

Department of Psychiatry Research

...The 2019 search confirms that the Department of Psychiatry's research productivity continues to increase. Since 2014, each consecutive year has been the most productive year in the history of the Department. The current search suggests a continuation of this trend...

...The overall number of citations has continued to increase. References to the work arising from the Department in 2018 exceed that of any previous year and the pattern suggests that 2019 will again exceed 2018 – noting that the past year total is nearly equaled with 4 months remaining in 2019.

More on Page 39.

2019 Department of Psychiatry Annual Report

Our Vision, Mission, & Values

Our Vision

Advancing mental health solutions for our community

Our Mission

- Promote the highest quality care for individuals with mental health 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

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1. **M**essage from the Department Head of Psychiatry

*Dr. Valerie Taylor
MD, PhD, FRCPC
Head Department Psychiatry*



In just 12 months we have seen considerable changes within the Department of Psychiatry. Change, even when it is for the better, can be challenging, and I would like to thank everyone for their patience as we move forward.

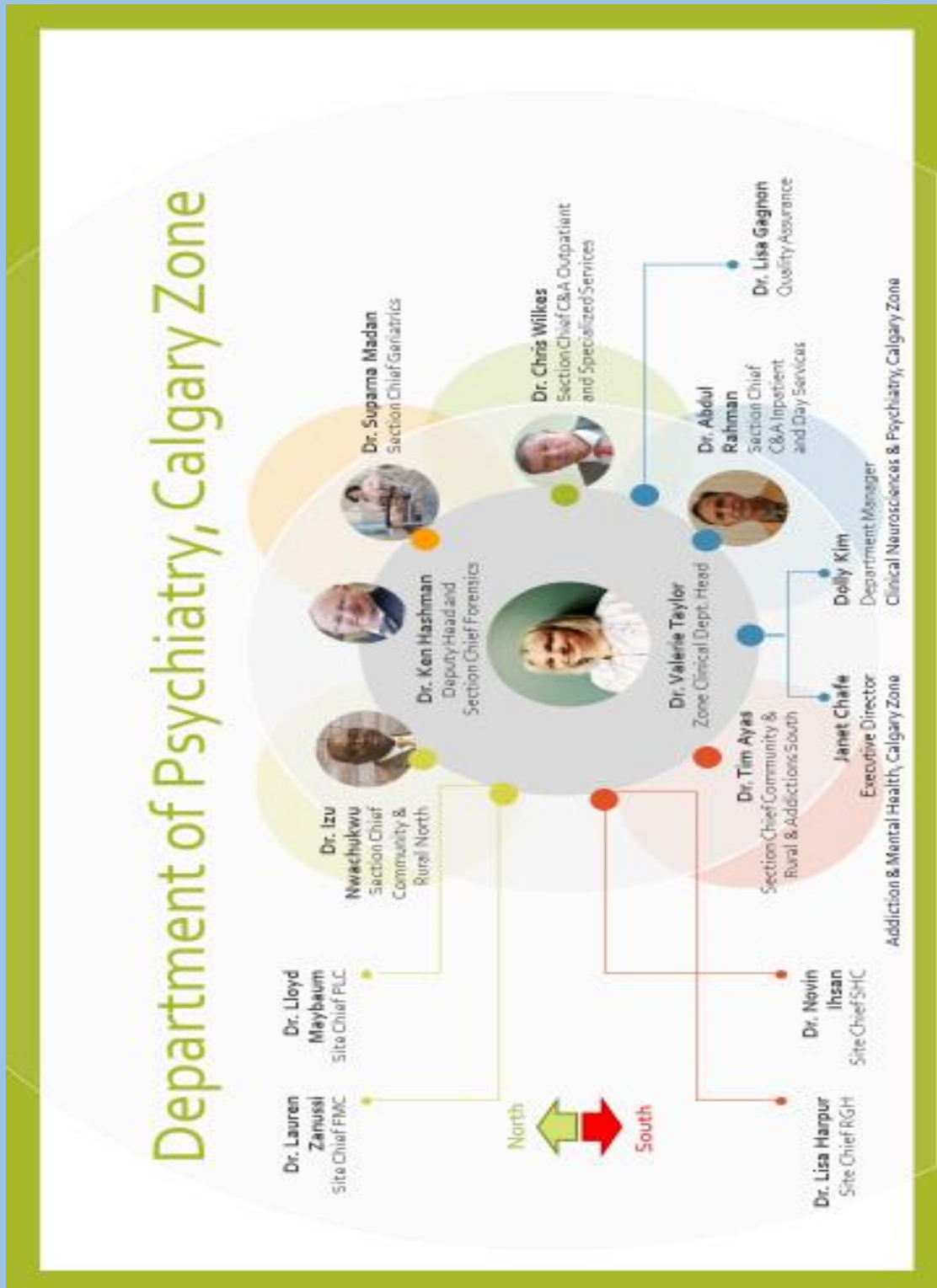
One change that occurred during the last 12 months was the launch of the Academic Medicine and Health Services Program (AMHSP), which has allowed us to both recruit expertise from other places to grow our academic mandate, and to solidify support for those already engaged in scholarship within our program. We have also seen the creation of the Geriatrics Subspecialty Program and the beginning of the Competency By Design (CBD) curriculum model within the Department. We have also worked with our community partners and staff all across the Zone to address complex issues such as

wait times, access and length of stay. Tackling these issues has led to creative ideas, exactly what I have come to expect of this Department.

As always, our mandate is to improve the care provided to our patients, both through innovative care models, community partnerships and our research and education programs. This report highlights our many successes in these areas over the last year.

Dr. Valerie Taylor

2. Departmental Structure & Organization



3. AMHSP & Workforce Recruitment

Dolly Kim and Justin McKinley

Since the Academic Medicine and Health Services Plan (AMHSP) is new to the Department of Psychiatry we wanted to take this opportunity to introduce the team. Below is a list of contacts and the areas each group is responsible for.

➤ **The Finance Group:**

- ❖ Responsible for budgeting, contracts, payments, reconciliations and workforce reporting.
 - Edina Wilkinson (Senior Financial Analyst)
 - Ritchie Kalsi (Coordinator)

➤ **The Accountability Group:**

- ❖ Responsible for clinical accountability, contracts (schedule A – Services and Key Performance Indicators), and data analysis.
 - Aaron Graf (Senior Analyst)
 - Nisha Joseph (Analyst)

➤ **Support:**

- ❖ Responsible for impact analyses, recruitment documents, contract tracking and is the first point of contact for the AMHSP Office.
 - Dina Abdo (Administrative Support)

➤ **Management:**

- Dolly Kim (photo below, right) & Justin McKinley (photo below, left)

We look forward to continuing to work closely with our members and the department.

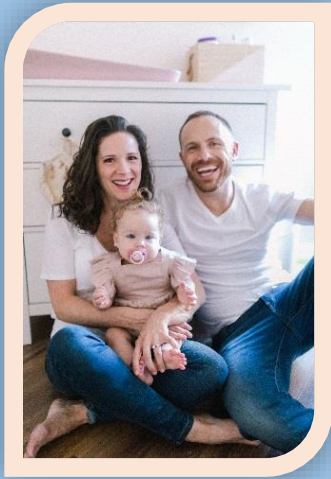


Meet the AMHSP Team

(Left to right): Aaron, Nisha, Dolly, Justin, Ritchie and Dina



Meet the New Psychiatry Team Members

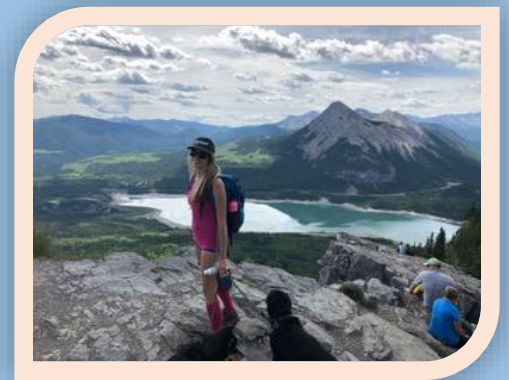


Dr. Lisa Walkey

Lisa is thrilled to have joined the team at PLC - she has interests in adult inpatient and emergency psychiatry, as well as addiction medicine. She is a devoted wife and mother to a beautiful 2 year old daughter. Outside of work, Lisa loves to travel and has a passion for photography.

Dr. Jadah Johnson

I'm mostly involved in inpatients and forensics, with a special interest in sex offenders. I'm an avid hiker and love to volunteer with animals in my free time.



Dr. Lindsey Ward

Since finishing residency at U of C in June, Lindsey has had a very exciting first few months of practice developing skills and experience in her field of interest - Psychiatric Care of the Medically Ill. She has taken delight in working with PGY1 residents on the Med/Psych Unit at PLC and has also been helping with Consultation Liaison coverage at both PLC and FMC. Thankfully there has been just enough spare time to enjoy the best part of life in Calgary - the mountains!



Dr. Tom Kim

I recently completed my residency at Queen's University. I am excited to join the Psychiatric Adult Services team at Foothills Medical Centre and the NW Mental Health Clinic team as an outpatient Psychiatrist.





Dr. Huntae Kim

I completed most of my residency program in Toronto before moving to Calgary for Child and Adolescent subspecialty training. My practice areas are varied, but if there is ever a situation where a Korean-speaking psychiatrist may be an asset, please don't hesitate to reach out! I also hope to take more role in education and have taken over from Dr. Waheed as UME coordinator for Child and Adolescent Psychiatry.

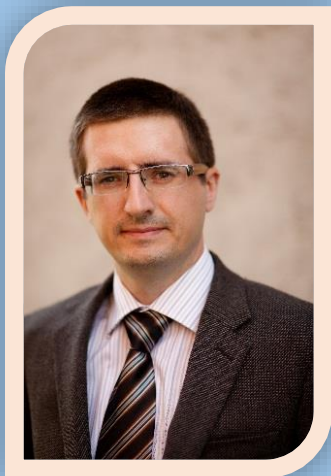
Dr. Maria Astorga

I completed my residency training in Winnipeg and practiced in Edmonton for a few year before moving to Calgary. I have a special interest in Dialectical Behavioral Therapy.



Dr. Dallas Seitz

Dr. Seitz is joining us from Ontario where he was Division Head of Geriatric Psychiatry, Queen's University and he is the current president of the Canadian Academy of Geriatric Psychiatry. His research interests include medication safety in older adults, health services and policy research, and implementation of best practices into clinical settings. He looks forward to meeting everyone in the Department of Psychiatry at the University of Calgary and spending time exploring the outdoors in and around Calgary.



Dr. Paul Ratti

I'm Paul Ratti, recent Calgary grad, and one of the two new Psychiatrists who joined the team on Unit 21. I consider myself hugely fortunate, and am thrilled to be joining such a wonderful team. To those whom I have not yet had the pleasure of working with, I look forward to meeting you soon.



Dr. Jace Dergousoff

After completing my psychiatry training at the University of Alberta I have recently relocated to Calgary with my family. Currently, I am settling into my role on Unit 21 and look forward to meeting other members of the Foothills Psychiatry team.



Dr. Julie Davison

Julie Davison attended medical school at McMaster University. She completed her psychiatry residency at UBC in Vancouver. She has worked in Vancouver and Yellowknife before coming to Calgary where she works on inpatients at Foothills Medical Centre.



4. Connect Care Updates

Dr. David Tano, Medical Informatics Lead



I hope you are doing well. My name is Dr. David Tano and am privileged to be your psychiatric representative on the Connect Care project. As many of you have already heard, Alberta Health Services is embarking on a massive project of having all Albertans within the Alberta Health Services under one electronic medical record system. The system they have chosen is called Epic. It is a system that is being used throughout the world and, especially, at certain major healthcare companies including that of; the Cleveland Clinic, the Mayo Clinic, and Kaiser Permanente.

Over the past two years, or so, we have been embarking on attempting to design this program and modifying it to our specific needs here in Alberta. Though there is a lot of work still to be done, there has been a massive collaboration throughout the entire province trying to make the future of Alberta coordinated and elite. In the very near future, all services within the Alberta Health Services will be coordinated under one electronic medical record system.

In fact, the rollout of this new medical record system will be initiated on November 3, 2019 at the Walter C. McKenzie campus in Edmonton. Calgary's initiation into this roll out will occur in May, 2020 starting with the rural acute care centres in the Calgary Zone, as well as, the Sheldon Chumir Health Center, and the South Calgary Health Centre. Further to this, urgent care centres in Airdrie, Okotoks, and Cochrane will also come online. At this same time, the Central Zone will also be coming online with Epic.

Practically speaking, for our Department of Psychiatry, Wave 2 beginning in May, 2020 will, fortunately, only involve a few psychiatrists who are currently working at the Sheldon Chumir Centre and the clinics of Urgent Care, the Mobile Response Team, the PACT Team, AMH Urgent Outreach from the Sheldon Chumir Health Centre, Safe Works, and the Supervised Consumption Site. In the near future, I will be reaching out to the psychiatrists working in these clinics to set up training sessions.

Our biggest and earliest rollout will occur in October, 2020 at which time the Alberta Children's Hospital, Peter Lougheed Centre, and University of Calgary teaching clinics are all scheduled to be rolled out. As we move closer to this time we will be seeking out, what we refer to as, "super users" in these various sites to help with training, and support on this new system.

For our physicians, there is a Connect Care physician manual that can be found at: <https://manual.connect-care.ca/>

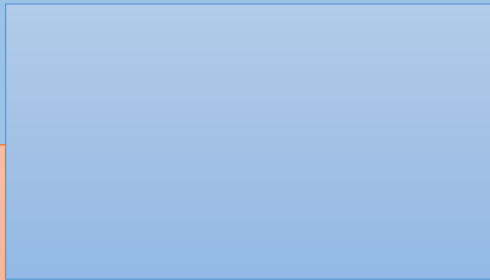
There, you can find links to the physician handbook, as well as, other tips, frequently asked questions, blogs, etc.

Over this next year, I will attempt to keep you informed as to the progress of this rollout. Given the great impact it will have on our services, as well as your day-to-day workflow, I asked for your patience and enthusiasm in rolling out this new system with the anticipation that this will improve healthcare to all of our patients in the future. Please understand, that during the process of rolling the system out, there may be complications and difficulties which we will hopefully minimize and will provide support to you all. Furthermore, as we move closer to rolling out the program, I will attempt to come to your site meetings to provide ongoing updates and, if possible, I will also try to provide demonstrations for you.



Connect Care

Better health. Powered by information.



5. Sections of Psychiatry

Child & Adolescent Addictions and Mental Health Psychiatry Program

Dr. Chris Wilkes, Section Chief Child & Adolescent Outpatient & Specialized Services

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

Overview of 2019

The CAAMHPP services continues to provide a comprehensive, integrated and responsive service to the Children and Adolescents in Calgary, including; both inpatient and outpatient services, day programs, specialized outpatient services and community clinics. CAAMHPP has been actively supporting inpatient programming to ensure greater access to multidisciplinary groups seven days a week. There has also been an emphasis on identifying community based services for ASD and looking at the social determinants of for admission into hospital. Additionally innovative AHS service planning with the Alberta Children's Hospital Foundation (ACHF) continues in order to establish an additional walk in community child and adolescent centre in the near future. This will include mental health research and family centered initiatives.

Now the Acute At Home Services supports patients with low to moderate risk to stay at home and move directly from emergency departments, inpatient, and day treatment. Patients and families can be connected to an outreach mental health professional. This clinician is attached to a larger interdisciplinary team who provide clinical, psychiatric, and case management support depending on the needs of the



families. Youth Substance Use and mental health services has been active thereby increasing the access for youth and families. The Adolescent Day Treatment Program has been supporting patients with a post discharge and aftercare program. It has diverted a number of patients from presenting at the ER. Likewise, the Youth Community Support Program has continued to show evidence of decreased hospital utilization rates.

Other innovative service development has reduced the outpatient wait list for the Metta Clinic and FMC Gender Clinic.

Highlights

Centre for Child and Adolescent Mental Health - Scope beyond Capital – Investing in Innovation and Research

- CanREACH - The continued 3-year investment will support the training of approximately 250 additional physicians.
- Elementary Mental Health Literacy Resources (Starting September, 2019) - The continued four year investment will improve the mental health

literacy of elementary aged youth, and promote a common language and understanding in schools and communities inside Alberta.

- Acute at Home (Starting September, 2019) – This three year investment by the ACHF will support the Acute At Home Program, to provide coaching and support to the family and youth, as well as, onsite support for teachers and schools when required. Through the provision of intensive home treatment, as well as, attention to both clinical and social needs, families can ‘get better at home’ without the disruption of a hospital admission.
- Peer Support (Starting September, 2019) - in partnership with the University of Calgary’s Faculty of Social Work and Dr. Gina Dimitropoulos within the Alberta Children’s Hospital Emergency Department (ED), this five year investment in the Peer Support Program developed for the new Center for Child and Adolescent Mental Health will help patients bridge the transition from professional treatment to community-based support.
- Patient and Family Centered Care (Starting September, 2021) - promotes innovation in planning and delivery of care and includes patient and family engagement. These will include:
 - Therapeutic Programing
 - Child, Youth and Family Engagement
 - Family and Community Resource Center

CAAMHP (PES, OCD, CDTP)

OCD & MAPS initiated PANS/PANDAS pilot clinic in collaboration with Rheumatology and Psychiatry to offer joint assessments for children/youth presenting with query of PANS/PANDAS. The pilot, which concludes December, 2019, includes a research component lead by Dr. Paul Arnold.

School Based Mental Health (SBMH) and Mental Health Literacy

Engagement and trainings in 52 of the 68 school boards in Alberta on Mental Health Literacy and Curriculum for grades 8-12. Over 7000 educators have been trained and approximately the same number of students have been exposed to the mental health curriculum.

Involvement in national work on creating a Mental Health Literacy curriculum that would be provided to the Indigenous youth across Canada.

In May, 2019 a demonstration class of the materials was conducted in Ottawa with Local Junior High School Students along with Canadian Senators and the Federal Health Minister. The SBMH program manager attended meetings in Ottawa to initiate national strategies for mental health literacy.

Early Childhood and Perinatal Mental Health (ECAP)

The Perinatal team has been involved in the Calgary Zone Perinatal Mental Health strategy roll-out. The team has also focused on the involvement and treatment of partners in acknowledgement that impacting whole-family wellness is a crucial component in the well-being of the babies.

Research

A five year investment by the ACHF will create an innovative academic care site in a community-based setting, which will be transformational for families, clinicians, and researchers in Calgary. Across various departments and faculties at the University of Calgary, and under collaborative leadership through the Mathison and Owerko Centres, this integrated research program. The Centre will bring together internationally renowned researchers who examine anxiety and depression from a variety of perspectives, ranging from neural circuitry involved in depression to policy-level research, to craft an integrated research program.

David Cawthorpe - AHS Research/Evaluation Coordinator – Prof. (Adjunct) Psychiatry/CHS
CanREACH is now being developed for provincial implementation.

Elements of Performance II: Extension of Elements of Performance I, to study Outcomes of adolescents treated involuntarily under the Mental Health Act for the WPA Thematic Conference on “Coercive Treatment in Psychiatry: A Comprehensive Review”
Ethics ID-189-58

Mental Health Literacy in Schools, \$678,012
Principal Investigator. June 2013-November 2018:

Private Donor via Alberta Children's Hospital Foundation: Principal Investigator (REB14-0554). CANREACH Primary Pediatric Psychopharmacology Program, \$406,224 Principal Investigator. June 2013-March 2019: Private Donor via Alberta Children's Hospital Foundation: Principal Investigator (REB14-0566). Effect of groups (family and patient-focused) on re-admission rates - ongoing Description of ACES impact of flow, etc.

CAAMHPP strategic planning committee
ACES too high working group and advisory committee

CAAMHP (PES, OCD, CDTP)

PRIHS Research Project – implementation begins 2020 with partnership between CAAMHP and Emergency Department, ACH, Calgary; Emergency Department, Stollery Children's Hospital and Addictions & Mental Health Services, Edmonton to improve the mental health patient experience in acute care.

Valuing Mental Health Grant: Peer Support Feasibility Research Project – creating a Peer Support Program based ED, ACH with Psychiatric Emergency Service and Acute at Home Program starting fall, 2019.

ACES Too High Project: Connection in the Community – development of new pathway for emergent mental health services for families presenting with multiple adverse experiences and previous involvement with mental health services starting fall, 2019.

Calgary Eating Disorder Program (CEDP)

The current list of research projects:

- The CEDP: Referrals, Knowledge and Perception Patterns (Phase II)
- Physical and Psychological Characteristics of Adolescent with Typical vs Atypical AN
- Adverse Childhood Experiences and Eating Disorders
- Evaluation of the CEDP FBT Outpatient Treatment Program

- Treatment Development Study of Family-Based Treatment for Atypical Anorexia (FBT Atyp-AN)
- An Open Trial of a Novel Family Based Treatment for Avoidant Food Intake Disorder (FBT ARFID)
- Application of Ecological Momentary Assessment to Adolescents with Anorexia Nervosa (FBT EMA)
- Evaluation of CEDP Day treatment program
- CEDP Registry - Longitudinal health outcome study
- Case Validation Study of Anorexia Nervosa
- Anorexia Nervosa in Adolescents: A Multi-Modal Imaging Study of Epigenetic Mechanis

Pediatric Consultation Liaison (PCL) Clinic/Somatic Rehab Clinic (SRC)

Awareness of the Relationship between Emotions and Physical Symptoms in Youth: The Development and Validation of the Understanding Your Physical Symptoms and Emotions Questionnaire:

This study is to validate a questionnaire that was developed for the Somatic Symptom patient population. Participants will be recruited from the Somatic Rehab Clinic (SRC) at ACH. It is a multi-site study with BC Children's Hospital, The Hospital for Sick Children in Toronto, & Children's Hospital of Eastern Ontario.

Several members of the YCSP team will be presenting at the Canadian Academy of Child & Adolescent Psychiatry conference in Quebec City in September 2019.

Dr. T.C.R. Wilkes – Research Sept 2018 – Aug 2020, Neighborhood Income Inequality and Maternal and Child Mental Health in Calgary, Principal Investigator: Dr. R. Pabayo, Co-Investigator: Dr. T.C.R. Wilkes, M.S.I. Grant #896

Future Plans

- There are many future plans for CAAMHPP but particularly important is the early intervention of the School Based Mental Health (SBMH) and Mental Health Literacy.
- Begin work on the development and roll out of evidence based Elementary Mental Health literacy resources.

- Continue to support post-secondary mental health collaboration.
- Continue work on the Indigenous Mental Health Literacy Curriculum.
- Examine evaluation methods for school based mental health services.
- Begin to manage www.teenmentalhealth.org and align this well visited and respected site with our existing online mental health training.

Forensic Psychiatry

Dr. Ken Hashman, Deputy Head & Section Chief Forensics

Overview of 2019

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 pretrial assessments of an accused's fitness to stand trial and assessments of criminal responsibility, mental health circumstances around infanticide, pre-sentence risk and dangerous or long-term offenders. We also perform assessments mandated by the Youth Criminal Justice Act.

The Forensic Assessment and Outpatient Service provides community-based outpatient assessment and treatment of adults mandated by the legal system.

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.

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 (UFT) or not criminally responsible by reason of a mental disorder (NCRMD).

Two rehabilitation homes, the Lighthouse (6 beds) and Bright Harbour (4 beds) allow people who are found NCRMD to gradually reintegrate to the community, depending on their mental stability and safety of the community.

Highlights

Forensic Psychiatry Subspecialty (Dr. Morrison – Program Director):

- With the formal recognition of forensic psychiatry as a subspecialty, we are currently in the process of obtaining accreditation for subspecialty training in forensic psychiatry. Minor revisions to our application have been requested by the Royal College which have been forwarded to PGME at the University of Calgary and will be sent to the Royal College by the end of October, 2019. We are hoping to have our sub-speciality training program formally approved for July 2020.

Access Improvement Measures

- Given the demands on our service for court-ordered assessments and treatment of mentally ill individuals in custody, as well as the increase in individuals who are NCRMD, we worked with Alberta Health Services and our stakeholders to optimize efficiencies in our service and enhance capacity. As part of this process, the Southern Alberta Forensic Psychiatry Centre (SAFPC) took part in the Access Improvement Measures (AIM) quality improvement initiative with some success. The team started by brainstorming the improvement project discussions already underway at the site; AIM works under the mantra of “those that do the work, change the work.” This provided the team direction, processes that needed to be mapped, gathering pertinent current data, and determining new data to be collected.
- From a foundation of data and statistics, the team developed their “aim” (team goal). The initial aim for the team was stated as “SAFPC will reduce the assessment stream patient’s average length of stay from 42 days to 30 days by December 1, 2018”. With a goal in mind, the team could develop different process trials to meet their goal using a Plan-Do-Study-Act (PDSA) cycle approach.
- The biggest win during the Centre’s AIM work was tracking the nursing history start time and comparing same to the average length of stay (ALOS) of the patients. The nurses focused on, starting all nursing histories within 72 hours of the patient’s admission, allowing the other downstream team members to start their work with the patient sooner.
- In July, 2018 the Centre was showing an ALOS of 65 days (all demand streams), at the end of the formal “72-hour nursing history” trial in November, 2018 and the Centre showed an ALOS of 36 days (all demand streams). That is a decrease in ALOS of 29 days (45% reduction). There were potentially other contributing factors noted by the team but they determined it was worth pursuing on an ongoing basis.

- Secondly, the Centre found great value in understanding the demand streams independently of each other. They started to track the demand streams by pre-trial and pre-sentence to better understand the impact/need of each service type. For example, dividing the above noted data by demand stream, the Centre saw pre-trial ALOS drop to 33 days.
- Overall the team described the work as intense but worth it. The Centre has always had a focus on quality improvement; AIM has provided a framework for their continued QI work.

Research

Research on Restorative Justice Interventions in a Not Criminally Responsible on account of Mental Disorder (NCR-MD) Population (Dr. Sergio Santana):

- In forensic mental health, the development of programs aiming to facilitate the recovery process (secure recovery) while maintaining a safe environment and protecting the public has become increasingly relevant. In the NCR-MD population, family interventions resonate well with the recovery outlook, as their violence whether directed to relatives or non-related victims, deeply affect their families. Indeed, repairing the damage inflicted to their primary support system by the NCR-MD appears to be important in their recovery and to produce positive outcomes for both victims and perpetrators. In this respect, Restorative Justice (RJ) practices are gradually emerging as significant elements in the recovery process of forensic patients and their families.
- To research the benefits of working with families, the outcomes in general and violent recidivism in particular in the NCR-MD population, a sample of NCR-MD from Southern Alberta that engaged in Restorative Justice (RJ) is being compared to those patients that were not involved in this type of intervention.

- Preliminary results suggest that involving the families of the NCR-MD population in the recovery of their relatives decreases length of stay and reduces violent recidivism. Furthermore, it may also have the potential to reduce auto-destructive tendencies in the NCR-MD population.
- Finally, accessing the natural resources of the NCR-MD population appears to compensate for the lack of professional resources, as Southern Alberta has a fraction of the resources available in Northern Alberta and our length of stay is significantly lower as are our rates of violent recidivism.

Future Plans

- To obtain funding for video-recording equipment to facilitate further research in families of the NCR-MD and to further develop therapeutic interventions facilitating recovery
- To obtain funding to complete data analysis of gathered data

Geriatric Psychiatry

Dr. Suparna Madan, Section Chief Geriatrics

Overview of 2019

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

Unit 48 at Rockyview General Hospital (RGH) is a multidisciplinary, 22 bed unit that is typically full to capacity. It is the only designated acute-care geriatric psychiatry unit in southern Alberta. This past year, the Unit 48 garden has been a successful venture to engage patients in activity and reminiscence.

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, subacute facilities, long-term care & assisted living facilities, Primary Care Networks and Seniors Health Programs. Community based mental health teams are

available to assist seniors with substance abuse issues, chronic illnesses (including those on Community Treatment Orders) and mood disorders. Outreach support is available for frail elderly who reside independently in the community.

The Geriatric Mental Health Outreach Team at RGH, comprising two full time nurses 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.

To accommodate changing demographics, our Community Outreach Service and Acute Inpatient Unit now service patients aged 70 and above (and those aged 65 to 69 with frailty).

Announcements

The section is happy to announce that the Royal College has accredited the Geriatric Psychiatry Residency Subspecialty Program at the University of Calgary.

The biannual de Vries-Mason Trailblazer award recognized Pat Rowe in 2019. Pat is a nurse with over 45 years of experience, ranging from leadership to frontline positions. In addition to being instrumental in the development of our Mental Health Consulting Service, she has been actively involved with teaching of nurses, allied staff and residents.

A resident Boot camp to prepare for the mandatory 6 month Geriatric Psychiatry rotation was well received last year and continued again in 2019 with the support of the clinical faculty.

Highlights

- We were pleased to recruit Dr. Dallas Seitz to our GFT faculty. Dr. Seitz interest in improving service delivery in rural locations and systems research, in addition to his leadership involvement with national organizations and will be an asset to our section.

Unit 48's garden (photo right)

Research

Dr. Ismail continues his research program focusing on 2 primary areas:

- Early detection of dementia with clinical, imaging, and biomarkers validations of Mild Behavioural Impairment (MBI) as a pre-dementia syndrome
- Assessment and management of agitation in dementia.

Ongoing studies include:

- A 7 1/2 year study of cognitively older adults using MBI and biomarkers to predict and monitor cognitive decline.
- PARADIGM - a 3 year study of neuroimaging and biomarkers of MBI.
- COMPASS-ND - Canada's national brain aging observational cohort study.
- S-CitAD - randomized double blind placebo-controlled trial of escitalopram versus placebo, in addition to a psychosocial intervention for agitation in AD.

- StaN (systematic treatment algorithm for agitation in AD) is a 12 week study validating an integrated care pathway for management of agitation, which includes extensive non-pharmacological interventions, measurement based care, and a-priori pharmacological algorithm.
- A3C study - validating newer measurement approaches to agitation in AD, validating the new IPA agitation definition.
- NAB-IT (nabilone for agitation in AD) - an RCT for a synthetic cannabinoid for agitation in AD - to start in the fall.



Funding for these and other studies has come from CIHR, NIA, Alzheimer's Drug Development Fund, Brain Canada, and CABHI. Additionally, Dr. Ismail participated in the development of the upcoming IPA criteria for Psychosis in Neurocognitive Disorders, and the ISTAART research and biomarker criteria for psychosis in AD.

Dr. Ismail is co-chairing the Canadian Consensus Conference on the Diagnosis and Treatment of Dementia, which is generating the next iteration of Canada's dementia treatment guidelines (due this fall), and is Chair of the Canadian Conference on Dementia, which will be held in Quebec City on October 3-5 2019.

Outpatient Psychiatry Services

Community and Rural North

Dr. Izu Nwachuckwu

MB, BS, DCP, M.Sc., MRCPsych (UK), CCST (Ireland), Pg. Dip (Scotland), FRCPC

Fellow Royal Academy of Medicine in Ireland

Section Chief, Community Outpatient & Rural North, AHS, Calgary Zone

Clinical (Asst.) Professor, Cumming School of Medicine, University of Calgary

Overview

It has been quite an eventful year with practically all of our community mental health programs involved in an ongoing service wide redesign project. As outlined in my last year's report the final outcome of this project will be a well-coordinated set of outpatient clinics and programs that are optimally aligned and integrated with each other to ease flow and improve efficiency. The pre-existing catchment area policy will be removed meaning that patients can access services from a community clinic of their choice, in a timely manner, based on the most appropriate level of care as determined by their specific needs. Transitions of care between programs will be as seamless as possible, with inbuilt provision for a warm hand over of care for the most vulnerable patients. Continuing close collaboration with Primary Care Networks, Allied Community Partners and Psychiatrists working in private practice will ensure a harmonization of care standards and an enhanced overall capacity of the mental health ecosystem across Calgary Zone.



standardization of care and providing client centered, time limited and goal focused treatment. While Phase I included four community clinics, Phase II extends to all 17 urban outpatient clinics. In June and July of 2019, Implementation Teams, including staff and physicians, met to review key components of the project, focusing on access, mandates, transition/discharge, community collaboration and evaluation. Representatives from PCNs and patient advisors also participated. Since gathering feedback from stakeholders, recommendations have been reviewed and will be

included in the Adult Outpatient Services Operating Manual. When complete this manual will guide the practice of staff and physicians in outpatient services across the Calgary Zone. It will ensure standard practices, consistency and streamlined services for clients regardless of which service they are connected to. A town hall will be held on November 4th, 2019 to share information about the redesign project and next steps. Communication to key community stakeholders will follow, to ensure they are aware of the emergent clinic design, processes and transition plans. During the roll out, clinicians will have access to support and training as they adapt the new processes into their routine practice.

Highlights

Outpatient Services Redesign Project

The Phase II of the Outpatient Redesign Project is near implementation. Phase II goals focused on increasing access to services,

Primary Care and Mental Health

Effective collaboration between primary care practitioners and mental health services

is essential for the efficient delivery of quality care to patients in the community. In Calgary Zone, the central hub for developing and coordinating strategic initiatives at this interface is the Primary Care Mental Health Working Group. This Group, comprising of leaderships of A&MH and PCN in Calgary Zone, is currently working on several projects, including:

- The Access Wheel Project – a compendium of resources available to Family Physicians for accessing direct input from psychiatrists, sometimes in real time, for the purpose of providing care to their patients
- Promoting the recognition and penetration of the Specialist Link Program
- Coordinating Primary Care response to the Opioid Crisis
- Development of Clinical Pathways – starting with Depression
- Evolving initiatives in the Shared Mental Health Care Program
- Development of Accredited Educational Videos for PCNs
- Development of an Educational Program for Eating Disorders

A&MH Calgary Zone has also been active in engaging Allied Community Programs and Agencies who are invested in and committed to supporting mental health patients and their caregivers in the community. These collaborative efforts will enhance the continuum of care, provide much needed additional resources for psychosocial rehabilitation in the community and help alleviate some of our capacity issues.

Perinatal Mental Health

The last meeting for the Perinatal AMH Advisory and QI Committee wrapped up in September 2019 with the completion and approval of the Calgary Zone Perinatal AMH Strategic Plan (final draft).

Key outcomes for this project include:

- Increasing the scope of Access Mental Health to serve as a central access point for perinatal clients and to systematically and reliably identify perinatal clients
- Reconfiguration of outpatient perinatal services as part of the Outpatient Service Redesign Project to:
 - ❖ Develop or enhance capacity at the four urban A&MH Community Clinics with each offering perinatal services with trained clinicians and access to psychiatry
 - ❖ Develop capacity at the Addiction Centre to treat perinatal clients with complex concurrent disorders
- Standardize perinatal screening and assessment practices across outpatient AMH services in the Calgary Zone
- Standardize evidence informed interventions across outpatient services in the Calgary Zone

Longer term objectives for this project include:

- Improving healthcare providers' knowledge, attitudes and practices regarding care during the perinatal period across the continuum of care
- Planning and monitoring perinatal A&MH services over the long term to understand their contribution to improved perinatal health outcomes

The draft Calgary Zone Perinatal AMH Strategic Plan will be presented to the Executive Management Team for review and endorsement at its November, 2019 meeting.

Engagement of Private Psychiatrists

In the spring of 2019, psychiatrists working in private practice were invited to a meeting with the Department of Psychiatry. A representative of the Primary Care Network leadership as well as representatives from three of our major allied community partners also attended the meeting. This round table aimed at galvanizing the principal actors in our community mental health ecosystem to recognize the common goal we share in promoting recovery, fostering resilience and enhancing the autonomy of mental health

patients in the community. The meeting provided an opportunity to familiarize our community partners with the ongoing Outpatient Services Redesign Project and to educate private psychiatrists on the various recovery and rehabilitation programs available within and outside of Alberta Health Services. This meeting was well received on all sides, with all parties excited at the prospects of more collaborative ventures in the future in furtherance of this objective.

Rural Clinics

Ensuring best standards of care in our rural/urban communities remains a strategic priority. There have been several evolving initiatives during the past year to provide increased access to subspecialty services at rural clinics. We are also well underway to streamlining access to rural clinics with a centralized triage system through Access Mental Health in Calgary. These efforts will continue in the coming year.

Neuromodulation Treatments for Depression

We are delighted to welcome the recent availability of outpatient ECT and rTMS treatments for patients with treatment resistant depression. Early signs indicate that the uptake of these services has been good and that treatment outcomes have also been encouraging. While outpatient ECT will be available at all four acute care centers, rTMS is only available at Foothills and Rockyview Hospitals for now. The introduction of rTMS in particular has been a welcome addition to the menu of options available to clinicians in the management of treatment resistant mood disorders. It is

hoped that these services will become more widely available over the coming few years, of course contingent upon availability of necessary resources to support their gradual roll out.

Integration of Police & Crisis Team (PACT) and Mobile Response Team (MRT)

The MRT program has undergone considerable changes over the past year. The program now provides a consultation role to Calgary Police Service (CPS) officers who call MRT when they have a mental health related case, especially when a Form 10 is being considered. The CPS consult line rollout started in October of 2018, one district at a time, at a deliberately slow pace to allow for initial process issues to be worked out and to ensure that MRT staff have sufficient time to adjust to what was expected to be a major change in their work practices. As of September, 2019 CPS Districts 1 to 8 have been covered, as have the Arrest Processing Section (APS) and the School Resource Officers (SROs). Figures 1 to 3 below illustrate how the number of Form 10s presenting to Emergency Departments have significantly reduced since the inception of this program.

Figure 1: Call Volume (form CPS to MRT) from October 2018 to September 2019

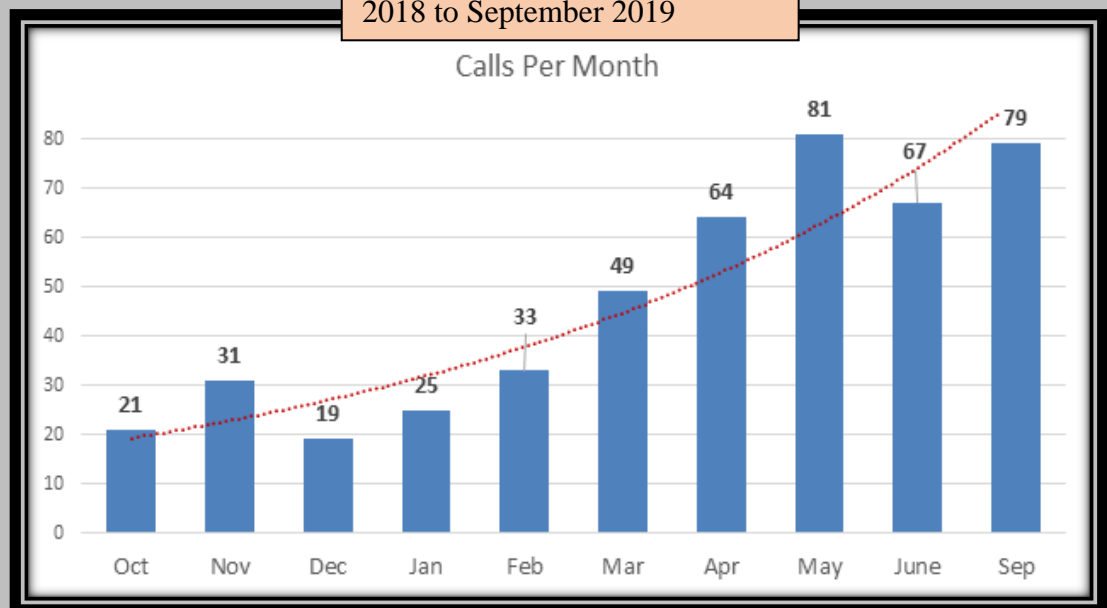


Figure 2: Based on the calls, we either recommend or don't recommend a Form 10 and we do our best to track how many calls result in a Form 10 or not.

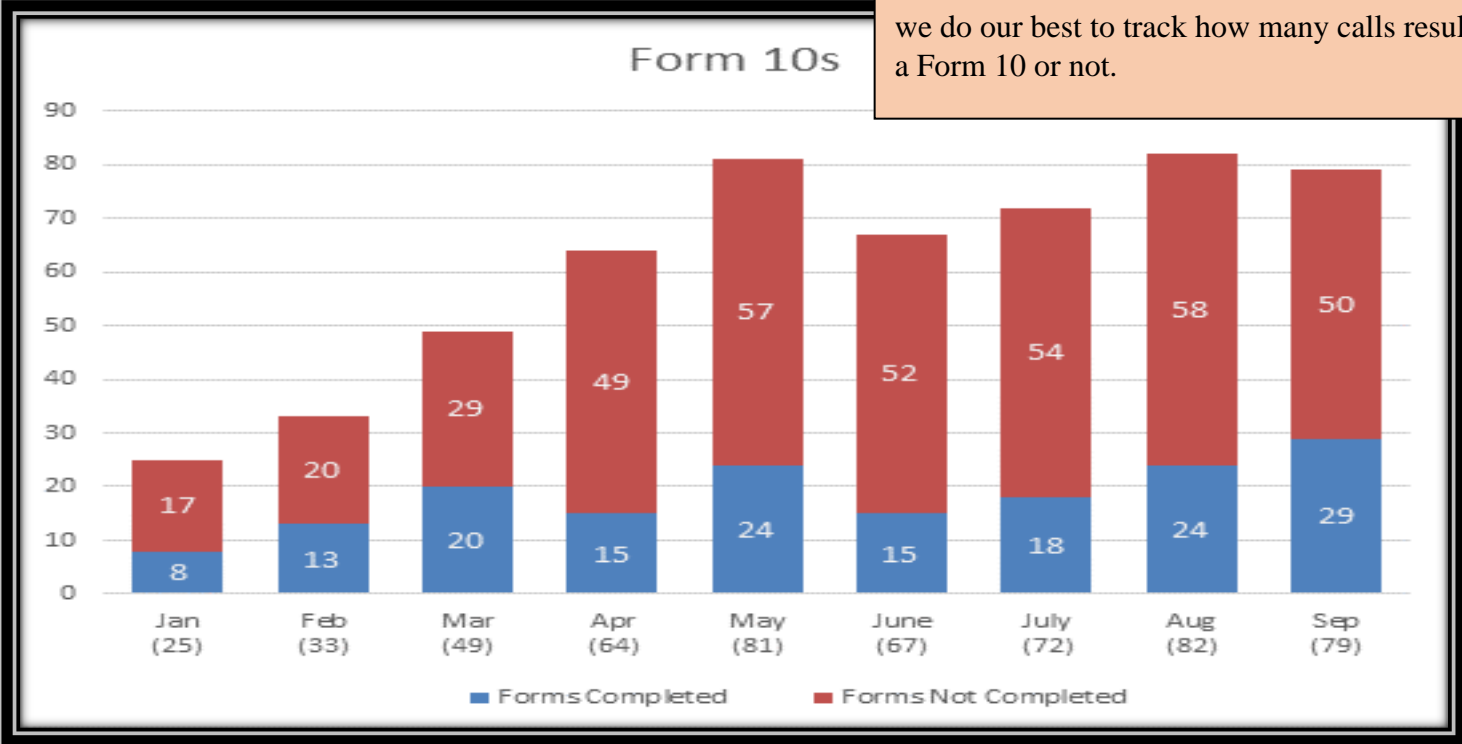
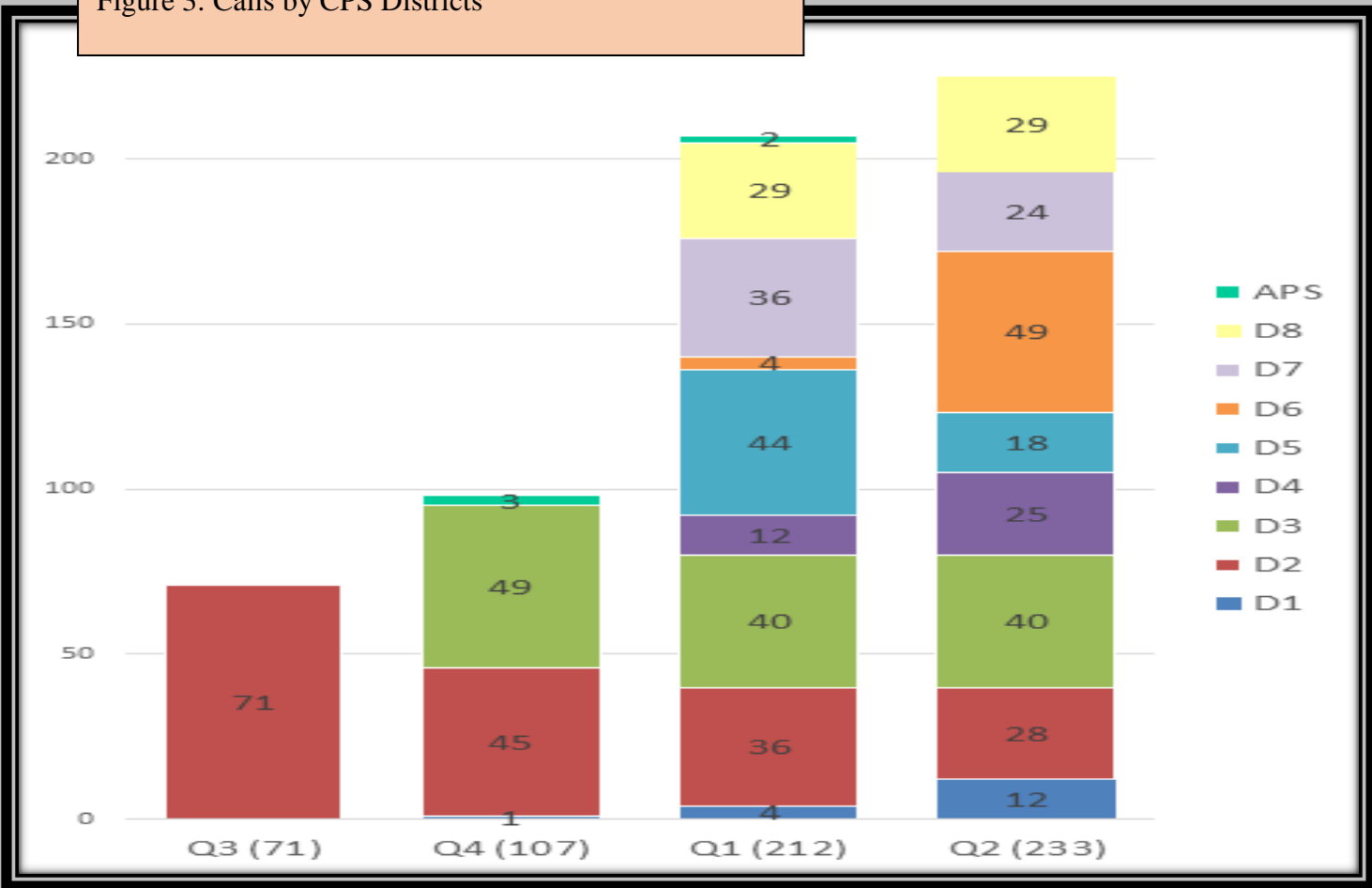


Figure 3: Calls by CPS Districts



The MRT/PACT unit is also currently piloting an urgent psychiatric consultation service. Under this new initiative MRT and PACT clinicians will be able to avail of a psychiatric consultation, by phone or in person, for the purpose of supporting the work of the clinician, assisting with crisis stabilization and when clinically appropriate diverting a hospital presentation. Appropriate referrals would include: clients at risk for quick deterioration that would otherwise require hospitalization, those clients in need of urgent medication recommendations, clients presenting with new onset psychosis, mania, or other risky behavior that is likely to further decompensate quickly if left in the community. This MRT/PACT program redevelopment project exemplifies how the synergy from aligning and integrating functionally contiguous programs can lead to improved efficiency, better patient care and enhanced overall system capacity.

Future Plans

Community mental health care in Calgary Zone is at the dawn of a new direction. The ongoing Outpatient Services Redesign Project brings with it lots of excitement and opportunities for improved care for patients and job satisfaction for staff. There will of course be a period of adjustment for staff, some of whose work practices may change considerably over the coming year or so. Adequate attention will be paid to supporting staff all the way until the new practices become embedded across the system.

As I noted in my last report, our greatest asset as an organization remains the exceptionally skilled and dedicated physicians, clinicians and allied staff that run our systems with such great diligence and commendable passion. To our esteemed staff, once again on behalf of our patients and entire community, I say THANK YOU!



Community, Rural South, Addictions & Claresholm

Dr. Tim Ayas, Section Chief Community, Rural & Addictions South

Overview

The division of Community, Rural South and Addiction Psychiatry has multiple components. The Claresholm Centre is the largest component of this portfolio, a 120 bed facility providing treatment of concurrent disorders, active rehabilitation, and transition/extended rehabilitation. The Addictions component is the broadest component, it involves the inpatient concurrent disorder resources at the Claresholm Centre, the Addiction Network at the RGH and FMC, the detoxification centre at Renfrew, as well as, the residential treatment program at the Lander Centre. It also involves the multiple outpatient resources throughout the Calgary Zone including; the Foothills Addiction Centre, Adult Addiction Services, rural addiction clinics, and the ODP/iOAT program at the Shumir. The Community component involves providing outpatient services in south Calgary not linked to a hospital, such as the South Calgary Health Centre. Lastly, the Rural South component seeks to provide addiction and mental health outpatient services to the rural communities south of Calgary including; Vulcan, Claresholm, Nanton, High River, Okotoks, Turner Valley, and Black Diamond.

Highlights

- Hiring of Dr. Yin Fong, a recent graduate in November 2018. She was a short stay unit nurse, then went to medical school in Calgary, and completed her psychiatric residency at the University of Toronto. She had a strong interest in addictions during her residency. She is now working at South Calgary Health Centre, Aventa, and the Claresholm Centre. She's been an excellent addition to the Department.
- Rural areas south of Calgary recently have been granted equal access to child/adolescent services in Calgary via Access Mental Health. This will assist in some patients receiving appropriate care as it has been difficult referring to this service for rural areas historically. That being said, the geographic/financial barriers still suggest that having access via in person or telehealth consultations in their home communities would be preferred.
- Rapid Access Addiction Medicine (RAAM) clinics have benefitted the health care system in Ontario immensely with decreased utilization of emergency and inpatient psychiatric resources. We have decided to potentially open the first RAAM clinic in Calgary via a partnership with Adult Addiction Services.
- Dr. Michael Trew was honored with the Prix d'excellence - Specialist of the Year and Mentor of the Year from the Royal College. Mike has been an excellent mentor for multiple residents and junior colleagues, including myself. A well-deserved honor.
- Due to the opioid crisis, Suboxone has now been removed from special licensure status in Alberta, hopefully to encourage more physicians to consider prescribing this life-saving medication to their patients.
- With the restructure of the addiction services at the Peter Lougheed Centre no longer being under the clinical jurisdiction of this Department, we were able to relocate our skilled clinical resources to both the Rockyview General Hospital and Foothills Medical Centre. This has resulted in more clinical support being available for these two sites.
- Dr. David Crockford has returned to the Foothills Addiction Centre. We are grateful given his extensive historical background in addictions research and clinical expertise.
- Dr. Ayas was pleased to represent the Department's opinion on the pros/cons of the supervised consumption site at the Sheldon Chumir to Calgary City Counsel.

Challenges

- Dr. Shirley Semaka, the hospitalist for the Claresholm Centre, is retiring in December, 2019. We need to find a replacement, preferably two family doctors, who can share this increasingly complex medical population.
- Dr. Ayas has unfortunately required much time off this year due to a traumatic brain injury from a motor vehicle collision.
- Dr. Paul Cameron has reduced his clinical practice significantly. He has been doing the lion's share of clinical rural practice in Black Diamond, Okotoks, High River, and Nanton.
- In this era of fiscal restraint, we are re-evaluating the current contract with the local family physicians for providing services to the Transition Unit at the Claresholm Centre. The Transition unit has not been receiving many referrals the past two years due to the increase in end point levels of care created in Calgary including St. Theresa's and Skypointe.
- Dr. Lemboye and the Okotoks mental health clinic had a mutual parting of ways as it became increasingly difficult for her to maintain regular scheduled clinical hours in Okotoks due to her busy workload in the city.

Research

The Addiction Centre continues to have an Addictions fellowship available to family physicians. Dr. Rob Tanguay and Dr. Sara Meunier have been formulating a fellowship program for psychiatrists (AFC in Addiction Medicine); Dr. David Crockford has now submitted a formal national application for this program to be approved.

The Claresholm Centre recently trained Dr. Qasim Hirani and Dr. Sara Meunier for their six month chronic care mandatory rotation at the Claresholm Centre. To my

knowledge, this continues to be a fairly highly rated rotation by the residents.

Dr. Ayas was the physician lead of the Enhancing Concurrent Capability provincial educational task force, and also co-chairing the monthly Concurrent Capable Community of Practice (a monthly AHS webcast to educate clinical supervisors). He stepped down from these positions due to health issues in June, 2019. His respected colleague in Edmonton, Dr. Krishna Balechandra, kindly offered to accept these positions.

Future Plans

- Recruitment of hospitalists to the Claresholm Centre is a high priority with Dr. Semaka's imminent retirement.
- Recruitment of adult psychiatrists to Rural South.
- Recruitment of child/adolescent psychiatrists to Rural South.
- Recruitment of additional physician resources to the Addiction Network at Rockyview General Hospital and Foothills Medical Centre.
- Re-evaluate the resources required to continue to maintain a transition shared care unit at the Claresholm Centre.
- Inform family physicians in rural South about the recent change to access child and adolescent services in Calgary via Access Mental Health.
- Establishment of the first Rapid Access Addiction Medicine Clinic in Calgary via a partnership with Adult Addiction Services.

Dr. Trew has initiated an Addiction & Mental Health Provincial Team in the development of a Methamphetamine Action Plan within AHS. The Department has already initiated a local committee comprised of Dr. Harpur, Tanguay, Ghosh, Crockford, and Ayas. I am attempting to link these two groups to prevent duplication of resources

Inpatient Psychiatry Services

Foothills Medical Centre

*Dr. Lauren Zanussi
Site Chief - FMC*



Overview of 2019

The Foothills Medical Centre site has had a very busy year. We continue to face the challenges of capacity and overcrowding and are constantly making adjustments to improve access and quality of care.

Within the acute care portion of our site, demand from our Emergency Department continues to be very high and we are continuing to work on the goal of being able to meet the extraordinary demand. We have hired a second position for working in the mornings, and plan to soon have a third position hired for the afternoons. This should lead to fewer uncovered days and improvements in patient care. We are also happy to welcome Dr. Rachel Grimminck to the role of CMD of psych ER services.

Our outpatient units have begun to engage with the process for the phase 2 redesign in order to optimize workflow through the mental health system and improve access to care for our most unwell clients. We are currently in the implementation phase and expect to see the effects of this change in the last few months of 2019.

Our rTMS program is now operational. We have begun to serve the community in providing the provincial standard for rTMS treatments. Combined with our ECT program, we are in position to create a neurostimulation program within the department.

Highlights

We are excited to welcome our new colleagues to work at the FMC. We have recently hired as full-time staff: Dr. Julie Davison, Dr. Paul Ratti, Dr. Jace Durgousoff, Dr. Tom Kim, and Dr. Huntai Kim. We also welcome back a familiar face in Dr. David Gibbs.

We continue to be proud of our role in education, where we are seen as one of the best undergraduate programs in the medical school and continue to innovate in Residency Training with our simulation program.

Future Plans

The upcoming year looks like a very busy one with the final implementation of the phase 2 Outpatient Redesign being among the largest changes. We also expect continued adjustment with staffing after the initiation of the AMHSP payment structure. There are challenges in managing outpatient ECT numbers, standardization of day hospital programming, and the significant busyness in the emergency department. Overall, however, we look forward to the challenges of improving patient care, safety, and quality of life.

Peter Lougheed Centre

Dr. Lloyd Maybaum, MSc MD, FRCP(C)

Site Chief - Peter Lougheed Centre



Overview of 2019

Since our last report, our dedicated team in Mental Health and Addictions continues to do their utmost to deal with capacity pressures across the hospital including; the inpatient units, Med-Psych Unit, Consultation Liaison, outpatient programs and the Emergency Department. While balancing these pressures this team continues to strive towards optimal patient and family centered care. I would like to provide an update regarding some of our initiatives over the past year.

The PLC Day Hospital continues to mature and increase its capacity. In the past year we reevaluated the two-stream model and condensed the model to one stream in an effort to optimize utilization and accessibility. This has resulted in a dramatic drop in wait times for this program. The program continues to accept referrals from inpatient units, Consultation Liaison and Emergency, combining to reduce inpatient length of stay and avoid admissions.

Length of stay data continues to be a helpful feedback tool for our inpatient psychiatrists. Our psychiatrists continue to work, in sometimes challenging conditions, to provide quality care to patients and their families mindful that we are all stewards of the health care system.

Our new follow-up clinic for recently discharged patients from units 25 and 27 is now fully operational. This clinic will allow patients to follow up with a psychiatrist, one with whom they are familiar with (due to their inpatient stay) on a more immediate basis in order to keep them settled in the community until they can eventually engage in more formative outpatient programming.

In another initiative, our version of M&M rounds known as, Educational & Practice Review Rounds has started with an initial review of the Mental Health Act and the issuing of forms. This CME and practice review will continue to improve our quality of patient care and enhance our communications as a team. These rounds should also help us to understand the hindrances and challenges that we face with respect to the safe provision of efficient and streamlined care while following normative practice guidelines.

At the PLC we have also pursued a pilot study regarding the model of weekday psychiatric emergency services (PES) delivery. In our previous model, weekday psychiatric coverage consisted of 4 hour blocks between 8 am and 4 pm resulting in multiple hand overs and changes in psychiatric care. Currently, we are testing a model in which two-psychiatrists are simultaneously covering weekdays from 8 am until 4 pm. There are pro's and con's to this new approach but final analysis at the end of the year should provide guidance with respect to service delivery enhancements in PES.

Highlights

In terms of medical staff, we are pleased to announce that we are joined by new hospital based psychiatrists; Drs. Lindsay Ward and Lisa Walkey but saddened that Dr. Heidi Solty will be leaving PLC inpatient practice. Dr. Nathan Finkbeiner assumed the role of Clinical Medical Director of the Day Hospital.

The staff members at the PLC exemplify collaborative work and do not hesitate to assist and to support one another. It continues to be a joy to work at the PLC and we are proud of our excellent teamwork and commitment.

Future Plans

Our capital planning initiatives including designing a psychiatric ICU to be located in the west wing and a new design for the SSU to be located on the main floor of the east tower are suspended, presumably given the uncertain economic picture in the province. We are hopeful that the new government will adhere to their commitment to invest in Mental Health and Addiction services and that these PLC initiatives will be identified as a provincial priority.

Rockyview General Hospital

*Dr. Lisa Harpur
Site Chief - RHG*



Overview of 2019

Emergency Psychiatry continues to function well. We have added new members to our team and we work closely with the Emergency Department to ensure continued open communication and coordinated care amongst all staff and physicians. We have collaborated to ensure that patients who are seen in parallel clearance are seen by the Emergency physician and medically cleared. Emergency Physicians are always available to support our patients even when they have been admitted to Psychiatry and are waiting for beds. Our temporary Resource Nurse position became permanent seeing patients who are waiting for admission, starting on skill building with them, attending to their needs and those of their families/supports. The team continues to work supportively to assess patients and direct them to the most appropriate service, minimizing admissions to inpatient services, when more appropriate resources are found. ERO is an integral part of the service and we rely on them to help support discharged patients.

Inpatient services (Units 45, 49, Geriatric Psychiatry Unit 48, and the CSU) works to provide patient and family centered care while remaining cognizant of the capacity pressures around the city. Safety on the units, for both staff and patients has been a central theme this year and we have all worked to attempt to create a safe environment. The construction of double doors on all inpatient units was completed as was renovation of the High Observation rooms on Unit 45. The daily CBT/DBT skills group continues to run on Unit 49 and has expanded to Unit 45. A variety of groups are running on Unit 48 for the geriatric patients. Of note, Unit 48 has changed the age mandate and are taking patients over 70 years on their unit (as per Geriatric services within the zone). The Crisis Stabilization Unit (CSU) has now been open just over one year and is functioning smoothly and to capacity 7 days per week. They are fulfilling the mandate and strive to have patients' acute concerns addressed within one to two days. In addition, they have a full follow up clinic two days per week to help support those discharged patients who need some extra support.

The Day Hospital and the Urgent Psychiatric Consultation Clinic (UPCC) continue to work at full capacity to help address acute patient needs while helping with the capacity pressures that we have in both inpatient and outpatient services. We are looking to take feedback from the AIM project to help improve the Day Hospital services and we continue to get positive feedback from patients who complete the program. The UPCC continues to work at an impressive pace and we are able to keep our wait list down. This is an invaluable service to Family Physicians as well as our RGH Emergency Physicians who also refer to the clinic.

We welcomed Drs. McAuley, Weatherbee and Guenther back from maternity leave, and now we say congratulations and farewell to Dr. Rhea Balderston as she heads off on her maternity leave. As well, we welcome Dr. Jadah Johnson who has joined the inpatient psychiatry group.

Finally, the RGH group would like to acknowledge and thank the Psychiatry Residents, who come for rotations in Inpatient, Outpatient, Psychotherapy, Consultation Liaison, and Emergency Psychiatry. They are an integral part of the milieu at RGH. The presence of learners, including clinical clerks, inspires us to be better clinicians, thinkers, mentors, and leaders.



Highlights

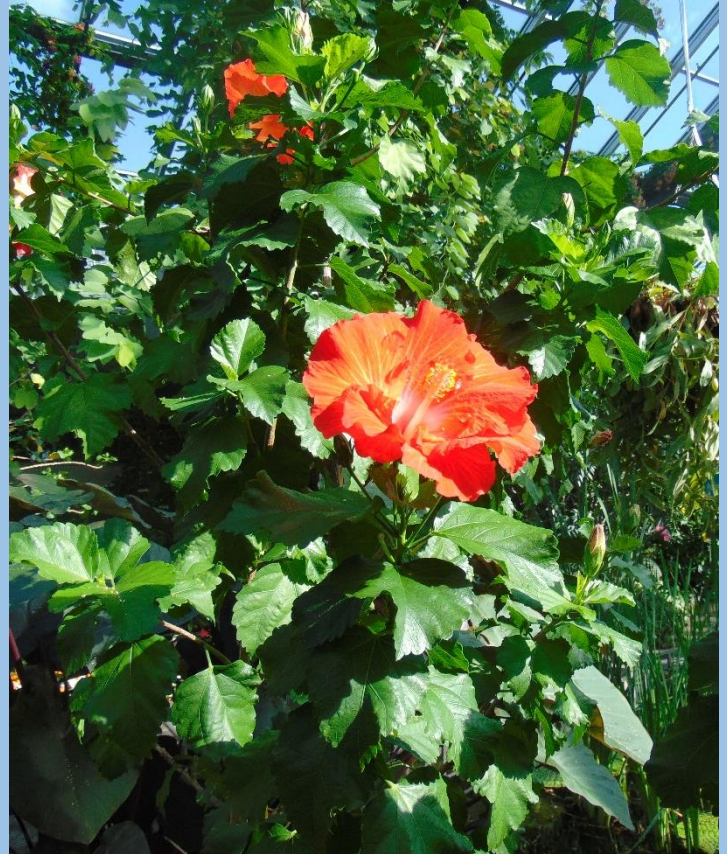
Our new project for RGH this year has been the opening of the rTMS clinic in the end of May, 2019. The Rockyview Health Trust generously donated funds for 4 rTMS devices and the site was very supportive in providing space for the new clinic. We sincerely thank former SOO, Debbie Goulard, and Site Director, Laurie Harding, for their strong support of this new initiative. We were fortunate to have in house training for both RGH and FMC staff and physicians with Dr. Jonathan Downar from the University Health Network and CAMH in Toronto. He provided everyone with hands on training as well as strategies for running the clinics. We opened the clinics with referrals from Psychiatrists only, given that we are still hiring for technician positions.

In the end of September, we will be accepting referrals from family physicians in Calgary. Referrals are centralized and the RGH clinic processes all rTMS referrals in the Calgary zone. Our goal is to help provide a treatment approach for the growing number of patients who are debilitated by treatment resistant depression and hopefully avert a costly hospitalization. To date, we have had many patients who have been able to successfully return to work following their treatment with rTMS. We are collecting data throughout the treatment process as well as at 1 month, 3 month, and 6 month intervals so that our treatment and future planning will be informed by the data.

In addition, as rTMS Clinical Medical Lead for the Calgary Zone, I successfully presented a proposal to the Foothills Health Trust in order to obtain funding for 4 rTMS devices for FMC. The clinical data that we collect from both sites will hopefully help us make a case to the province for increased operational funding and expansion of rTMS clinics across Calgary including the PLC and SHC sites.

Future Plans

For our hospital, we plan to continue to add new physicians as necessary, we plan to continue to help with capacity issues, and we will grow the rTMS service and make a case for additional operational dollars



South Health Campus

Dr. Novin Ihsan, Site Chief – SHC



Overview of 2019

We as a mental health team at South Health Campus (SHC) are heading into our seventh year of operation. It has been an incredible journey of discovery and growth. As with all teams of this magnitude, I receive important help from many caring people on a regular basis whose contributions have made it all possible. I want to start by first acknowledging and thanking my dyad partners in operations, my physician colleagues in management, and each and every psychiatrist and staff on our mental health team in helping us attain excellence together. Your professionalism, dedication and team work make the difference.

Our PES and PORT teams continue to see an ever-growing volume of patients coming through our doors in the south part of the City. Our Inpatient units remain full and show a regular turnover of patients, at the same time balancing a low length of stay with low recidivism rates. We use our PORT team as needed to bridge patients from our PES and inpatient units to resources in the community. Our CL team of five carry a busy workload in meeting the addictions and mental health needs of our medical/surgical patients. Our outpatient wait times remain at two to three months and we informally track our length of stay in this service too so that we can serve a greater patient population in a more efficient manner. Our Urgent Psychiatric Consult Clinic hails the dedication of two psychiatrists and targets a one to two weeks wait time to see an urgent psychiatric consult. Our Day Hospital continues to use a step-up and step-down model, offering a short wait time to help direct traffic away from our Emergencies and Inpatient units when possible.

Future Plans

Our goals for the next year are to stay on top of our inpatient length of stay, optimize the medication reconciliation process on site, keep aggression on our units low, work with the Department to standardize medical coverage on our inpatient units, and work with our site leadership to come up with a way to concurrently manage CL patients when needed. From an outpatient perspective, we want to look at offering more perinatal mental health support in the south part of Calgary. We also want to keep our outpatient wait times low. We welcome opportunities to improve efficiency in inpatient ECT and to establish outpatient ECT and rTMS at SHC in the future. We are also keen in providing more teaching and learning opportunities at SHC for our resident and clinic clerk colleagues.

All in all, we at SHC try to provide excellent patient care in keeping with the goals of the Department of Psychiatry. We take pride in collegiality and the same shows when we produce stats on our length of stay or recidivism or aggression rates. We promote a culture of mutual respect, kindness and work-life balance and support each other as a team, whether it is for work or personal reasons. I am proud to say that staff at SHC try their best to lead by example. Thank you once again to each and every member of our team to help us get to where we are today. I am truly grateful

6. Education

Undergraduate Medical Education

Dr. Nancy Brager, Director UME Psychiatry

Overview of 2019

The UME office has had several key position changes:

- Associate Dean of Undergraduate is now Christopher Naugler
- Assistant Dean Clerkship is now Kevin Busche
- The Assistant Dean Pre-clerkship has yet to be announced

Within our Department, our key faculty remain the same with the exception that Dr. Alex Di Ninno will be covering both pre-clerkship and clerkship evaluations, as our clerkship evaluations coordinator will be on maternity leave. Dr. Huntai Kim will be our new Undergraduate Coordinator for Child and Adolescents, replacing Dr. Waqar Waheed.

Highlights

The major change for us starts this year is that Course 7 will run in December not January as part of the process to shorten pre-clerkship in order to lengthen clerkship. Further to this, our clerkship will be split 4 weeks adult and two weeks C & A. We will have one exam but the two rotations may be split. The additional time in clerkship will allow for more electives, time off for CaRMS and better vacation timing.

Elective diversity (maximum 8 weeks electives in one specialty) is being introduced.

Our Psychiatry Electives are oversubscribed. We are now asking students to complete a survey to help filter out those students who are genuinely interested.

We are fortunate to have continued Departmental support during these difficult financial times, as well as, we have strong and dedicated faculty. We remain the most highly student rated pre-clerkship and clerkship program. Our Psychiatry Interest Group remains very active and is a significant source of recruitment.

A Mental Health Survey was completed of undergraduates at the Cumming School of Medicine, as part of an international study. Poster presentation at the WISHES symposium and the article “Wellbeing and mental health amongst medical students in Canada” was just published.

Future Plans

The budgeting cuts will be one of the greatest challenges to Undergraduate Education. Details of the reduction in funding from UME is not yet known. Strategies to manage these cuts are yet to be determined.



Postgraduate Medical Education Program

Dr. Greg Montgomery, Director PGME Psychiatry
Pauline Burgess, PGME Psychiatry Coordinator

Overview of 2019

The residency program is well into the process of preparing for the Royal College's Competence By Design (CBD) model of residency education (including around assessment and feedback for learning), which launches July, 2020. In addition to a Grand Rounds presentation in September of 2019, key teaching faculty participated in a departmental workshop on the topic in mid-October. A pilot run of the E-Portfolio format and Entrustable Professional Acts (EPAs) will occur in early 2020 to familiarize inpatient preceptors with the workplace based assessment process. An overarching CBD lead, Dr. Rory Sellmer, is in place and we have recruited Dr. David Crockford for the Assessment Lead. Academic Advisors for the incoming PGY-1s will be selected in early 2020. In lead up to planning for the July, 2020 rotations, this winter we will continue to review the competencies provided by the Specialty Committee to determine if future rotation schedules may need to alter sequencing or content.

In the summer of 2019, PGY-1 residents participated in two simulation events set in the context of their emergency psychiatry teaching and on-call preparation training. PGY-4s will participate in a department-only simulation event over two half days to prepare them for rare but serious scenarios that may arise in practice. The development and implementation of simulations will become an integral component to accomplishing many of the expectations in the Entrustable Professional Acts (EPAs) within the CBD framework; it is vital that we continue to cultivate the use of simulations.

Ongoing evolution of the delivery of our academic curriculum remains a key priority overall including different structures for learning such as off-site visits, flipped classrooms, integration of OSCEs into seminars and a bolstered psychopharmacology curriculum in PGY-1 to better prepare our residents for the beginning of their core adult inpatient rotations at the start of PGY-2. These changes are supporting and aligning with the CBD format.

First year residents requested more learning around the various encounters that are seen in the Emergency Psychiatry setting. In addition to the simulations, the program ran its third year of summer teaching for the PGY-1s in this area. We also continued the summer 'refresher' course for the PGY-2s on this topic in addition to a series of STACER preparation sessions.

Residents are distributed equitably for regular rotations to all five acute care sites across the Calgary Zone, as well as, using our community based clinics regularly including, the Alex Youth Centre that has expanded to take additional Shared Care rotations. New Outpatient rotations at the Chumir and in Cochrane will provide residents the opportunity to explore learning in community-based settings.

In preparation for the external review in 2022, all U of C residency programs are undergoing internal reviews; the Psychiatry program had its review on October 25, 2019. As per protocol all program policies surrounding residency training, as well as, the Terms of Reference for the Residency Program Committee were updated in the period leading up to the review.

Faculty with an interest in medical education and global health continue to work with residents that have a similar interest to establish medical education collaboration with a medical school in Tanzania. Two departmental faculty and four residents are travelling in November, 2019 to continue this work and the consequent research.

Highlights

In regards to outgoing and incoming residents in the recent academic year, all eight residents were successful at their 2019 certifying exams and remained in Calgary to practice or further their subspecialty training. Of the incoming PGY-1s, a record four residents came from Ontario medical schools and one from Saskatchewan in addition to the three local successful applicants. The continuous strong external numbers (six of eight PGY-1s in Jul 2018 were also external applicants) reflects well on the program's standing across Canada, of which the support from the department's teaching faculty has had a definite influence.

Challenges

We will continue to work with teaching staff to prepare them for the use of Competency By Design with workshops, further Grand Rounds presentations and educational materials, beginning with a revamp of the PGY-1 structure to allow for the first two months of training to be solely in Psychiatry.

Trainees that began in the program July, 2019 and earlier will follow the current format that uses the ITER as a primary evaluation tool, so there will be two educational structures concurrently in use for July 2020 - June 2025.

Research

Residents are expected to present a formal research project by the time they complete their training; this is a requirement of the Royal College Specialty Committee in Psychiatry. The program has worked with the research director to create comprehensive guidelines on achieving this requirement and have provided a handbook to all residents replete with expectations and timelines. Dr. Alex McGirr assumed the Research Director role in September, 2019.



Future Plans

We value innovation in our program, and we continue to develop and enhance various tools to assess residents and our programming. In addition to the third annual OSCE Day, in February, 2019 with a record number of both faculty and residents participating in August, 2019, we received PGME funding through a competitive application process to create simulation cases in direct collaboration with two other residency training programs for late 2019 early 2020.

The program's CBD team will continue to work on developing the infrastructure for implementation of workplace-based assessments in all core rotations as well as implementing a competence committee and a pool of academic advisors.

Fellowship Program

Dr. Cindy Beck, Fellowship Director

Fellowship

2019 has brought many exciting advances in fellowship and subspecialty training.

Dr. Aaron Mackie has continued to work with interdisciplinary colleagues to create a fellowship program in Behavioral Neurology and Neuropsychiatry, and an application for its accreditation by the United Council for Neurologic Subspecialties. The fellowship program will be starting in 2020, and we are pleased to welcome Dr. Kimberly Williams as the inaugural fellow.

Our Geriatric Psychiatry subspecialty program was accredited by the Royal College; congratulations to Dr. Suparna Madan who led this application. Meanwhile, Dr. Denis Morrison and colleagues have submitted the application for the Forensics Subspecialty, and hope to have their training program up and running by July, 2020.

Congratulations to our two fellows who completed their training in June, 2019. Dr. Renee Farrell has an interest in emerging adults with general medical conditions and comorbid mental disorders. With this in mind, she came to us immediately after her residency in Pediatrics, and completed a one year fellowship in Child and Adolescent Psychiatry. Dr. Mansoor Chaudry did a one year Early Psychosis fellowship, and has moved on to a staff position in Saskatchewan. Dr. Ivonne Donoso has also been with us much of this year, and will graduate from her Mood Disorders fellowship in early 2020.



Subspecialty Programs

Child and Adolescent Subspecialty Program

Dr. Sterling Sparshu, Director Child & Adolescent Subspecialty Program

Overview of 2019

In June of 2019 Dr. Huntae Kim graduated from the Child and Adolescent Subspecialty and has begun work in a number of different settings as a member of the faculty. Our PGY-5 residents (Drs. Krystyna Banas and Qasim Hirani) successfully completed their general psychiatry training and advanced to PGY-6. Our program welcomed Drs. Andrew Dutcher and Ashley Pauls into their first year of subspecialty training. August, 2019 marked the retirement of Dr. Waheed from the role of Program Director after years of excellent leadership. I (Dr. Sterling Sparshu) have subsequently assumed this role.

Highlights

The program continues to have a strong interest with far more applicants than we have training spots to accommodate. There also continues to be interest in fellowships.

Challenges

We have an internal review in October, 2020 and continue to work towards Competency by Design (CBD) with a tentative launch date of 2021. This will mean unfortunately mean some replication of work in first ensuring that we are meeting Royal College expectations under one system before transitioning to the next. CBD will require training of preceptors and formation of competence committees.

Education

Subspecialty trainees currently have the expectation of completion of a scholarly project as part of their training. Some residents have already completed these, some are still in progress. We also have funding to support special training experiences and conferences which our residents are grateful for. They have used this for a number of unique experiences which will greatly benefit their future patients (e.g. training in how to administer the ADOS).

Geriatric Subspecialty Program

Dr. Suparna Madan, Director Geriatric Subspecialty Program

Geriatric

The section is happy to announce that the Royal College has accredited the Geriatric Psychiatry Residency Subspecialty Program at the University of Calgary. Plans are underway to recruit a residency program director and invite applications for subspecialty training for the 2020 to 2021 academic year.

Forensic Subspecialty Program

Dr. Denis Morrison, Director Forensic Subspecialty Program

Forensic

With the formal recognition of Forensic Psychiatry as a subspecialty, we are currently in the process of obtaining accreditation for Subspecialty Training in Forensic Psychiatry. Minor revisions to our application have been requested by the Royal College which have been forwarded to PGME at the University of Calgary and will be sent to the Royal College by the end of October, 2019. We are hoping to have our sub-speciality training program formally approved for July 2020.

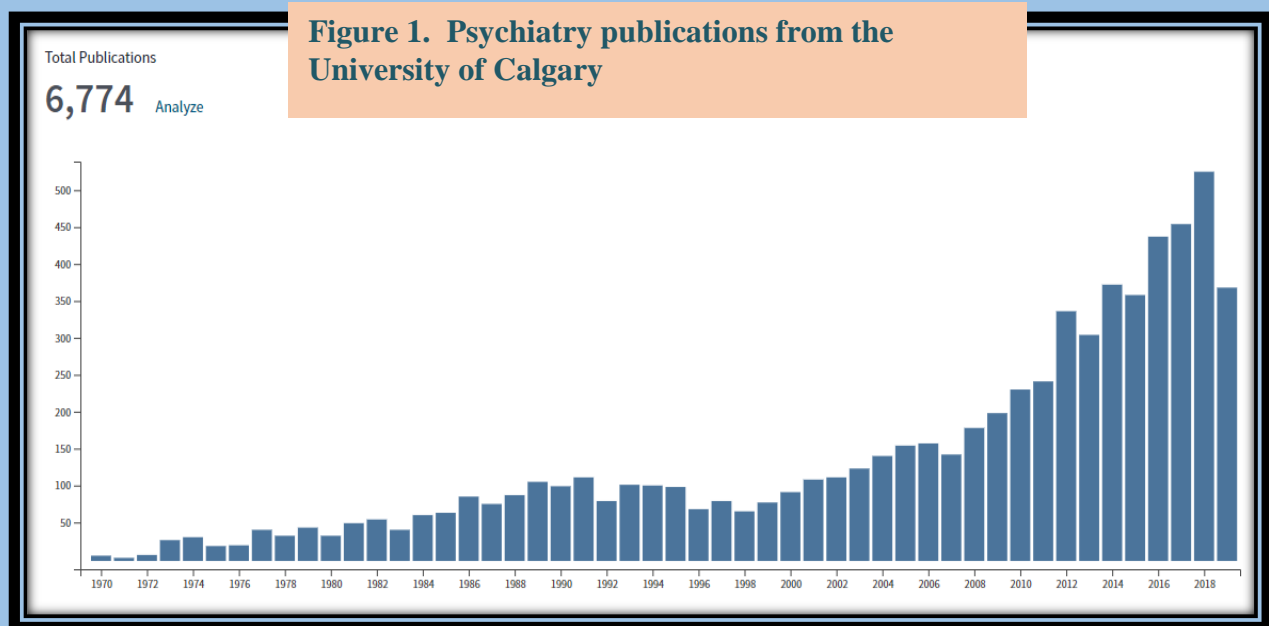


7. Department of Psychiatry Research

Dr. Scott B. Patten, Research Director

The goal of this report is to provide metrics for the Department of Psychiatry’s overall academic productivity. These citation metrics reported here are based on a set of search criteria that, for reasons of consistency, have been repeatedly employed in previous annual reports. A minor modification of the search was employed this year, substituting a wildcard (psychiatr*) for the previous “psychiatry” in the topic and research area searches in order to detect “psychiatric” as well as “psychiatry.”¹ The search was implemented in the Web of Science, a Clarivate Analytics platform. This covers a Web of Science Core Collection, but also Biosis Previews, Korean Journal Database, Medline, the Russian Science Citation Index and the ScIELO Citation Index.

There were two searches. The first identified papers with “psychiatry” under “Research Area” or “Topic” if the word “Calgary” appeared in the title or address fields. The intention of this search was to provide a high level overview of relevant output at the University of Calgary, recognizing that the Departments contributions may be direct (e.g. publications produced by Department members) or indirect (related to initiatives in which the Department participates). Due to the emergence of the Mathison Centre for Mental Health Research & Education, a second search included papers with “Mathis*” and “Calgary” in their address field. Many papers fell into both categories and the presentation of metrics from the searches were not combined to avoid double counting. The search as performed on August 30, 2019. While the graphics presented below depict 2019 publications, it should be noted that the final number for 2019 will not be available until 2020 – these 2019 publications essentially represent productivity in the first half of 2019.

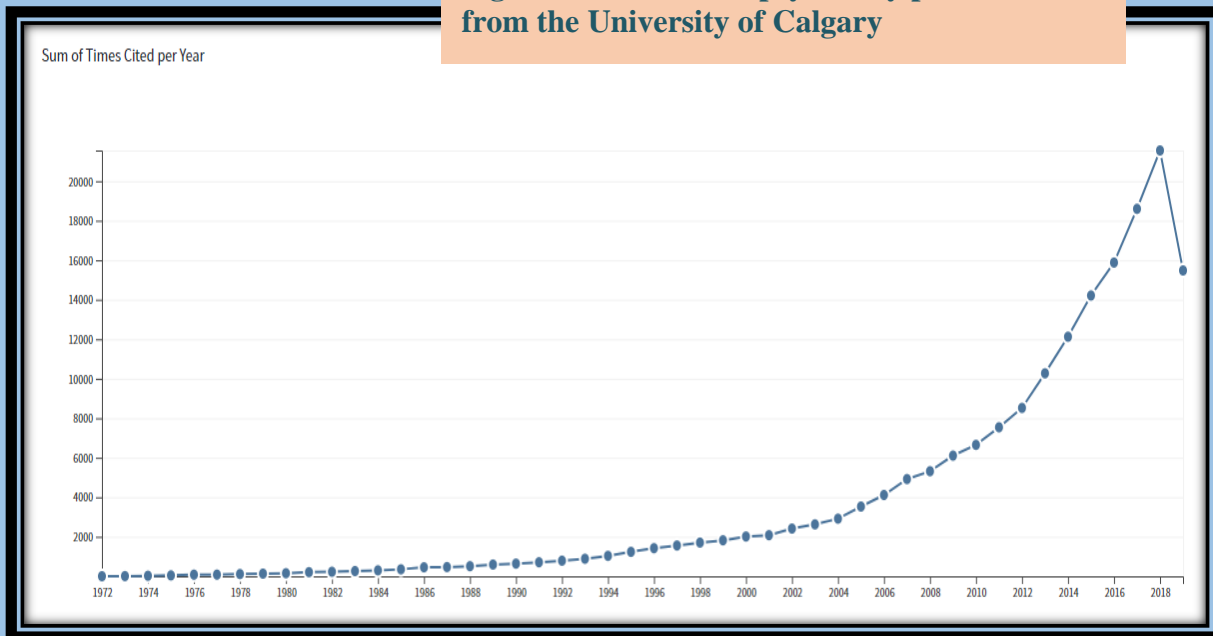


¹ Search syntax: (su=psychiatr* or ts=psychiatry*) and (ti=Calgary or ad=Calgary) timespan: 1970-2019

The 2019 search confirms that the Department of Psychiatry’s research productivity continues to increase. Since 2014, each consecutive year has been the most productive year in the history of the Department. The current search suggests a continuation of this trend. Figure one presents the search output.

The search strategy also allows an examination of citations to the set of publications identified and depicted in Figure 1. This information is presented in Figure 2. The overall number of citations has continued to increase. References to the work arising from the Department in 2018 exceed that of any previous year and the pattern suggests that 2019 will again exceed 2018 – noting that the past year total is nearly equaled with 4 months remaining in 2019.

Figure 2. Citations to psychiatry publications from the University of Calgary



The second category of the search (ad=mathis* and ci=calgary) is of inherent value since it shows the number of papers attributed to the Mathison Centre for Mental Health Research & Education. There have now been 346 papers which specify an affiliation with the Centre, see Figure 3. There is an associated increase in citations to these papers, see Figure 4.

Figure 3. Publications attributed to the Mathison Centre for Mental Health Research & Education

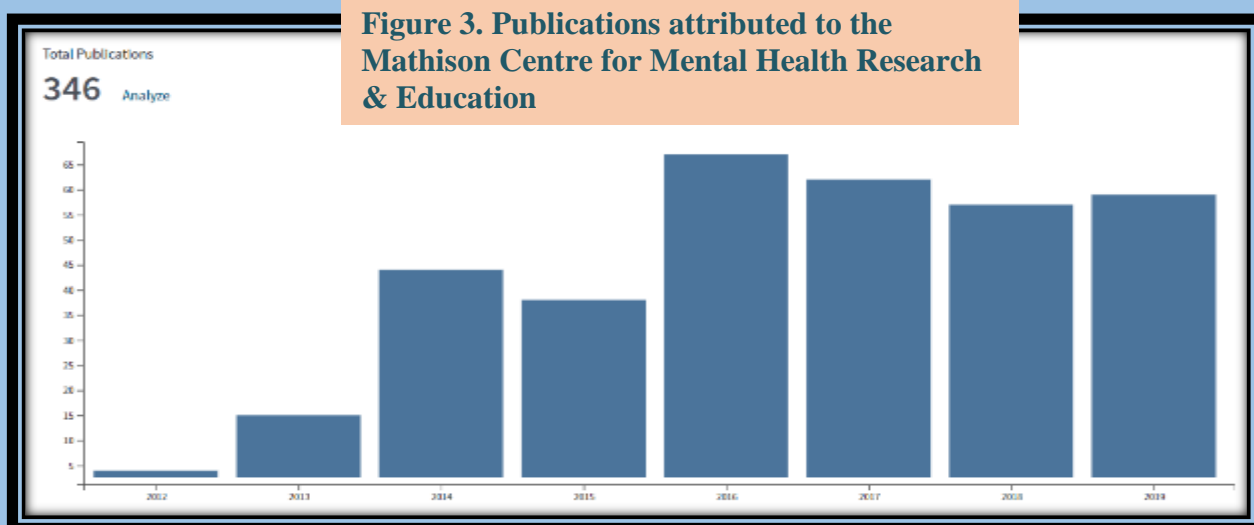
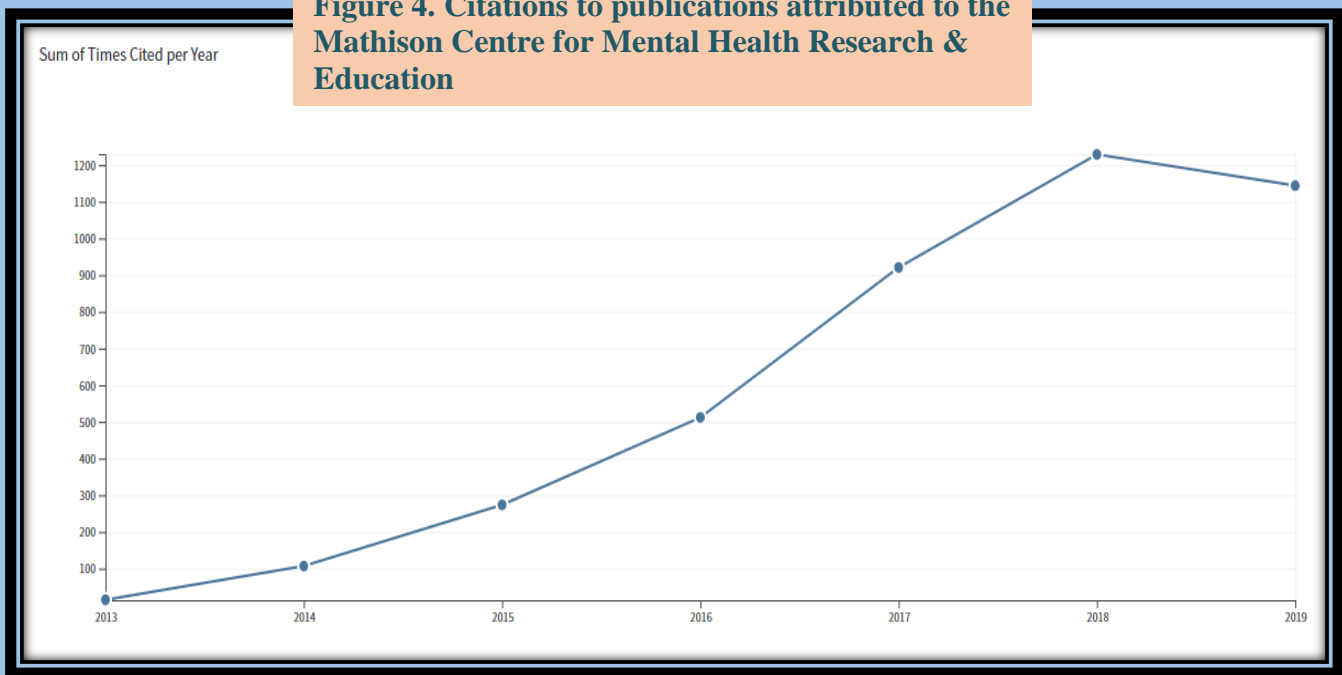


Figure 4. Citations to publications attributed to the Mathison Centre for Mental Health Research & Education



Of the 346 publications detected in the search, there are 12 papers that have been flagged as “highly cited” by the Web of Science. This indicates that they are in the top 1% of papers in their field, accounting for their time since publication.

The biggest challenges for the future involve integrating trainees with Departmental research efforts, since the increasingly specialized nature of research is making it more difficult for them to participate in ways that they find appealing and rewarding. The Department will need to look at new and creative ways to involve its trainees in research. Integration of clinical practice and research in the Department is also still a work in progress, and will be essential for gaining additional momentum. As always, new ideas and technologies are guiding research in new and different directions. An epistemological shift is occurring in health research, which is beginning to move in the direction of supporting more personalized medical care. Research activities related to this shift should be encouraged so that the Department does not fall behind.

8. Hotchkiss Brain Institute

Fifteen Years of Excellence in Brain and Mental Health Research

Dr. David Park, HBI Director

Written by Ms. Brandi Chuchman, HBI Project Manager, Major Developments and Partnerships

The Hotchkiss Brain Institute (HBI) is an internationally recognized academic centre of excellence, in neurological and mental health, with a mission to inspire discovery and apply knowledge towards innovative solutions for neurological and mental health disorders. Since its inception in 2004, and built on more than 30 years of neuroscience research in Calgary, the HBI has operated in partnership with Alberta Health Services and the University of Calgary's Cumming School of Medicine (CSM). The HBI also leads the campus-wide University of Calgary Brain and Mental Health research strategy. This university strategy encompasses over 350 faculty members across nine faculties to provide a unifying direction for brain and mental health research, and elevate the profile and resources for interdisciplinary research in this area of strength.

More than 240 clinician-scientists, researchers, and physicians from across the university are members of the HBI and are dedicated to advancing neurological and mental health research and education. Together with trainees and staff, the HBI represents over 900 people working together towards a shared vision of "Healthy Brains for Better Lives." Key discoveries and transformative clinical research at the Institute are organized within multidisciplinary Brain and Mental Health Teams and build on a springboard environment of NeuroTechnology Platforms. The Platforms provide state-of-the-art equipment, facilities, and technical expertise in areas ranging from MR imaging, to molecular biology, to non-invasive neurostimulation, and more. The HBI provides additional support to its members via:

- start-up funding of new recruitments
- granting competitions philanthropic funding opportunities
- studentships, scholarships and fellowships for trainees
- fostering of local, provincial, national and international research and education partnerships
- hosting events and activities

Further details are available on the HBI website.

HBI Partnership with Psychiatry

The Department of Psychiatry represents 25 HBI members. Many more Psychiatry faculty members are part of the university wide Brain and Mental Health research strategy. Additionally, Department Head Dr. Val Taylor sits on the HBI Executive Committee, which provides oversight and decision making for the Institute's operation. The HBI partners with the Department of Psychiatry in supporting The Mathison Centre for Mental Health Research & Education, which leads basic and clinical mental health research for the Institute.

Future Directions

The HBI will be developing a new strategic plan in 2020, with a focus on the following areas:

- Innovative trainee programs open to all trainees supervised by full HBI members. This includes the Institute's innovative REALISE career development training program, and the interdisciplinary BRAIN CREATE trainee program in neurotechnology that just launched this year. HBI members Drs. Marc Poulin and Richard Wilson lead BRAIN CREATE, with funding from NSERC.
- New programs to support and propel 'high risk high reward' research.
- A Computational Neuroscience Platform for Brain and Mental Health, led by Dr. Joern Davidsen from the Department of Physics and Astronomy, and Dr. Signe Bray from the Department of Radiology. This emerging platform has already received the support of multiple faculties and departments across campus, and is funding multidisciplinary research collaborations, new recruitments, training, and resources in the areas of
 - brain circuit modelling
 - machine learning tools
 - brain-computer interfaces
 - an interdisciplinary graduate specialization training program
- An ongoing commitment to support recruitment of the top upcoming and established brain and mental health researchers who align with strategic areas, including in mental health and healthy brain aging.
- Investments and way finding for our members and trainees to succeed in the rapid translation of their discoveries. The HBI appointed Dr. Lawrence Korngut as HBI Director of Innovation and Commercialization earlier this year.
- Moving towards the adoption of Open Science Principles to build on its involvement in several national Open Science programs and accelerate the discovery and translation process for neurological and mental health disorders, via the public sharing of all research data and methodologies. The HBI recognizes participant privacy and academic autonomy in its adoption of these Principles.
- Leadership in the development of multidisciplinary Grand Challenges that will unite and energize diverse research groups across campus under the banner of the 2020 iteration of the Brain and Mental Health research strategy. The strategy will be undergoing an International Review, led by the Office of the VP (Research), in November, 2020. Brain and Mental Health scholars are also working closely with the Child Health & Wellness cross-cutting strategy that launched this fall.



9. Mathison Centre for Mental Health

Research and Education

Dr. Paul Arnold, Director Mathison Centre

Josephine Adda

Overview of 2019

The Mathison Centre is leading mental health research across the University of Calgary on various fronts. With membership growth to 71, the Centre continues to expand the breadth of research and broaden multi-disciplinary approaches to mental health research at the University of Calgary.

- The Mathison Centre, in partnership with the Owerko Centre, is leading a vision to close knowledge gaps and break new ground in Child and Adolescent Mental Health through a comprehensive program of research that will be based in the new Calgary Centre for Child and Adolescent Mental Health. This partnership with AHS, funded by the ACHF, will enable the integration of clinical services with research that will generate new biological, translational and clinical data that will be used to develop, test and refine interventions.
- We expanded our scope through the addition of the BMH Stress team, whose members engage in basic science research that is generate new insights regarding the biological basis of mental health and mental illness. We have also developed a partnership with the O'Brien Institute to enable mental health research at the population level.
- We are leading continuing engagements with other centres, institutes and faculties across the university in defining priorities and grand challenges in mental health at the University of Calgary. This effort will be pivotal to the development of version 2 of the Brain and Mental Health research strategy of the University of Calgary led by the Hotchkiss Brain Institute.

Highlights

- Our Centre is “punching above its weight” in research citations. According to Clarivate analytics, of 346 publications in which Mathison Centre is specified as an affiliation, there are now 12 papers flagged by Clarivate as “highly cited” (top 1% in their field). This means that 3.5% of Mathison-affiliated publications are in the top 1% of the world literature, or 3.5 times as likely as the average paper to have such a high impact. In addition, three of our faculty are cited as among the top 1% of cited researchers within their fields (Drs. Addington, MacQueen, and Patten).
- The Mathison Centre has received its first Canada Research Chair (CRC - Tier 2) award to support a chair in Clinical Biomarkers in Child and Adolescent Mood and Anxiety Disorders. Recruitment visits are currently underway, and we look forward to welcoming the successful candidate in the coming year.

Research

The Mathison Centre's mandate is to conduct and promote leading research and education on the early identification, treatment and prevention of mental health disorders across the lifespan with a principal focus on the mental health of children, youth and emerging adults. The Centre promotes multidisciplinary approaches through translational research from basic science through to clinical, health services and population health research. By focusing on young people, we strive to make an impact through research and education that will reduce the personal, family and societal costs of mental health disorders.

In the last year, three of our members recently became Canada Research Chairs, including; Dr. Stephanie Borgland (Tier 1, Addiction), Dr. Brandy Callahan (Tier 2, Adult Clinical Neuropsychology), and Dr. Catherine Lebel (Tier 2, Paediatric Neuroimaging), doubling our total number of CRCs to six. Mathison Centre members were successful in securing a number of grants as principal investigators (PIs), co-principal investigators (Co-PIs) or co-investigators (Co-Is). Members and trainees published a significant number of papers and received various awards and recognitions. A selection of these in Grants Section of the Annual Report.

Future Plans

The Centre will continue to build partnerships in the community and grow its membership to further advance mental health research at the University of Calgary. Through strategic engagement with the university community and external partners including AHS, we will affirm our role in leading and influencing the mental health research agenda for the university, Alberta and the country. Our 5 year strategic plan reflects from a high level the future of the Centre. The plan includes:

- Propelling studies into the etiology and pathogenesis of mental health conditions with a goal of identifying factors that determine and influence mental illnesses. Research approaches that addresses the full continuum of determinants from biological mechanisms through to psychosocial determinants will be pursued in this effort.
- Advancing research into efficacious early interventions and treatment of mental health illnesses.
- Leading research that seeks to transform population mental health, enabled by close linkages with Alberta Health Services and community partners.

Building core resources at the University of Calgary (people, systems, infrastructure and data) that are foundational to research in mental health.

10. **C**ontinuing Professional Development (CPD) and Grand Rounds

Dr. Thomas Raedler, Director

Ann Enders, Assistant

Overview of 2019

The multi-disciplinary CPD committee of the Department of Psychiatry resumed its meetings after the summer break. This committee oversees all CPD-activities through our department and meets monthly.

The Fall 2019 Grand Rounds semester began on September 3, 2019. We have a full schedule with 16 scheduled Grand Rounds presentations until Christmas and will cover a wide array of topics. Grand Rounds are being held in room G500 at the Foothills site. Grand Rounds can also be viewed via Telehealth at 17 AHS sites throughout Alberta. As of April, 2018 Grand Rounds are also accessible via Adobe Connect.

In the Spring 2019 semester we held 25 Grand Rounds sessions and we awarded a total of 547 CME credits to 67 participating physicians.

The 2019 Psychiatry Online Literature Review Course (POLRC) 'Highlights of 2018' ran from February, 2019 until June, 2019. Forty-three physicians and residents participated and reviewed 12 articles focusing on general psychiatry, child and adolescent psychiatry, psychotherapy and geriatric psychiatry.

The CPD-Committee contributed to several day-long events including Mood Day in 2019, the Inaugural Susan Carpenter Education Day for Developmental Disability Mental Health, as well as, the upcoming Psychotherapy Day.

Highlights

In March, 2019 we introduced a new format of medical education 'Psychiatry Quarterly Updates (PQU)'. PQU are three-hour sessions that focus on a specific topic. Physicians can earn up to 3.75 Section 3 CME-credits. The first three sessions focused on Alcohol Use Disorder, Psychosis and Trauma and were attended by 100 to 150 participants.

Future Plans

- We will continue to offer weekly Grand Rounds. We will start scheduling Grand Rounds for the Spring 2020 semester in November, 2019.
- The next Psychiatry Quarterly Updates (PQU) are scheduled for November 29, 2019 (Women's Mental Health) and March 6, 2020 (Anxiety Disorders). We are in the process of planning additional PQU-sessions for 2020 and 2021.
- We just started the planning for Psychiatry Online Literature Review Course (POLRC) 2020 on 'Highlights of 2019'.
- As always we are looking forward to suggestions for topics for Grand Rounds and Psychiatry Quarterly Updates.

I am grateful for the support from the Department of Psychiatry, the CPD-Committee and all volunteers who participate in our CPD-activities. I am especially grateful for the ongoing support from our CPD coordinator Anne Enders, who makes all these wonderful educational events possible.



11. **M**ental Health Clinical Trials Unit

(Formerly Psychopharmacology Research Unit)

Dr. Thomas Raedler, Medical Director

Ann Enders, Assistant

Overview of 2019

As part of a rebranding effort, the Mental Health Clinical Trials Unit (MHCTU), previously known as Psychopharmacology Research Unit (PRU), was renamed earlier this year. Despite the name change, the MHCTU continues to focus on conducting clinical trials as a way of finding new medications that will be more effective and better tolerated than the currently available treatments. We also participate in studies looking at new indications for established medications. Despite our attempts, recruitment of subjects for clinical trials remains the main challenge.

Highlights

Over the past year we were able to recruit several subjects for our research studies. We are grateful for the support we have been receiving from psychiatrists and nurses, who have referred subjects for different research protocols.

Research

Over the past year, the MHCTU has participated in the following clinical trials:

- Adaptive Phase II Study to Evaluate the Safety & Efficacy of Sodium Benzoate as an Add-on Treatment for Schizophrenia in Adolescents (sponsor SyneuRx International (Taiwan) Corp; NCT01908192). PI: Thomas Raedler, MD. Co-Investigators: Beverly Adams, MD, Iliana Garcia-Ortega, MD. Recruitment ongoing.
- A phase II randomised, double-blind, placebo-controlled study to evaluate the efficacy, safety, and tolerability of orally administered BI 409306 during a 52-week treatment period as an early intervention in patients with attenuated psychosis syndrome. PI: Thomas Raedler, Co-Investigators: Beverly Adams, MD. Recruitment ongoing.
- An adaptive, phase IIb/III, multi-center, prospective, randomized, double-blind placebo-controlled study of the safety and efficacy of NaBen® (sodium benzoate), a d-amino acid oxidase inhibitor, as an add-on treatment for schizophrenia in adults. PI: Thomas Raedler, Co-Investigators: Rory Sellmer, MD, Beverly Adams, MD. Recruitment ongoing.
- An adaptive phase II/III, double-blind, randomized, placebo controlled, two-part, dose-finding, multi-centre study of the safety and efficacy of NaBen® (sodium benzoate), a d-amino acid oxidase inhibitor, as an add-on therapy with clozapine, for residual symptoms of refractory schizophrenia in adults. PI: Thomas Raedler, Co-Investigators: Rory Sellmer, MD, Beverly Adams, MD. Recruitment ongoing.

- A phase II randomised, double-blind, placebo-controlled study to evaluate the efficacy, safety, and tolerability of orally administered BI 409306 during a 28-week treatment period as adjunctive therapy to antipsychotic treatment for the prevention of relapse in patients with schizophrenia. PI: Thomas Raedler, Co-Investigators: Rory Sellmer MD. Recruitment ongoing.

Future Plans

We were asked to participate in additional clinical trials in ADHD (phase IV) and schizophrenia (phase II and phase III). We are currently working on submitting these protocols to the ethics board for approval.

12. **S**trategic Clinical Network

Dr. Frank McMaster

Overview of 2019

The Strategic Clinical Network for Addictions and Mental Health (AMHSCN) was created in 2012, to enhance the prevention and treatment of addiction and mental health issues in the province, and to provide the best possible outcomes for patients. This has been a very successful year in both building research capacity and in changing clinical practice.

Highlights

- Creation of the Alberta Addictions and Mental Health Research Hub to help connect, support, and provide a competitive advantage to researchers across addictions and mental health throughout Alberta.
- Awarded funding for both the Virtual Supervised Consumption and CanREACH projects (\$2,558,813).
- Support TMS clinics opening in Edmonton and Calgary zones, along with implementation and evaluation working groups to help with scale and spread.
- Continued support for the research community through special funding opportunities (now through the Research Hub).

Research

Virtual Supervised Consumption

Dr. Kay Rittenbach was awarded PRIHS 4 funding for \$914,813 (3-year project) to initiate and study virtual supervised consumption services in Calgary. This first of its kind project will establish the feasibility of providing life-saving harm reduction services over a phone line to people using substances alone. The project team is focused on creating a sustainable model that can be spread throughout Alberta and further.

Substance Use and Addictions Program: Opioids and Pain

Marni Bercov was awarded \$1,219,203 from Health Canada to establish the use of evidence-based care pathways for proper prescribing of opioid pain killers. This funding will support three diverse working groups and the knowledge synthesis and translation that is needed to ensure that patients in Alberta are receiving appropriate and safe care for pain.

Valuing Mental Health Transformation Research and Innovation Fund

The AMH SCN was awarded \$900,000 to administer two grant calls in support of research in Alberta that will close gaps in care identified in the AMH health system review. The recipients of these awards included:

- Dr. Kathleen Chaput from the University of Calgary for “Development of a novel intervention for parent in recovery from addiction: patient oriented research approach”
- Dr. Gina Dimitropoulos from University of Calgary for “Enhancing systems collaboration for high-risk youth with mental health disorders and addictions”
- Dr. Gina Dimitropoulos from University of Calgary for “The role of peer support in the emergency department for youth and their families: navigation to community and specialized mental health services”
- Dr. Laura Evans from University of Calgary for “Evaluation of average maintenance dosing of buprenorphine/naloxone SL in different population groups”
- Dr. Ron Lim from University of Calgary for “Low dose buprenorphine to mitigate the barrier of withdrawal in transitioning a patient from opioid dependence to opioid maintenance therapy in an outpatient setting”
- Dr. Stephanie Montesanti from University of Alberta for “Metis Mental Health First Aid Programs in Alberta”
- Dr. David Nicholas from the University of Calgary for “ Integrated navigational support for children with developmental disability and mental health issues”
- Dr. Lara Nixon from University of Calgary for “ Preparing to scale: improving inner city access to integrated health care and housing supports for adults with addictions and mental health challenges”
- Dr. Robbie Babins-Wagner from the University of Calgary for “Implementation of an outcome measurement in children’s mental health – pilot project”

Future Plans

- Expand TMS into the North and South Zones (PRIHS 5 application submitted)
- Further develop the Research Hub

13. **Quality Assurance, Improvement and Innovation**

Dr. Lisa Gagnon, QA Lead

Overview of 2019

Many insightful, committed and passionate colleagues have been instrumental to this work. Only a few are mentioned below, but all of my colleagues' contributions are greatly appreciated! The focus of Quality Assurance for the Department of Psychiatry in 2019 include:

- medical co-management of admitted patients to Addictions and Mental Health units, which has been identified as a top 12 hazard in the Calgary zone
- chairing and improving the process around Quality Assurance Reviews
- commitment to the Quality Assurance Committee and implementing recommendations
- oversight to the Patient Relations complaint process involving physicians
- the Adult Inpatient Capacity Initiative, with inpatient capacity as a top priority within Addictions and Mental Health
- perinatal mental health service development and planning
- Mitigation of service delivery problems as a result of a recent court proceeding related to the Alberta Mental Health Act

Highlights

Thanks to the collaboration of Dr. Jim Eisner and Dr. Mike Spady, of the Department of Family Medicine, we have finalized the Psychiatric Primary Care Scope of Practice document. This standardizes roles and expectations of the family physicians (called PPC) who provide medical management to patients admitted on Addiction and Mental Health units (on adult sites).

The objective for the Adult Inpatient Capacity Initiative, launched in 2018, is to reduce the boarding in ER, improve flow and transition between ER, inpatient and community resources, and have actual Length of Stay (LOS). Approach, expected LOS and ultimately improve the quality of care given to Addictions and Mental Health patients. Dr. Shawn Currie, Robert Bush and the many frontline staff who participate in this initiative, deserve a great thanks for their time and wisdom. Although we continue to have inpatient capacity pressures, some highlights of the work include:

- Access Mental Health has adjusted their referral processes regarding inpatients
- With the help of the Outpatient Section Chiefs, Drs. Tim Ayas and Izu Nwachukwu, a standard has been set for inpatient and outpatient team communication, outpatient physician coverage and CTO completion, to facilitate discharge from inpatients
- We have engaged the Group Standardization project lead around differences in programming and impact on LOS
- Dr. Val Taylor and Janet Chafe have sent out a memo stating that mental health treatment should begin in the ER

Through the dedication of Kim Frache, Anne-Marie McInnis (funded through a Calgary Health Trust donation) and Aleta Ambrose, the Perinatal Mental Health Strategic Plan has been finalized.

I am delighted that Dr. Michael Trew has joined Dr. Cristin Fitzgerald, our Clinical Safety Leader - Kim Conlon, and the writer in chairing Quality Assurance Reviews (QARs). We are trialling a new model for QARs, to improve the timeliness to completion and have more time to follow up on recommendations.

In collaboration with AHS Legal, Dr. Ken Hashman and the Executive Management Committee, we have provided guidance to AHS Provincial and the Calgary Zone around completing forms in accordance with the Alberta Mental Health Act. This work was made necessary as a result of the recent court outcome related to the Act.

Future Plans

October 11, 2019 the Departments of Family Medicine and Psychiatry will be hosting a town hall meeting to launch the Psychiatry Primary Care Scope of Practice document and discuss implementation. Some potential next steps will include hiring further physicians to these roles, clarifying at the site level ways to implement and review of outcomes.

The medical management of patients admitted to an Addictions and Mental Health unit will continue to be a focus of improvement. Some potential work includes targeted education for early recognition of medical decompensation, improved communication around decompensation and simulations for management of urgent medical situations. The medical management of admitted adolescent mental health patients at Alberta Children's Hospital will also be reviewed.

With funds donated through Calgary Health Trust, a rural peer support program for perinatal women with mental health problems will be launched towards the end of 2019. Thank you to Kim Frache, Families Matter and Canadian Mental Health Association for their work to operationalize this project.

The adult inpatient inclusion and exclusion criteria should be finalized in the next one to two months. This document is a result of a recommendation and is anticipated to reduce the demands for adult inpatient Addiction and Mental Health beds. When it is finalized, we will need to educate, implement and evaluate the success of this document.

The adult inpatient capacity initiative will continue, with both the PES and Inpatient sub committees continuing to look at factors that potentially contribute to increasing the length of stay needlessly.

In collaboration with our CME lead, Dr. Thomas Raedler, and a frequent chair of the Review Panels, Fraser Gordon, a special Grand Rounds will be held to educate frontline staff and physicians about the Alberta Mental Health Act, the recent court case and ways to ensure that we are serving our patients in accordance with the act.

14. Department Events 2019

The 32nd Annual Sebastian K. Littman Research Day

Dr. Scott B. Patten

Overview

The research day was held on March 1st, 2019. This was the 32nd annual iteration of the event. The research day featured a keynote presentation and symposium on the use of administrative data for health services research. The keynote speaker was Dr. Paul Kurdyak from CAMH and the University of Toronto. Dr. Kurdyak is an international leader in this field of study. The symposium also featured presentations from local representatives of organizations that facilitate data access for research, including; Dr. Cathy Eastwood from the Centre for Health Informatics, Dr. Peter Faris from AHS Research Facilitation, Kyla Brown from PolicyWise and Dina Lavorato from the Prairie Regional Data Centre.

Highlights

Two projects received recognition at the event:

1. Best Presentation by a Graduate Student was awarded to (shared) **Natalie Dawes & Olivia Cullen**. Its title was: “*Give young people more power: What youth have to say about transitioning to adulthood.*”
2. Most Innovative Presentation by a Graduate Student was awarded to **Govind Peringod** for his presentation entitled: “*Automated, continuous home-cage monitoring of sucrose preference in mice.*”

Abstracts from the research day are available at: <https://prism.ucalgary.ca/handle/1880/110208>
Their archiving in PRISM means that they will be indexed and citable through Google Scholar.

The Research Day receives support from the Department of Psychiatry and from an Endowment from the estate of Dr. Sebastian K. Littman.

Future Plans

The 2020 Research Day will be held on March 6th, 2020. The theme of next year’s event will be research related to repetitive transcranial stimulation.

Run for Women

Dr. Lisa Gagnon

Overview

Every year it gets bigger and better! There were 1664 registrants and \$200,000 was raised for the Women's Mental Health Clinic.

Highlights

The Shoppers Drug Mart Run for Women had a number of supporting events prior to the run on June 9, 2019. The local Shoppers run committee held a launch event for their group, including a patient presentation, which generated a lot of enthusiasm – they were a leading Shoppers group nationally in terms of number of SDM affiliated local participants!!! The annual pub/silent auction night organized, again by the local group, was a roaring success, both in terms of fun to be had and great auction items. The Calgary Health Trust launched its first ever captain event, which included a patient speaker, whose story moved everyone in attendance to tears.

It was a spectacular day for the run! Our patient speaker, Yalda – was so passionate and courageous. She is a staunch advocate for perinatal mental health and created a YouTube video with Calgary Health Trust see <https://www.youtube.com/watch?v=ouepyKgXjdA&t=1s> this presentation also moved many to tears, including her physician Dr. Zahra Mohammed. In conjunction with the Running Room and Calgary Health Trust, the Shoppers Drug Mart Run for Women generated \$200,000, which goes to the Women's Mental Health Clinic, to support much needed therapy and triage support. THANK YOU to Shoppers Drug Mart, Calgary Health Trust, the Running Room, our courageous patient speakers, as well as all who participated! Besides supporting pregnant and postpartum women with mental health struggles, the run improves awareness and reduces stigma around mental health conditions.

Future Plans

The 2020 run will generate even more funds and awareness for perinatal mental health.



The Inaugural Susan Carpenter Education Day

Dr. Thomas Raedler/Anne Enders

Overview

A new Continuing Medical Education event was created to highlight the complex overlap of mental health symptoms and intellectual developmental disorder. Hosted by Arnika Centre, this event occurred April 26, 2019 at the downtown public library. There were over 100 registrants.

The event was accredited for 5 hours of Mainpro credit. Feedback was reviewed by the committee to assist in planning future events.

We received financial support from the Department of Psychiatry and the committee for Continuing Professional Development. The Sinneave Foundation, Jansen-ortho, Purdue, Otsuka and Shire pharmaceuticals also provided much appreciated support.



Highlights

Keynote speaker: Dr. Robin Friedlander presented “*A Psychiatrists’ Perspective on Severe Self-injury Behaviour in Children with Autism Spectrum Disorder*”. Dr. Trevor Prior provided information about diagnosing and treating adults with normal IQ and Autism. Dr. Susan Carpenter outlined the history of Arnika Centre in Calgary and the transition of the clinic to Alberta Health Services. A delicious luncheon was served by Luke’s.

Challenges

We had a short lead time to organize this event and had setbacks related to a very steep learning curve. AHS provided much needed admin support.

Future Plans

Planning has begun for a second event to be held in the Spring of 2020. Our new theme will reflect the necessity of being able to see clearly when two disorders overlap. We hope to make this year’s event accessible to family doctors and will be applying for accreditation for family doctors as well as psychiatrist. Our tentatively scheduled keynote speaker is Dr. Yona Lunsky from CAMH. Dr. Lunsky co-authored a report for the Ontario government on service gaps for adults with developmental disabilities.



Art for the Hope Hallway is coming soon!!! 😊



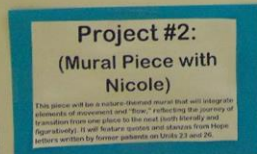
HOPE HALLWAY, FOOTHILLS HOSPITAL

Meet OUR Artists!



Project #1: "Wave" (Clay-Mosaic Piece with Tracy)

This piece will feature a loan to 300 hand-made tiles that will be created and painted by patients and staff from Units 23 and 26. It will embody messages of strength and vitality and be radiant with diverse colors. It will be a piece that evokes peace, connection and engagement. Target completion date: February, 2019.



Project #2: (Mural Piece with Nicole)


This piece will be a nature-themed mural that will integrate elements of movement and "flow," reflecting the journey of transition from one place to the next both literally and figuratively. It will feature quotes and stories from Hope letters written by former patients on Units 23 and 26.

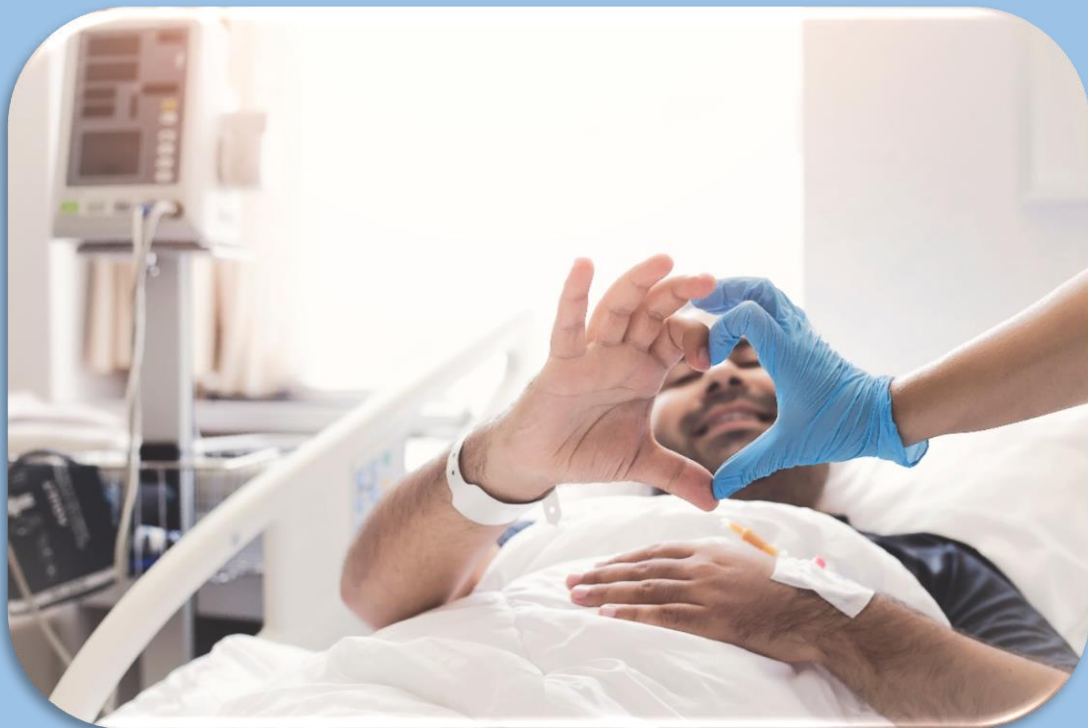


15. Awards & Recognitions

Awardee	Award
Brooke Allemang (supervised by Gina Dimitropoulos)	Alberta Innovates SPOR Graduate Studentship
Calgary Eating Disorder Program (CEDP)	Compulsivity in Adolescents with AN *Pediatric Innovations Award (formerly: Alterations in Fronto-Stratial Circuits Underlying Compulsivity Associated with Anorexia Nervosa)
CanREACH program and team	President's Excellence Award for Outstanding Achievement in Innovation and Research Excellence
Dan Devoe (supervised by Jean Addington)	Best poster award "Interventions and Transitions In Youth at Risk of Psychosis: A systematic Review and Meta-Analysis", 11th International Early Psychosis Association Meeting
David Cawthorpe	AHS President's Award - Excellence in Innovation and Research for CanREACH
Dr. Alex McGirr	Early Career Achievement in Psychiatry Award from the Canadian Psychiatric Association
Dr. Alex McGirr	NARSAD Young Investigator Grant. The award is to conduct a randomized placebo-controlled augmentation trial of rTMS in depression.
Dr. Darby Ewashina	Dr. Marnie Hinton Resident Award for Physician Wellness 2018 for demonstrating significant contributions to the advancement of physician wellness
Dr. Glenda MacQueen	Elected Fellow, Canadian Academy of Health Sciences
Dr. Iliana Ortega	Honourable Mention - Faculty Award for contributions and teaching in the Psychiatry Clerkship
Dr. Jean Addington	Distinguished Service Award from the Schizophrenia International Research Society
Dr. Jean Addington	Excellence in Supervision Award Honorable Mention
Dr. Jean Addington	Election to the Academy of Health Sciences.
Dr. Mike Trew	Prix d'excellence - Specialist of the Year and Mentor of the Year from the Royal College

<p>Dr. Nancy Brager</p> 	<p>She has become a full Professor and she climbed a mountain (Machu Pichu) this year to raise money for Cystic Fibrosis (Photo on left)</p>
<p>Dr. Rachel Grimminck</p>	<p>Work-Place Integrated Education Award</p>
<p>Dr. Rachel Grimminck and the residents involved in the research surrounding the use of simulations</p>	<p>Top poster at CPA in September 2019 and presented a poster at the World Congress of Psychiatry in Lisbon in August 2019. In a national COPE competition, this team was awarded one of only two grants to further their research in this area of medical education.</p>
<p>Dr. Sheri Madigan</p>	<p>American Professional Society on the Abuse of Children Award for Outstanding Research Article</p>
<p>Dr. Zahinoor Ismail</p>	<p>Most outstanding neuropsychiatric syndromes-related poster Alzheimer's Association International Conference</p>
<p>Drs. Aaron Mackie, Philip Stokes, and Lauren Zanussi</p>	<p>Pre Clerkship Gold Star Awards from the Class of 2020 for Course 7 Teaching</p>
<p>Drs. DeGroot and Grimminck and their team (de Groot J, Crowshoe L, Grimminck R, Coderre S, Heirali A, Viceer N, Busche K, Rizzuti F, Keegan D, Roach P, Weeks S, Jenkins D, McPhalen D, Paget M, Henderson R, Mawoyo S, Chu P, Katigema S.)</p>	<p>The ii' taa'poh'to'p Grant Competition. Their project is "Confronting the Reality of Racism that Indigenous Canadians Experience in Health Care: A Video and Simulation Project to Spur Decolonization in Medical Education".</p>
<p>Drs. Jean Addington, Scott Patten and Glenda Macqueen</p>	<p>Clarivate Analytics Web of Science 1% of highly cited researchers for 2018</p>
<p>Drs. Mohamed Abdel-Keriem, Rhea Balderston, Benjamin Grintuch, Seema Hussain, Novin Ihsan, Juliana Kirova, Sonya Malhotra, Suneina Mohan, Philip Stokes, Jason Taggart, and Roy Turner</p>	<p>Clerkship Honorable Mention from the class of 2018</p>
<p>Drs. Toba Oluboka, Paul Reinhardt, Lauren Zanussi, Andrew Dutcher, and Susan Poon</p>	<p>Clerkship Gold Star Awards from the Class of 2018</p>
<p>Jade Stein (supervised by Daniel Kopala-Sibley)</p>	<p>Branch Out Neurological Foundation Graduate Scholarship effective Sept 1, 2019</p>
<p>Kirsten Fiest</p>	<p>Calgary's Top 40 under 40 list</p>

Melanie Noel	John C. Liebeskind Early Career Scholar Award of the American Pain Society
Pat Rowe 	de Vries-Mason Trailblazer Award winner this year. Graduated in 1973 and has worked with the Geriatric Mental Health Consulting Service since 1998. (Photo on left)
Pauline Burgess	Service in Support of Residency Education Award from the University of Calgary Postgraduate Medical Education (PGME)
School Based Mental Health (SBMH) and Mental Health Literacy	Gifted the intellectual property for www.teenmentalhealth.org from Dr. Stan Kutcher and his associates to continue to move this work forward in Alberta, nationally and internationally. SBMH was chosen because of the exemplary work done to promote mental health literacy provincially, research conducted throughout our partnership and ongoing contributions to the existing materials.



16. Grants and Publications

Grants

Grants Supported by the SCN (New for 2019):

1. PRIHS - Virtual Supervised Consumption – Alberta Innovates (\$914,813)
2. HIIS – CanREACH – Alberta Health/AHS (\$1,644,000)

Grants in the CAAMHPP:

1. David Cawthorpe - ACHRI equipment grant
2. School Based Mental Health (SBMH) and Mental Health Literacy - Alberta Children's Hospital provided grant funding for the development of an Elementary Mental Health Literacy resource to complement the existing work of TeenMentalHealth.org and expand the continuum of evidence based training and curriculum.

Grants in the Mathison Centre - External Grants (as Principal Investigator or Co-Principal Investigator only):

1. Dr. Catherine Lebel (PI), Canadian Institutes of Health Research, Project Grant, Fall 2018, \$879,750. Brain development and internalizing symptoms in youth with fetal alcohol spectrum disorder.
2. Dr. Marc Poulin (PI), Canadian Institutes of Health Research, Project Grant, Fall 2018, \$868,275. Regulation of cerebral blood flow in obstructive sleep apnea.
3. Dr. Zahinoor Ismail (Co-PI), Canadian Institutes of Health Research, Project Grant, Spring 2019, \$1,048,050. The impact of mild behavioural impairment on cognitive decline and associated patterns of anatomical and functional neuroimaging in Parkinson's disease. Monchi O (PI).
4. Dr. Gerry Giesbrecht (PI), Canadian Institutes of Health Research, Project Grant, Spring 2019, \$971,550. Role of the gut microbiota and physiological systems underlying internalizing problems during the transition from childhood to adolescence.
5. Dr. Deinera Exner-Cortens (PI), Public Health Agency of Canada, \$1,250,000. Changing bystander behaviour to prevent dating violence.
6. Dr. Valerie Taylor (PI), IMAGINE SPOR Incubator Grant, \$73,600. A clinical trial to evaluate the safety and efficacy of Fecal Microbiota Transplantation in a population with Major Depressive Disorder and Irritable Bowel Syndrome.
7. Dr. Daniel Kopala-Sibley (PI), Social Sciences and Humanities Research Council of Canada Insight Development Grant, \$64,452. Examining interactions between children's genes and temperament and their parent's temperament in predicting parenting behaviours.
8. Dr. Valerie Taylor (PI), Weston Family Microbiome Initiative's Proof-of-Principle 2018, \$300,000. A clinical trial to evaluate the Safety and Efficacy of Fecal Microbiota Transplantation in a Population with Major Depressive Disorder.
9. Dr. Pringsheim Tamara (PI), Maternal Newborn Child and Youth Strategic Care Network (MNCY SCN), Health Outcomes Improvement Fund II, 2018, \$375,000. The Tourette OCD Alberta Network

Grants from the Outpatient Team:

1. Dr. Crockford has an active grant with Health Canada SUAP on order sets for cannabis and psychosis, a submitted grant solicited by Health Canada SUAP for a Methamphetamine and psychosis order set, a submitted grant to Health Canada SUAP for pharmacotherapy of

Methamphetamine use disorder, and a proposal for a brief intervention for cannabis use in clinical high risk and early psychosis.

Publications

Publications by the AMH SCN Leadership Team (2019):

1. Yan, C., Rittenbach, K., Sour, S., & Silverstone, P.H. (2019) Cost-Effectiveness Analysis of a Randomized Study of Depression Treatment Options in Primary Care Suggests Stepped-Care Treatment may Have Economic Benefits. *BMC Psychiatry*, 19(1):1-13 doi: 10.1186/s12888-019-2223-3
2. Brown, S., Rittenbach, K., Cheung, S., McKean, G., MacMaster, F.P., Clement, F. (2019). Current and Common Definitions of Treatment Resistant Depression: Findings from a Systematic Review and Qualitative Interviews. *Canadian Journal of Psychiatry*, 64(6):380-387. doi: 10.1177/0706743719828965
3. Buganza, T. E., Mitchell, N., Abraldes, J. G., Thomas, L., Ma, M., Bailey, R. J., & Tandon, P. (2019). Depression in cirrhosis – a prospective evaluation of the prevalence, predictors and development of a screening nomogram. *Alimentary Pharmacology & Therapeutics*, 49(2), 194–201. <https://doi-org.ezproxy.lib.ucalgary.ca/10.1111/apt.15068>
4. Deschamps, J., Gilbertson, J., Straube, S., Dong, K., MacMaster, FP., Korownyk, C., Montgomery, L., Mahaffey, R., Downar, J., Clarke, H., Muscedere, J., Featherston, R., Vandermeer, B., Lynam, D., Magnussen, R., Bagshaw, S.M., & Rewa, O.G. (2019). Association Between Harm Reduction Strategies and Healthcare Utilization in Patients on Long-Term Opioid Therapy Presenting to Acute Healthcare Settings: A protocol for a systematic review and meta-analysis. *Systematic Reviews*, 8(1):1-8 doi: 10.1186/s13643-019-0997-5
5. Selby B, MacMaster FP, Kirton A, McGirr A. (2019). d-cycloserine blunts motor cortex facilitation after intermittent theta burst transcranial magnetic stimulation: a double-blind randomized placebo-controlled crossover study. *Brain Stimulation* 12(4):1063-1065 doi: 10.1016/j.brs.2019.03.026
6. MacMaster, F.P., Croarkin, P., Wilkes, T.C., McLellan, Q., Langevin, L.M., Jaworska, N., Swansburg, R., Jasauri, Y., Zewdie, E., Ciechanski, P., & Kirton, A. (2019) Repetitive Transcranial Magnetic Stimulation in Youth with Treatment Resistant Major Depression. *Frontiers of Psychiatry - Neuroimaging and Stimulation*, 10:170. doi: 10.3389/fpsyt.2019.00170
7. Brooks, B.L., Low, T.A., Plourde, V., Virani, S., Jadavji, Z., MacMaster, F.P., Barlow, K.M., Lebel, R.M., Yates, & K.O. (2019) Cerebral blood flow in children and adolescents several years after concussion. *Brain Injury*, 33(2):233-241. doi: 10.1080/02699052.2018.1540798
8. Jaworska, N., Courtright, A.K., DeSomma, E., MacQueen, G., & MacMaster, F.P. (2019). Aerobic Exercise in Depressed Youth: A Feasibility & Clinical Outcomes Pilot Study. *Early Intervention in Psychiatry*, 13(1): 128-132. doi: 10.1111/eip.12537
9. Croarkin, P., MacMaster, F.P. (2019). Transcranial Magnetic Stimulation for Adolescent Depression. *Child and Adolescent Psychiatry Clinics of North America*, 28(1): 33-43. doi: 10.1016/j.chc.2018.07.003

Publications by the CAAMHP Team (2019):

1. David Cawthorpe - AHS Research/Evaluation Coordinator – Prof. (Adjunct) Psychiatry/CHS
2. October 2018: Foundation for Advancing Family Medicine: CanREACH: Patient-Centred Mental Health in Paediatric Primary Care (PPP) Program, Edmonton, AB.
3. AHS President’s Award - Excellence in Innovation and Research for CanREACH
4. ACHRI equipment grant

5. Baxter A. Kutcher S. Wei Y. Cawthorpe D. (2018). School-based mental health literacy training shifts the quantity and quality of referrals to tertiary child and adolescent mental health services: A Western Canada regional study (Submitted).
6. McCaffrey E., Chang S. Farrelly G. Rahman A., Ritchie B., Goldade R., & Cawthorpe D. (2019). Transforming health care through evidence based mental health literacy: The economic impact of the Canadian Research and Education for the Advancement of Child Health (CanREACH). (Submitted: Canadian Journal of Community Mental Health).
7. Melathopolous K, Cawthorpe D. (2019). Central intake development and system change impact on per capita child and adolescent mental health discharges from 2002 to 2017: Implications for optimizing system design based on shaping demand. Perm J. 2019 (In press).
8. Cawthorpe D (2018) A 16-Year Cohort Analysis of Autism Spectrum Disorder-Associated Morbidity in a Paediatric Population. Front. Psychiatry, 29 November 2018. doi.org/10.3389/fpsy.2018.00635.
9. Cawthorpe D. Marriott B. Piaget J. Moulai I. Cheung S. (2018). Relationship between Adverse Childhood Experience Survey Items and Psychiatric Disorders. Perm J. 2018 Oct 5; 22. doi: 10.7812/TPP/18-001
10. Cawthorpe D. (2018) Improving youth mental health supports in Canada. CMAJ October 09, 190 (40) E1181-E1182; DOI: <https://doi.org/10.1503/cmaj.181233>
11. Cawthorpe, D. Kerba, M. Narendran, A. Ghuttora, H. Chartier, G. & Sartorius, N. (2018). Temporal order of cancers and mental disorders in an adult population. BJPsych Open, 4(3), 95-105. doi:10.1192/bjo.2018.5.
12. Cawthorpe D. (2019) Temperament, Attachment, and Conduct: Nature, Nurture, and Disposition. Seattle: Amazon. ISBN-10: 1796525111.
13. Cawthorpe D. (2019) The Biological Self: The place of Attachment, Mental Representation, Memory, and Consciousness. Seattle: Amazon. ASIN: 1793249563.
14. Cawthorpe D (2018) Data Setup and Odds Ratio Algorithms: A Paediatric and Adult Population Case Study Examining Age Associations of Psychiatric Disorder across All Main International Classification of Disease Categories (Methods in Population Morbidity Analysis). Seattle: Amazon. ISBN-13: 978-1790408160.
15. Cawthorpe D (2018) A 16-Year Cohort Analysis of Autism Spectrum Disorder-Associated Morbidity in a Paediatric Population. Front. Psychiatry, 29 November 2018. doi.org/10.3389/fpsy.2018.00635.
16. Cawthorpe, D. (2018). Objective Skills Clinical Exam: Every Day in the Field of Practice. Seattle: Amazon. ISBN 9781980880417.
17. Cawthorpe, D. (2018). Attachment and Adolescent Suicidality. Seattle: Amazon. ISBN 9781720221579.
18. Compulsivity in Adolescents with AN *Paediatric Innovations Award (formerly: Alterations in Fronto-Stratial Circuits Underlying Compulsivity Associated with Anorexia Nervosa)
19. The CEDP: Referrals, Knowledge and Perception Patterns (Phase I) – complete and publication in press
20. CanREACH program and team were the recipients of the 2019 President’s Excellence Award for Outstanding Achievement in Innovation and Research Excellence.
21. School Based Mental Health (SBMH) and Mental Health Literacy
22. SBMH was gifted the intellectual property for www.teenmentalhealth.org from Dr. Stan Kutcher and his associates to continue to move this work forward in Alberta, nationally and internationally. SBMH was chosen because of the exemplary work done to promote mental health literacy provincially, research conducted throughout our partnership and ongoing contributions to the existing materials.
23. Alberta Children’s Hospital provided grant funding for the development of an Elementary Mental Health Literacy resource to complement the existing work of TeenMentalHealth.org and expand the continuum of evidence based training and curriculum.

24. Several academic papers (some published, some pending) have been generated out of the Alberta SMILES data with additional papers to follow as the data is further analysed.
25. Wei, Y., Baxter, A., Kutcher, S. (2019). Establishment and Validation of a Mental Health Literacy Measurement in Canadian Educators. *Psychiatry Research*.
26. Baxter, A., Kutcher, S., Wei, Y. Cawthorpe, D. (In review) School-based mental health literacy training shifts the quantity and quality of referrals to tertiary services: A Western Canada regional study, *BMC Health Services*
27. Kutcher, S. Wei, Y, Baxter, A. (In review) The Impact of “Go-To Educator Training” on Educator’s Knowledge About Stigma Towards Mental Illness in Six Canadian Provinces. *Early Intervention in Psychiatry*
28. MacMaster F, Croarkin P, Wilkes TCR, McLellan Q, Langevin L, Jaworska N, Swansburg R, Jasai Y, Zewdie E, Ciechanski P, Kirton. Repetitive Transcranial Magnetic Stimulation in Youth with Treatment Resistant Depression. *Frontiers in Psychiatry*, March 2019, Volume 10, Article 170
29. Smith JM, Mader J, Szeto ACH, Arria AM, Winters KC, Wilkes TCR. Cannabis use for Medicinal Purposes among Canadian university students. *The Canadian Journal of Psychiatry* Jan 4, 2019: 1-5

Publications by the Forensic Team (2019):

1. 2019. Vicarious Trauma in Victims of Violent Crime: Implications for the management of Mentally Disordered Offenders. Published Abstract. 24th Annual Conference of the Canadian Academy of Psychiatry and the Law.

Publications from the Mathison Centre:

1. Devoe, Daniel J.; Farris, Megan S.; Townes, Parker; Addington, Jean, “Attenuated Psychotic Symptom Interventions In Youth At Risk Of Psychosis: A Systematic Review And Meta-Analysis”, *Early Intervention In Psychiatry*, Feb 2019
2. Suh, Jee Su; Schneider, Maiko Abel; Minuzzi, Luciano; Macqueen, Glenda M.; Strother, Stephen C.; Kennedy, Sidney H.; Frey, Benicio N., “Cortical Thickness In Major Depressive Disorder: A Systematic Review And Meta-Analysis”, *Progress In Neuro-Psychopharmacology & Biological Psychiatry*, Jan 10 2019
3. Devoe, Daniel J.; Farris, Megan S.; Townes, Parker; Addington, Jean; “Interventions And Social Functioning In Youth At Risk Of Psychosis: A Systematic Review And Meta-Analysis”, *Early Intervention In Psychiatry*, Apr 2019
4. Vanryzin, Jonathan W.; Marquardt, Ashley E.; Argue, Kathryn J.; Vecchiarelli, Haley A.; Ashton, Sydney E.; Arambula, Sheryl E.; Hill, Matthew N.; Mccarthy, Margaret M., “Microglial Phagocytosis Of Newborn Cells Is Induced By Endocannabinoids And Sculpts Sex Differences In Juvenile Rat Social Play” *Neuron*, Apr 17 2019
5. Bousman, Chad A.; Zierhut, Heather; Muller, Daniel J., “Navigating The Labyrinth Of Pharmacogenetic Testing: A Guide To Test Selection” *Clinical Pharmacology & Therapeutics*, Aug 2019
6. Qian, Winnie; Schweizer, Tom A.; Churchill, Nathan W.; Millikin, Colleen; Ismail, Zahinoor; Smith, Eric E.; Lix, Lisa M.; Munoz, David G.; Barfett, Joseph J.; Rajji, Tarek K.; Fischer, Corinne E., “Gray Matter Changes Associated With The Development Of Delusions In Alzheimer Disease”, *American Journal Of Geriatric Psychiatry*, May 2019
7. Mallo, Sabela C.; Ismail, Zahinoor; Pereiro, Arturo X.; Facal, David; Lojo-Seoane, Cristina; Campos-Magdaleno, Maria; Juncos-Rabadan, Onesim, “Assessing Mild Behavioral Impairment With The Mild Behavioral Impairment Checklist In People With Subjective Cognitive Decline”, *International Psychogeriatrics*, Feb 2019

8. Soltani, Sabine; Kopala-Sibley, Daniel C.; Noel, Melanie, “The Co-Occurrence Of Paediatric Chronic Pain And Depression A Narrative Review And Conceptualization Of Mutual Maintenance”, *Clinical Journal Of Pain*, Jul 2019
9. Sticht, Martin A.; Lau, David J.; Keenan, Catherine M.; Cavin, Jean-Baptiste; Morena, Maria; Vemuri, Venkata Kiran; Makriyannis, Alexandros; Cravatt, Benjamin F.; Sharkey, Keith A.; Hill, Matthew N., “Endocannabinoid Regulation Of Homeostatic Feeding And Stress-Induced Alterations In Food Intake In Male Rats”, *British Journal Of Pharmacology*, May 2019
10. Mughal, Muhammad Kashif; Giallo, Rebecca; Arnold, Paul D.; Kehler, Heather; Bright, Katherine; Benzies, Karen; Wajid, Abdul; Kingston, Dawn, “Trajectories Of Maternal Distress And Risk Of Child Developmental Delays: Findings From The All Our Families (Aof) Pregnancy Cohort”, *Journal Of Affective Disorders*, Apr 1 2019
11. Morena, Maria; Aukema, Robert J.; Leidl, Kira D.; Rashid, Asim J.; Vecchiarelli, Haley A.; Josselyn, Sheena A.; Hill, Matthew N., “Upregulation Of Anandamide Hydrolysis In The Basolateral Complex Of Amygdala Reduces Fear Memory Expression And Indices Of Stress And Anxiety”, *Journal Of Neuroscience*, Feb 13 2019
12. Baribeau, Danielle A.; Dupuis, Annie; Paton, Tara A.; Hammill, Christopher; Scherer, Stephenw.; Schachar, Russell J.; Arnold, Paul D.; Szatmari, Peter; Nicolson, Rob; Georgiades, Stelios; Crosbie, Jennifer; Brian, Jessica; Iaboni, Alana; Kushki, Azadeh; Lerch, Jason P.; Anagnostou, Evdokia, “Structural Neuroimaging Correlates Of Social Deficits Are Similar In Autism Spectrum Disorder And Attention-Deficit/Hyperactivity Disorder: Analysis From The Pond Network”, *Translational Psychiatry*, Feb 4 2019
13. Boedhoe, Premika S. W.; Heymans, Martijn W.; Schmaal, Lianne; Et Al, “An Empirical Comparison Of Meta- And Mega-Analysis With Data From The Enigma Obsessive-Compulsive Disorder Working Group”, *Frontiers In Neuroinformatics*, Jan 8 2019
14. Bousman, Chad; Al Maruf, Abdullah; Mueller, Daniel J., “Towards The Integration Of Pharmacogenetics In Psychiatry: A Minimum, Evidence-Based Genetic Testing Panel”, *Current Opinion In Psychiatry*, Jan 2019
15. Alders, Gesine L.; Davis, Andrew D.; Macqueen, Glenda Et Al., “Reduced Accuracy Accompanied By Reduced Neural Activity During The Performance Of An Emotional Conflict Task By Unmedicated Patients With Major Depression: A Can-Bind Fmri Study”, *Journal Of Affective Disorders*, Oct 1 2019
16. Burton, Christie L.; Wright, Leah; Shan, Janet; Xiao, Bowei; Dupuis, Annie; Goodale, Tara; Shaheen, S-M; Corfield, Elizabeth C.; Arnold, Paul D.; Schachar, Russell J.; Crosbie, Jennifer, “Swan Scale For Adhd Trait-Based Genetic Research: A Validity And Polygenic Risk Study”, *Journal Of Child Psychology And Psychiatry*, Sep 2019
17. Mogadam, Alexandra; Keller, Anne E.; Arnold, Paul D.; Schachar, Russell; Lerch, Jason P.; Anagnostou, Evdokia; Pang, Elizabeth W., “Magnetoencephalographic (Meg) Brain Activity During A Mental Flexibility Task Suggests Some Shared Neurobiology In Children With Neurodevelopmental Disorders”, *Journal Of Neurodevelopmental Disorders*, Aug 19 2019
18. Ciechanski, P.; Carlson, H. L.; Herrero, M.; Lane, C.; Macmaster, F. P.; Kirton, A., “A Case Of Transcranial Direct-Current Stimulation For Childhood Stroke Hemiparesis: A Brief Report”, *Developmental Neurorehabilitation*
19. Farris, Megan S.; Devoe, Daniel J.; Addington, Jean, “Attrition Rates In Trials For Adolescents And Young Adults At Clinical High-Risk For Psychosis: A Systematic Review And Meta-Analysis”, *Early Intervention In Psychiatry*
20. Nogovitsyn, Nikita; Souza, Roberto; Muller, Meghan; Et Al, “Testing A Deep Convolutional Neural Network For Automated Hippocampus Segmentation In A Longitudinal Sample Of Healthy Participants”, *Neuroimage*, Aug 15 2019
21. Ramasubbu, Rajamannar; Brown, Elliot Clayton; Marcil, Lorenzo Daniel; Talai, Aron Sahand; Forkert, Nils Daniel, “Automatic Classification Of Major Depression Disorder Using Arterial Spin Labeling Mri Perfusion Measurements”, *Psychiatry And Clinical Neurosciences*, Aug 2019

22. Addington, Jean; Shakeel, Mohammed K.; Braun, Amy; Bonneville, Dominique; Stowkowy, Jacqueline, “Metacognition In Youth At-Risk For Psychosis”, *Schizophrenia Research*, Aug 2019
23. Lukmanji, Aysha; Williams, Jeanne V. A.; Bulloch, Andrew G. M.; Bhattarai, Asmita; Patten, Scott B., “Seasonal Variation In Symptoms Of Depression: A Canadian Population Based Study”, *Journal Of Affective Disorders*, Aug 1 2019
24. Cole, Jaeden; Bright, Katherine; Gagnon, Lisa; Mcgirr, Alexander, “A Systematic Review Of The Safety And Effectiveness Of Repetitive Transcranial Magnetic Stimulation In The Treatment Of Peripartum Depression”, *Journal Of Psychiatric Research*, Aug 2019
25. Pringsheim, Tamara; Stewart, David G.; Chan, Parco; Tehrani, Ali; Patten, Scott B., “The Pharmacoepidemiology Of Psychotropic Medication Use In Canadian Children From 2012 To 2016”, *Journal Of Child And Adolescent Psychopharmacology*
26. Sinopoli, Vanessa M.; Erdman, Lauren; Burton, Christie L.; Park, Laura S.; Dupuis, Annie; Shan, Janet; Goodale, Tara; Shaheen, S. -M.; Crosbie, Jennifer; Schachar, Russell J.; Arnold, Paul D., “Serotonin System Genes And Obsessive-Compulsive Trait Dimensions In A Population-Based, Paediatric Sample: A Genetic Association Study”, *Journal Of Child Psychology And Psychiatry*
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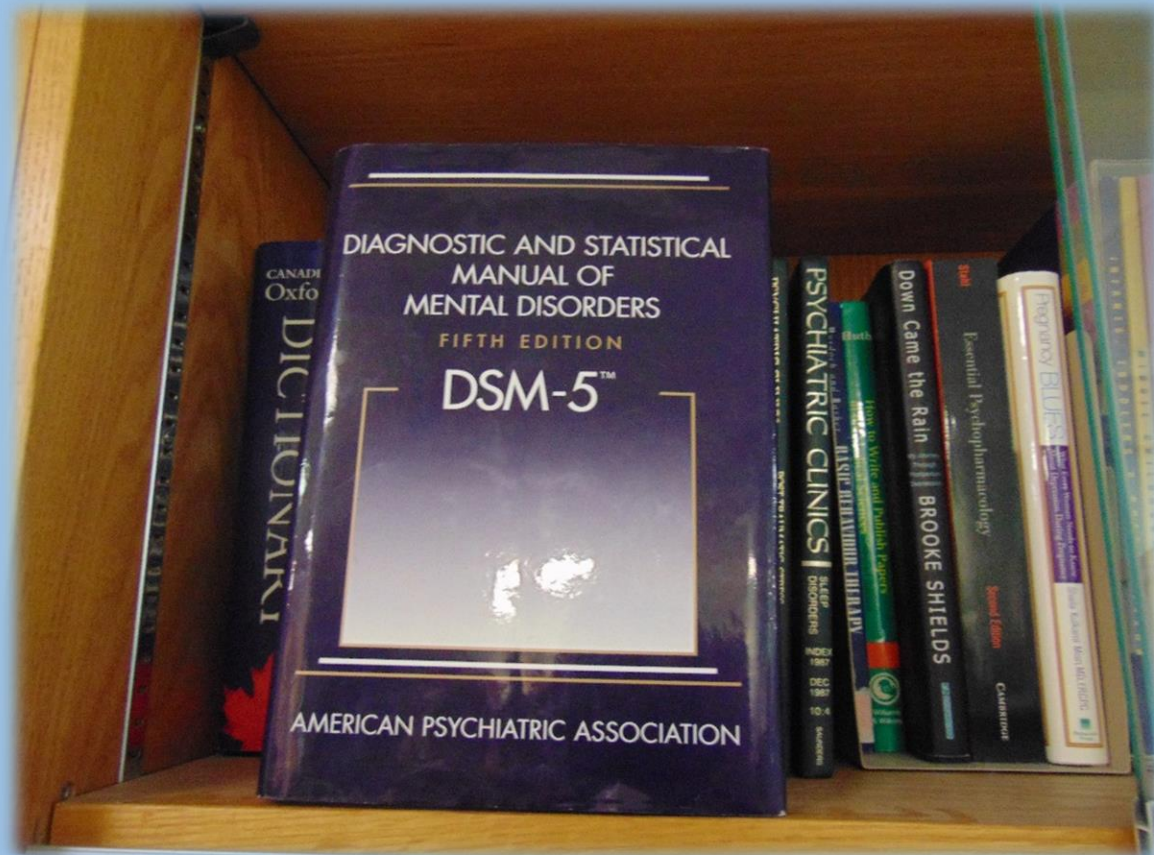
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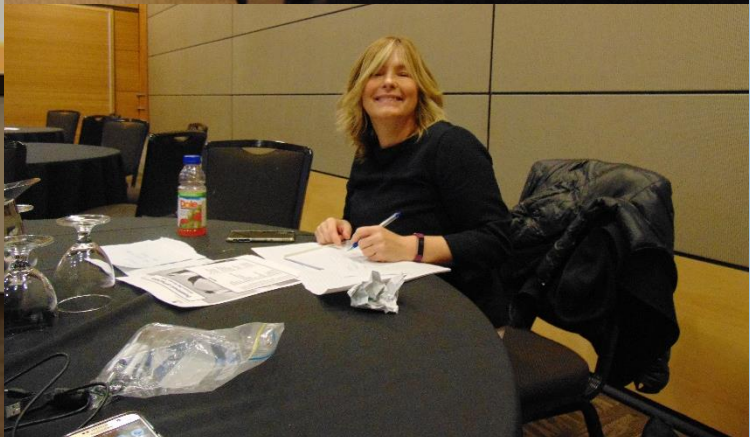
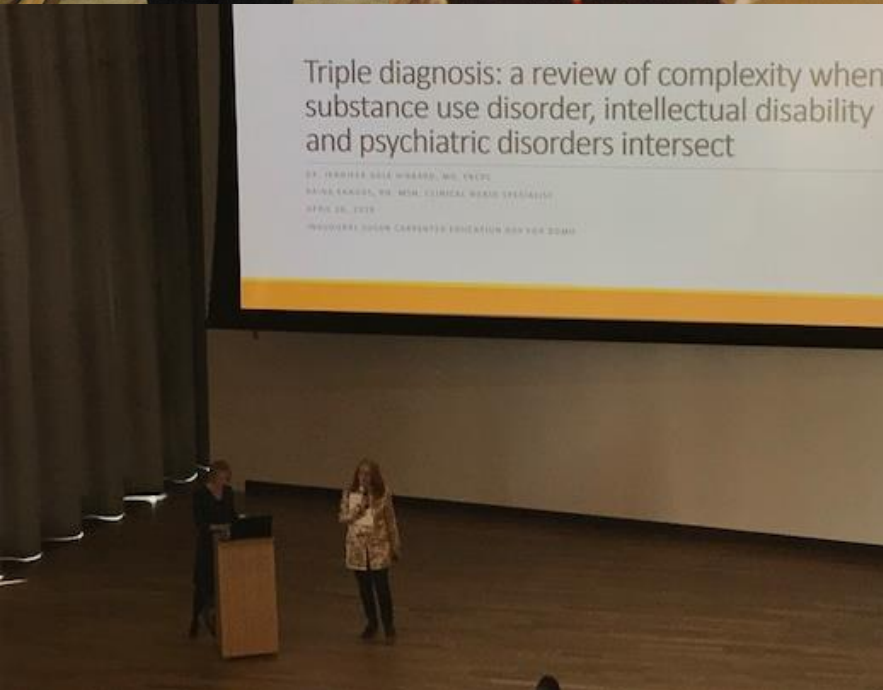
1. Impacts of Methamphetamine Abuse in Canada. House of Commons Standing Committee published this report with the assistance of local physicians Dr. Michael Trew, Dr. Esther Tailfeathers, and Dr. Tim Ayas.
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3. Dr. Ghosh and Tanguay have a number of active grants and submitted manuscripts involving chronic pain, supervised consumption, and peer navigation in addictions.

Other:

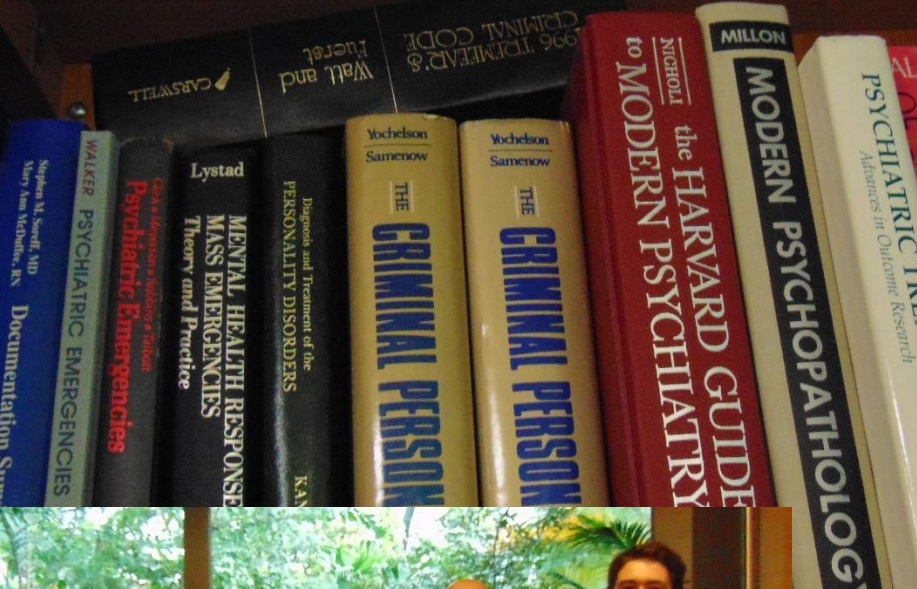
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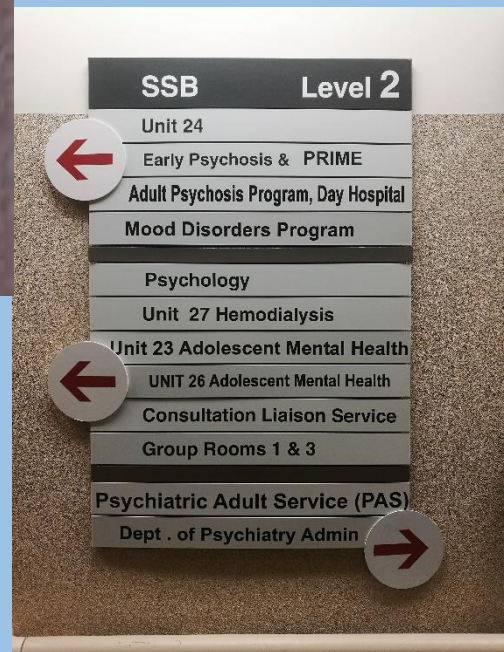




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