From the Department Head

Following the Department Head’s review in 2001 I have been offered and have accepted a second term as Head, Regional Clinical Department of Psychiatry. The second term will begin in July of 2002 and will begin with a mini-sabbatical of three months. Part of that sabbatical will be spent at the University of British Columbia in the Mental Health Services Research Unit. I would like to thank all of the members of the Department for their support over the last five years. Without that support the job is not doable and frankly not worth doing.

The next five years will have different challenges and major changes can be expected. I would like to highlight three related changes: Workforce Planning, Quality Management and the Mazankowski Report.

The period of 1997-2002 has been a period of rebuilding for the Regional Clinical Department of Psychiatry. We have recruited 42 new or returning psychiatrists into the Department. This recruitment has been essential for the daily operations of our services. The Department has now done a Workforce Plan for the next five years, and this may have been circulated to you by the time you read this. The Workforce Plan is based on population health needs and it conceptualizes the Department of Psychiatry as having a role within Southern Alberta. This perspective is exactly the same as all other departments in Calgary. However, since regionalization and due to the ambiguities in the roles and responsibilities of the Alberta Mental Health Board, and with the lack of psychiatrists available, such a vision was not practical. The expansion of the Medical School has been occurring for the last two years. This wave of expansion will move up into residency training in 2003 and this Workforce Plan forms a basis for our request for new residency positions. The plan will also go forward to the Calgary Health Region, so that it links appropriately with the growth in the Mental Health & Psychiatric Program.

The Mazankowski Report has been widely circulated. The report highlights that Southern Alberta is poorly served by existing Alberta Mental Health Board facilities. Gary Mar, the Minister of Health and Wellness, has accepted the Mazankowski recommendations and has stated that AMHB clinical services will be integrated with regional services by April 2003. The Department is therefore planning to participate in expanded services in Southern Alberta, delivered through the health regions.

Quality should be the top priority for Alberta’s health system. This is

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Residents Corner

The Residency Training Program would like to thank Dr. David Johnston for his role in the program over the past four and a half years, which ends March 31, 2002. Best wishes in his new employment with Hamilton Health Care. I will be taking over the torch from him as Postgraduate Director.

Congratulations to all the residents who presented at Littman Day this year- Cindy Baxter, Shaid Hosain, Suparna Madan, Rup Pandya, William White and Lauren Zanussi. This is twice the number of presenters in both 2000 and 2001. Suparna Madan was awarded the Innovative Research Award from Janssen Pharmaceuticals for her research regarding ‘Spirituality in Psychogeriatrics’ and ‘Effects of Music Intervention on Disruptive Behaviors.’ Cindy Baxter was awarded the Scientific Award from Lundbeck Pharmaceuticals for ‘Transcultural Psychiatry in Psychiatry Residencies.’ If you were not lucky enough to see these presentations the first time around, Suparna and Rup will also be presenting at APA.

In the area of Undergraduate teaching, MIND course students awarded Ania Wisniewska a Gold Star Award for Preceptor (Small Groups). And in the Canadian Residency Matching program the residency committee selected from 53 applicants Canada-wide (nine from UofC). Results will be broadcast on Wednesday, March 13, 2002.

Our residency program has expanded this winter as a result of accepting Carmen Ionescu and Sheri-Lynn Cassidy. Carmen will join the other first year residents immediately and Sheri-Lynn will begin on July 1, 2002.

At the other end of the training spectrum, Dr. Trevor Ballegeer will be joining the department as a Fellow in the Early Psychosis Program, with an interest in Child and Adolescent Psychiatry. Dr. Ballegeer is currently completing his training at the UofM and will begin his fellowship July 1, 2002.

In an effort to revamp the undergraduate training in our department, William White and Lauren Zanussi have agreed to provide resident input in MIND and curriculum/kerlsheept committees respectively.

Five residents will be writing their exams in late April and participating in the oral exams in early June. Best wishes to Clint Hirst, Lloyd Maybaum, Mitch Spivak, Karen Tanguay and Ania Wisniewska.

Bev Adams

Opportunity in Consultation-Liaison Psychiatry

Southwood Nursing Home is looking for a regular

Visiting Psychiatrist

Southwood Nursing Home (located on Heritage Drive just east of MacLeod Trail) has a special 16-bed unit for clients in long-term care with non-Alzheimer's related behavioural disturbance, almost all with long-term psychiatric disorders. The majority are under age 65. It is anticipated at the present time that this would require 2-4 hours per month, and Community Psychiatry hopes in time to be able to fund support for a part-time nursing position.

We believe this is an interesting and potentially gratifying C-L position in the community, and perhaps the first of a number of such opportunities.

For further information please contact either Dr. Michael Trew at 670-2168 or Dr. John Tuttle at 259-8400.
Undergraduate Education

Arising from the November retreat feedback, support for undergraduate training has evolved into three new primary committees, each focused on addressing a specific area of clinical and/or academic teaching:

1) MIND Course Planning
2) Clerkship Planning
3) Undergraduate Curriculum-coordination of pre-clinical and clerkship curriculum and evaluation

I would like to thank the faculty, residents, medical students and administrative staff who have agreed to sit on these committees. We are working hard to review our current strengths and weaknesses before we begin modifying our program to meet the needs of our upcoming (and expanding) classes.

Undergraduate Medical Education at UofC is working closely with all departments to develop long term business plans in all areas encompassing students’ educational needs. Funding for preceptors of both mandatory and elective students, teaching support, availability of multimedia resources and office space for on-site learning are all being reviewed.

The Class of 2002 finishes on April 14, 2002. The Class of 2003 will begin their mandatory clerkship rotations on April 29, 2002. Each of the eight blocks will increase in size from previous years: from 9-11 students to 12-13 students. I would like to thank the staff at the Rockyview for agreeing to assist in providing additional learning ‘spots.’

In the Faculty of Medicine’s Winter 2002 Bulletin, Drs. Philip Stokes and Chris Gorman were listed as receiving Gold Star Awards for their lectures in the MIND course. Drs. Zahinoor Ismail, Janet Wright, David Johnston and Lauren Zanussi (resident) were awarded Letters of Excellence for their teaching. Congratulations to our excellent teachers!

The MIND course runs from August 1-23. Faculty are reminded to try to keep ‘some’ of August open to assist in teaching. Dr. Brager will be contacting Faculty soon regarding availability.

Nancy Brager

Sessional Funding 2002-2003

The Regional Clinical Department of Psychiatry has had to make adjustments to sessional allocations. The hourly rate increases again on April 1, but the budget for the next year stays the same. To accommodate these changes we have had to reduce the inpatient sessional allocation, but maintained other individualized allocations. You can get more details at site-based medical staff meetings.

Don Addington

Both the Calgary Health Region and the Alberta Mental Health Board have been developing an infrastructure to support Quality Improvement. In 2001, Lisa Stewart was appointed as the QI Consultant for the Mental Health & Psychiatric Program. In addition, the capacity of the Information & Evaluation Unit to support QI projects has increased.

The Regional Clinical Department of Psychiatry is looking for a

Quality Management/Quality Improvement Physician

Funding for a 0.1 FTE core commitment is available. In addition, there will be support for education and training in the regional environment. Specific task-related commitments beyond the 0.1 FTE can also be supported.

If you are interested in this position, please contact Dr. Don Addington at 670-1296 for more information or submit a formal application to his attention by April 1, 2002.
Activities - Division of Geriatric Psychiatry

The Geriatric Division of Psychiatry has been quite busy over the last few months.

First and most importantly, a two-day Geriatric Psychiatry Program in Lethbridge for clinicians and physicians in Southern Alberta was organized for the 7th and 8th of March, 2002. Subjects included competency assessment, behaviour management in dementia, substance abuse in the elderly and service planning for Southern Alberta. With the recent release of the Mazankowski Report, the opportunity exists for Calgary to develop networking within Southern Alberta to advocate for increased funding for resources and it is hoped that this conference will be the first of an annual series available to clinicians in the Southern Alberta Region.

Interestingly, this coincided with the removal of Sharon Anderson and the undersigned from the Provincial Geriatric Psychiatry Management Executive Committee. Needless to say, the exclusion of Calgary from this planning process resulted in a fair amount of information travelling from the Calgary area to Alberta Hospital Ponoka and the Alberta Mental Health Board. As a consequence, there will be a meeting to discuss the future structure of this Executive, bearing in mind of course that the role of the Alberta Mental Health Board is not clear at this time.

The Journal Clubs continue to be well attended, so well attended in fact the Division has to look at the direction these will take. Further information will follow after the Division has had a chance to discuss the issue at the Division Meeting in mid March.

Lastly, we hear that the proposed Geriatric Rehabilitation Unit is far from dead. Once we hear the budget for 2002/2003 it will be clearer whether this unit will be opening up this fall, or deferred until the 2003/2004 budget year. Given the number of sure referrals coming into all the programs, it is clear that we are advocating for the earliest opening possible and it is pleasing to report we have overwhelming support from Care in the Community in this regard. Interestingly, Care in the Community has completed a report on the mental health needs of clients in long-term care. If anyone is interested in this report, please contact either Sharon Anderson at 297-4821 or myself at 541-6344 and we will be happy to forward this document. For those who simply want the "bottom line", it is evident that the majority of patients in long-term care require mental health support, which comes as no surprise to us who work in the field!

Stuart Sanders

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Farewell Dr. David Johnston

As most of you probably already know, Dr. David Johnston has resigned and accepted a position in Hamilton, Ontario, as Assistant Chief and Director, Clinical Operations, Psychiatry for St. Joseph’s Healthcare, Hamilton.

Some of the challenges there include the integration of the former Hamilton Psychiatric Hospital and St. Joseph’s, as well as future projects such as a Brain-Body Institute and a new 200-bed facility.

Dr. Johnston’s last working day will be March 28, 2002. A well-attended farewell dinner was held for him on March 8 at the Faculty Club. We thank him for his many contributions to the Department and wish him every success with his new challenge.

Don Addington
Challenges in the Next Year

In the current environment, change never stops. It simply changes tempo.

In the past year the single greatest challenge facing the Mental Health Portfolio has been in the area of Human Resources. Our programs and services have wrestled with this problem and have been largely successful. New colleagues and health care professionals have been recruited and we have developed new processes to optimize our use of our skilled professionals. This issue is one, however, that will continue and perhaps be further accentuated as we face other challenges. At the time of writing these comments, the process for implementing the recommendations of the Mazankowski Report remains obscure. We can, however, anticipate a major shift of resources and service capability into the Calgary Region in the short to medium term. This will create further challenges meeting the Human Resource need for service and it will create a significant leadership challenge in managing the changes.

A year ago the Mental Health Portfolio embarked on three explicit strategies that we thought would allow us to build a service delivery network appropriate for the needs of Calgary’s citizens.

The three strategies were:
1. Continue to implement the integration of Calgary Health Region and AMHB services.
2. Re-engineer the service delivery model.
3. Create an innovative plan for stakeholder relations.

As we complete our budget planning, it is necessary that we reflect and reassess these strategies and determine their relevance as we look forward to facing the challenges of the Mazankowski Report. I would anticipate that each of our five Programs would be looking to their membership for their input and their ideas with respect to the challenges in the year ahead.

Rollie Nicol

Alberta Children’s Hospital

We are very pleased to welcome Dr. Muhammad Naseer to our small and committed group of hospital based child psychiatrists. Dr. Naseer is joining myself, Dr. Beryl Gardner, Dr. Tim Yates, and Dr. Abdul Rahman in reclaiming full call coverage for ACH as of March 1, 2002. We are all indebted and very thankful to the Foothills Hospital psychiatrists who were willing to help cover our call schedule over the last several months. This support from the Foothills psychiatrists has greatly eased the stress of covering the hospital workload with our small numbers.

After postponement due to the tragic events of Sept 11th, the Mood and Anxiety Specialty Clinic reorganized three very successful presentations by Dr. Susan Bradley from the University of Toronto in mid January 2002. Dr. Bradley is former Head of the Division of Child Psychiatry at U of T and author of many scholarly publications, including a recent book on Affect Regulation and the Development of Psychopathology. She presented on Affect Regulation, Gender Identity Disorder, and Effective Parenting. We were particularly impressed to see adult psychiatrists, Drs. Kent Sargeant and Pat Coll, attending the Affect Regulation conference, since this area has strong implications for adult affective and personality disorders.

Thanks are due to Dr. Rup Pandya, the resident pharmaceutical liaison, and Christine Keillor of GlaxoSmithkline, for organizing a very nice dinner for Dr. Bradley and psychiatry residents at The King and I restaurant.

Joan Besant
recommendation no. 8 of the Mazankowski Report. Now that there is an adequate number of psychiatrists in the Region for the day-to-day operations, we as physicians should be spending more of our time focusing on quality. We have established a process for Quality Management in the Mental Health & Psychiatric Program. I would like to invite you all to participate in more quality-related activities over the next five years. This can be done by individuals through self-audit processes that are well rewarded by the maintenance of certification program of the Royal College. It can be done by Clinical Medical Directors, who spend time with their managers looking at feedback from Patient Satisfaction Surveys. The Program Medical Directors need to support and encourage Quality Improvement projects within their portfolios. We have established a highly competent Information & Evaluation Unit, headed by Dr. Harvey Smith. The Unit is involved in a range of information management, quality improvement, utilization management and evaluation projects. We are in need of increased physician involvement in that process. I am advertising again this year for a psychiatrist to commit at least a half day a week to supporting Quality Improvement projects in the Region.

Don Addington

The Department is also offering workshops for people to learn about Quality Improvement strategies.

In summary, we are looking at an increased role for the Department in Southern Alberta within a framework of more focused accountability for mental health services. This combination offers us an opportunity to focus more on quality.

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**Newsletter Title**

As you may have noticed, the psychiatry newsletter now has an official title: Mind Matters. Psychiatrists and residents sent in several options, and then voted from the list of titles that were submitted. A total of fifty-eight votes were received, which were distributed as follows:

- Calgary Psychiatry Newsletter - 14 votes
- Shrink Rap - 13 votes
- Mind Matters - 23 votes
- Brain Bites - 2 votes
- The Rapport - 2 votes
- Psychiatry Insights - 2 votes
- Psychiatry Outlook - 2 votes

Dr. Suparna Madan, PGY-4, submitted the winning title and will be presented with a dinner gift certificate for two! All voters will receive a coupon for a free coffee & muffin.

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**Awards & Promotions**

The Department would like to congratulate the following faculty members on their promotions:

- Dr. Liya Xie to Assistant Professor
- Dr. Adam Moscovitch to Associate Professor and Dr. Ken Hashman also to Associate Professor.

Four psychiatrists were nominated by the Department for Recognition Awards for Clinical and Adjunct Faculty in the following categories:

- Dr. Janet Wright - Undergraduate Medical Education
- Dr. Arlie Fawcett - Postgraduate Clinical Education
- Dr. Denis Morrison - Continuing Medical Education
- Dr. David Hodgins - Research

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The Newsletter for the Regional Clinical Department of Psychiatry is distributed quarterly to all psychiatry medical staff and faculty, psychiatry residents, Program Directors, CHP Medical and Executive Directors, CHP CMO and COO, Chair MAB, Mental Health Executive Director & Executive Medical Director, and psychiatry support staff.

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