

Enhancing patient care and promoting innovation



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“With excellent recruits, increased research funding and a continual search for innovative solutions to capacity issues, the Department of Psychiatry is poised to serve Calgary and the broader community in the coming years.”

Message from Dr. Beverly Adams

Head of the Department of Psychiatry,
Alberta Health Services and the University of Calgary

The Department of Psychiatry is committed to enhancing patient care, training the next generation of clinicians, generating new knowledge to advance our understanding of psychiatric illnesses and disseminating knowledge into clinical practice.

We are making significant gains. Despite ongoing capacity challenges, our dedicated team of psychiatrists, nurses and support staff is delivering excellent care through Calgary’s four adult acute-care sites, the Alberta Children’s Hospital (ACH), the Southern Alberta Forensic Psychiatry Centre (SAFPC) and the Claresholm Centre for Mental Health and Addictions.

At the Foothills Medical Centre (FMC), we have improved access to treatment for mood disorders and psychotic illnesses and opened 14 new adolescent beds. We have also reopened Unit 45 at Rockyview General Hospital (RGH), with six additional adult beds. We are working with the ACH Brain Health Capacity Optimization Project to further enhance our services and promote research.

We are serving our community. With mental health clinics in all quadrants of the city, a large mental health program at the Sheldon M. Chumir Health Centre (SMCHC) and psychiatrists who travel as far as Banff and Drumheller, we are working with communities to improve mental health. We provide psychiatric consultation services to a range of other facilities, such as Aventa (for women with addictions) and Woods Homes (for children with mental illness). In addition, we are improving access to treatment and flow of patients by reorganizing current community clinics and developing new clinics in conjunction with Primary Care Networks.

We are doing more research. The Mathison Centre for Mental Health Research and Education is helping the department become more research intensive by bringing together mental health researchers, coordinating conferences and events to share research findings and providing funding support for seed grants and graduate students. It also provides the opportunity to focus on child and youth mental health and liaise with the Canadian Mental Health Association (CMHA), the Calgary Police Service and other community partners.

Beyond the Mathison Centre, in 2013-2014 we saw triple the number of annual research funding




applications for our own departmental research funding competition, including five applications from trainees (four of which were funded) and six from faculty members (two of which were funded). We have at least three applicants participating in Stage 1 of the Foundation Scheme under the Canadian Institutes of Health Research; if successful, these foundation grants would provide seven years of stable funding to our researchers.

We are collaborating. We continue to collaborate with the Hotchkiss Brain Institute (HBI) and the Alberta Children’s Hospital Research Institute (ACHRI). Through Mathison Centre funding made possible by the HBI, our researchers have access to pilot funding, which should translate into heightened success at national and international funding competitions.

We are preparing for the future. The Child and Youth Mental Health Initiative has enjoyed tremendous success and will continue to flourish under the director of the Mathison Centre. The next major challenge will be addressing the needs at the other end of the continuum in geriatric psychiatry and healthy brain aging.

Beverly Adams
Department Head, Psychiatry, Alberta Health Services
+ the University of Calgary



We have recruited and retained nearly the entire 2014 graduating class of 8 psychiatrists from the Cumming School of Medicine.

Inpatient

Psychiatry Inpatient Services continues to struggle with extreme bed pressures and a high level of acuity at all four acute care sites. The creation of six much needed adult beds at RGH and 14 adolescent beds at FMC has eased some of the strain. Overall, the reorganization of affected units has worked out very well.

The Consultation Liaison Psychiatry Program is providing urgent in-hospital consultation services at all acute care sites. The department has expanded the outpatient consultation liaison program to include oncology and clinical neurosciences.

We are excited to have a new psychiatrist on staff who will be focusing on gender identity disorders and endocrinology. We also continue to expand perinatal services, which is an increasing need with Calgary's population growth.

At the Peter Lougheed Centre (PLC), we have a short-stay unit that is very successful and a medical-psychiatric unit (Unit 43) that serves extremely complex patients with medical and mental disorders.

Psychiatry emergency departments continue to see very high patient volumes and are at times overwhelmed. We have been working hard at streamlining services within emergency departments; a new system-wide parallel process, where psychiatrists work together with emergency doctors, has been helpful in reducing patient wait times and making the treatment process seamless. Both patients and emergency staff have given positive feedback.

One of the biggest issues we face is the lack of community placements and housing options for patients with pervasive developmental disorders and severe chronic mental illness, which often result in lengthy hospital stays.

NEWS

We have recruited and retained the entire 2014 graduating class of eight psychiatrists from the Cumming School of Medicine, as well as adding several other talented doctors to our ranks—all of whom bring enthusiasm, energy and expertise to the section.

Our front-line staff is continuing to offer high quality care in the face of challenges with resources. We appreciate that our section members were very generous with their time this year, offering support to the community after the tragic April 2014 stabbings of five students.

In September we were pleased to meet with a Japanese delegation of psychiatrists and lawyers. The group was in Calgary to explore our system as a potential model for community mental health treatment and legal framework in Japan.

Several members of our team are active in research, including Dr. Scott Patten, who is publishing a book entitled *Epidemiology for Canadian Students: Principles, Methods and Tools for Critical Appraisal*.

“We are very proud of our colleagues and the work they do trying to make life better for the patients of Alberta. We are fortunate to have such skilled, dedicated and talented people.”

Dr. Arlie Fawcett, Section Chief, Psychiatry Inpatient Services

Outpatient

As the population of Calgary increases, so too does the demand for outpatient psychiatric services. To meet this challenge, we are working to improve integration between our clinics and working with our primary care partners to increase efficiencies and our capacity to provide timely care.

Outpatient programs include three core clinics—Foothills Professional Building, Sheldon M. Chumir Health Centre (SMCHC), and Sunridge Professional Building—each with significant individual expertise. We also have outpatient services at the South Health Campus (SHC), which includes an injection clinic to administer antipsychotic medications and a day hospital service. Psychiatric Emergency Services and the Psychiatric Outreach Response Team are also based at SHC.

Thirty other clinics serve the mentally ill in different capacities, including highly specialized treatment for schizophrenia or mood disorders, psychotherapy, treatment for people with developmental delays and outreach and community extension teams. We also collaborate with the Calgary Police Service.

We are working with Primary Care Networks and Family Care Centres to provide support for their mentally ill patients, which we hope will free up capacity at our outpatient clinics to provide timely treatment to acutely ill patients.

Many of our clinics also treat people on community treatment orders (legislation that aims to help mentally ill people who are difficult to engage and treat). Calgary has the largest number of community treatment orders in the province, and we are

implementing strategies to best treat this vulnerable population.

Finally, the Arnika Centre provides mental health care to special high-needs clients who have both mental health issues and low IQ.

NEWS

We are increasing collaboration with Primary Care Networks and Family Care Clinics, as well as expanding shared care. We continue to streamline our core clinics, formerly administered by the Alberta Mental Health Board, by standardizing protocols, intake processes and accountabilities to become more efficient and responsive to the ever-growing needs in the community. The outpatient mental health program at SHC continues to develop.

FMC is reorganizing outpatient services to include a psychosis stream and a mood and anxiety stream. The PLC day hospital has also been reorganized to provide services to both inpatients and patients in the community who need more intense treatment.

Over the last two years, we welcomed 17 new psychiatrists to our clinics and services, and in 2014 we participated in a city-wide education symposium for family physicians focused on mental health.

We continue to work on academic integration into our outpatient programs to facilitate research that ultimately informs clinical practice. We are developing a complex database that will further facilitate clinical research in these clinics.



We welcomed 17 new psychiatrists to our outpatient programs in the last 2 years.

“The need for outpatient psychiatric services is growing along with the city's population, and we are enhancing and improving the already great mental health services we provide.”

Dr. David Tano, Section Chief, Psychiatry Outpatient Services

Geriatric

Geriatric Mental Health Services provides seniors experiencing late-life mental disorders with integrated and interdisciplinary services that are patient-focused, flexible and proactive.

RGH's Unit 48 has 20 beds (plus two overcapacity beds) and is the only designated acute-care geriatric psychiatry unit in southern Alberta. It frequently operates at overcapacity.

The Geriatric Mental Health Rehabilitation and Recovery Unit at Carewest Glenmore Park, a 20-bed sub-acute inpatient geriatric psychiatry unit, is a unique shared-care unit that focuses on group therapy and helps people who do not require acute care or involuntary admission.

Geriatric psychiatrists provide consultation-liaison support to medical-surgical wards at adult acute-care hospitals across Calgary, as well as to Primary Care Networks and seniors health programs. We work with a number of programs and teams that help seniors with substance abuse, people living in long-term care, transition units and assisted living, as well as seniors living at home or under community treatment orders.

The Geriatric Mental Health Outreach Team at RGH, comprised of one full-time nurse, one part-time nurse and one full-time social worker, provides prompt follow-up and caregiver support to inpatients on psychiatry units and medical-surgical wards, speeding up patient discharge and reducing relapse and readmission to hospital.

We continue to seek support for a dementia stabilization unit, a formal outpatient geriatric service and a second inpatient unit to supplement the 20 beds at RGH and serve our aging population.

NEWS

Over the last year, our section prepared an application for a geriatric psychiatry residency sub-specialty program in Calgary. We submitted the application to the Royal College of Physicians and Surgeons of Canada over the summer and the College will inform us of its comments and recommendations late in 2014.

There are only three accredited geriatric psychiatry training programs across Canada; as residents often prefer to stay where they train, we hope that having our own program will help us replace some of our doctors, many of whom are gearing up for retirement and gearing down their professional practices. Every year a couple of residents in Calgary's general psychiatry program express an interest in more geriatric psychiatry training.

This year, our section acquired a geographic full-time academic position dedicated to geriatric research within the Cumming School of Medicine. Dr. Zahinoor Ismail was the successful candidate for this position.

RESEARCH

The section is involved in cutting-edge research including the following:

- A pilot project exploring the use of 3D immersion reminiscence therapy in frail elderly people;
- A study involving the use of safer alternatives to antipsychotics (such as scyllo-inositol—a derivative of coconut palm) to treat agitation in patients with dementia;
- A study of dementia and depression via functional neuroimaging; and
- A study of neuropsychiatric symptoms, including the stability of delusions from normal aging to dementia and prevalence of depressive symptoms in mild cognitive impairment.

We actively teach geriatric psychiatry to residents within psychiatry, geriatric medicine and family medicine. We also contribute to educational events, speaking frequently at conferences for general psychiatry and other disciplines with an interest in elder care.

By 2051, about one in four Canadians is expected to be 65 years of age or older.

“The section of geriatrics is always exploring creative ways to meet the mental health needs of Canada’s rapidly aging population.”

Dr. Suparna Madan, Section Chief, Geriatric Psychiatry

Our 7 psychiatrists manage 28 concurrent disorder beds and 60 psychiatry rehabilitation beds.



Addictions

The Claresholm Centre for Mental Health and Addictions, one hour's drive south of Calgary, provides treatment and education for adults coping with a mental illness who may also have a concurrent addiction. In particular, we treat sub populations who suffer from chronic pain and concurrent opiate dependence, and who suffer from anxiety disorders with concurrent benzodiazepine dependence. Our facility, which is unique in Canada, helps people with bipolar disorder, mood and anxiety disorders, schizophrenia and substance abuse or other disorders manage their illness and increase their independence. We also perform joint admissions reviews and consultation with the 48-bed Lander Treatment Centre in Claresholm.

Our seven psychiatrists manage 28 concurrent disorder beds and 60 psychiatry rehabilitation beds. Once patients are ready to go back to living in their community, we coordinate follow-up support, outpatient programs and outreach services.

The waiting list for the Addiction Centre in Calgary has decreased, but internal waiting lists to get into some of its programs have increased. To address this gap, we are starting a new group to help early-phase treatment for patients who are accepted to the Addiction Centre but are not able to enter the general treatment program right away.

NEWS:

Dr. Tim Ayas has been named medical director at the Claresholm Centre for Mental Health and Addictions, and is responsible for both addictions and psychiatric rehabilitation.

The Family Medicine program at the Cumming School of Medicine is adding an extra year of residency in addiction medicine, and we will be involved in providing some of the training. Starting in 2015, residents will be working with the Claresholm facility, as well as with the Addiction Centre, the Opiate Dependency Program and the Renfrew Recovery Detoxification Centre.

We have started a psychiatric consultation service to support Adult Addiction Services, the main outpatient addiction clinic in Calgary. This service will help triage patients for further services. We continue to have some psychiatry and family medicine residents doing attachments at the Claresholm centre.

In April, Drs. Hugh Colohan and Tim Ayas presented "Team-based Addiction Management in the Community" at the Calgary Therapeutic Conference, a two-day conference that was well attended by family doctors, specialist physicians, pharmacists and nurse practitioners.

"Claresholm Care Centre has been reallocating resources to help provide both psychiatric rehabilitation and addictions services, which mesh with the other parts of the continuum of services."

Dr. Hugh Colohan, Section Chief, Addictions and Claresholm Care Centre

Forensic

The Forensic Psychiatry Section provides assessment of and treatment for adults and adolescents with mental disorders within the legal system, and works to ensure the courts understand the individuals in order to make the most appropriate decisions for those individuals and the community.

Our work includes pre-trial assessments of an accused's fitness to stand trial, as well as criminal responsibility, mental health circumstances around infanticide, pre-sentence risk assessments, dangerous or long-term offender assessments and assessments as mandated by the Youth Criminal Justice Act.

The Southern Alberta Forensic Psychiatry Centre (SAFPC), our inpatient facility in Southern Alberta, has 25 beds for acute assessment and treatment of people in custody, as well as eight beds for those found unfit to stand trial or not criminally responsible by reason of a mental disorder (NCRMD).

A group home in northwest Calgary, the Lighthouse, has six beds to allow people who are NCRMD to gradually reintegrate to the community, depending on their mental stability and the safety of the community.

The Forensic Assessment and Outpatient Service (FAOS) provides community-based outpatient assessment and treatment of adults mandated

by the legal system. Due to an increase in demand for FAOS from the courts, we are in the process of recruiting two new psychiatrists to better meet that demand.

The Forensic Adolescent Program provides community-based outpatient assessment and treatment of adolescents mandated by the legal system.

We also provide service in the areas of Mental Health Diversion, Correctional Clinics, Correctional Transition Team, Telehealth and Community Geographic Teams, which provide services to smaller centres in southern Alberta.

NEWS


With the formal recognition of forensic psychiatry as a subspecialty, we are pleased to advise that seven members of our section have passed the first subspecialty examination in forensic psychiatry in Canada, which was held by the Royal College of Physicians and Surgeons of Canada in September 2013. We are now in the process of obtaining formal accreditation for subspecialty training in forensic psychiatry.

7 members of our section have passed the first subspecialty examination in forensic psychiatry in Canada.



"We have a dual role—to treat patients with mental disorders within the legal system and to ensure that the court optimally understands these patients. Consequently, the court can make the most appropriate disposition for individuals and the community at large."

Dr. Ken Hashman, Section Chief, Forensic Psychiatry



28 psychiatrists saw about 5,500 patients under the age of 18 (more than double from 2008).

“A vision created together is much better than many visions created alone.”

Dr. Abdul Rahman, Section Chief,
Child and Adolescent Inpatient Services

“If you want a healthy society you have to help children’s development. There is no health without good mental health, and the biggest cause for mortality and morbidity in adult life is adverse child events.”

Dr. Chris Wilkes, Section Chief,
Child and Adolescent Outpatient Services

Child + Adolescent Services

In the last year Child and Adolescent Psychiatry Services was divided into Inpatient and Outpatient subsections, a move that has allowed significant advancement in our provision of services at ACH, FMC and in the community.

We continue to work on the Integrated Pediatric Brain Health Initiative with ACH to further enhance our service delivery and research promotion.

INPATIENT

We have enhanced the capacity to treat children and adolescents by opening 14 adolescent beds on Unit 23 at FMC, as well as eight beds at SHC. The pre-existing child and adolescent unit at ACH and the adolescent units at FMC (Unit 26) and at SHC (Unit 56A) have been doing an excellent job in providing ongoing care to children and youth with mental health issues.

We ran a successful six-month pilot project at Wood’s Homes, creating a community psychiatric unit as an alternative to hospitalizing significantly ill children. A new initiative requesting all Calgary-area child and adolescent psychiatrists to consider being on-call for ACH has increased the ranks from seven to 22 psychiatrists and climbing.

Adolescent day treatment has moved into a temporary home at the Addiction Centre until a more permanent home is created at Richmond Road Diagnostic and Treatment Centre (RRDTC). The Day Treatment Program at ACH continues to do extraordinary work.

In the spring and late fall we held sessions to help train general physicians and pediatricians to better recognize, diagnose and treat children with mental health issues.

We also created the Autism+ service to meet community demand and centralize mental health services for children with autism at Neuropsychiatry Services, RRDTC. Because more children are

presenting with psychosis and mood symptoms, we enhanced the Mood and Anxiety Disorder Clinic and renamed it Mood, Anxiety and Psychosis Service.

We helped prepare an initial proposal for the Integrated Pediatric Brain Health Model of Care for southern Alberta and submitted it to Alberta Health Services for further review. This collaboration with mental health, psychiatry, neurosciences and developmental pediatrics could, if approved, pave the way for Alberta to be a collaborative leader in developmental neurosciences and psychiatry.

OUTPATIENT

We work with different partners in the community to provide extensive outpatient services. We are increasing our role in the community by being more available and increasing the numbers of people we serve. We currently have 28 psychiatrists who are seeing approximately 5,500 patients under the age of 18 (more than double the number seen in 2008).

NEWS

We are in the process of recruiting more university-based psychiatrists. We have two new recruits to support the inpatient program on Unit 23 at FMC and outpatient services at the RRDTC.

In addition, we have been very active in promoting mental health literacy and the importance of support and early identification in treating children with psychiatric issues. We have worked closely with the Norlien Foundation in this regard, attending its seminars and offering presentations in the community.



Medical students have rated the psychiatry program, Course 7, as the number one pre-clinical course.

“With continued expansion and great enthusiasm, our postgraduate program is helping meet the vision of postgraduate medical training: building healthy communities through high-quality postgraduate education.”

Dr. Jordan Cohen, Residency Program Director

Undergraduate, Postgraduate + Fellowship Training Programs

UNDERGRADUATE PROGRAM

Our medical students continue to show strong interest in pursuing psychiatry as a specialty program. Outstanding teaching by our faculty and residents has resulted in students again rating the psychiatry program, Course 7, as the number one pre-clinical course this year. About 15 percent of the Cumming School of Medicine’s undergraduate class applies to psychiatry as a specialty option every year, compared to about 5 percent elsewhere in Canada.

Course 7 is offered late in the curriculum, so extra effort is made to introduce psychiatry as a specialty, including a student-run psychiatry interest group that organizes talks by faculty, presents workshops and holds movie nights to spark students’ interest.

A six-week clerkship includes five weeks of adult psychiatry and one week of child and adolescent psychiatry. Self-declared students can take an optional three weeks of adult psychiatry and/or child and adolescent psychiatry. Our undergraduates can also take a variety of electives across the spectrum of psychiatry.

POSTGRADUATE PROGRAM

We have expanded from seven to eight residents a year, and this year we received 97 applications for those eight seats. We continue to enjoy a very high retention rate for graduates joining the psychiatry medical staff in Calgary Zone—close to 85 per cent. As the program continues to grow, we are sending residents for regular rotations to the SHC.

We are preparing for the site visit by the Royal College of Physicians and Surgeons of Canada in early 2015 for accreditation of our program. In anticipation of accreditation, we have also integrated new evaluation tools into our curriculum.

Residents now have four junior formative oral interview exams—one exam each for adult, child, adolescent and geriatric patients.

Our formalized mentorship system for residents is in its third year, and the program is getting plenty of attention: not only was it presented at an international conference, but it was also published in the Journal for Academic Psychiatry.

In an effort to increase research productivity and interest, residents are now expected to present a formalized research project by the time they complete their training. Many of our residents are involved in clinical trials and are presenting other scholarly work.

Drs. Aaron Mackie and Zahinoor Ismail continue to work on a certified program in neuropsychiatry, which will enhance residency training in this field.

FELLOWSHIP TRAINING

We continue to expand the range of fellowship opportunities in the department. This year saw the launch of our recently accredited Royal College of Physicians and Surgeons of Canada subspecialty training program in child and adolescent psychiatry, with two inaugural fifth-year residents, Drs. Ben Grintuch and Yuserly Rosas. We are also working on obtaining accreditation of our geriatric psychiatry and forensic psychiatry training programs.

Dr. Dina Munim finished her fellowship in child and adolescent psychiatry in 2014, and Dr. Brienne McLane completed the first year of the requirements for her neuropsychiatry fellowship during her residency in Calgary. She is being supported by a Helios scholarship and Department of Psychiatry fellowship for her second year at the University of British Columbia, and plans to return to Calgary next year.

Mathison Centre for Mental Health Research & Education

The Mathison Centre for Mental Health Research and Education was launched two years ago to promote internationally recognized research and education on the early identification, treatment and prevention of mental disorders in youth. Our growing team is working toward a better understanding of the mechanisms of mental illness, identification of risk factors and better treatments for Canada’s youth.

NEWS

Dr. Andrew G.M. Bulloch was named the interim director of the Mathison Centre, as the search continues to fill the position permanently. Dr. Bulloch has done an excellent job in making the centre come

to life and has created a vibrant milieu for trainees and faculty.

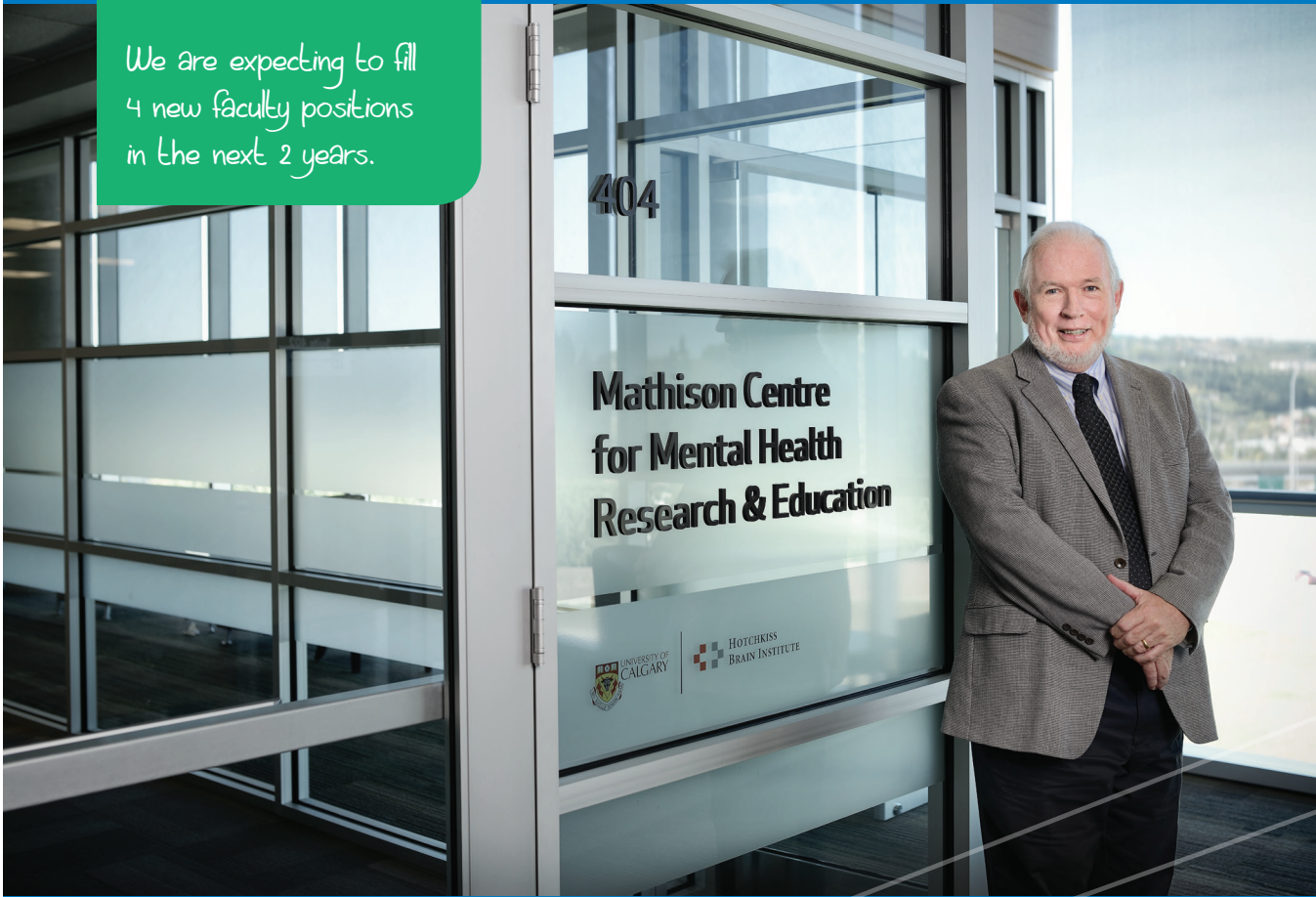
We are developing a robust trainee program to create future leaders in early intervention of childhood and adolescent mental health issues. A new trainee coordinator position will facilitate educational programs and organize job-shadowing opportunities for trainees to study with physicians.

We have a number of pilot and seed grants, studentship and fellowship awards, as well as three new summer studentships and new visiting traineeships. We welcomed our first visiting trainee from Italy to study with Dr. Anne Duffy over the summer.

“Our focus on youth mental health—with a multidisciplinary translational approach—is helping to ensure that youth remain productive contributors to society and that the personal, family and societal costs of mental disorders are reduced.”

Dr. Andrew Bulloch, Interim Director, Mathison Centre for Mental Health Research and Education

We are expecting to fill 4 new faculty positions in the next 2 years.



COLLABORATING WITH THE HOTCHKISS BRAIN INSTITUTE AND THE ALBERTA CHILDREN’S HOSPITAL RESEARCH INSTITUTE

Researcher Profiles

The Department of Psychiatry is proud to have many prominent researchers as faculty members. The researchers listed below are members of the University of Calgary's Mathison Centre for Mental Health Research and Education and the Hotchkiss Brain Institute.

DR. DONALD ADDINGTON

Professor



Dr. Addington is active in research, education, clinical practice and administration. His research activities include health services research and knowledge synthesis, with a focus on quality and outcome of schizophrenia and first episode psychosis

services. He has most recently developed a fidelity scale for first episode psychosis services, which is being piloted in centres in both Canada and the United States. It will be ready for grant applications in larger-scale studies in 2015.

Dr. Addington is also working with the Royal College of Physicians and Surgeons of Canada on a dissemination program for a recently published document on mental health core competencies for all Canadian physicians. Dr. Addington was one of the group of clinical and education specialists who developed this document.

DR. JEAN ADDINGTON

Professor



Dr. Addington, the Novartis Chair for Schizophrenia Research and an Alberta Innovates Health Solutions scientist, focuses on understanding risk factors of mental illness in youth and identifying predictors and mechanisms

of psychosis. Working with young adults and adolescents as young as 13, she seeks to determine

whether early intervention can impact the later development of serious mental illness in youth at risk.

Dr. Addington and other researchers are starting to collect early data on changes in the brain that could suggest the likelihood of someone developing a condition like schizophrenia. In 2014 she received a \$1.5 million grant from the Canada Brain Research Fund to start a clinical study in this area.

DR. CYNTHIA BECK

Assistant Professor



Dr. Beck's research is in the areas of health services and psychiatric epidemiology, particularly for people with mental disorders. She has received funding to study the use of motivational interviewing for treatment of cannabis

use among individuals with first episode psychosis. She is interested in the use of administrative data to access information on health services. In addition, she has been involved in cardiac revascularization among individuals with and without substance use disorders, the construction of a risk adjustment model for outcomes of an early psychosis program (as co-investigator), and the effect of shadow billing on the completeness and validity of administrative data (as co-investigator). Her work also includes the use of survey data to analyze patterns of health services use.

DR. ANDREW GM BULLOCH

Professor and Interim Director of the Mathison Centre for Mental Health Research and Education



Dr. Bulloch's research interests are in psychiatric epidemiology and pharmacoepidemiology. He is researching the risk factors for major depression and bipolar disorder, while seeking ways to accurately chart the natural history of

these disorders in real time. He is also documenting drug recommendations for these disorders in an effort to understand if they truly are under-treated. His teaching interests include mental disorders and their biological causes and the history of neuroscience and psychiatry.

DR. ANNE DUFFY

Professor



Dr. Duffy, the Campus Alberta Innovates Program Professor in Youth Mental Health, focuses her research on advancing the understanding of the origins of psychiatric disorders in high-risk youth and the identification of

opportunities for effective early intervention. This research aims to understand the nature of inherited vulnerability, describe the natural history and associated biological markers and identify early targets for effective treatment and prevention of recurrence, morbidity and mortality. This research has been consistently funded by peer-reviewed grants since 1995 and is currently funded by the Canadian Institutes of Health Research (CIHR), the Department of Psychiatry and the Mathison Centre for Mental Health Research and Education.

Dr. Duffy has over 75 peer-reviewed publications in prominent journals, including both the American

Journal of Psychiatry and the British Journal of Psychiatry. She has received several salary awards over the course of her career, including a Canada Research Chair in Child Mood Disorders and CIHR and National Alliance for Research on Schizophrenia and Depression (NARSAD) Investigator Awards.

DR. MATTHEW HILL

Assistant Professor



Dr. Hill studies the role of the endocannabinoid system in the regulation of stress and emotional behaviour. Endocannabinoids are the brain's endogenous version of Tetrahydrocannabinol, the psychoactive constituent of cannabis.

Specifically, Dr. Hill is interested in the role of the endocannabinoid system in the effects of stress on neuroendocrine function, inflammation, emotional behaviour and metabolism. He uses a systems level approach, incorporating a range of neuroscientific techniques from cellular and biochemical to behavioural.

DR. ZAHINOOR ISMAIL

Assistant Professor



Dr. Ismail's research bridges psychiatry and neurology, focusing on cognition across the neuropsychiatric spectrum and healthy brain aging. His research is funded by CIHR, the Kathy Taylor Chair in Vascular Dementia, the Joan and Clifford

Hatch Foundation and the Alzheimer Society of Calgary. In collaboration with local and international researchers, Dr. Ismail has ongoing studies in clinical psychopharmacology (predictors of adverse drug reactions), epidemiology (prevalence studies of neuropsychiatric symptoms), cognitive screening

(validation of novel screening tools) and functional neuroimaging (neuropsychiatric symptoms in mild cognitive impairment). His recent accomplishments include a publication in the Journal of the American Medical Association in April 2014 on the use of antidepressants for agitation in Alzheimer's dementia.

DR. FRANK MACMASTER

Assistant Professor



Dr. MacMaster's research focuses on understanding the underlying biology of mental illness in children and adolescents, with the goal of developing novel and targeted interventions. He is currently studying the effects of repetitive

transcranial magnetic stimulation and transcranial direct current stimulation on youth with mood disorders, targeting brain regions known to be dysfunctional in depression and looking for predictive biomarkers of response. His laboratory is identifying an indicator in the dorsolateral prefrontal cortex that may help predict patients' responses to treatment.

He is also studying the relationship between obesity and depression using brain imaging, animal models and epidemiological approaches.

Dr. MacMaster's other research interests include other psychiatric disorders found in young people, such as attention deficit hyperactivity disorder, schizophrenia and obsessive compulsive disorder. He is also broadening his work in brain stimulation, looking at Tourette syndrome.

DR. GLENDA MACQUEEN

Professor



Dr. MacQueen studies factors that are associated with outcome in mood disorders, particularly following a first onset of illness. In addition to clinical dimensions of outcome, she examines cognitive function, structural and functional

brain changes and physical health in patients with unipolar or bipolar disorder. She is also interested in understanding whether the cognitive and brain changes that occur in major depression and bipolar disorder can be prevented or reversed with various treatment approaches.

DR. SCOTT PATTEN

Professor



The focus of Dr. Patten's work is on the longitudinal epidemiology of major depression. His main goal is to integrate epidemiologic estimates of incidence, recurrence, prevalence, episode duration and mortality into a comprehensive epidemiologic picture.

This work helps to identify risk and prognostic factors, information that helps examine trends, set priorities and identify opportunities for prevention.

Dr. Patten has expertise in methodological approaches to the analysis of longitudinal data. In addition, he has experience with all aspects of longitudinal and cross-sectional epidemiologic projects, including issues related to sampling, measurement and data collection.

He is also interested in the patterns of comorbidity of major depressive disorders with non-psychiatric conditions, especially neurological disorders.

DR. TAMARA PRINGSHEIM

Assistant Professor



Dr. Pringsheim's primary research interest is the use of antipsychotic medications in vulnerable populations, including children, the elderly and individuals with neurodegenerative disorders such as Parkinson's disease and Huntington disease. She

is interested in helping physicians put knowledge into practice and improve standards of care by using knowledge synthesis and knowledge translation strategies to promote drug safety and effective treatment for neuropsychiatric disorders.

Dr. Pringsheim has spent the past three years developing and promoting antipsychotic safety monitoring guidelines for children, the CAMESA guidelines. These evidence-based guidelines have been officially endorsed by the Canadian Paediatric Society. She is currently involved in a prospective cohort study of children started on antipsychotic medications for disruptive behaviour disorders, and she is working on a number of projects related to antipsychotic use in adult populations.

DR. THOMAS RAEDLER

Associate Professor



Dr. Raedler provides inpatient and outpatient psychiatric services at the Foothills Medical Centre. The focus of his clinical work and research activities has been on schizophrenia and, more recently, early psychosis and prodromal stages of psychosis.

As Psychiatry Clerkship Director and Resident Research Coordinator, Dr. Raedler is involved in student and resident education and research. Dr. Raedler is the medical director of the Psychopharmacology Research Unit (PRU) of the

University of Calgary. In addition, he is the president of the Alberta Psychiatric Association and serves on the board of directors of the recently created Canadian Consortium for Early Intervention in Psychosis.

DR. RAJAMANNAR RAMASUBBU

Associate Professor



Dr. Ramasubbu's research interests focus on studying the neurobiology of mood disorders. Current studies include investigation of neural markers and predictors of treatment response to antidepressant treatment using functional

magnetic resonance imaging, genetic imaging in mood disorders, and deep brain stimulation (DBS) treatment for treatment-resistant depression. The first patient in Dr. Ramasubbu's DBS study of the subcallosal cingulate brain region has attained clinical remission six months following DBS treatment.

DR. JIANLI WANG

Associate Professor



Dr. Wang's research includes the epidemiology of workplace mental health problems, interventional research in workplace mental health and risk prediction research. He is currently leading CIHR-funded projects on the topics of workplace environmental factors

for mental disorders and workplace mental health accommodations. He is also leading a CIHR-funded project on developing risk prediction algorithms for mental disorders. Dr. Wang was recently awarded a \$1.9 million grant from the Movember Foundation to study early identification and prevention of major depression in male workers.

Continuing Professional Development

The Department of Psychiatry’s professional development committee plans and implements educational events to foster continued learning and to fulfill the requirements of the Royal College of Physicians and Surgeons of Canada. Throughout the year the committee organizes and supports a range of activities:

- A zone-wide grand rounds program, linked by Telehealth across southern Alberta. This year our program hosted over 20 rounds presentations, which were also recorded and made available via podcast. More than 70 individual psychiatrists accessed these programs and 10 residents completed the evaluations;
- Site-based and section-specific education programs, e.g., journal clubs and lunch-and-learn rounds;
- An online education program (Psychiatry Online Literature Review Course) aimed primarily at rural psychiatrists across Western Canada. Currently, 40 psychiatrists access this program;
- Continuing medical education events in other departments or groups, facilitated by individual psychiatrists and psychologists:
 - > “Healthy Minds, Healthy Children”, organized by the Department of Social Work at the Alberta Children’s Hospital,
 - > “Healthy Minds” program, organized by the Mental Health Commission, and
 - > Provincial Concurrent Capable Learning Series, organized by the Alberta Health Services (AHS) addictions medicine group; and

- Special events that address specific national and local education topics:
 - > Mood Day (February 2014)
 - > Sebastian K. Littmann Research Day (March 2014)
 - > Forensics Day (April 2014)
 - > Addictions Day Conference and Networking Fair, in collaboration with the Cuming School of Medicine Office of Continuing Medical Education (May 2014)
 - > Women’s Mental Health Day (May 2014)
 - > Addiction Motivational Interviewing Course (September 2014)
 - > Psychotherapy Day (September 2014)
 - > Concurrent Disorders Telehealth series (Addictions Program of the AHS) - throughout the year.

We are planning the following events for 2015:

- Update in Medicine for Psychiatry,
- Mood Day (February 2015),
- Psychosis Day (February 2015),
- Sebastian K. Littmann Research Day (March 2015),
- Canadian Association For Cognitive Behavioural Therapies annual meeting (May 2015), and
- Canadian Association for Cognitive Behavioural Therapies annual meeting (May 2015).

2014 PSYCHIATRY GRAND ROUNDS

Jan. 14, 2014	Neuropsychiatry Case Rounds	Dr. Brienne McLane
Jan. 14, 2014	Visual Hallucinations	Dr. Laura Baxter
Jan. 14, 2014	Neuropsychiatric Manifestations of HIV Infections	Dr. Darren Leung
Jan. 28, 2014	Long- Acting Injectable Antipsychotics: Clinical Recommendations	Dr. Pierre Chue
Feb. 04, 2014	Improving Patient Outcomes from the Top-Down	Dr. Martin Katzman
Feb. 11, 2014	Metabolic Syndrome: Comparison of Two Studies	Dr. Thomas Raedler
Feb. 18, 2014	Albert Nobbs, Transgender Issues in the Movies	Dr. Chris Wilkes
Feb. 25, 2014	DSM V: Schizophrenia, Mood Disorders, and Substance-Related Addictive Disorders	Dr. S Patten, Dr. S Currie, Dr. Toba Oluboka
Mar. 04, 2014	A 2014 Update on Bipolar Disorder: Changing Perspectives on the Illness and its Treatment	Dr. Ayal Schaeffer
Mar. 11, 2014	DSM V: Session II	
Mar. 25, 2014	Cognitive Dysfunction in Schizophrenia: New Treatment Options	Dr. Thomas Raedler
Apr. 15, 2014	Spit for Science: Finding Genes for Childhood Neuropsychiatric Traits in a Community Setting	Dr. Paul Arnold
Apr. 22 2014	Population Neuroscience of the Adult Brain	Dr. Tomas Paus
Apr. 29, 2014	Inspired Care Inspires Research and Training	Dr. Ridha Joober
May 06, 2014	Understanding the Role of Empirically-Supported Psychotherapy Treatments (ESTs) in Evidence Based Practice	Dr. Terence Singh
May 13, 2014	Information Session: Pathways to Housing	Sue Fortune (ED, The Alex)
June 03, 2014	Professional Identity Formation: From the Patient to the Person	Dr. Janet deGroot
June 10, 2014	Pain, Pharmacology, Neuropathology, and its Effect on Mental Health	Dr. Rob Tanguay
June 17, 2014	Mechanisms of Deep Brain Stimulation in Treatment Resistant Depression	Dr. Clement Hamani
Sept 23, 2014	Improving Quality of Pharmacotherapy in Schizophrenia: PLP Project	Dr. Donald Addington & Dr. Chris Symonds
Sept 30, 2014	Nicotinic Receptors and Schizophrenia	Dr. Robert Freedman
Oct 07, 2014	Decision Making and the Role of Clinical Ethics	Clinical Ethics Committee
Oct 28, 2014	Gaining Insight into Lack of Insight.	Dr. Eric Teboul
Nov 04, 2014	New Developments in Understandingthe Depression-Pain Puzzle Implications for Therapeutics.	Dr. Atul Khullar
Nov 25, 2014	What’s New in Child and Adolescent Mood Disorders?	Dr. Paul E. Croarkin
Dec 2, 2014	The Frontal-Subcortical Circuit Divide in ADHD Differential Diagnosis and Stimulant Medication Response	Dr. James B. Hale
Dec 9, 2014	3 score and 10; Management of the Elderly Living in the Community with Psychotic Illness	Dr. John deVries & the Community Geriatric Mental Health Service
Dec 16, 2014	Annual Psychiatry Residents’ rounds	

Sebastian K. Litmann Research Day

MARCH 14, 2014

The Sebastian K. Littmann Research Day has been held every year since 1987 to raise awareness, enhance communication and foster skills in psychiatric research at the University of Calgary.

In 2014 we welcomed keynote speaker Dr. Joel Kleinman, who worked previously at the National Institute of Mental Health. Kleinman has researched schizophrenia for 25 years, with an emphasis on postmortem studies, and his presentation was entitled, “Genetic Neuropathology in Human Brain Development and Schizophrenia.”

Other presenters included Arjun Dhoopar and Dr. Thomas Raedler on endothelial dysfunction in depressive disorders and Aisha Shaikat (working with Dr. Oloruntoba Oluboka and Dr. Glenda MacQueen) on the development of a new rating scale for depression in bipolar disorder.

Health services research included Dr. Rosalyn McAuley with an evaluation of the parallel process in the FMC emergency room; Sandy Berzins and Lindsay Guyn, two researchers at the Calgary Counselling Centre, with a discussion on measuring depression outcomes in community practice; and Brian Marriot with an economic evaluation of

changes to the Assured Income for the Severely Handicapped program.

Drs. Priscilla Liu and Jassandre Adamyk-Simpson spoke about patient engagement in research, Keltie McDonald presented epidemiological research on bipolar disorder, Isabelle Vallerand presented on the risk of mortality associated with depression in primary care and Dr. Kirsten Fiest presented validation data for depression rating scales in people with epilepsy.

Clinical content included Dr. Ray Purdy presenting case-report data on limbic encephalitis, Igor Yakovenko presenting on pathological gambling, and Drs. Karl Tomm, Shari Couture and others presenting on family therapy. Dr. Lisa Buchy, a post-doctoral fellow, made a presentation on the PREDICT study, a major study looking at the predictive association of drug use on outcomes in patients clinically at high risk of psychosis. There were also poster presentations on a wide variety of topics.

2014 Events

Curling Bonspiel, March 21

Women's Mental Health Day, May 23

Addiction Day and Networking Fair, May 30

Japanese Delegation Visit, September 15 & 16

Outrun the Stigma, a run for mental health awareness, October 5

**Hotchkiss Brain Institute 10th Anniversary Symposium:
The Future of Neuroscience, October 9**

**Hotchkiss Brain Institute 10th Anniversary Symposium:
The Future of Neuroscience Scientific Symposium, October 10**

The Department of Psychiatry Fall Social, October 16

Opening Minds Gala, October 18

Hotchkiss Brain Institute Town Hall, November 12

Awards

Dr. Donald Addington received the Alberta Medical Association 2014 Medal for Distinguished Service for outstanding personal contributions to the medical profession and Albertans.

Dr. Susan Carpenter was awarded the Earl L. Loschen Award for Clinical Practice from the National Association for Dual Diagnosis in the USA for contributions in clinical practice that have significantly improved the quality of life for individuals with intellectual and developmental disabilities, as well as mental health needs.

Dr. Janet de Groot was awarded the Association of Faculties of Medicine of Canada May Cohen Equity, Diversity and Gender award for her work in founding the office of Equity and Professionalism, leading a social accountability task force, educating to reduce unconscious bias in search and selection at a faculty level, and initiating reflective career development sessions for basic science graduate students and junior faculty.

Dr. Vina Goghari received the HBI/Pfizer Canada Research Award. The award and grant money will support her in her research on the underlying brain abnormalities in bipolar disorder. Goghari’s research team uses a combination of brain imaging and lipid profiling to study brain abnormalities in patients with bipolar disorder to investigate whether these abnormalities can be used to predict cognition, disease status and outcome.

Dr. Glenda MacQueen received the 2014 Canadian College of Neuropsychopharmacology Heinz Lehmann Award in recognition for her outstanding research on the behavioural and neural markers of depression in humans, in particular the relation between brain structure and function and depression.

Dr. Scott Patten received the Graduate Students’ Association Award for Supervisory Excellence.

Peter Lougheed Centre’s Short Stay Unit was awarded the Gold Couch Award by the University of Calgary, Department of Psychiatry residency program for the best clinical teaching unit in Calgary.

The 2014 class of clinical clerks from the University of Calgary nominated the following teachers for the winners of the **Gold Star Award** for outstanding undergraduate medical teaching:

- Carl Adrian
- Dale Danyluk
- Toba Oluboka
- Philip Stokes
- Jason Taggart
- Roy Turner

The following people were awarded the Associate Dean’s Letter of Excellence for undergraduate medical education:

- Katalin Mayer
- Karen Tanguay
- Nancy Brager
- Alexandra Di Ninno
- Benjamin Grintuch
- Aaron Mackie
- Elena Petrov
- Blair Ritchie
- Sergio Santana
- Brett Sawchuk
- Reilly Smith
- Sterling Sparshu
- Philip Stokes
- Rob Tanguay
- Pamela Weatherbee
- Lauren Zanussi
- Tim Ayas

Many department members have also been recognized for their undergraduate medical education teaching contributions at different levels.

Bronze level awards

- Katalin Mayer
- Karen Tanguay
- Tim Ayas
- Nancy Brager
- Alexandra Di Ninno
- Benjamin Grintuch
- Aaron Mackie
- Elena Petrov
- Blair Ritchie
- Sergio Santana
- Brett Sawchuk
- Reilly Smith
- Sterling Sparshu
- Robert Tanguay
- Pamela Weatherbee
- Lauren Zanussi
- Maureen Pennington

Silver level awards

- Karen Tanguay
- Philip Stokes

Workforce Planning + Recruitment

FUTURE NEEDS

AHS Calgary Zone has a shortage of psychiatrists, as do most health jurisdictions in the country. Particular shortages are in child and adolescent, geriatric and forensic psychiatry. The overall need of our growing population significantly exceeds the growth in psychiatrist supply. At the same time, several of our senior psychiatrists are slowing down their practices or retiring outright.

STRATEGIES

Our graduating residents are our primary recruitment candidates. In 2014, 7 (out of 8) graduating residents joined the department, along with a graduate from the University of Alberta and a graduate from the University of Western Ontario. Additionally, one psychiatrist who went through our child and adolescent psychiatry subspecialty training program joined our team.

Recruitment continues to be very successful, with the addition of the following members:

- Oluyemisi Ajeh, Forensics and SAFPC
- Noura Al Faraj, Inpatients at PLC
- Rhea Balderston, Outpatients at RGH
- Amanda Berg, Outpatients at SMCHC
- Jack Chu, Outpatients at RGH, RRDTC, SMCHC and Sunridge Professional Centre
- Eric Fung, Inpatients and Emergency at RGH, and ACT Team at SMCHC
- Adeola Lemboye, Child and Adolescent at SHC
- Darrin Leung, Inpatients, Geriatric Consultation-Liaison and Community Geriatrics at RGH
- Kanwal Mohan, Inpatients and Geriatric Consultation-Liaison at PLC
- Dina Munim, Child and Adolescent at FMC
- Joseph Raiche, Outpatient Transgender and Perinatal at FMC
- Vidya Raj, Outpatients at SMCHC
- Thomas Stark, Outpatients at Carnat Centre and NE Family Care Clinic, Inpatients at PLC
- Manrit Takhar, Inpatients at PLC and Outpatients at Sunridge
- Jonathan Tan, Child and Adolescent at FMC

Departmental Structure + Organization

GOVERNANCE

The Department of Psychiatry comprises an academic department that is part of the University of Calgary, Cumming School of Medicine and a clinical department within Alberta Health Services (AHS), Calgary Zone. The two departments are linked through a single jointly-appointed department head and a single executive committee.

Department Head

The department head reports to the dean of the Cumming School of Medicine and to the associate zone medical director, AHS, Calgary Zone. The department participates in the activities of the faculty through the involvement of its members in such activities as faculty-wide meetings, committees and collaborative teaching and research efforts. The primary role of the department head is to support, directly and indirectly, the teaching, research and service activities of the department’s members. Thus, the head has departmental responsibility for budget submissions and management, purchasing, curriculum planning, space and resource management, personnel recruitment, hiring and promotion, planning, program development and the annual evaluation of faculty and staff. Within the structure of the department, some of this work is distributed among the faculty and support staff, and we appreciate their skill in helping us accomplish these necessary departmental activities.

The Clinical Department of Psychiatry comprises 184 members:

SECTION	PRIMARY	SUPPLEMENTARY	TOTAL
Addictions and Claresholm Care Centre	5	15	20
Child and Adolescent Psychiatry	32	15	47
Forensic Psychiatry	13	4	17
Geriatric Psychiatry	13	7	20
Psychiatry Adult Inpatient Services	68	65	133
Psychiatry Adult Outpatient Services	53	57	110
Total	184		

Sections

The Department of Psychiatry has six sections: Addictions and Claresholm Care Centre; Child and Adolescent Psychiatry (Inpatient and Outpatient); Forensic Psychiatry; Geriatric Psychiatry; Psychiatry Adult Inpatient Services; and Psychiatry Adult Outpatient Services. The section heads are advisors to, and supporters of, the department head. At the departmental level, the section heads assist in curriculum development, program and faculty evaluations, and physical and human resource management. Beyond the department, the section heads are delegates of the department head, and may participate in local and provincial initiatives. The section heads are responsible for services within Addiction and Mental Health Services, Calgary Zone.

Performance Reviews and Promotions

The head of the Department of Psychiatry completes all the academic annual merit evaluations. The department’s Promotions Committee reviews recommendations for promotion for full-time faculty and part-time clinical or adjunct appointments, and recommendations for promotion are made to the dean based on the advice of the department head. The department’s Executive Committee reviews all initial clinical and adjunct appointments and subsequent re-appointments before recommendations are made to the dean. Members of the clinical department have their privileges reviewed annually and have a personal review with their program medical director every three years.

DEPARTMENTAL COMMITTEES

Department of Psychiatry Executive Committee

This committee meets monthly and integrates the zone and university leadership. It comprises all the program medical directors, education directors, research director and the chief resident. It is responsible for recruitment and retention, policy and planning.

Departmental Full-time Faculty Committee

This committee meets on a monthly basis to advise the department head on academic planning and policy matters. Issues discussed include long-term planning, program development, teaching and research policy, faculty appointments and human resource planning, and other issues relating to strategic planning. This committee will sometimes discuss policy matters that are to be taken to the department at large for discussion and voting.

Residency Training Committee (RTC)

This committee is chaired by the postgraduate training director, who is appointed by the associate dean of postgraduate medical education in consultation with the department head. The RTC meets on a regular basis throughout the year (usually monthly) and consists of the program director, the chair of the psychotherapy committee and the director of resident research. The chairs of the curriculum and addiction committees are invited to meetings as needed. In addition, five elected residents from all levels of training, one representative from each of the major teaching institutions involved in the program, the chief resident, and the resident Canadian Organization of Psychiatry Educators representative are part of this committee. The department head (ex-officio) may also attend this meeting. The RTC provides leadership and supervision in all aspects of residency education in psychiatry within the Cumming School of Medicine, the University of Calgary and its affiliated teaching hospitals and programs. It selects residents and reviews and approves resident rotations.

Undergraduate Medical Education Committee

Selected by the department head, the director of undergraduate medical education chairs the Undergraduate Medical Education Committee. The director, in consultation with the head, selects two or three additional members for the committee to oversee Course VII, clerkship and evaluations. This committee is responsible for undergraduate curriculum planning, calendar changes, and program requirements. It also oversees the clinical clerkship, a subcommittee of the Undergraduate Medical Education Committee.

Continuing Professional Development Committee

The purpose of this committee is to plan and implement educational events based on the identified needs of the Department of Psychiatry, and implement a series of regularly scheduled learning activities and events that fulfill the requirements of the Royal College of Physicians and Surgeons of Canada. Membership includes the director of continuing professional development (chair), representatives for the site coordinators from Alberta Children’s Hospital, Foothills Medical Centre, Peter Lougheed Centre and Rockyview General Hospital, and the seven section chiefs. In addition, non-psychiatrist education coordinators of the clinical departments may attend to facilitate coordination of events schedules and contribute to development of needs assessments.

Fellowships Committee

This committee is responsible for facilitating and coordinating advanced clinical and research training in the department at the post-residency and post-doctoral level; this includes the selection and admission process for clinical fellows and funding, where applicable. The chair of the Fellowships Committee is selected by the department head. In consultation with the head, the chair selects five or six additional members for the committee to provide representation from the Residency Training Committee and fellowship programs.

Medical Leadership + Adminstration

Calgary Zone Addiction and Mental Health

There were several position changes in 2014:

- Joan Campbell retired from her position as Executive Director of Addiction and Mental Health in the Calgary Zone on October 31, 2014. Janet Chafe is the new Executive Director.
- Kim Frache returned from leave on November 1, 2014 and is back full time as Director, Adult South and Geriatric Mental Health.

Key initiatives for Addiction and Mental in the Calgary Zone in 2014 included the following:

- Adult Unit 23 moved to Unit 45 at the RGH and opened 6 additional beds.
- 14 additional adolescent mental health beds were opened at the FMC.
- Three projects, focused on Mental Health Literacy in Child and Adolescent Mental Health, are being implemented. Empowering Educators is focused on Kindergarten to grade 9 teachers, Teaching Teens is focused on grade 9 and 10 students and CanREACH is focused on primary care physicians.
- Child and Adolescent Addiction and Mental Health is working collaboratively with Developmental Paediatrics and Neurosciences toward the development of a Brain Health initiative.
- The Adult Community Mental Health Clinics are completing a service redesign.
- The auditor general visited the Calgary Zone in October as part of a provincial review. A report and recommendations are expected early in the New Year.
- A knowledge forum on the new Not Criminally Responsible Reform Act was held in November 2014 for forensic psychiatry.

- Claresholm Centre for Mental Health and Addictions added 12 new acute care rehabilitation beds.
- Psychiatric consultation, via Telehealth, for adult addiction services and the Renfrew Recovery Detoxification Centre was implemented.

Over capacity, especially in the emergency departments and on the inpatient units, across all sites and ages, continues to be an issue.

Strategic Clinical Network (SCN)

The current initiatives for the Addiction and Mental Health SCN are:

- Adult Depression Pathway
- Adolescent Depression Pathway
- Alcohol Misuse Pathway
- Complex High Needs (EMS) project

Several key positions with the Addiction and Mental Health Strategic Clinical Network were filled in 2014:

- Cathy Pryce accepted the position of Senior Provincial Director;
- Dr. Nick Mitchell accepted the position of Senior Medical Director; and
- Dr. Peter Silverstone accepted the position of Scientific Director.

Information Management, Evaluation + Research (IMER)

IMER plays a critical role in improving patient care, planning mental health services and reporting progress to Alberta Health and Wellness and Alberta Health Services (AHS). It also plays an important part in the partnership between the Alberta Health Services, Calgary Zone, and the University of Calgary through its knowledge translation activities. IMER continues to fulfill its mandate to play a significant role in strategic planning and setting priorities for Addiction and Mental Health Services (A&MH). The Calgary Zone A&MH portfolio has become an example in innovation and quality treatment in Alberta.

IMER is composed of three teams: education, evaluation and information management. These teams are staffed by specialists in education, evaluation, information management, research, performance measurement and quality improvement.

The education team acts as an education and practice resource consultant within A&MH, Calgary Zone, by creating and consulting on new policy development, learning and training opportunities and student placements. The education coordinator collaborates with management teams and internal and external partners to implement educational activities and projects that encompass all disciplines in the zone, such as nursing, psychology, social work, psychiatry, occupational therapy, contracted services and addictions counselling.

The evaluation team contributes to short- and long-term planning within A&MH services, AHS and the community. It focuses the evaluation process

on the information needs of program stakeholders and produces results and recommendations that are useful to improving practices. The evaluation team continues to expand its knowledge and support in the areas of system and program level outcome measurement, program evaluation, quality improvement and research.

The information management team continues to deliver timely, high-quality clinical and administrative information to clinicians, managers and leadership, which they require to make effective decisions for the best-quality care in addiction and mental health. The information management team also collaborates with other zone and provincial services to help A&MH achieve its goals. The A&MH programs in Calgary provide direct service to over 80,000 clients every year. It is important to document and report on this large volume of clinical activity; the information is then used to satisfy Alberta Health reporting requirements, but is also used for internal planning and evaluation purposes.

Every summer IMER highlights its current projects and activities in its annual report. Also, at the end of each fiscal year, IMER produces the Year End Service Summary (YESS), which is a comprehensive data summary of clinical activity in A&MH, Calgary Zone and its contracted service partners. YESS is the most inclusive collection of individual service data and has become the official source for program statistics.

Improvement + Innovation

The Department of Psychiatry, Calgary Zone, has always placed a high priority on quality assurance and improvement, and encouraged innovations in the provision of clinical services.

Over the course of the past year, the Quality Assurance Committee has met repeatedly to review safety concerns or incidents within the zone and make recommendations to ameliorate services. In 2014 the committee changed its review process to improve efficiency. A clinical safety leader now reviews all critical incidents and decides if a formal investigation is required; this new process has reduced the backlog of critical incidents reviews.

The link of family physicians to specialist care (psychiatry in this instance) is enormously important for the flow of patients in both practice systems. In the past year the department has renewed efforts to work with Primary Care Networks so that its most stable patients can be transferred to the care of family doctors, and reciprocally, more referrals from family physicians can be taken into its specialty psychiatry clinics for assessment and treatment.

In the past year there has been particular focus on patient complaints about care delivery. The department has engaged more front-line clinical medical leaders, who assist in the resolution of such complaints. In the coming year staff plan to provide education through departmental grand rounds on the critical incident review process, as well as the patient complaints process, as they are key components of clinical quality assurance.

These quality improvement initiatives are still in the early phases, but hold substantial promise

of improved patient care delivery. Monitoring, evaluations and reporting will of course occur over the next year.

CHALLENGES

In 2014 the Department of Psychiatry successfully recruited 15 physicians, and continues to actively recruit in under-served areas such as child and adolescent psychiatry. A recruitment search is ongoing for the Mathison Centre for Mental Health Research and Education director. The department also expects to recruit in the area of geriatric psychiatry and healthy brain aging, and currently has an active search for a joint academic/clinical position. The absence of an academic alternate relationship plan (AARP), the shrinking sessional budget relative to the size of the department and the absence of new clinical services at various sites will compromise the ability of the department to recruit the physicians necessary to meet the expanding need for mental health services.

The major challenges for the Department of Psychiatry are both clinical and academic. Calgary has experienced a significant increase in population, which has, in turn, increased the number of patients accessing mental health services and overwhelmed both inpatient and outpatient programs. Staff have partially addressed inpatient capacity for children and adolescents; however, there is still further need. Also, capacity for adults with psychiatric disorders is an ongoing issue, with a need for more inpatient beds and urgent services.

Looking to the Future

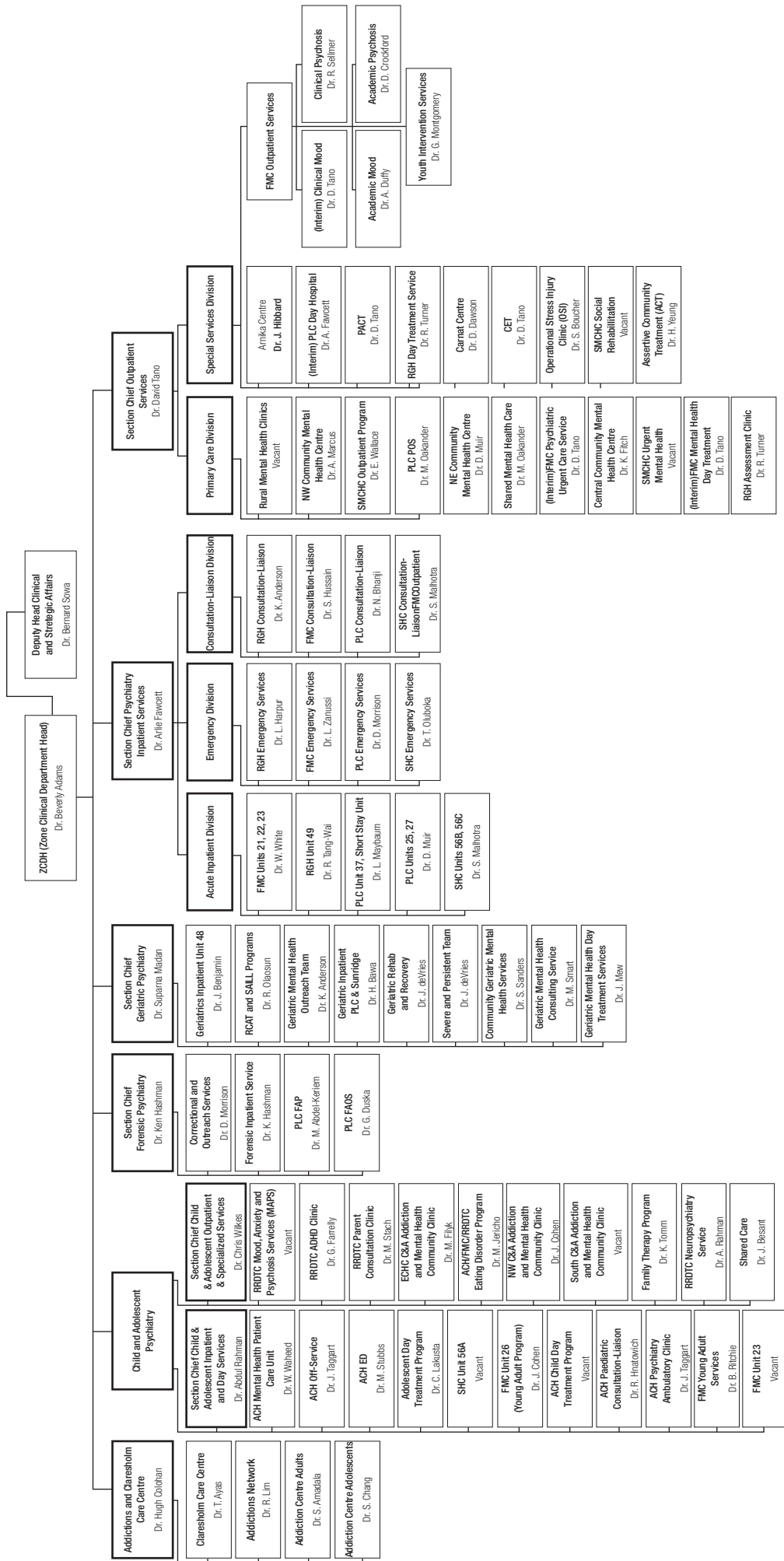
The Department of Psychiatry, Calgary Zone, worked with the zone and the provincial Addiction and Mental Health group to identify a series of initiatives that were aligned with the stated priorities of Alberta Health Services. Some initiatives will be realized over a multi-year time frame.

Ongoing priorities for Addiction and Mental Health include the following:

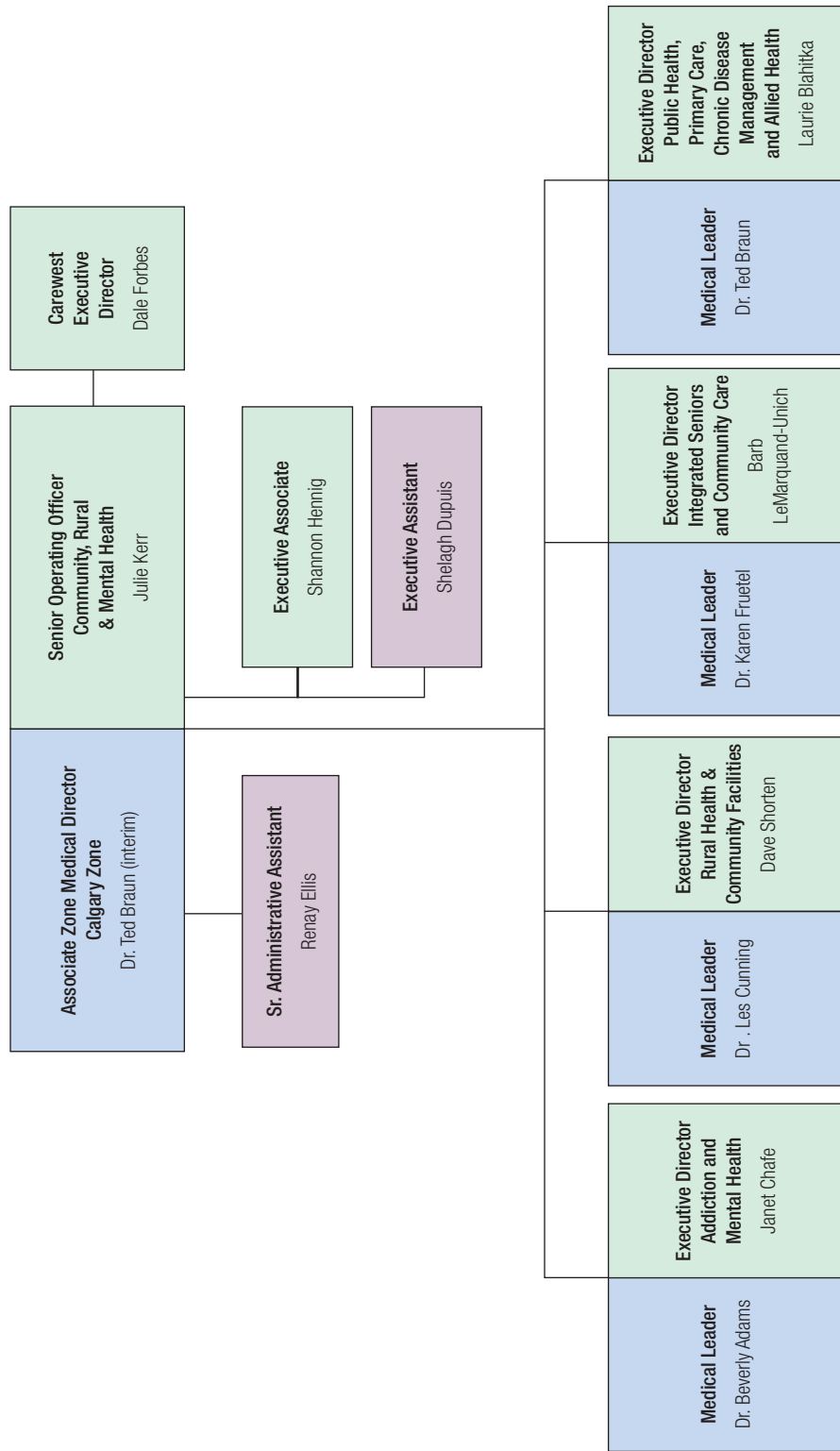
- Acute-care capacity for child and adolescent mental health patients—partially addressed with the opening of 14 adolescent beds at Foothills Medical Centre;
- Decreased percentage of Alternative Level of Care (ALC) inpatients, with 52 beds approved within the Calgary Zone for mental health long-stay patients in the community;
- Increased urgent-care services for mental health patients;

- Canadian Psychiatric Association (CPA) targets for emergent (24 hours), urgent (14 days) and scheduled (30 days) care. Community clinic redesign and process improvements continue to be a priority for outpatient services, with a major focus on access improvement measures (AIM);
- Implementation of clinical care pathways in collaboration with the Addiction and Mental Health Strategic Clinical Network, including an adult and adolescent depression pathway, alcohol misuse pathway and complex high needs (EMS) project; and
- Integration of research into our specialized and community clinics to foster improvement in patient care.

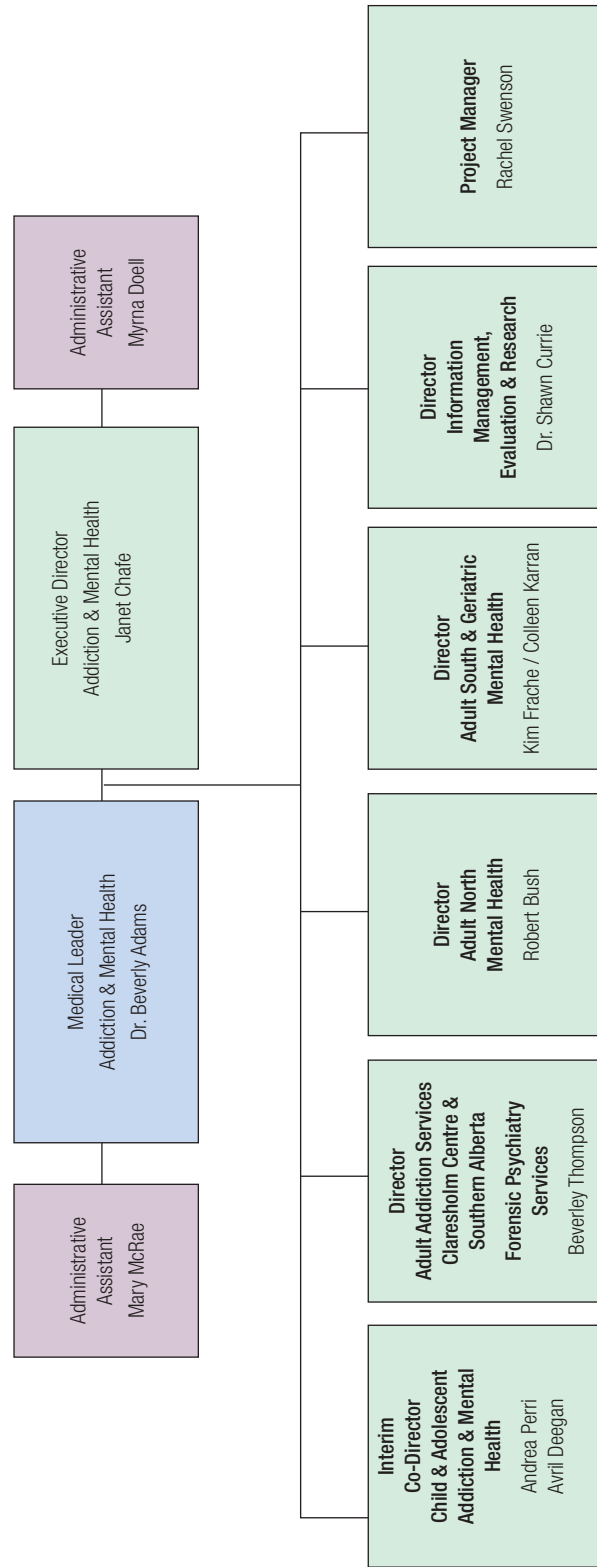
Clinical Department of Psychiatry, Calgary Zone



Community, Rural & Mental Health, Calgary Zone



Addiction & Mental Health Calgary Zone



Our Vision

Advancing mental health solutions for our community

Our Mission

- Promote the highest quality care for individuals with mental disorders and their families
- Support mental health promotion and prevention
- Promote a learning environment through psychiatric education and research
- Represent the profession of psychiatry
- Collaborate and develop networks
- Develop innovative service delivery models
- Integrate mental health care with primary health care
- Work to reduce the stigma of mental illness

Our Values

- Best standards of clinical practice
- Highest ethical standards of professional conduct
- Prevention, access, care and sensitivity for patients and their families
- Patient-focused treatment decisions
- Evidence-based principles of treatment
- Advocacy for patients
- Leadership
- Lifelong learning
- Collegial support
- Respect for other health professionals
- Respect for multi-disciplinary team approach

HOSPITAL SERVICE LOCATIONS

Alberta Children's Hospital

2888 Shaganappi Trail NW, Calgary, Alberta T3B 6A8

Foothills Medical Centre

1403 29 Street NW, Calgary, Alberta T2N 2T9

Peter Lougheed Centre

3500 26 Avenue NE, Calgary, Alberta T1Y 6J4

Rockyview General Hospital

7007 14 Street SW, Calgary, Alberta T2V 1P9

South Health Campus

4448 Front Street SE, Calgary, Alberta T3M 1M4

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