where senior staff are present on-site and are available to jointly see patients and families with our fellows, but fellows progress to spending more time seeing their patients and families independently.

The second year of fellowship training is designed to build in breadth and depth upon the core skills and competencies that our fellows began developing during their first year of training and prepare them for graduation. Given that the majority of the core training requirements are fulfilled during the first year, a highlight of our program is that fellows have ample time to pursue specific areas of their own interest in child and adolescent psychiatry. This unique aspect of our fellowship allows our second years to really tailor a large percentage of their entire second year to meet their clinical, academic and professional goals. By the end of the second year, our fellows feel prepared to enter the field of child and adolescent psychiatry.

The core clinical experiences of the second year are a twelve-month hospital-based outpatient psychiatry experience, a three-month forensic-based experience, and a five-month community health experience.

**BCH CAP Rotation Blocks - 2nd Year**

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<td>Outpatient Continuity Clinic</td>
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On the **Outpatient Psychiatry Service**, in the second year, fellows increase their clinical time from one to three clinical sessions per week (2 afternoons for follow up; 1 morning for diagnostic evaluations). The 2nd year outpatient experience builds upon their developing skills of assessment, psychotherapy and pharmacotherapy through the experience of working with a wider range of patients. Supervisory structure for this expanded experience is the same as that for the first year. During the course of the second year, each fellow also participates in at least one group therapy experience as a co-facilitator and a family therapy experience.

Our second-year fellows receive a **forensic experience** by working in Department of Youth Services (DYS), where they have the opportunity to learn the skills required to function as a consultant to the legal system around matters related to the mental health needs of delinquent youth.

Fellows spend five months at the Martha Eliot Health Center in fulfillment of their **community psychiatry** requirement. They have the opportunity to work with a largely underserved community, particularly a Latino population, under the guidance of the on-site Boston Children’s Child and Adolescent Psychiatrist. Fellows with a particular interest in community and public sector psychiatry may also elect to devote additional time in one of the other settings of the Children’s Hospital Neighborhood Partnerships program, including the school system.

**Emergency Psychiatry Training (On-call)**

Emergency evaluations and treatment of youth and their families are core skills for the child and adolescent psychiatrist. Throughout both years of training, fellows take call, providing acute care for patients presenting with psychiatric emergencies in multiple hospital contexts, including the inpatient psychiatry unit, the medical and surgical wards and when necessary the emergency department. We provide a progressive, structured and supervised set of experiences to ensure the development of these critical abilities. Beginning with a gradual phase-in involving shadow calls and seminars during the summer of the first year of training and continuing with ongoing case-based teaching and attending supervision on all individual cases seen, our fellows have the support and structure needed to master the challenges they face when providing emergency psychiatric care.

Emergency Psychiatry Training or On-call is taken from home with travel to the hospital for coverage of the tasks listed below:

- Weekday evening call encompasses urgent patient care calls from OPS, and management of brief admissions and restraints to IPS.
- Weekends and holidays encompasses the following:
- Urgent inpatient medical/surgical and ER consultations and/or medication evaluations as triaged to the fellow by the Psychiatry attending.
- Clinically indicated inpatient medical/surgical follow-up consultations as predetermined by the Psychiatry Consultation Service (PCS).
- Admissions and restraints on IPS (medical issues are triaged directly to the covering pediatrician; the On-Call Psychiatry Attending is responsible for rounding on all IPS patients)
- Back-up for SW (if not available) during which fellows will assume SW role and responsibilities (coverage of the EPS and PCS including psychiatric boarders.)
- Fellows review all patients seen with the On-Call Psychiatry Attending and discuss triage versus deferral of new consults

On-Call is divided into Basic–Emergency Psychiatry Training (B-EPT) and Advanced–Emergency Psychiatry Training Experience (A-EPT):

- **B-EPT** consists of the following specific number of required weekend and weekday on-call shifts.
  - **Weekends**
    - 1\textsuperscript{st} year Fellows responsible for 4 full weekends per year
    - 2\textsuperscript{nd} years Fellows responsible for 3 full weekends per year
  - **Weekdays**
    - 6 weeks responsibility by 1\textsuperscript{st} year Fellows
    - 4 weeks responsibility by 2\textsuperscript{nd} year Fellows

- Following a fellow’s completion of their **B-EPT** requirements, additional weekend and weekday shifts each year will be made available through **A-EPT**. The **A-EPT** experience, which is strongly encouraged, will allow for the consolidation of skills learned in the **B-EPT** experience. It should be noted that the Department provides financial compensation for these **A-EPT** shifts. This compensation will be in addition to the fellow’s salary and making this advantageous for those considering moonlighting during their fellowship.

There are additional supports available to the fellows during these experiences. A resource specialist assists the fellow with any disposition work that is needed on weekends. Additionally, a behavioral response nurse is available on weekday evenings until 11pm and on weekends from 9am to 5:30pm. This nurses focuses on preventing/managing patient agitation and aggression, liaises with nursing staff, care-companions, and security, and transitions psychiatric boarder patients from the ED to the medical floor.
Electives

Over the course of the entire second year of training, fellows have an average of 16 to 20 hours per week of elective and administrative time to pursue any advocacy, clinical, community, educational, or research interests they may have. Faculty mentors play an essential role in helping fellows to plan for these opportunities.

Some of our recent electives (Research opportunities not included)

- Chief Fellows in Child and Adolescent Psychiatry (2 positions), BCH
- Senior Fellow, Psychiatry Consultation Service (PCS), BCH
- Senior Fellow, Inpatient Psychiatry (Bader 5), BCH
- The CASTLE Program, High Point Treatment Center (acute detox and stabilization inpatient program for teens with substance use disorders)
- Learning Disabilities Program, Department of Neurology, BCH
- Sleep Medicine Clinic, Center for Pediatric Sleep Disorders, BCH
- Institute for Professionalism and Ethical Practice (IPEP), BCH
- Pediatric Psychosocial Oncology, Dana-Farber Cancer Institute
- School-Based Rotation, Children’s Hospital Neighborhood Partnership (CHNP), BCH
- Student Mental Health Services (SMHS) at Harvard University Health Services (HUHS)
- Autism Center, BCH
- Developmental Neuropsychiatric (DNP) Clinic, BCH
- The Center for Early Detection, Assessment & Response to Risk (CEDAR), Massachusetts Mental Health Center
- The Prevention & Recovery in Early Psychosis (PREP) Program, Massachusetts Mental Health Center
- Office of Government Relations Mental Health Advocacy
- Obsessive-Compulsive Disorder Institute (OCDI Jr), McLean Southeast
- Lurie Autism Center, Massachusetts General Hospital
- Gender Management Service (GeMS); endocrinology
- Eating Disorders and Adolescent Medicine Clinic, BCH
- Research (arrange with specific investigator)
CORE SEMINARS

The core didactic seminars in our child and adolescent psychiatry fellowship are an integrated series designed to cover child development, developmental neuroscience and mental health topics from the historical to the most contemporary. They draw upon the resources of the Boston Children’s Hospital Department of Psychiatry and the Consolidated Department of Psychiatry at Harvard Medical School.

All Years
- Psychiatry Grand Rounds (every two weeks)
- Mortality and Morbidity Conference (monthly, presenters rotating between services)

Year I
- Intensive orientation (including “crash course”); Fundamentals of Assessment and Treatment Lectures (Introductory Clinical Lectures)
- Psychotherapy 101a: Fundamentals of Development & Psychotherapy
- Psychotherapy 101b: Modular (CBT) therapy for Child Psychopathology
- Diagnostics, Psychopharmacology and Pathophysiology Seminar
- Diversity and Cultural Competency
- Joint Journal Club (with Year II fellows)
- Normal Development, Developmental Neuroscience, and Developmental Psychopathology (3 hours/week @ HMS Psychiatry combined didactics with Boston Children’s Hospital, Cambridge Health Alliance and Massachusetts General/McLean CAP programs)

Year II
- Diagnostics, Psychopharmacology and Pathophysiology Seminar;
  Neuropsychiatry/Neurobiology and Treatment Refractory Child Psychopharmacology
- Psychotherapy 201
- Working with Families
- Motivational Interviewing
- Transition to Practice/Career Seminar Series
- Joint Journal Club (with Year I fellows)
Psychotherapy Training

Our fellowship program philosophy recognizes the importance of both knowledge of and basic skills in the practice of evidenced-based psychotherapies for child, adolescents, and their families. The two-year psychotherapy innovative curriculum emphasizes the integration of evidence-based practices into general psychiatric care of children and adolescents. The emphasis is on learning the many skill elements that comprise modern psychotherapies and that child and adolescent psychiatrists are likely to use in their clinical practice. In year one, case-based discussions (Psychotherapy 101A) engage the Fellows in using the basic techniques of the therapeutic relationship, parent-child interaction training, psychodynamic psychotherapy and CBT to treat children and families with complex presentations. Also in year one (Psychotherapy 101B), Fellows learn a modular approach to using basic CBT and psychodynamic practice elements with children and teens.

The Second Year Psychotherapy Seminar (Psychotherapy 201) builds upon the foundations in psychotherapy training offered during the first year by focusing on specific psychotherapy approaches and empirically supported treatments for use with particular clinical conditions including complex cases. The emphasis is on the integration of these treatment approaches with clinical outcome assessment that will have pragmatic use for the busy practicing child and adolescent psychiatry.

In both years of training, fellows are assigned psychotherapy cases and receive at least one hour of individual supervision each week. Fellows may spend additional second year elective time learning more detailed psychotherapy protocols.

Training to be an Academic Clinician-Educator

The Stuart J Goldman Educator Award is given to child and adolescent fellows in the Department who seek to enhance their skills and scholarship as academic clinician-educators. As the Department fellowship director for over two decades, Dr. Goldman strongly promoted the development and implementation of innovative teaching initiatives in the clinical setting while wholeheartedly encouraging his trainees to become independent, self-motivated, and self-directed learners and teachers. This annual award(s) for attendance at the Harvard Macy Institute is given to recognize his life long commitment to training the next generation of child and adolescent psychiatric educators.

Fully funded by the Department, any 2nd year psychiatry fellow who is envisioning or considering a career as a clinician educator is eligible. The Harvard Macy Institute’s Program for Post-Graduate Trainees: Future Academic Clinicians is a 3-day intensive program focused on
two major themes: skills in teaching and learning AND developing scholarship in medical education. Learning formats rely on small group project work and problem-solving, interactive small group activities with individualized feedback, and large group case-based discussion. The course learning is built around the trainees’ educational project development. Therefore, each trainee must apply with a medical education project that is of interest to the trainee and of benefit to the current or future training program in which he or she works or teaches. Each scholar must have the explicit support of a faculty mentor who will assist and oversee the scholar’s project development at the home institution.
ADDITIONAL PROGRAM INFORMATION

Our Program is fully accredited by the Accreditation Council for Graduate Medical Education (ACGME) for five fellows per training year. Fellows in good standing will be eligible for specialty boards in Child and Adolescent Psychiatry providing they have met the other requirements as described by the Board.

Appointments

Appointments as Fellows in Psychiatry at Boston Children’s Hospital and Harvard Medical School begin July 1 and will be for two years.

Salary

Effective July 2018, the following are the salaries according to postgraduate level.

- House Officer - PGY IV $75,089
- House Officer - PGY V $80,221
- House Officer - PGY VI $86,415
- House Officer - PGY VII $88,977

Note. Additional compensation available through participation in Advanced–Emergency Psychiatry Training Experience

Benefits – Health, Malpractice and Other Insurance

Fellows receive malpractice insurance coverage while serving Boston Children’s patients. House officers may enroll in a variety of health insurance and health maintenance organization programs. Dental insurance, disability insurance, life insurance, and travel insurance for hospital business are also provided for house officers.

Housing assistance

The Lease Guaranty Program at Boston Children’s Hospital: All fellows who receive a salary from Boston Children’s Hospital are eligible to participate in this program, which helps alleviate the burden of security deposits/last month’s rent when renting a new apartment.

Transportation/Parking

Boston Children’s is convenient to various modes of public transportation (bus, commuter rail and subway). The Hospital provides subsidies for monthly commuter passes, and there is discounted parking available to house staff.
Child Care Center
Boston Children’s has a Child Care Center for the children of hospital employees and staff in response to the need for high quality, convenient childcare. The hours of operation are 6:30 a.m. to 6 p.m., Monday through Friday, except for Hospital-recognized holidays. The Center can accommodate 42 children, ages three months to five years. There are some reduced tuition rates available and these are offered based on gross family income on a first-come, first-served basis. For more information about the program, or for a tour, please call (617) 355-6006.

Vacation/Leave
Four weeks’ vacation and one week of conference time are allotted for each year of training. Fellows are expected to give at least eight weeks’ notice prior to taking vacation or conference time. Absences during the first two months of training are discouraged and require special permission from the Training Director.

Educational Resources for Travel to Meetings
Each fellow receives a $1000 /2 year-allowance to be used towards expenses for attending conferences. Should a fellow present a poster/abstract/paper at a conference, s/he will have an additional $500 /year allowance per each conference that s/he presents. We make it a priority for fellows interested in going to AACAP to attend at least once during their 2 years of training.

Application Process
Graduates of U.S. or international medical schools, who will have completed at least three years of General Psychiatry or Pediatrics residency, and USMLE steps 1 through 3, are eligible to apply. Our application process is part of the ERAS system. Please email Courtney Kellogg for further instructions (courtney.kellogg@childrens.harvard.edu). Applications must include: 1) a completed application form; 2) Dean’s letter; 3) medical school transcript; 4) USMLE scores; 5) three letters of reference; 6) curriculum vita; and a personal statement.

Foreign citizens who wish to enter the United States for postgraduate training must comply with the United States Immigration Laws, in addition to following the application procedure described above. Foreign medical school graduates should contact the Educational Commission for Foreign Medical Graduates (3624 Market Street, Philadelphia, PA 19104, [215-386-5900], (www.ecfmg.org) for details concerning their requirements.

Boston Children’s Hospital participates in the National Resident Matching Program (www.nrmp.org) and complies with all of its rules and regulations. Please note that all offers for
positions in our training program are contingent upon the successful completion of any pertinent prior residency training, as well as all hospital required pre-employment matters. This includes the satisfactory completion of the credentialing process, and receipt of acceptable final evaluations and letters of references.

For inquiries, please contact:
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OUR FACULTY

David R. DeMaso, MD (Psychiatrist-in-Chief)
Oscar G Bukstein, MD, MPH (Fellowship Director, Associate Psychiatrist-in-Chief)
Patricia Ibeziako (Director for Clinical Affairs in Psychiatry)
Chase Samsel, MD (Associate Fellowship Director)
Zheala Qayyum, MD (Associate Training Director)

Inpatient Psychiatry Service (Inpatient & CBAT)
Eleni Maneta, MD (Medical Director)  Willow Carpenter, LICSW
Joseph O’Garr, MD (Medical Director, CBAT)  Shaela Demers, LICSW
Yohanis Anglero Diaz, MD  Lauren View, LICSW
Molly Schofield, LICSW  William Hall, LCSW
Lisa Conti, PMHNP

Psychiatry Consultation Service
Patricia Ibeziako, MD (Director)  Chase Samsel, MD
Serena Fernandes, MD  Simona Bujoreanu, PhD
John Glazer, MD  Kristine McKenna, PhD
Nina Muriel, MD (Dana Farber Cancer Inst)  Katharine Thomson, PhD
Monique Ribeiro, MD  Kevin Tsang, PsyD
Outpatient Psychiatry Service

Paul Hammerness, MD (Medical Director)  Giuseppe Raviola, MD, MPH
Lauren Mednick, PhD (Clinical Director)  Heather J Walter, MD, MPH
Renee Brant, MD  Elisa Bronfman, PhD
Oscar G Bukstein, MD, MPH  Marcus Cherry, PhD
Barbara Burr, MD  Eugene D’Angelo, PhD
Claire Brickell, MD  Shannon Hourigan, PhD
Anthony Deo, MD, PhD  Colleen Hayden, LICSW
Joseph Gonzalez-Heydrich, MD  Erica Lee, PhD
Hesham Hamoda, MD  Keneisha Sinclair-McBride, PhD
Aaron Hauptman, MD  Carolyn Snell, PhD
Roberta Isberg, MD  Elizabeth Wharff, PhD, LICSW
Kaizad Munshi, MD

Emergency Psychiatry Service

Jennifer Cummings, LICSW (Director)  Zheala Qayyum, MD (Medical Director)
Oscar Bukstein, MD

Behavioral Health Integration Program and MCPAP

Heather J Walter, MD, MPH (Medical Director for PPOC BH; Co-Medical Director, MCPAP)
Diana Sabagh, MD (MCPAP)
Oscar G Bukstein, MD, MPH
Paul Hammerness, MD
Nina Graupera, MD

Martha Elliot Health Center

Olivia Carrick, MD (Director, Martha Elliot Health Center)  Nina Graupera, MD

Boston Children’s Neighborhood Partnerships

Shella Dennery, PhD, LICSW (Director)  Heather J Walter, MD, MPH (Consultant)

Children’s Hospital Global Partnerships Program

Patricia Ibeziako, MD (Senior Director)  Monique Ribeiro, MD (Co-Director)
Myron Belfer, MD  Kevin Tsang, PsyD (Co-Director)
Adolescent Substance Abuse Program
Diana Deister, MD  Patricia Schram, MD
Sharon Levy, MD

Early Childhood & Neurodevelopmental Disorders
Kerim Munir, MD  Joshua Sparrow, MD

Pediatric Neurology
Sarah Spence, MD  David Urion, MD

Research – Program for Behavioral Science & Fuss Center
David Glahn, PhD (Director, arrive 11/18)  Eugene D’Angelo, PhD
Todd Anthony, PhD  Heidi Ellis, PhD
William R. Beardslee, MD  Michelle Bosquet Enlow, PhD
Oscar G Bukstein, MD, MPH  Joseph Gonzalez-Heydrich, MD
David R DeMaso, MD  Christine Seiberg, PhD
Anthony Deo, MD, PhD  Deborah Waber, PhD
OUR 2018-2019 CHILD & ADOLESCENT PSYCHIATRY FELLOWS

FIRST YEAR FELLOWS

Tarek Aly, MD
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Dr. Aly is what he defines as “Egyptorican;” a 50/50 mix of Puerto Rican and Egyptian backgrounds. He attended the University of Central Florida for a BS in Psychology and later Emergency Medical Technician Training. While at UCF, he started Hope In Hand Inc., a nonprofit organization focused on helping homeless individuals and families in Central Florida. He was given the opportunity to meet with the then Senator Obama during his campaign twice and received the Visionary Leadership Award from UCF for the nonprofit work. He worked as a Children’s Target ed Case Manager after graduation and chose to pursue child/adolescent psychiatry soon after. While attending Ross University School of Medicine, he simultaneously sought a Master’s in Public Health from Michigan State University. He pursued residency at New Bridge Medical Center in New Jersey where he was able to focus on expanding the psychiatric education program for medical students and residents. He helped create the NEST (Narcan Education Support Team) Program which focused on distributing and teaching proper use of rescue naloxone inhalers to help reduce the number of opiate overdoses below the age of 25. Tarek is an avid writer who taught improv/interactive performance in his past while performing standup comedy. His main audience now consists of his wife and daughter who do not find his “dad jokes” as funny as he does.

Ethan Anglemyer, DO
ethan.anglemyer@childrens.harvard.edu

Dr. Anglemyer is originally from a small town outside of Kansas City, MO. He completed medical school at Kansas City University of Medicine & Biosciences. Ethan is moving from sunny Fort Lauderdale, Florida where he completed his 4-year adult psychiatry residency. He has been heavily involved with mental health advocacy and has given several community talks regarding youth suicide. This is what initially started his interest in child and adolescent psychiatry. Through his career he has published a case report on the deaf population, highlighting inequalities of care, and been involved with several conference presentations. Ethan ultimately wants to work with LGBTQ youth as well as those suffering from substance use. He moved to Boston with his husband and 3 animals (2 cats and a dog). Ethan is a foodie at heart and will be taking full advantage of all Boston has to offer. Interesting fact is that he continues to play his trumpet and embraces a history of being a band geek.
Rachel Conrad, MD
rachel.conrad@childrens.harvard.edu

Dr. Conrad graduated magna cum laude with a major in Health & Societies from University of Pennsylvania. While there, she completed two honors programs and traveled to Sub-Saharan Africa to research Botswana’s public HIV treatment program. Following graduation from Penn, she worked as an Associate Consultant at Bain & Co in their Boston headquarters helping healthcare clients understand the potential impact of healthcare reform. During medical school at Baylor College of Medicine, she co-founded a Finding Meaning in Medicine group to foster reflection and connection around the experiences of practicing medicine. She had formative experiences in both the Narrative Medicine program led by writer Ricardo Nuila and the Baylor Ethics Track. She was elected to the Gold Humanism Honor Society during her fourth year of medical school. During her training in adult psychiatry at Emory University, she facilitated a peer support group for residents and conducted a large survey regarding residents’ experience with the death of a patient. She is interested in resilience and compassion among medical trainees and physicians. On weekends, she can be found hiking or practicing yoga.

Kevin Simon, MD
ksimon@msm.edu

Dr Simon is from Brooklyn, NY. He completed adult psychiatry training at Morehouse School of Medicine. He earned his Medical Degree from Southern Illinois University School of Medicine; prior to graduating, he was awarded a research fellowship from the National Institute of Mental Health where he studied implementation of innovative health systems to improve mental health services for children. He completed his bachelor’s degree in Biology/Sociology at Morgan State University. Kevin was a Group for the Advancement of Psychiatry (GAP) fellow and an American Psychiatry Association – Public Psychiatry Fellow. Dr. Simon has published in notable academic journals including Anti-Cancer Drugs, Health Affairs, Psychiatric Services, and Psychiatric Times; he’s contributed to policy briefs disseminated by The Kennedy Forum and written several book chapters. He’s fought for criminal justice through work with Physicians for Criminal Justice Reform. Dr. Simon’s career interest includes a hybrid of community mental health, organized psychiatry and advocacy.
**SECOND YEAR FELLOWS**

**Jessica S. Bayner, MD**  
jessica.bayner@childrens.harvard.edu

Dr. Bayner was born in Manhattan, raised in Queens, attended high school in the Bronx and is proud to call herself a native New Yorker! Jessica chose to expand her horizons to the tri-state area and went to Connecticut for college, where she majored in English, and studied public policy as well as multicultural medicine and communication, with a concentration in Hispanic Society. She earned her medical degree from Jagiellonian University Medical College in Kraków, Poland. Jessica then did her residency in general psychiatry at Bergen Regional Medical Center in New Jersey. As a recipient of an APA public psychiatry fellowship, she served as a Chair for her cohort and addressed issues pertaining to social justice and community healthcare. She braved backlash from her friends/family of Yankees fans by coming to Boston Children’s Hospital for a child and adolescent psychiatry fellowship – but it proved to be worth the risk! Her time at BCH has been educational in many different ways and filled with fantastic learning opportunities. In addition to acting as one of the Chief Fellows during her second year, Jessica will work on the Advocacy group she founded through the GME, as well as study the role of ethics in medicine, and do a global health elective abroad. In the near future, Jessica will move from beantown to the city of brotherly love to continue her training at the University of Pennsylvania to do a fellowship in forensic psychiatry. When she is not traveling or randomly singing top hits from the 90s, Jessica enjoys binge-watching shows and dancing as a certified Zumba instructor - be sure to let her know if you want to have a Latin-inspired cardio party!

**Martha J. Ignaszewski, MD**  
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Dr. Ignaszewski is of Canadian-Polish heritage hailing from Vancouver, Canada. She studied medicine in the historical medieval city of Krakow, Poland at the Jagiellonian University Medical College, while reconnecting with her Polish roots. From there, she moved to exotic Western Massachusetts for adult residency at the University of Massachusetts Medical School-Baystate Medical Center, and then fast tracked to Boston Children’s Hospital, and has enjoyed being in a metropolitan city again. Martha is an eager learner and educator, focusing on research pursuits, clinical teaching and is focusing much of her second year electives on being the Senior Fellow to the inpatient psychiatry service. She is also very excited to be one of the Chief Fellows for this academic year and working with administration to make training at BCH as amazing as it can be! She is currently pursuing additional fellowship training in Addiction psychiatry, with plans to matriculate in July 2019. When she is not working efficiently and poring over academic pursuits, Martha loves to travel, explore the extensive food and beverage scene in Boston and surrounding New England, and check out local trails for outdoor mental health time!
Tamar Katz, MD, PhD

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Dr Katz had a straightforward but very fun childhood in Hanover, NH and Binghamton, NY. before moving to Boston to attended college. Following college graduation, she lived at home for a year while working in a lab to save money for a round the world backpacking trip She not only saved money for the trip but met her husband as well. She married in 2002 and spent all her and her husband’s hard-earned savings on the round the world year-long backpacking trip (a lifetime highlight). She attended Mount Sinai Medical School in NY in the combined MD/PhD program, but during that training she had the opportunity to move to Boston in 2005 and to finish up her PhD and some of my medical training at Harvard Medical School in Boston. Dr Katz completed her PhD in genetics, my MD, and then residency in psychiatry at Massachusetts General Hospital. Following her graduation from general (adult) residency, “I was lucky enough to attend the child and adolescent psychiatry fellowship at Boston Children’s. I’ve been so happy with the training here including the breadth of psychiatric sub-specialties, the collegiality of the department, and the resources available at one of the world’s best pediatric hospitals—not to mention the buzzing academic life of the greater Boston area! My professional interests include pediatric neuropsychiatry and psychiatric genetics, and I hope to balance both clinical work and research long term. When I’m not pursuing work related things I enjoy long distance running, triathlons, cooking, volunteering, hanging out with friends, taking care of my 5 children, reading, watching brainless Netflix, and sleeping (especially sleeping).”

Jacob White, DO

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Dr. White is a 5th generation Idahoan who brought his family of 6 from the University of Arizona. His driving interest is improving quality of interaction between the many components of a medical system: inpatient and outpatient care, mental health and primary care etc. and how to improve access and quality of care for families in the rural West. He was drawn to the BCH program because of its role in the Massachusetts Child Psychiatry Access Program, the children’s hospital’s high profile role in mental health advocacy and in his second year is relishing direct exposure and participation in advocacy and pediatrician support. The Boston cost of living lead he and his family to settle outside of the city but he claims to love the train commute and his kids are thriving in the high quality Massachusetts school system. Jake graduated from the Pacific Northwest University of Health Sciences College of Osteopathic Medicine He is eager to return to Idaho and hopes to bring with him some of the innovative solutions that come from BCH and the Boston area with it’s rare mix of abundant resources, incredible per capita concentration of expertise and focus on creative problem solving.
Muhammad Zeshan, MD
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Dr. Zeshan is an IMG from Pakistan and finished residency training at Mount Sinai Bronx Lebanon Hospital in Bronx, NY. Along with my child psychiatry fellowship at Boston Children’s Hospital, I also serve as an APA Diversity Leadership Fellow, on the APA Council on Medical Education and Lifelong Learning, am an APA RFM (Resident Fellow Member) Assembly Representative, participate in the APA Minority Medical Student Mentorship Program, and am a Nyapati Rao & Francis Lu International Medical Graduate Fellow. Moreover, I am doing a 2-year Infant Parent Mental Health Fellowship from University of Massachusetts. The best things about Boston Children’s are excellent clinical training, very caring and approachable faculty, and abundant opportunities for personal and professional growth! Besides my clinical experience, I worked for almost 12 years in my father’s restaurant. One of the best things my wife likes about me is that I cook good food. I also love spending time with my 2-year-old daughter and 3-month old son!

Fellows Class of 2018 & 2019

Back row (left to right): Jessica S. Bayner, Muhammad Zeshan, Jacob White, Kyle Stephens, Gino Mortillaro, Vyoma Acharya, Amanda Schlesigner, Martha J Ignaszewski, Oscar Bukstein

Front row: Tamar Katz, Eleni Maneta, Paige Partain
The Outpatient Psychiatry Service (OPS) offers comprehensive assessment and treatment services to children and their families on the Longwood Avenue Campus, Martha Eliot Health Center, located in nearby Jamaica Plain, and in Boston Children's Waltham site. Annually the Department provides approximately 20,000 outpatient visits between these two sites. Offering both psychotherapies and somatic therapies, the OPS provides the best evidence-based care to help children and their families across the full range of psychiatric disorders. The OPS has specific focus and expertise in the assessment and treatment of complex neuropsychiatric illness (autism and pre-pubertal psychosis) and in psychiatric illness in the presence of medical comorbidity (diabetes, congenital heart disease, cystic fibrosis, epilepsy). This in addition to being responsive to the range of mood, anxiety and ADHD, for Boston Children’s affiliated children, in primary or specialty care settings on the hospital campus as well as in the community. The service is organized into three areas: 1) biologically based neuropsychiatric disorders such as acute psychosis, autism, and ADHD (Developmental Neuropsychiatry), 2) Anxiety, depressive, Trauma/Stress disorders program (General Psychiatry), and 3) co-occurring medical and psychiatric disorders (Medical Coping). The outpatient setting is also home for the Center for Neuropsychology, which provides neuropsychological services to children with co-morbid medical and neurological diagnoses (e.g., tumors, seizures, traumatic brain injury).

Although OPS principally serves children from Boston communities and the commonwealth, the reputation of Boston Children’s brings children from around the country and quite literally, from around the world. This cultural and ethnic diversity is a unique strength of OPS. The outpatient experience over the Fellowship is the crucial learning venue for critical diagnostic and formulation skills as well as both psychotherapies and somatic therapies.

Operating at full capacity, the Department’s intensive psychiatry services has two settings: 1) Inpatient Psychiatry Service (IPS), a 16-bed med-psych unit that specializes in caring for children and adolescents who struggle with depression, psychosis, anxiety, eating disorders, and other psychiatric illnesses as well as those who have co-existing medical illness, and 2) Community-based Acute Residential Treat unit (CBAT), a 12-bed unit providing a step-down level of care for children struggling with disabling illnesses. Inpatient psychiatry services are a cornerstone experience where Fellows learn the fundamental diagnostic and therapeutic skills to work with the most challenging youth in a structured interdisciplinary setting.
The **Emergency Psychiatry Service (EPS)** offers acute psychiatric assessment and disposition services on a 24-7 basis in the Hospital’s emergency room. Each year, the Department provides emergency psychiatry services to over 1,000 children in crisis. The EPS is staffed by psychiatric social workers with support from resource specialists and overseen by the Psychiatry Attending on Duty. This program has had ongoing research into identifying acute suicide risk in the hospital setting as well as an innovative family intervention implemented in the ED and aiming to avoid psychiatric hospitalizations. The EPS offers an important learning setting for understanding and managing the acute mental health crises faced by today’s children and adolescents.

The **Psychiatry Consultation Service** provides state-of-the-art pediatric psychosomatic medicine services to children and families facing challenges related to inpatient medical and surgical hospitalizations. Based upon the Clinical Manual of Pediatric Psychosomatic Medicine (co-written by the Psychiatrist-in-Chief), faculty and trainees provide responsive clinical guideline-based diagnostic and treatment services to all in-house Boston Children’s medical and surgical wards, as well as to a variety of medical-surgical subspecialty services including the Cardiology, Cystic Fibrosis, Critical Care Medicine, Gastroenterology, Hematology-Oncology (Dana Farber Cancer Institute), Pain Medicine, and Solid Organ Transplant programs. Consultation services provide critical learning experiences in the important core competencies of systems-based practice and interpersonal/communication skills.

**PROVIDING CLINICAL CARE FOR CHILDREN IN PRIMARY AND SPECIALTY CARE**

The integration of behavioral health care into the primary or specialty pediatric setting has long been a priority within the Hospital.

**Primary Care**

In primary care, the Department and the Pediatric Physicians Organization at Children’s (PPOC) have partnered to run the **Behavioral Health Integration Program (BHIP)**. The program has been building sustainable capacity to deliver integrated behavioral health services in community-based pediatric primary care practices throughout Massachusetts. The program is training primary care providers and medical home teams in BH integration, filling critical gaps in the BH workforce, contributing to workforce development, and fostering effective integration across the continuum of care. There are nearly 85 pediatric practices who have been or are involved in the training phases of the BHI program.
PPOC/BCH Telepsychiatry Project was started in 2017 with a grant for the Health Policy Commission. Serving 6 PPOC practices, the Telepsychiatry Project offers face-to-face consultation as well as on-going care to children and their families with limited access to specialty psychiatric care.

Martha Eliot Health Center (MEHC) located in Jamaica Plain serves as a primary site for Fellows to be exposed to community psychiatry and the care of underserved youth. It was founded in the 1950s after Harvard University delegated Dr. Martha May Eliot, a professor of maternal and child health, to collaborate with the Boston health commissioner to create a pilot program that eventually became the center. MECH provides medical and psychiatric care to mostly low-income families and runs outreach programs that address obesity, asthma, mental health, violence, and other issues. The Department also has child psychiatrists embedded in other Boston Children’s affiliated, Boston-based health centers.

In the Massachusetts Child Psychiatry Access Project (MCPAP), the Department joined with other state academic psychiatry departments to provide child psychiatry services to Massachusetts pediatric practices. This innovative program of collaborative healthcare provides rapid telephone consultation to pediatricians as well as consultations, care coordination, and educational services. MCPAP has had high primary clinician and parent satisfaction rates while becoming a national model for increasing access to child mental health services. The Department is joining with colleagues from McLean Hospital, Massachusetts General Child Psychiatry, North Shore Children’s, and New England Medical Center to provide child psychiatry services to the eastern part of Massachusetts.

Pediatric Specialty Care
The Department provides BH services in multidisciplinary specialty pediatric programs and/or centers of excellence based in other Departments across the Hospital. In these sites, psychiatrists and psychologists work to provide collaborative clinical and research services. The Department provides oversight to these mental health clinicians to ensure patient safety and quality of mental health care. The following Departments/Programs are part of these collaborative/integrated BH services: Adolescent Medicine, Anesthesia, Cardiology, Developmental Medicine, Neurology, Oncology, Otolaryngology, Orthopedics and Primary Care. As part of this work, there is a strong collaboration between the Department, Developmental Medicine Center and Neurology to offer a state-of-the-art Autism Spectrum Center.
PROVIDING CLINICAL CARE FOR CHILDREN IN SCHOOLS

The Boston Children’s Hospital Neighborhood Partnerships (BCHNP) is an innovative community mental health program that provides prevention, intervention, and consultation services onsite in Boston-area schools. Every year, BCHNP reaches nearly 1,000 students and provides nearly 600 hours of training and consultation to 78 teachers and parents. Through this program, BCH built an innovative curriculum utilizing a 4-session classroom intervention called Break Free from Depression (BFFD) (https://www.openpediatrics.org/course/break-free-depression), which has now reached over 30,000 students, 1,500 educators, 546 schools, and 35 states.

Leveraging this successful onsite school-based approach and its many year collaboration with the Boston Public School (BPS) system, BCHNP created and implemented the Gloria and Charles Clough Foundation Training and Access Project (TAP). This innovative consultation model is now in 15 elementary schools, eventually scaling up to 25 schools in the Boston Public School system over the next three years, providing elementary schools with critically-needed access to BCHNP teams who will help educators, parents, and child health professionals to identify psychological stress and behavioral issues early in a child’s life (http://www.childrenshospital.org/centers-and-services/programs/a--e/boston-childrens-hospital-neighborhood-partnerships-program/training-and-access-project).

Through these efforts, BPS has identified and designated BCHNP as one of its “exceptional school-community partners” with an ongoing partnerships and collaborations. Within this context, BCHNP is pleased to offer the beginning child and adolescent psychiatrist the opportunity to observe, evaluate and treat children in the very setting that children live and learn – school.
GLOBAL PARTNERSHIPS PROGRAM – REACHING AROUND THE WORLD

In keeping with our Department’s commitment to innovative quality mental health care for all children and families in need, The Children’s Hospital Global Partnerships in Psychiatry (CHGPP) was established. The CHGPP Observership Program is designed for physicians and psychologists residing outside the United States who have an interest in child and adolescent mental health. The program is designed to provide exposure to trained individuals from countries around the world who can then aid in the development of child mental health policy, foster child mental health clinical programming and otherwise serve as advocates for child mental health care in their respective countries of origin. This program also provides a venue for the faculty and students of Harvard University and other educational institutions in the Boston area to share their interests and activities related to child and adolescent international mental health. The program convenes symposia on selected topics of interest to the Harvard community and other interested parties.

The Department’s faculty is involved in ongoing collaborations with mental health professionals and academicians from over 18 different countries including China, Costa Rica, Haiti, Finland, France, Norway, Sweden, The Netherlands, Nigeria, Rwanda, Somalia, Tanzania, and Turkey. These collaborations include initiatives to improve access to quality mental health care, establish school-based mental health programs, and provide preventive interventions to families at risk for depression.

The Department’s Children’s Hospital Center for Refugee Trauma and Resilience, under the direction of Heidi Ellis, PhD provides our Fellows with the opportunity to participate in work with children and families who have been displaced as a result of war, civil unrest, terrorism, or natural disasters. As a result of all these activities, our fellows have the opportunity to conduct research abroad and learn directly from our senior faculty as well as colleagues from around the world about the challenges of providing quality mental health care to children and families outside the United States.

ENSURING QUALITY OF CARE

In the midst of the changing healthcare landscape, the demonstration of unsurpassed evidence-based care becomes paramount. Recognizing the opportunity, the Department implemented a dedicated quality improvement program for child and adolescent psychiatry administered by our Psychiatry Quality Program (PQP), which works with clinical, education, research, and advocacy leaders to move forward the Department’s strategic priorities.
RESEARCH – STRIVING FOR INNOVATION

Research has long been a core part of the Department for over 60 years. There are currently over 50 researchers and research support staff that are engaged in scientific investigations. The Department’s research spans a diverse set of fields, involving Psychiatry, Psychology, and Social Work researchers. The majority of research projects reflect successful collaborations with other Hospital departments as well as local, regional, national and international affiliated institutions.

Program for Behavioral Science – Supporting research and innovation

All Department research falls under the management of the Program for Behavioral Science (PBS), which works to promote, support, and enhance the Department’s research efforts by: 1) Identifying and promoting innovative research; 2) Developing and supporting individual researchers; 3) Facilitating research collaborations outside the Department; 4) Overseeing the pursuit and management of research funding; and 6) Overseeing Department research cores in administration support, biostatistics, scientific review/quality, behavior science, and faculty support/development. Current Department’s areas of research include: 1) Developmental Neuroscience, 2) Health Psychology/Consultation-Liaison Psychiatry, 3) Community Psychology, and 4) Developmental Psychopathology.

Areas and Centers of Research Excellence – Understanding the Brain

Two centers of research excellence have emerged – one in Developmental Psychopathology and a second in Community Psychology.

- The Tommy Fuss Center for Neuropsychiatric Disease Research (Fuss Center) is a multifaceted program that integrates psychiatry, neuroscience, genetics, stem cell science, bioinformatics, and brain imaging, our aim is to unlock the genetics and biology of psychiatric disease, with a focus on early detection, prevention, and intervention to protect and treat the most vulnerable community of children and young adults. The Center aims to understand what causes developmental pathways to diverge into pathological or healthy outcomes and screening drugs for new therapies to change the course of disease.

- The Refugee Trauma and Resilience Center at Boston Children's Hospital is dedicated to understanding and promoting the healthy adjustment of refugee children and adolescents who have resettled in the United States. In partnership with refugee communities and agencies, its build prevention and intervention programs, conduct research, and develop resources to assist refugee families and service providers.
Our research chief and researchers

David Glahn, PhD joins the Department in November 2018 as the Director of the Program for Behavioral Science and the Fuss Center. His research aims to identify and characterize genes and environmental factors influencing risk for psychotic and affective disorders and their endophenotypes as well as to specify genetic and environmental influences on normal variation of brain structure/function and cognitive ability. In his new position, he is charged with promoting teaching and mentorship for young investigators or those that wish be investigators in the future. As such, promoting scholarship for fellows will be a priority.

Department research has a number of independently funded investigations including: 1) discovery of biomarkers in early child psychosis and those at risk (Joseph Gonzalez-Heydrich, MD); 2) impact of maternal trauma history on infant and child development (Michelle Bosquet Enlow, PhD); 3) novel interventions for suicidal youth (Elizabeth Wharff, LICSW, PhD/Kimberly O’Brien, LICSW, PhD); 4) preventive family interventions for childhood depression (William R Beardslee, MD); 5) preclinical neurobiological investigation of neural circuits associated with stress and anxiety (Todd Anthony, PhD); and 6) identification of the roots of and risk factors for radicalization, extremism, violence, and terrorism within refugee communities (Heidi Ellis, PhD).

Collaborations and Partnerships

A hallmark of Department research is the breadth of collaborative work. The majority of research projects involve partnerships with other departments in the hospital, community groups, and national and international institutions. Our projects are enhanced through consultation from colleagues within the Department through the sharing of work ideas and provision of mentoring support. Our psychiatrists, psychologists, and social workers work with peers across Boston Children’s, including Cardiology, Neurology, Developmental Medicine, Radiology, Newborn Medicine, Otolaryngology, Emergency Medicine, and Anesthesia.

Tight partnerships exist with institutions within the greater Boston medical and academic communities (including HMS, HU, Broad Institute, Wyss Institute, BUSM, DFCI, MGH, MIT) as well as government and private institutions (including such diverse organizations as: MA DPH and DMH, Refugee & Immigrant Assistance Center, and the Boston Public School system). Researchers also collaborate with institutions across the US and various international organizations.

Fellows who intend to pursue research in earnest are assigned faculty advisors who work directly with them to develop ideas for projects. In addition, through its Clinical Research Program and the Harvard Catalyst Program, Boston Children’s offers opportunities to trainees
and faculty alike to enroll in basic or intermediate courses in clinical research design, biostatistics, and the use of statistical software packages.

CHILD MENTAL HEALTH INITIATIVES – OUR ADVOCACY PROGRAM

Our Department has, is, and will continue to be a strong, active advocate, nationally, regionally and locally, for the highest quality mental health services for children and families. We work closely with the Hospital’s Government Affairs Office to partner with community groups, consumer advocates, healthcare providers, educators and policy makers to improve mental health services and access for children and families through public policy and through community-based solutions. We consider it important that our fellows be exposed to child mental health advocacy. Therefore, we offer instruction in advocacy issues and efforts through seminars given by the Government Affairs staff. In addition, we encourage fellows with specific interests in this area to participate in our ongoing advocacy efforts [e.g., Children’s Mental Health Campaign].

TRAINING FOR PSYCHOLOGISTS, SOCIAL WORKERS, & MEDICAL STUDENTS

For over 50 years, the Department has provided training in not only child and adolescent psychiatry, but also clinical child psychology, and psychiatric social work. We also provide training to medical students. An important additional goal of Department training is to provide education for mental health professionals who can then aid in the development of child mental health policy, foster child mental health clinical programming and otherwise serve as advocates for child mental health care locally, regionally, nationally and internationally. All are highly sought-after training programs that are regularly filled to capacity.