Minders

The Newsletter for the Regional Clinical Department of Psychiatry

Volume III, Issue 3

Fall 2003

From the Department Head

Clinical Services continue to operate through the summer, so that we are at times busier providing coverage to our colleagues. It is important to remember that. when planning vacations and absences, we are independent professionals with responsibilities to our patients. These responsibilities include ensuring coverage when we are away. This is best done through long-term collegial professional relations based around clinics and services.

Over the summer, the Departmental Executive has been working on a number of related issues.

Regional Sessional Contract

In the nineties, Alberta Health Care transferred the contract for sessionals from Alberta Health to the Regions. The first contract reflected much of the terminology of the older contract. That contract is being renegotiated to reflect the context of the expanded health region and the role of an integrated clinical and academic department in relation to the regional Mental Health Program.

Roles and Responsibilities of Psychiatrists

Psychiatrists function in a variety of roles in the Region. These include administration, research,

education and program evaluation. In addition, they can function clinically as either consultants or as direct care providers in their role as attending physician. We are trying to clarify these roles and responsibilities, link them to in-

dividual programs and services and to sessional remuneration. The goal of this activity is to improve the accountability of the sessional contract and to improve the care provided.

Two new clinical services are coming online. These include 20 new acute care beds at the Rockyview General Hospital, and 10 geriatric psychiatry rehabilitation beds at the Glennview Nursing Home, increasing to 20 in January 2004. These services

standing priorities for the Department, increased acute care

beds for South Calgary and geriatric rehabilitation in Calgary. Dr. Kent Sargeant has agreed to be the Clinical Medical Director for the new inpatient unit, and Dr. John deVries to be the Clinical Medical Director for Psychiatry on the Rehabilitation Unit. Dr. John Bradley is the

Clinical Medical Director for Family Medicine on the Rehab Unit.

Don Addington

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Residents' Corner

I'd like to begin my submission to Mind Matters by going back to a warmer place and time - the Elbow Springs Golf Course on June 23, 2003. The residency golf tournament was a resounding success. We had sun, wind and an eclectic group of golfers, which made for a very entertaining day for all of us. A grateful thank you to all the tolerant veteran golfers - it will take the rest of us a few more tournaments to get up to par! Lenora Forchert and Dr. Miyauchi were excellent in spearheading this event; the residency program is forever in your debt.

Residency numbers continue to ebb and flow. Although one of our residents moved to another province this summer, we now have accepted another resident through the transfer process within the Faculty of Medicine. Please join me in welcoming Dr. Rory Sellmer to our group of first year residents. We now have six PGY-1 residents in our program.

On behalf of Dr. Steve Simpson,

Chair of the Residency Curriculum Committee, I'd like to thank Dr. Yinka Marcus for agreeing to join the Curriculum Committee. Your input will be much appreciated. Janet Caldwell will be providing interim administrative support for this committee; please contact Janet (944-4781) regarding any curriculum issues.

Dr. Tim Yates, Chair of the Psychotherapy Committee, is currently researching possible workshops for staff and residents with visiting psychiatrists specializing in various forms of psychotherapy. As further information becomes available, Dr. Yates or myself will be sure to let you know. Dr. Yates hosted a mini-retreat in mid-August that was well attended by faculty and residents; the purpose of this retreat was to prepare for the upcoming academic year and to investigate potential learning opportunities. It was gratifying to see strong representation from the Department of Psychology; our sister department has excellent resources and staff to complement

residency - and faculty - training.

The American residency exams, also known as the PRITE, will be administered over September 26 and October 3 (Fridays) in the afternoons to second, third, fourth and fifth year residents (unless otherwise arranged.) Please note residents will be required to be at the Foothills for 1300h on these two days.

Over the summer the Department was enriched by two fellows: Dr. Joann McIlwrick, who is doing a fellowship with the Early Psychosis Treatment Program at FMC, and Dr. Suparna Madan, who, after graduating from our Residency Program this summer, was awarded an Eli Lilly Fellowship in Geriatric Psychiatry. She is working in Geriatric Psychiatry at RGH.

The upcoming year promises to be busy! I look forward to seeing you at the Faculty Meet 'n Greet on November 21.

Bev Adams

Residents Scholar Development Fund



I am delighted to report that our second annual Invitational Golf Tournament was a resounding success. The generous contributions from both participants and non-participants to the Residents Scholar Development Fund raised approximately \$11,500. I would like to especially acknowledge Pauline Burgess, Education Program Coordinator to the Residency Training Program, for her financial contribution, as well as

volunteering to raise more money on the par 3 hole. I would like to also thank Lenora Forchert for her tireless effort to get the tournament together.

Dr. Chris Mason has kindly offered to be the PLC representative to help get a stronger turnout for next year's tournament. I will be sending invitations to the psychiatrists in the newly expanded Region. It will give us an opportu-

nity to catch up with everyone.

Next year's tournament will be held again at the Elbow Springs Golf Course on **June 28, 2004**, starting around one o'clock. I hope to see all of you.

On behalf of the Department of Psychiatry and the Residents, I would like to express our thanks!

David Miyauchi

Undergraduate Education

The MIND Course

The annual psychiatry course for second year medical students, commonly known as the MIND course, has undergone further revisions from last year. Dr. Chris Blashko has been instrumental in working with faculty to revise the students' core document and small group cases to meet the standards and formats used across the Faculty of Medicine's undergraduate program. A hearty thank you to Chris and all the lecturers who have endured several hours of 'red pen time' to make this document work!

As you may remember from last year, Dr. Lauren Zanussi has been very involved in undergraduate teaching throughout his residency, including elective time devoted to this area. Due to family illness, I have had to 'step back' this year from the organization of the MIND course and Lauren, now co-chair of the MIND course, has competently taken over preparations. Lauren, I owe you!

It is very encouraging to our Undergraduate Committee to see the response to assist in teaching not only from prior teachers, but from new graduates and the residency program. Of the fifty-six small group teaching times, about one

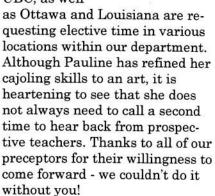
half are hosted by new faculty and residents. In clinical correlation (sometimes known as "bedside teaching rounds"), we are happy to see that here also about one half of the twenty-three faculty are relatively (<3 years) new to our department.

On September 12, many of the faculty involved in the MIND course attended our first ever information session. Hosted by Lauren, the group learned about the inner workings of the three major components of the course: lectures, clinical correlation and small group teaching. This was a very insightful and educating session for all of the teachers and support staff, carried by a very entertaining speaker!

Also new to the department is my new academic assistant, Linda Billings. Linda will be working closely with Pauline Burgess in coordinating undergraduate experiences (i.e. MIND course, clerkship) in our department. Please join me in welcoming Linda to our department.

Clerkship

Here's a definite sign that Calgary is the place to be for training! We are being 'scouted' by medical students not only from the prairie provinces, but also from schools further afield: clerks from UBC, as well



At Foothills, we have begun to arrange journal clubs/case report noon hours for the clinical clerks. Clerks take turns presenting interesting cases or journal articles with the assistance of their preceptor and perhaps another faculty member on Tuesdays. Thanks to the pharmaceutical representatives for Astra Zeneca. GlaxoSmithKline, Lilly and Wyeth for agreeing to support these luncheons. If you would like to participate in one of these sessions, please contact Pauline (944-1271) for further details.

Nancy Brager

Medical Education Seminar Series

The Continuing Medical Education Office in the Faculty of Medicine is arranging a Medical Education Seminar Series for faculty and residents. Topics all carry an educational or evaluational theme that is applicable to all facets of medicine.

Seminars run in the school year (September to June) and are in Room G388 of the Health Sciences Centre on Wednesdays at 1600 hours. For more information or to be added to the mailing list, contact Jane Brown at 220-7240.

Development of A Provincial Mental Health Plan is Underway

Alberta's nine Regional Health Authorities and the Alberta Mental Health Board, in partnership with Alberta Health and Wellness and the Alberta Alliance on Mental Illness and Mental Health, are developing a plan for the province that will guide the way mental health services are delivered. This is the next step in the evolution of mental health service delivery in the province. It follows the transfer of responsibility for mental health programs and services from the Alberta Mental Health Board to Alberta's health regions earlier this year.

Under that restructuring, responsibility for community and facility-based mental health services was transferred to the health regions. The Alberta Mental Health Board retained responsibility for province-wide services and programs such as forensic, psychiatry, suicide prevention, aboriginal mental health and tele-mental health.

The Provincial Mental Health Planning Project's Steering Committee includes representatives of the nine health regions, the Alberta Mental Health Board, Alberta Health and Wellness and the Alberta Alliance on Mental Illness and Mental Health. The Alliance will help ensure that the plan includes the views of service providers and people with a mental illness.

"As the integration of mental health services takes hold in each of the health regions, it becomes cal that we critidevelop a joint vision of the future". said Ed Andersen, chair of the Steering Committee and Chair of the East Central Health Region

the East Central Health Region Board. "We have the right people at the table and will be looking for the input and active participation of patients, clients, families of people with a mental illness and service providers."

"The mental health field is characterized by the strong dedication of people providing services they know are vitally important", said Ray Block, co-chair and CEO of the Alberta Mental Health Board. "We need to work together to establish a system that will serve the mental health needs of Albertans in the best way possible."

The Steering Committee's work plan includes extensive consultation, including:

- One-on-one interviews with stakeholders.
- Focus group sessions with members of aboriginal communities, service providers, consumer groups that represent persons with different mental illnesses, members of regional mental health networks, people employed with Alberta's four psychiatric hospitals, and associations representing family physicians, psychiatrists and psychologists, among others.
- An invitation to the public to provide their views, with ads going into daily and weekly newspapers early in September.

The information gathered will be provided to working groups that have been established to look at service plan models, funding, accountability, human resource development and research and evaluation.

The plan will be submitted to the Minister of Health and Wellness by the end of 2003.

Rollie Nichol

New CPD Director

Dr. Steve Simpson was recently appointed Continuing Professional Development Director for the Department of Psychiatry, taking over from Dr. Tim Yates. In this capacity Dr. Simpson will be administering the CPD Fund and chairing the CPD Planning

Committee.

The purpose of the CPD Fund is to support the activities of the University of Calgary Department of Psychiatry CPD Committee. This would include journal club meetings, rounds, guest lecturers, and other educational activities deemed appropriate by the CPD Director.

Thanks to Dr. Yates for his valuable work and success to Dr. Simpson!

Consultation-Liaison Services in Calgary Region

As most of you are aware, C-L Services in the Region (at least the Adult sector) are primarily based out of the three hospitals. The respective services in FMC, RGH and PLC each have a slightly different model of delivery, but all provide Consultation to the Medicine/Surgery areas of the hospitals for patients with Mental Health concerns. At times, this means concerns which arise directly from their illness, such as mood problems due to the use of corticosteroids. Other times, the physical problems may be due to their psychiatric problems, such as for people who have been admitted with Tylenol overdoses. Often we are asked for assistance with patients with delirium or dementia. Depression and anxiety are also often part of the picture. For us in Mental Health, there are no surprises here.

Over the last year, each site has had times of challenge in keeping up with demand for services. On the one hand this has been due to challenges in finding psychiatrist time, on the other, the problem was finding enough support staff (or funding for them). Despite the inevitable challenges in keeping up a service for which we have no way of limiting demand (not unlike Emergency), each service has done an admirable job in responding to the needs and challenges of the rest of the inhospital sector in the Region.

Over the years, there has been interest in expanding beyond the Acute Care areas, to provide regular consultation to other areas, especially those affected by chronic disease. Currently, there are such initiatives (done with little support and tremendous good will) to consult regularly to the MS Clinic, the Cancer Centre (outpatients), renal dialysis, the Southern Alberta Clinic (HIV), and so on.

In the last six months, we have taken another initiative to start providing some Mental Health consultation to patients who are under age 65 in selected nursing homes. To this end, the Region hired Lisa Bouche, MA to assist. with behavioural consultations at Glamorgan Nursing Home. We have also attempted to provide some psychiatric input for Southwood Nursing Home, although this has had some unforeseen challenges. At this time, we are exploring the possibility of extending consultation to the Fanning Centre. This is proceeding slowly with the intent to make sure that we can provide useful input without becoming overwhelmed by a demand which we could not possibly respond to in a reasonable way.

As we look to the future, the Division hopes to help develop a network of expert consultation to the community of chronically ill adults within the Region. With the financial constraints we all have, this will continue to require creative alliances with other clinics within the Region, and rely on the interest and energy of our clinicians, as it always has.

Michael Trew



Dr. John McLennan joined the Department of Psychiatry in September. John is a child psychiatrist who is finally returning to Alberta, after further education. He completed a Master's in Public Health at the University of North Carolina. For the last three years, he has been studying for a PhD at McMaster University, supported by an Alberta Heritage Foundation for Medical Research fellowship, He is returning to Alberta with a joint appointment in Community Health Sciences and the Department of Psychiatry. He has succesfully obtained two salary

awards, one from AHFMR as a Population Investigator, and an equivalent award from the Canadian Institutes of Health Research. During his one day a week of clinical activity, he plans to link a clinical interest in Attention Deficity Disorder with the development of treatment algorithms. He presented rounds earlier this year on the clinical research gap in children's mental health. We welcome him to the Department of Psychiatry and wish him luck with his research project.

Don Addington

CHR Welcomes Claresholm Care Centre

The Specialized Services Program would like to officially welcome Claresholm Care Centre (CCC) to the Calgary Health Region. CCC is a community focused psychiatric facility providing treatment, education, and support services dedicated to maximizing the ability of mental health consumers to live independently. Clients who are accepted to CCC generally have multiple diagnoses, often complicated by addiction as well as personality disorders. A Steering Committee is presently in place with input from programs from Calgary, Medicine Hat and Lethbridge to further clarify Intake Criteria and improve liaison with other hospitals and services. As the target population are people with severe, persistent, and complex mental illness with relapses and disabilities, higher intensity of resources is required

from the interdisciplinary team. The client profile would be patients with potential for skill development and willingness to participate in ongoing programs.

CCC has potential for about 100 patients, and consists of three residential units: (1) Rehab North serves 20 clients with serious psychiatric illness and provides short term assessment and treatment with focus towards restoration of adaptive functioning; (2) Rehab East serves 40 clients and provides management, educational and supportive services as well as skill development with the goal of restoring one's social adaptation and living skills; (3) Rehab West serves 40 clients with severe and persistent mental illness who are especially treatment-resistant with focus on supportive rehabilitation. Management at CCC involves various treatment modalities including: pharmacotherapy, various forms of group therapies, vocational rehabilitation, and social support. There is also a Community Support Services for about 40 clients living in the Claresholm community which provides crisis management, telephone support, medication monitoring, and day treatment.

The psychiatric team at CCC is headed by Dr. Hugh Colohan as Medical Director, together with Drs. Herb Cohen, Jane McCruden, Catherine McKercher, and Paul Cameron. The psychiatrists as well as the managers will be eager to continue to receive feedback from the rest of us regarding the referral process.

Henry Chuang





University of Calgary
Department of Psychiatry
FALL SOCIAL 2003
MEET & GREET DINNER
has been moved to
Friday, November 21, 2003

(not: September 19)
University of Calgary Faculty Club
6:30 pm cocktails, 7:00 pm dinner
Invitations will be sent closer to the date.



Research Office

A component of the Department of Psychiatry's mission is to conduct and disseminate research in psychiatric disorders. As a way of better fulfilling this mission, the Department has created a new position: that of a Research Director, and has designated space and facilities for a Research Office. The Research Director and Research Office will develop procedures to support research (e.g. needs assessment, internal peer review, consultations), help to coordinate Departmental activities related to research (e.g. research day) and by directing the development of material and administrative infrastructure conducive to research.

I have been appointed to the position of Research Director. The Research Office is physically located at the Peter Lougheed Centre in the Psychiatry Administration area. I will be available to meet with

researchers, currently on Tuesday mornings, about projects and research ideas. These meetings could be about specific technical issues (e.g. sample size calculations), about developing new research ideas, finding sources of funding, refining written proposals etc.

These are exciting times for research in the Department. As most of you are aware, Dr. JianLi Wang has joined the Department as an Assistant Professor, Dr. Wang holds a PhD in epidemiology, and prior to his appointment here completed a two year post-doctoral fellowship at Dalhousie University. Dr. John McLennan, a child psychiatrist who is in the final stages of completing a PhD from McMaster University in Health Research Methodology, has also joined the Department. Dr. McLennan is supported both by the Alberta Heritage Foundation for Medical

Research and by the Canadian Institutes of Health Research. Both Dr. Wang and Dr. McLennan are cross appointed with Community Health Sciences.

Another exciting development is the ongoing planning for the Calgary Brain Institute. This institute will help to create better and more productive linkages between the Neuroscience Research Group and affiliated clinical departments, including Psychiatry.

The Department is building upon pre-existing strengths in the areas of Schizophrenia and Addiction. Strong linkages with Community Health Sciences and promising new opportunities through the Brain Institute bode for a bright future for research in the Department.

Scott Patten

A number of changes and new initiatives have arisen over the summer months within the Quality Improvement initiative in Mental Health and Psychiatric Services. In June, the Quality Council for Mental Health and Psychiatric Services was restructured to reflect the new network relationships between services, as well as to include the rural services now included in the Calgary Health Region. The mandate for the Quality Council was also revised to reflect the changes within Mental Health and Psychiatric Services. The Quality Council will now serve a dual purpose

of both sharing information on

within individual programs and

quality initiatives occurring

Updates in Quality Improvement services. The second team ex-

services, as well as to coordinate large regional QI projects across the continuum of care.

Mental Health and Psychiatric Services has joined the Calgary Health Region's Patient Flow initiative. Three teams from within Mental Health and Psychiatric Services will be taking part in looking at flow, both within their services and across the care continuum. The teams reflect a wide scope of care from both inpatient and outpatient services. The first team looking at patient flow is the Schizophrenia Continuum of Care Team and involves Central, NE,

EPTP, OSS, ACT, Claresholm Care Center, and Inpatient amining patient flow is Unit

27 at the PLC. The third team involved in the Regional Collaborative is Psychiatric Emergency Services at FMC. Over the next few months, the three teams will be trialing new processes aimed at improving patient flow through their programs and services. If you are interested in further information regarding these exciting new initiatives please contact: Dr. Jane McCruden, Quality Improvement Physician at 943-5469 or Lisa Stewart, Quality Improvement Consultant at 297-2324.

> Lisa Stewart & Tane McCruden

News from Primary Community Care



Perhaps the biggest change for the Primary Community Care (PCC) Program over the past 6 months has been the devolution of the Alberta Mental Health Board and the inclusion of the rural mental health clinics into the PCC portfolio. Welcome to the rural clinics and, in particular, to the psychiatrists who work in the clinics: Dr. Paul Cameron (High River, Black Diamond, Okotoks and Claresholm), Dr. Herbert Cohen (Airdrie), Dr. Gerald McDougall (Banff), Dr. Dianne Maier (Strathmore, Vulcan), Dr. Badri Rickhi (Cochrane), Dr. Heather Scott (Airdrie) and Dr. Doug Watson (Canmore).

Shared Mental Health Care has also taken a monumental step

forward with the development of an Alternative Payment Plan for the family physicians and the psychiatrists. This has been an important step towards stabilizing this unique and innovative care delivery system. The Mental Health &Psychiatric Services Executive has received budgetary approval for the expansion of Shared Mental Health Care and we will be looking for more psychiatrists to be participating in the near future.

The Mental Health Information and Options Service (MHIOS) has become operational and is closely aligned with HealthLink. This innovative service has been well received and we are starting to notice a shift in workload away

Mental Health Home

from individual clinics, thus allowing them to have more time to focus on clinical work. The operational control of MHIOS has now shifted out of PCC as the focus becomes increasingly on the development of a central system to streamline access to clinics.

The Diversion Project has completed its evaluation and has shown to be highly effective and helpful to those individuals that it has been involved with. Armed with this evaluation, the Mental Health & Psychiatric Services Executive will be looking for continuing funding to allow the project to become an ongoing program.

John Tuttle

The Mental Health & Psychiatric Services Web Site was

launched this summer. It lists all mental health services and programs, with links to the programs' web sites if they are avail-

able. There are links to various reports and publications, special features, and learning and development. Click on the link

for "Mental Health & Psychiatric Services" at the bottom of

the CHR Home Page to get to the internal web site, or go to iweb.crha-health.ab.ca/

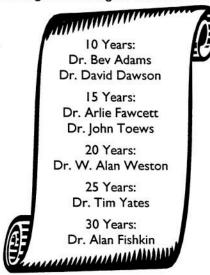
mh. There is also an external version, be found at www.calgaryhealthregion.ca/mh.

Click and have a look!

which can

Long Service Awards

Congratulations to the following physicians who will be receiving a CHR Long Service Award this fall:





The Newsletter for the Regional Clinical Department of Psychiatry

is distributed quarterly to all psychiatry medical staff and faculty, psychiatry residents, Program Directors, CHR Medical and Executive Directors, CHR CMO and COO, Chair MAB, Mental Health Executive Director & Executive Medical Director, and psychiatry support staff.

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