

The Newsletter for the Regional Clinical Department of Psychiatry

Volume V, Issue I Spring 2005

## From the Department Head

Over the winter, a number of important initiatives have made progress. A new Division of Health Sciences has been created within the University. This will include the Faculties of Medicine, Nursing, Veterinary Medicine and Kinesiology. The Faculty of Nursing will be moving across 16th Avenue into the Health Sciences Centre. This will increase opportunities for multidisciplinary learning.

Mental Health Research Program

A new Mental Health Research Program is being developed in the Brain Institute under the leadership of Dr. Scott Patten. This program will focus on Epidemiology, Health Services Research and Surveillance Research. This should provide a home base for the Department's increasing focus on these areas of research and provide a base for a provincial Mental Health Services Research Unit. It will also increase the profile

of mental health within the Institute.

**New Forensic Centre** The new Southern Alberta Forensic Centre is taking shape in northwest Calgary. This will allow the current forensic unit to move from the Peter Lough-

eed Centre Keep looking out for signs of spring! vanand allow it to expand. The Short Stav Unit will then move into that space, so that construction can begin for the PLC expansion. The expansion will include a purpose built and designed Short Stay Unit. The psychiatrists and staff on the Short Stav Unit have shown great forbearance in putting up with uncomfortable

**Urban Travel Policy** The Department's Executive has approved a new policy for funding

physical surroundings

for a number of years.

travel within Calgary in support of nontraditional health ser-

> vice delivery models. The policy has been circulated to all the members of the Department and has been discussed at all site meetings. In the next fiscal year, Mischelle

> > Thiel,

Manager of the Department, will work with the Program Medical Directors to incorporate it into either current sessional budgets or expanding sessional budgets.

Alternative Relationship Plan

The Executive has also approved in principle a document outlining the case for an Alternative Relationship Plan for the Academic Department of Psychiatry. The core of the Academic Department includes

Geographic Full-time Members of the Department (GFTs), however, many other members of the Department play

Continued on page 11

#### Inside this issue:

Residents' Corner	2
Undergraduate Education	2
Seb. K. Littmann Research Day	3
Inpatient Psychiatry	4
Golf Tournament	5
Accreditation	6
Help Wanted	6
TDS Unplugged	7
Welcome	7
Primary and Community Care	8
Arnika Centre	9
Vision, Mission & Values	10
From the Department Head - Continued	11
Awards & Promotions	11





#### The Canadian Resident **Matching Service** (also known as CaRMS) working in our favour again

This year, we have five excellent new students slated to start on July 1, 2005. Join me in welcoming Drs. Susan Brownell, Christine Chang, Aaron Mackie, Heidi Solty and Jason Taggart to our program. Jason joins us from Dalhousie and the rest of the new residents are from Calgary.

The Residency Training Committee interviewed twenty-four applicants over five interview periods. The lunch hour consisted of an overview of the program developed by Drs. Darcy Muir, Rory Sellmer and Jeremy Quickfall, followed by a short talk by junior faculty. In addition to the lunch hour and the traditional tour of the site, Dr. Bina Nair also organized a preliminary information package that was sent out to each applicant prior to the interviews. Also, residents invited the applicants to an evening gathering to informally meet their potential future peers. This was a lot of work for the residents and I commend them on taking this extra initiative. It paid off!

At the other end of the training spectrum, our final year residents have each completed two successful long case interviews. The written portion of the exam will occur over April 19 and 20, shortly followed by the third component. The Phenomenology Diagnosis and Management stations will be organized in Ottawa for Psychiatry examinees from across Canada April 27, 28 and 29. Best wishes go to the five residents in our program scheduled for these exams: Drs. Carl Adrian, Jordan Cohen, Ian Forbes, Rup Pandya and Tyler Pirlot.

Ber Adams

### **Undergraduate Education**

April 24 marks the end of another clerkship year for Calgary. We had 100 core rotation clerks training in the three main venues, as well as spending clinic time at ACH (next year we have 116 students). In addition, our thirty elective students, both from the U of C and other programs, also spent a minimum of two weeks with our Department. Teaching students absorbs much of a preceptor's day and I sincerely appreciate the extra time and effort it takes to provide students with this experience. My heartfelt thanks to all of you! Your efforts show in the strong number of local students that choose to stay here for residency, particularly our program in recent years.

Clerk seminar schedules are cur-

rently under review - we are looking for lecturers at PLC and FMC to cover several topics. If vou are interested in contributing one hour every six weeks, please contact Pauline Burgess at 944-1271.

Our next Undergraduate Retreat is slated for March 11. This has consistently been a useful time to review and brainstorm. In the next newsletter, I'll share some of the main points that arose from this retreat.

Please join me in welcoming Diana Silva to the Department. Diana has been working with Dr. Will White and has agreed to take on the secretarial role for myself as well. She is currently compiling ACCESS income reports for 2004 for faculty involved in clerkship in the past calendar year.

Last, but definitely not least, I am extremely happy to congratulate Dr. Lauren Zanussi on receiving not one but two prestigious teaching awards. In recognition of the superior quality teaching in Communications and the MIND Course, Dr. Zanussi was awarded the Faculty of Medicine Undergraduate Medical Education Award. Nationally, Dr. Zanussi received the Canadian Association of Medical Education (CAME) 2005 Certificate of Merit Award. Lauren has spent countless hours - even during medical school - tutoring, composing, researching and redefining his teaching skills. These awards are a well deserved honour.

Nancy Brager

### Sebastian K. Littmann Research Day 2004

This year's Sebastian K. Littmann Research Day was, perhaps, the biggest ever. There were 38 abstracts submitted, covering a very broad range of research activities within the Department. The guest speaker, Dr. Colin Shapiro from the University of Toronto, special presentations by Dr. Cynthia Beck (Evidence-based Medicine) and Dr. Beverly Adams (CanMed Roles) brought the total number of academic presentations during Littmann Day to over 40. This year, the Research Day was attended by over 120 people.

Awards for Best Resident Research Project and Most Innovative Resident Research went to Dr. Jordan Cohen and Dr. Jeremy Quickfall, respectively. Works in progress were presented by Dr. Ian Forbes (psychopharmacology trials), Dr. Cristin Fitzgerald and Dr. Sara Binder (a behavioural activation research protocol). Presentations made by several graduate students were of such high quality that it will be essential to recognize their contributions in some way. perhaps with a new award next year. The very active research programs at the Addiction Centre, Early Psychosis Treatment Service and Dr. David Cawthorpe's group were represented, as were some of the Department's senior faculty including Dr. Karl Tomm, Dr. Peter Roxburgh and others.

The profile of Littmann Day seems to be ever-increasing. In the next few years, we are likely to see the emergence of new "research showcases" - for example, a provincial showcase is a component of the new Alberta Mental Health Research Plan. A new showcase may also emerge from the Mental Health Interest Group currently being formed under the direction of one of our full-time faculty, Dr. John McLennan.

The Littmann Day continues to attract interest from the Mental Health Program and from Departments on Campus. I often hear the Research Day described as an example of a successful Department-based research forum. Thanks to everyone who participated!

Scott Patten



Dr. Colin Shapiro



Dr. Jeremy Quickfall receives the Award for Most Innovative Resident Research from Dr. Scott Patten



Dr. Scott Patten presents the Best Resident Research Project Award to Dr. Jordan Cohen



Yvette Kosidowski, Admin Secretary at PLC, receives flowers for her 35th anniversary with the Region



Dr. Wilkes presents the Child&Adolescent Research Award to Susan Ponting, MH Therapist at FACS

### **Inpatient Psychiatry**

It is hard to believe that the 4th Invitational Golf Tournament, in support of the Residents Scholar Development Fund, is rapidly approaching. It will be held on Monday, June 20, 2005 at the Elbow Springs Golf Course. You have all received the invitation created by Ms. Janet Caldwell, one of the secretaries in Psych Admin at FMC, who has graciously accepted to organize the event. It has proven to be a very successful event in the past, regardless of whether you are a scratch golfer or a completely novice duffer. The purpose of the event is to have fun and to gradually build the trust fund up to \$500,000.

In the meantime, we have been very fortunate that Mr. and Mrs. Ron Goodfellow have established a fund with the Calgary Health Trust in memory of their son, Michael. Their wish is to promote and support bright young minds to conduct research in the field of Child and Adolescent Psychiatry. It is their intention to be able to give an award annually for a deserving project. The first recipient of this award in the amount of \$2.500 is Dr. Cherelyn Lakusta, who conducted a study on "Family Functioning and Youth Suicide" during her fellowship vear under the supervision of Drs. Chris Wilkes and Karl Tomm. I was very pleased that both Ron and Marilyn Goodfellow were able to attend Dr. Lakusta's presentation at the Alberta Children's Hospital. I am very grateful that we have such strong community leaders supporting psychiatric research, especially by our residents.

From a service standpoint, I would like to thank Dr. David

McMullen for providing psychiatric emergency coverage in the mornings at the Rockyview General Hospital. He returned to private practice in February of this year. There will also be changes at the Foothills Medical Centre and the Peter Lougheed Centre for psychiatric emergency service. Dr. Zahinoor Ismail is taking a one-year sabbatical to do a fellowship in geriatrics at the Sunnybrook Hospital in Toronto. Dr. Phil Stokes, who has been heavily involved in the planning of the new Emergency Department at the Peter Lougheed Centre, will be going on a six-month study leave in July of this year. The order in which medical clearance is provided remains an issue in the Emergency Department. There will be a joint departmental QI project to address this issue to determine the most effective, efficient and efficacious delivery of service for psychiatric patients presenting to the Emergency Department.

On a high note, the Short Stay Unit at PLC will finally be moving out of their "trailers", into Unit 37, after it is vacated by Forensics in June of 2005 and renovations are completed. It will subsequently move into the main floor of the new east tower. The capacity of the Short Stay Unit has been increased to 16 beds. Dr. Lloyd Maybaum has been successful in recruiting Dr. George Duska to be the fourth psychiatrist on the unit, so that seven day coverage by the psychiatrists could be maintained. They have also established a follow-up program to facilitate early discharge, to provide short term care and to provide care while patients are waiting to get into programs.

As part of major capital expansion at the PLC, a functional plan for

an Inpatient Medical and Psychiatric Unit was developed. Dr. Roger Kathol, who established such a unit in Iowa City in 1986 and who has consulted extensively both nationally and internationally, was asked to conduct a feasibility assessment for integrating Inpatient Medical and Psychiatric Care. He felt that a 14 bed Type III medical psychiatric unit would contribute substantially to improved patient care, lower overall health care cost and obtain greater bed capacity. Champions for such a unit are Dr. Elizabeth MacKay, Site Chief for Internal Medicine, and Drs. Tom MacKay and Lauren Zanussi. Dr. Kathol felt that success of such a unit depended on also having an integrated collaborative outpatient service. An architectural plan has been drawn, but final confirmation has not yet been received.

I would like to applaud the staff on Unit 45 for taking the initiative to search for more innovative and more fulfilling models of care, which heavily involves the patients in the process. They have made a site visit to the Royal Ottawa Hospital to observe how the Tidal Model of Care works.

Considerable contributions have been made by numerous members, in addition to the leadership provided by the Clinical Medical Directors. I would like to acknowledge Dr. Terry Fauvel for his work on regional order sets, Dr. Pamella Manning for representation on the Regional Patient Care Information System, Dr. David Tano for chairing the Regional ECT Committee and Dr. David Crockford for serving on the Regional Smoke Cessation Program.

David Miyauchi



### 5<sup>th</sup> ANNUAL INVITATIONAL GOLF TOURNAMENT

for the

Department of
Psychiatry
Resident's Scholar
Development
Fund



MONDAY, JUNE 20, 2005

Tee off commencing @ 12:30 P.M.

ELBOW SPRINGS GOLF CLUB

Entry Fee: \$275.00 (includes \$150.00 charitable donation)

#### Entry Fee includes:

18 holes of golf Use of a golf cart Hole-in-one prize Dinner

AND

A chance to win:

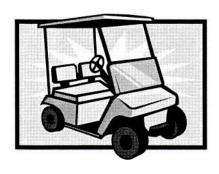
Team prizes
Individual prizes
Closest to the pin prizes
Draw prizes

Non-golfers welcome

The tournament will be a Texas Scramble. Maximum two mulligans per person - purchase at event.

Don't miss out on a fun day!

If you have any questions, please contact Janet Caldwell at 944-4781



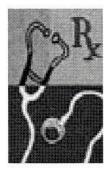


### It's Time Again for Accreditation

The Accreditation Review Team will be making its way to the Calgary Health Region sometime in mid-April. It feels like we just went through the whole process recently, but we also learned that being prepared for whatever issues may arise is important. As a result, Ms. Iris Penwarden, Risk Management Coordinator, had already rounded up a dynamic

team comprising different areas and services in the Region right after the last Accreditation process about three years ago. This Team has been meeting on a regular basis, and more so recently in order to evaluate our own performance and identify areas of improvement. The Accreditation Review will focus on the following:









- 1. Being a Learning Organization and Achieving Positive Outcomes.
- 2. The Team Uses Research, Evidence, and Best Practice Information to Develop and Improve its Services.
- 3. The Team Monitors and Improves the Quality of its Services to Achieve the Best Possible Outcomes.
- The Team, Working with the Community, Promotes Health, Prevents or Detects Health Problems early, and Maximizes the Wellbeing of Those it Serves.
- 5. The Team's Services are Integrated and Coordinated to Ensure Continuity of Service for the Population it Serves.
- 6. The Clients' first Contacts with the Team Lead to the Best Decision about Services.
- 7. The Team Accurately and Appropriately Assesses its Clients.
- The Team Works with Clients and their Families to help them Actively Participate in Service Delivery and Carry out their Responsibilities.
- 9. The Team Obtains Informed Consent before starting any Service or Intervention.
- 10. The Team Protects and Promotes the Rights of its Clients and Families.
- 11. The Team has an Appropriate and Integrated Service Plan (Goals) for each Client.
- 12. The Team Delivers Safe, Efficient, and Effective Services.
- 13. The Use of Medications and other Therapeutic Technologies is Safe, Efficient, Effective, and Promotes the Best Possible Quality of Care.
- 14. After Transition or End of Service, the Client's Ongoing Needs are met and Continuity of Service is Maintained.

Henry Chuang

### Thank you to Drs. Pamella Manning and Henry Chuang

Drs. Pamella Manning and Henry Chuang participated in the accreditation of the Mental Health Program that has just taken place. Psychiatrist participation in accreditation is an important reflection of our overall involvement in the Mental Health Program. Our thanks goes to both of the psychiatrists who put a great deal of time and effort into this process.

Don Addington



#### Wanted:

Psychiatrist(s) interested in working with the team in **Shared Mental Health Care** within Calgary. This consists of working with Mental Health Clinicians and Family Physicians. For further information contact Dr. Michael Trew at 943-3805.

#### Wanted:

Psychiatrist(s) interested in working with patients in Nursing Homes under the age of 65. The time involved could vary from a few hours per month to 1/2 day per week. Fur further information contact Dr. Michael Trew at 943-3805.

### TDS Unplugged!

So, what do you want to read about first, the good news or the bad? The bad you say? Okay, TDS (Oscar) will be unplugged in the spring of 2006, and all of the information including order sets will be lost. The good news? Before that happens, Sunrise Clinical Manager (SCM) will come online with new order sets and a new information management system. We at the Rockyview haven't had Oscar so we are just starting to use an abbreviated version of SCM this month (without order sets).

In case you don't know, an order set is a bunch of orders that are written at one time, such as admission orders. The benefits of order sets are that they save time, they provide an "aide memoir" for completeness and they represent best practice standards in the Region.

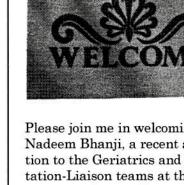
The current version of SCM is for inpatient orders only - outpatient ordering is still in the conceptual stage. As your representative for developing new SCM order sets I have been harassing some of you to write a template of orders. These must be acceptable to all three inpatient sites and so far

Order sets online

there are sets for admission orders (general and geriatric), ECT, dementia workup, clozapine startup and lithium startup. An alcohol withdrawal set is under development interdepartmentally. Rose Richea, Project Team Leader for order set development, and I discuss these further so that they can be prototyped by software programmers. You will be able to use them in the spring of 2006. We will also have access to order sets from other departments if so desired. Child psychiatry order sets will be developed in about a year.

I really appreciate those who have helped with this venture. Would you like to propose (hint: write) any other order sets? Remember the long-term benefits! I would be glad to hear from you.

Terry Fauvel terry.fauvel@calgaryhealthregion.ca

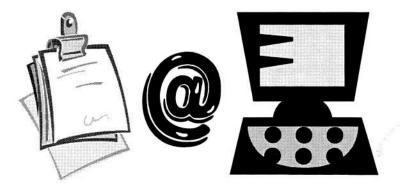


Please join me in welcoming Dr. Nadeem Bhanji, a recent addition to the Geriatrics and Consultation-Liaison teams at the Peter Lougheed Centre. He also joined the University of Calgary Department of Psychiatry as a full-time faculty member. Dr. Bhanji completed a fellowship in Clinical Pharmacology at McGill last year and is now looking into a Master's in Community Health Sciences.

Please also join me in welcoming Dr. Susan Carpenter, a Child & Adolescent Psychiatrist who is rejoining the Department after a number of years. For many years she has pioneered the care of individuals with both mental disorders and developmental disabilities. She has succeeded in developing the Arnika Centre, a clinic supported both by the Vocational Rehabilitation and Research Institute (VRRI) and the Calgary Health Region. We hope that this Centre can be the model for the development of other collaborative services for this hard to serve population.

Don Addington





### **Primary and Community Care**

I have had the pleasure of leading the Primary and Community Care Program for six weeks now, so my view of this may be rather "green". The Program consists of the general clinics at the three adult hospitals (PAS, POS, Psych Assessment/Urgent Therapy), the psychotherapy clinics at Health on 12th (a.k.a. the "old Belcher", sometime to become the Sheldon Chumir Health Centre), the Mental Health component of the new South Calgary Health Centre, Shared Mental Health Care in the city, as well as the Mental Health Clinics in the surrounding rural areas and the corresponding Shared Care - Rural. In many ways this Program is the least well-defined and closest to care in the community with other general health caregivers.

To this point, I have been impressed with the sense of dedication and mission that I see in both frontline workers and the managers (physicians or otherwise) who work in these areas on a daily basis. There are areas of particular excitement these days. The SCHC (South Calgary Health Centre for the uninitiated - don't we all love letters...) has just opened and already the way that we do business there is showing signs of being unique and special.

It is special in the way that different services such as Mental Health Urgent Care, short-term therapy, Mobile Response and the Geriatric Mental Health Teams can really work together with a sense of oneness. This has been facilitated by careful planning of the layout of the area, along with wonderful cooperation from all the managers and staff involved to create a culture of cooperation. It will be fascinating to watch how this evolves with time and to see if there are things which we can bring to other parts of the organization.

Shared Care (Mental Health, since other areas of medicine are starting to use the shared care model) is new to me. Clinicians (Psychologists, Social Workers, or Nurses) are paired with Family Physicians for a few hours a month in order to help the Family Physicians deal with Mental Health issues better in their practices. There is support from a psychiatrist as well, on a less frequent basis to assist. This is both direct and indirect care for the patients with the goals of increasing the amount and skill of Mental Health care in Family Physicians' practices, as well as facilitating referral of patients beyond the scope of Family Medi-

> cine to more specialized Mental Health services. In general, this has been received very well

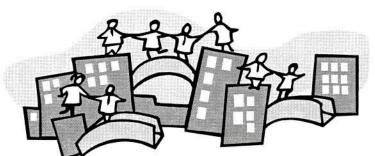
by the commu-

nity. It is a program that may well have opportunity to grow in the future. We are in need of more psychiatrists to support this endeavour.

Things are happening at Health on 12th! For those who may have lost track, the plan is to move all of the current activities to the west half of the building, to facilitate the demolition and rebuilding of the entire structure. The current target is to rebuild the east half in time for an opening in the summer of 2007 (I am never sure how much money to bet on these time projections, especially when there is still not a hole in the ground). In the longer term, the west half of the property will be sold and commercially developed (the proceeds help pay for the half that the Region keeps). At this point, there is the excitement of planning for the new space, knowing that there will be umpteen revisions between now and then.

In summary, I'm still on the steep part of my learning curve in this position. Everyone has been wonderful, and this Program has the potential for developing leadership as we look for better and better ways to reach into the community.

Michael Trew



Community and Cooperation

### **Arnika Centre for Dual Diagnosis**

The Arnika Centre was established in September 2002 as a partnership program of Persons with Developmental Disabilities and Alberta Mental Health (later integrated into the Calgary Health Region). The Centre offers a service for adults and teenagers over the age of sixteen with a developmental disability and a mental health problem. We are graciously supported by the Vocational Rehabilitation and Research Institute and are located in their building.

The Arnika flower is a hardy naturally occurring wild flower in Alberta. It is a symbol of the strength and tenacity of people with multiple disabilities. Our Centre acknowledges our patients' strengths as well as the challenges they face. We work with caregivers and community based agencies to stabilize people in their own community. Our focus is to normalize the life of our patients as much as possible.

Currently we offer psychiatric consultation and follow-up through four psychiatrists offering 1.3 FTE: Drs. Susan Carpenter (Medical Director), David Dawson, Lori Hogg, and Karen Tanguay. We have a full-time nurse coordinator and manager. Mrs. Barbara Pitcher. There is a half-time psychologist supporting needs of our patients, Dr. Sheilla Mansell. We also have a neurologist, Dr. Cory Toth, working with us five hours per month. We have no case managers as are available in mental health clinics.

An extensive database has been kept over the last two years. Autism Spectrum disorders account for 36% of our patients. Psychotic disorders account for 21%. Seizure disorders exist in 20% of our patients. All levels of intellectual disability are represented with our patients. About half of the population seen have mild intellectual disability and the other half fall in the moderate, severe and profound ranges of intellectual disability.

Clinics such as the Arnika Centre have been established across Canada to serve the needs of the specialized population of intellectually disabled people with mental illness. Often such illness is first perceived as a behaviour problem. How else can a person with very limited verbal and cognitive skills express themselves except through behaviour? With clinicians with experience in the area of developmental delays we aim to develop clarity of diagnosis.

With enhanced medical care and the movement to deinstitutionalize people with disabilities and mental illness, there are new challenges that are faced by clinicians. A spectrum of services from the most intensive inpatient services to the care of an outpatient service such as the Arnika Centre is evolving. Patients who may have died of medical complications in the past are living to older ages and presenting with new health issues that were unknown in the past. An example of this is Down Syndrome, which in the 1920's had a life expectancy of 9 years, in the 1980's it was 35 years, and in 1996 a life span of 55 years for those with mild or moderate intellectual disability and 43 years for those with se-





vere and profound intellectual disability.

The Arnika Centre hopes to expand with the needs of the Calgary Health Region. We seek more funding to expand services. Our waiting list is currently six to eight months for initial assessment. In 2004, 120 new patients were served and 340 ongoing patients were served. The demand for this service is strong within the Calgary community.

Susan Carpenter

# Department of Psychiatry VISION, MISSION & VALUES

In September 2004 the Regional Department of Psychiatry Executive held a retreat to develop a vision and mission for the Department. This represents an integrated clinical and academic vision, which is published as a



draft below. If you have any comments or suggestions on the draft, please e-mail them to mischelle.vanthiel@calgary healthregion.ca.

#### **Our Vision**

Advancing mental health solutions for our community.

#### Our Mission

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

#### **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

#### From the Department Head

critical roles in the academic mission of the Department. The development of an Alternative Relationship Plan allows us to propose an equivalent funding of individuals' time, whether they are involved in education, research or administrative service. If you are interested in being included

in this plan, please let Mischelle vanThiel know. I have already spoken to a number of people who have expressed an interest. The next step in the development of this plan is to hire consultants, who will track our current activities and develop a business plan aided by the Vision and Mission of the Department, and

informed by the volume of work that we currently undertake.

#### Vision, Mission & Values

In September 2004 the Executive held a retreat to develop a vision and mission for the Department. This represents an integrated clinical and academic vision which is published as a

Continued from front page

draft in this Mind Matters (on page 10). If you have any comments or suggestions on the draft please e-mail them to mischelle.vanthiel@calgaryhealthregion.ca.

Keep looking out for signs of spring!

Don Addington

### **Awards & Promotions**

The Department of Psychiatry is proud to congratulate to Dr. Lauren Zanussi on receiving not one but two prestigious teaching awards. Dr. Zanussi was awarded the Faculty of Medicine Under-



graduate Medical Education Award for his significant contributions to Communications and the MIND Course. Nationally, Dr. Zanussi received the Canadian Association of Medical Education (CAME) 2005 Certificate of Merit Award. This award promotes, recognizes and rewards faculty members committed to medical education in Canadian Medical Schools. Dr. Zanussi's nominators

cited the quality of his teaching at the "Gold Star" level, his contributions to curriculum development and identified him as a role model. Dr. Zanussi was invited to attend the Medical Education Conference in Saskatoon where the CAME award will be presented.

Congratulations are also in order for Dr. Sam Chang's promotion to Clinical Associate Professor, Dr. David Cawthorpe to Adjunct Assistant Professor, and Dr. Rajamannar Ramasubbu to Associate Professor.

## MIND MATTERS ONLINE

Mind Matters is also available online.
Check it out at:
www.calgaryhealthregion.ca/clin/psych
(click on Mind Matters icon).





The Newsletter for the Regional Clinical Department of Psychiatry

is distributed quarterly to
all psychiatry medical staff and faculty,
psychiatry residents,
Program Directors and Program Medical Directors,
CHR Executive Medical Directors and VP's,
CHR CEO, CMO and CCO, Chair MAB,
and psychiatry support staff.

Submissions & Inquiries: janny.postema@calgaryhealthregion.ca Phone 944-1296 Fax 270-3451



Department of Psychiatry Foothills Medical Centre 1403 - 29 Street NW Calgary, AB T2N 2T9