

The Newsletter for the Regional Clinical Department of Psychiatry

Volume VI, Issue II Fall 2006

From the Department Head

The newsletter missed a beat last summer, but we are back on track for a fall edition. Like most other organizations and groups in Calgary the Department of Psychiatry is concerned about growth. We are involved in a number of exciting initiatives that each has its uncertainties and potential difficulties. The growth initiatives are in the Calgary Health Region, such as the South Hospital, the Department of Psychiatry which straddles the University and the Region and which is developing an Alternative Relationship Plan and finally within the Hotchkiss Brain Institute which is growing the Population Mental Health Program.

The South Hospital Planning moved quickly into functional planning this summer and there have been meetings between the planners and the mental health executive and both inpatient and outpatient services. The plan is to open in 2010 a 350 bed

inpatient facility linked to a major outpatient services that will start by serving as many outpatients as the current Foothills Hospital. In this first wave there

should be a short stay unit and two general psychiatry units. In addi-

tion there is planning underway for a medical psychiatric unit. The outpatient services will provide a continuum of care from emergency services to partial hospitalization, outreach services and outpatient clinics to serve at least the 250,000 people of South Calgary and the South Rural Area of the Calgary Health Region. The services would span early childhood services to geriatric services. The Department will need to recruit a large number of psychiatrists and in particular can look to the group of 9 residents

in the PGY 4 group. The health facility will grow by 100 beds per year to 650 in 2013. The outpatient services should double in the same time frame.

The Depart-

ment of Psy-

chiatry has



been working hard on its Alternative Relationship Plan with the consultants. A work time study was completed and we are very grateful to the partici-

pleted and we are very grateful to the participants in this study. In addition, over 40 members participated in an earnings study. The time study demonstrated that on average the participants are working about 1.2 Full Time Equivalent (FTE). The medical FTE is set as 50 hours per week by the Alberta Medical Association. The plan should comprise two parts, the academic alternative funding plan and the sessional plan. The academic plan would require full time

membership; the sessional plan could be anything up to a 20% Full Time Equivalent Membership. The Academic Plan would comprise the current Geographic Full Time Faculty and executive leadership team plus a significant expan-

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Update on Geriatric Psychiatry

Firstly, the Division of Geriatric Psychiatry would like to welcome Dr. John Ryan back into the role of Medical Director, Nursing Unit 48, Rockyview Hospital. This will allow for some strategic planning, in particular to look at the ongoing role of Unit 48. It has become increasingly difficult for the unit to meet the needs of the rapidly increasing numbers of seniors in the Calgary Region. Although plans progress for the development of a twenty bed Geriatric Psychiatry unit at the PLC site this will not be until spring 2009. Efforts are still underway to encourage the proposal of a Dementia Assessment Unit; with a mandate to assess and stabilize dementia clients with behavioural problems, not due to a treatable psychiatric condition. These discussions are at a preliminary stage.

Moving on to academic activities, the Division hosted a very successful conference in Banff, April 21-23, 2006. This conference was somewhat unique, in that it was a joint Geriatric Psychiatry and Forensic Psychiatry Conference. The keynote speakers were Dr. David Naimark, a Geriatric and Forensic Psychiatrist from San Diego and Alberta's very own Dr. Kevin Lawless. Topics included "Compelling Legal Issues in Geriatric Psychiatry", "Legal Issues in Treating Behavioural Problems in Dementia", "The Evaluation of Undue Influence in the Elderly" and "The Forensic Evaluation of the Older Criminal". As well, half of each morning was devoted to case discussions, which provided for some lively discussions between the different perspectives of Forensic Psychiatry and Geriatric Psychiatry. The majority of attendees have requested that

future similar conferences be held and the evaluations were extremely positive overall. The Division thanks Astra Zeneca for its financial support and assistance in arranging the conference.

The Department of Psychiatry has offered a position to Dr. Remi Olaosun, who has experience in both Geriatric Psychiatry and Addictions. It is anticipated that he will have roles to play in both of these portfolios and hopefully develop improved linkages. The issue of geriatric patients with addictions, particularly alcohol and gambling, are becoming increasingly evident. At the end of June, Dr. René Desautels met members of the Division and presented Grand Rounds. Dr. Desautels is a geriatric psychiatrist at the Douglas Hospital in Quebec, as well as on the Board of the Canadian Academy of Geriatric Psychiatry and would represent a valuable addition to the Division, if he can be persuaded to come to Calgary.

Lastly and perhaps most importantly, plans are underway to develop a Day Hospital for Geriatric Mental Health clients. If a site can be found, it is anticipated this will open in the spring of 2008. This should be of great benefit to the Region and will provide the next "pillar" in the planned geriatric psychiatry continuum. It should make it easier to treat and manage patients within the community and avoid acute admissions as well as allow for earlier discharge from Acute Care and the Rehab Unit at Glenmore Park. We are hoping it will be possible to locate the day hospital at the planned Senior's Health Campus and co-locate the unit adjacent to a geriatric day hospital so clients with complex needs can obtain medical as well as psychiatric support. Over the next few months we will be looking at models around the world to see what would represent the best fit.

Of course this will provide training and research opportunities, as well as career opportunities!

Stuart Sanders

Undergraduate Education

History was made this year in the last presentation of the MIND Course under the old undergraduate curriculum. Taking into account that the course fell wholly in August - not the most optimal time of year to recruit teachers! - the students were overwhelmingly positive in their feedback. On behalf of Dr. Lauren Zanussi, many thanks to the eight residents and numerous faculty, particularly those taking on new roles this year, for providing strong learning experiences in clinical correlation, small group teaching and the lectures. Several students that attended the MIND Course have since contacted the training office for clerkship and Med 440 electives.

The new clerkship year began in late April with the introduction of PDA's, new clerkship objectives and increased infrastructure at ACH. Objectives have been expanded to include at least one assessment of suicidal risk, cognitive impairment and seven of the disorders - schizophrenia, depression, mania, anxiety, personality, adjustment and sub-

stance abuse. Students will be logging their encounters on their PDA's. Students will also be expected to witness and discuss the use of ECT and psychotherapy, as well as review with faculty the criteria and procedure for certification.

The program is also very happy to welcome two new teachers to our clerkship program. In mid-October, Dr. Lisa Gagnon will be joining staff on Unit 21. Dr. Jeremy Quickfall has joined Consultation-Liaison at FMC and will be involved with clerkship supervision this fall.

With the addition of the new ACH, clerks will be attending clinics at an increasing number of sites - ODD/CD, ADHD, mood and Diagnostic Clinics will remain at the old location. Eating Disorders, Multisectoral, Liaison, Inpatients and Consultation-Liaison experiences will be reassigned to the new venue. Clerks will continue to attend Forensic Adolescent clinics at Sunridge with Dr. Waqar Waheed.

Clerkship electives are booming! Traditionally, each fall we have a handful of calls from mostly outof-town students which can be neatly handled by a few psychiatrists. This year, we are still receiving inquiries and we have already met the requests of twenty elective rotations from far away places (Krakow, Ireland, London, Edmonton!) as well as an increasing number of calls from across Canada, particularly McMaster, London and Ottawa. Heartfelt thanks to all of the departments at the PLC who are carrying the major load of electives - your support is truly appreciated!

Nancy Brager



I'd like to start off the report with sincere thanks on behalf of the residents to the faculty and support staff for your involvement with the Golf Tournament in June. Rain and wind didn't deter the fun! Dr. Salim Hamid continues his reign as member of the winning team in the last three residency scholar fundraisers.

In August we put in several proposals to Postgraduate for Professional Development funding from Alberta Health and Wellness (AH&W). All five projects for residents and faculty have been awarded funding. Residents now have full financial support to attend Dr. Christopher Shea's two day conference in Calgary -"Overcoming Interviewing Obstacles" on September 28 and 29, and Dr. Michael White's two day presentation on October 19 and 20 regarding the use of Narrative Therapy to address the consequences of trauma and abuse. The third arm of resident funding will support a two day off-site retreat to give the residents an in-depth opportunity to review recent changes to academic and psychotherapy training, as well as creating a standardized method of evaluating clinical rotations and preceptors.

For faculty, AH&W funding will support two separate events. We will investigate the possibility of bringing in a well known neuropsychiatrist from Toronto to speak on traumatic brain injuries, PTSD, conversion disorder and clock drawing. Further details will be announced later in the year.

Responses to my request this spring for OSCE's for the resident test bank were quite limited. Dr. Joann McIlwrick and I

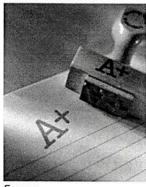
will be organizing a Friday afternoon for interested faculty to attend a workshop on developing OSCE stations in the Can-MEDS format. Resident final exams now include a multi-station OSCE in Ottawa, so all residents need exposure to this type of testing throughout residency to gain skills and confidence in this area, as well as in the long interview portion. Biannual OSCE's tied to practice orals will not suffice; OSCE's must become a part of each clinical rotation. Again, details on

this workshop will be sent out at a

later date.

Our program's internal review is slated for October 24. All descriptions of clinical rotations need to be in the CanMEDS format - you may get a call from Pauline Burgess if your subspecialty description needs revision. As well, a concerted effort will be made to have all ITERs for rotations to the end of September in resident files. The review committee will request interview time with the residents and the training committee on this day; residents may need 2-3 hours off rotation on October 24.

Bev Adams



Exams



Department of Psychiatry Sebastian K. Littmann Research Day Friday, March 02, 2007

Village Park Inn

Please mark this important event on your calendars!

This is the 20th anniversary of the Research Day - it is one of the longest running of its type in the Faculty. To mark this occasion, Dr. David Miyauchi will provide some historical background on Professor Littmann's career.

The theme will be Consultation-Liaison Psychiatry, and the Guest Speaker will be:

Dr. François Lespérance, Chief and Associate Professor Department of Psychiatry Centre Hospitalier de l'Université de Montréal



The topic of the keynote presentation is: Depression and Coronary artery disease: Cause or Effect?

We are also planning a special symposium on C/L Research at U of C. Speakers will include: Dr. Nancy Brager, Dr. Raj Ramasubbu, Dr. Steve Simpson and Dr. Nathalie Jette.

More hours than before will be eligible for Category 1 CME.

For planning purposes, we need a rough estimate of the number of attendees to expect. If you are planning to attend and/or present please contact Yvette Kosidowski at 943-4710 or yvette.kosidowski@calgaryhealthregion.ca.



PSYCHIATRISTS WANTED

Several services within the Region are looking for psychiatrists:

- Urgent Telemental Health, Foothills Medical Centre Contact: Mischelle van Thiel, 944-1295
 - Day Program, Rockyview General Hospital Dr. Patrick Coll, 943-3614
 - Shared Mental Health Care Dr. Michael Trew, 944-2168
 - Short Stay Unit, Peter Lougheed Centre Dr. Lloyd Maybaum, 943-5656



You are invited!!!

2006 Rural Mental Health Forum Featuring the Play "Clubhouse Working"

You are invited to an open forum to discuss Mental Health Care in the rural part of the Calgary Health Region followed by a presentation of the play "Clubhouse Working"

Date: October 14, 2006

Place: Prairie Winds Clubhouse

4621-2 Street West

Claresholm, Alberta

Time: 10 am - 2 pm

*a light lunch will be served - no charge

Join us @ 10:00 am for coffee and muffins. The forum will be in the morning with round table discussions of mental health issues in the rural area. Your input is valuable to us. Following lunch will be the premiere presentation of the play performed by members of the Prairie Winds Clubhouse.

Sponsored by: Regional Mental Health Advisory Committee - Calgary Health Region

Information & Evaluation Resources in Mental Health and Psychiatry: Ten Years Later and Still Going Strong

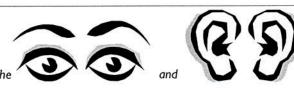
The Information and Evaluation Unit (aka I & E Unit) officially came to life in 1997. The staff complement was small, resources were tight, and most of mental health had no idea what we did for the Calgary Health Region. Nine years later, there are more staff, resources are still tight, but our role has greatly expanded. Fortunately, the profile of the I & E Unit's activities and work is also better known. Nonetheless, many professionals in the Region are unaware of our existence and the important role we play in Mental Health and Psychiatric Services.

At a recent planning day, our team was asked to create a picture or a slogan to describe our role in the Region. My personal favourites were:

- We are the I's ("eyes") and Ears of mental health.
- A tree (badly drawn the artist being me) showing the activities of the I & E Unit (information management, program evaluation, supporting quality improvement activities in mental health, and research) as the roots and the many mental health programs and services on the branches and trunk. The latter symbol was thought by most team members to best capture the role of the Unit. We are connected - through our databases, evaluations, and consulting work - with most, if not all, of the Mental Health and Psychiatric Services (including contracted agencies) in the Region.

It was not that long ago that

evaluation of mental health services was considered an "optional" activity. Programs that conducted evaluations were well regarded, but were the exceptions. Indeed, many mental health services across Canada continue to collect only minimal data to evaluate their services (typically utilization data consisting of number of clients served). The landscape is changing, however, and there is greater emphasis on accountability to funders via regular program evaluations. All requests for new funding must now include a rigour-



of Mental Health

ous plan for measuring the impact of the new program or service. Undoubtedly driving this trend is the emphasis on evidence-based practice in health care. At the I & E Unit, we also feel strongly that evaluations need to serve a practical purpose in addition to satisfying reporting requirements. Evaluation data needs to help managers, clinicians, and medical directors make decisions about ways to improve services.

Although new to I & E, I have known about the great work done by the Unit for many years. There are actually two teams, Information Management and Evaluation, but collaboration among these teams is inevitable and required as our projects take on a system-level perspective. The specific activities of the Information Management

and Evaluation teams are nicely described in the 2005- 2006 Mental Health Plan available on the web

(www.calgaryhealthregion.ca/mh). As well the Unit has a web page on the internal CHR web: (iweb.calgaryhealthregion.ca/mh). A few of our recent activities and products:

- Recent evaluations of Psychiatric Emergency Services, Access Mental Health, and the new mental health services of the South Calgary Health Centre.
 - Taking the lead in rolling out the electronic health record in mental health.
- Profiling the mental health needs of the Region's population through: the Year End Summary, collaboration with the population survey group, monitoring local preva-

lence data, and adding a section on mental health to the Health of the Region Report.

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- Regular reporting on performance indicators for mental health (e.g. length of stay, waittimes, readmission rates).
- Creating and updating the Service Area Information Database (SAID), a comprehensive, searchable repository of all mental health services in the Region.

The mandate of our Unit has recently expanded to include more research. Although the activities of our team have always been grounded in empirical, research-based methodology, we will be conducting research on more formal levels by publishing evaluation results, pursuing external grants, and strengthening our

connections with the other researchers in the Department. This new mandate serves many purposes: dissemination of knowledge to other professionals via academic channels, increasing capacity through external funding and collaboration, the means to answer interesting questions that might be overlooked in regular evaluations, mentoring junior researchers and evaluators through supervision, and opening up our methods and findings to the scrutiny of external peer review.

Our team has many talented individuals. Below is a short list of persons who can serve as a first contact if you need information, want some help with an evaluation, or have a data request.

Shawn Currie, Director:

shawn.currie@calgaryhealthregion.ca
Susan Armstrong, Manager:
susan.armstrong@calgaryhealthregion.ca
Roxanne Rowan, Information
Management Coordinator:
roxanne.rowan@calgaryhealthregion.ca
Colleen Lucas, Evaluation Coordinator:
colleen.lucas@calgaryhealthregion.ca
David Cawthorpe, Evaluation
Coordinator for Child and Adolescent Mental Health:

david.cawthorpe@calgaryhealthregion.ca

Shawn Currie

Specialized Services

The Specialized Services Program has seen a number of changes over the past year. Our former Program Medical Director, Dr. Henry Chuang, has moved on and I took over the position last December. Dr. Stephen Boucher resigned as Clinical Medical Director of the Carnat Centre in order to provide medical leadership to the Occupational Stress Injury clinic. Dr. David Dawson has been appointed as the new Clinical Medical Director at Carnat Centre, Dr. David Li has returned to England. Dr. Chris Blashko, Clinical Medical Director at the Central Community Mental Health Clinic, has moved the focus of his practice from the Central Clinic to the Rockyview General Hospital. A psychiatrist from Ontario has been interviewed for the Central Clinic and the Rockyview General Hospital and is scheduled to start mid October. Another psychiatrist from out of province hopes to join the Region next spring.

Dr. David Miyauchi and I have been looking at ways to have Specialized Services improve their support for the inpatient units and to assist in patient flow. Discussions are in progress with the Day Treatment Program at the Foothills Hospital and a review of the Day Treatment Centre at the Rockyview General Hospital is due to start late September. The Claresholm Care Centre has already undergone a review and is revising its psychiatric rehabilitation services. The Addiction Centre will start providing inpatient services at Claresholm to selected Addiction Centre patients with concurrent disorders. I have had discussions with the Psychiatric Residents regarding the inclusion of Claresholm in their chronic care rotation.

The population of the Calgary Health Region and consequent psychiatric requirements are continually increasing. The new South Hospital creates additional opportunities and challenges. Specialized Services in conjunction with the other psychiatric programs will continue to recruit psychiatrists to meet these needs.

Hugh Colohan

Name Change to Mental Health & Addictions Services

Effective October 1, 2006, the Mental Health & Psychiatric Services Program will be renamed to "Mental Health & Addictions Services". The new name recognizes an important trend to integrate mental health and addictions services in the health care environment. This parallels the integration of mental health into health, which occurred in 2004.

As you are aware, there is now a Regional Addictions Program within Mental Health and Addictions Services. There is also an important Regional collaborative with the Alberta Alcohol and Drug Abuse Commission (AADAC) that will ensure that the Regional Addictions Program is complementary to and collaborative with AADAC services.

Collectively, all three of these strategies reflect our commitment to addressing the needs of the population suffering with an addiction, particularly those who also deal with mental illness.

Cathy Pryce & Don Addington

Congratulations

A lot has happened since the last Mind Matters that came out in March. The list of awards and honours received by members of the Department and residents for that period is long and impressive!

Residents

Congratulations to all our PGY-5 residents for passing their exams: Drs. Karin Kerfoot, Bina Nair and Jeremy Quickfall. Drs. Nair and Quickfall joined the Department over the summer. We are pleased to announce that Dr. Salim Hamid also passed his exams.

Speaking of residents: Dr. Jeremy Quickfall was the winner of the Best Resident Research Award at the Alberta Psychiatric Association Annual Meeting in Banff in March.

We were pleased to hear that Dr. Karin Kerfoot was chosen as the 2006 recipient of the Martin Fischer Scholarship Award from the Canadian Group Therapy Foundation. This award recognizes and rewards Karin as an outstanding Canadian student in group therapy. This was based on her basic and advanced training in group therapy supervised by Ms. Linda Goddard. The Canadian Group Psychotherapy Foundation (CGPF) is a charitable, nonprofit organization with a mandate to support public education, training, and research in group psychotherapy. The CGPF offers scholarship awards for outstanding contributions by group therapy trainees or practitioners. The Martin Fischer

Award was established to recognize the contributions of a founding member of the Ontario Group Psychotherapy Association, which later became the Canadian Group Psychotherapy Association. The purpose of the award is to recognize and reward an outstanding Canadian trainee or student for contributions to the field of group psychotherapy.



Congratulations to Dr. Yuri Power, who was selected for a once-in-alifetime experience through IM-PACT: Building Leadership in Public Mental Health in North America. Six academic institutions from Canada, Mexico and the United States are collaborating with Human Resources & Skills Development Canada, Dirección de Desarollo Universitario, Secretaría de Educación Pública and the Fund for the Improvement of Post Secondary Education, US Department of Education to develop and administer this project. Participating institutions are: Canada - Dalhousie and McMaster; Mexico - National Institute of Psychiatry and National Institute of Neurology and Neurosurgery, both in Mexico City; United States - Massachusetts General Hospital-Harvard Medical School and Tufts University School of Medicine/Tufts-New England Medical Centre. The consortium of these institutions will enable psychiatry students from the three countries to complete a program that will increase their knowledge of North American public mental

health care systems and prepare them for leadership roles in psychiatry, planning care for an admixed society. An innovative curriculum will be introduced focused on the advancement of existing public mental health care practices in Canada, Mexico and United States. Each institution will have 7 psychiatry residents participate in this program as a three-month elective. The residents will be spending their elective time in Canada, the US and Mexico with another Canadian resident, two American residents and two Mexican residents.

Three of our residents received awards from the Medical Education Committee at the Rockyview General Hospital:

Dr. Aaron Mackie - Cadger Award, General Internal Medicine for outstanding performance in the GIM block at the Rockyview.

Dr. Susan Brownell - E.R. Oscar Award for outstanding performance in the RGH Emergency block.

Dr. Jason Taggart - ICU Award for outstanding performance in the RGH ICU block.

Faculty/Physicians

U of C medical students annually recognize excellence in teaching and mentorship with the Gold Star and Calgary Medical Students Association (CMSA) Letter of Excellence Awards. This year's for the Class of 2008 Clerkship Awards for Psychiatry are: Gold Star Award Preceptor: Dr. Roy Turner; CMSA Letter of Excellence Preceptor: Drs. Kent Sargeant and Lauren Zanussi.

Dr. Nady el-Guebaly has been awarded the designation of Fellow by the Canadian Psychiatric Association. This honour clearly demonstrates Dr. el-Guebaly's exemplary contributions to the specialty of psychiatry.

Dr. Don Addington received the Michael Smith Award presented by the Schizophrenia Society of Canada. This award has been established to recognize those researchers and clinicians working in Canada who have supported people with schizophrenia and their families in their efforts to achieve the mission of the Schizophrenia Society of Canada: to alleviate the suffering caused by schizophrenia and related mental disorders.

Dr. Karl Tomm was honoured this year in being elected by his peers to receive the 2006 Lifetime Achievement Award from the American Family Therapy Academy for a consistent and outstanding contribution to the field of family therapy theory and practice over the course of a career. AFTA is an exclusive organization whose membership is limited to leading international scholars in the field of couple and family therapy.

Dr. John deVries has been awarded the Lifetime Achievement in Geriatric Psychiatry in Canada Award by the Canadian Academic of Geriatric Psychiatry. The Selection Committee was impressed by his credentials and leadership over the years in Geriatric Psychiatry and called Dr. deVries an ongoing inspiration to the Committee and to others in the field. Congratulations are also in order for Dr. deVries for reaching a 30-year milestone with the Calgary Health Region.

Other recipients of Calgary

Health Region Long Service Awards this year are Drs. Philip Stokes and Paul Cameron (10 years), Dr. Hugh Colohan (15 years), Dr. John Ryan (20 years), and Dr. Don Angus (25 years).

The Department of Psychiatry
Awards presented at the 2006 Fall
Social went to:
Dr. Nadeem Bhanji - Research
Award (part-time faculty)
Dr. JianLi Wang - Research Award
(full-time faculty)
Dr. Philip Stokes - Undergraduate
Medical Education Award
Dr. Janet de Groot - Postgraduate
Clinical Education Award
Dr. Leanne Birkett - Continuing
Medical Education Award

Mental Health Workers

Fran Barnes and Dan Hicks of the Forensic Adolescent Program received a Silver Award in the 2006 Premier's Award of Excellence for his participation on the Community Partnership Youth Reintegration Committee. This cross sectoral committee works to facilitate transitions for youth from the Calgary Young Offenders Centre back to the community and has been effective improving continuity of care for this complex population.

Congratulations and an Opportunity

Congratulations to Dr. Brian Cram and the Eating Disorders Program. Four new adult medical psychiatric beds were opened in September on NU 32 at Foothills Hospital. These beds are designed to serve the medically compromised patients with eating disorders on a unit that is designed to simultaneously meet their medical and psychiatric needs. There are both medical and mental health program staff, hospitalists and psychiatrists. The staff are investing a great deal of time in team building, communicating

and clarifying their roles.

The opportunity is that we are still looking for a replacement for Dr. Janet Wright as the adult psychiatrist for the Eating Disorders Program. Please contact Dr. Brian Cram at 943-7700 if you are interested.



5th Annual Golf Tournament

The Fifth Annual Resident Scholar Development Fund Invitational Golf Tournament at the Elbow Springs Golf Course on June 21, 2006 was a resounding success, despite brief threats of a thunderstorm. There were however rumblings from the Director of the Postgraduate program about the length of time and energy required to play a full round of golf... Rather than ignoring her utterances, we are hoping to

have a shot-gun start, nine hole golf tournament next year at Elbow Springs Golf Course on June 18, 2007 so that we could all finish at the same time.

On behalf of the Department of Psychiatry, Faculty of Medicine, University of Calgary, I would like to thank all of you who have supported the event through your generous donations to The Fund. I would also like to acknowledge those who organized this successful event, namely Mischelle van-Thiel, Pauline Burgess, Marie Drescher, Sheryl Trowsse and Ursula Zanussi.

Congratulations go to this year's winning team: Sara Binder (Captain), John Tuttle, Salim Hamid and Dean Halcro.

David Miyauchi



June 21, 2006 Elbow Springs Golf Club















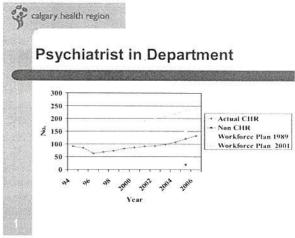
From the Department Head

sion of 30 to 50%. The sessional plan would comprise the current sessional system with a growth plan. The current ARP specialist sessional rate is 20 to 30% higher than the current Department of Psychiatry sessional rate. The next stage of planning is to identify a number of areas for recruitment of academic faculty who could add to existing services by doing clinical research, education and service delivery. As an example in adult services, we lack tertiary level care for depression and anxiety disorders, vet such services are usually available in major teaching centres.

Finally, in the Hotchkiss Brain Institute the Population Mental Health Program has been established and faces two opportunities. The Provincial Mental Health Research Plan has sufficient funds and is setting in motion the recruitment of the first three chairs in its Research Chairs Program. These chairs will hold a funded university position and in addition should be supported with about \$200,000 per year for five years. They will be expected to apply for major project grants. The recruitment will be managed provincially, but each researcher will be based at one of the universities and will hold a cross appointment with the Region.

The researchers will be either population or health services researchers and they

but we are barely keeping up with population growth. In 2001 we set a workforce plan with two



should be part of our Population Mental Health Research Program. Space for the program has been identified at the east end of the second floor of the Heritage Research Building. The second opportunity for the Population Mental Health Program is in a new AHFMR team grant program worth 1.0 million per year for five years. This is of course a competitive program with no guarantees of funding. In addition to the Provincial Chairs Program we hope to expand our local chairs over the next year. The Schizophrenia Chair is being re-opened for competition and we hope to add new chairs in the coming year.

How have we been doing in recruitment over the last decade? The attached slide shows that we have more than doubled the Department,

targets. One was a conservative target based on national Royal College recommendations that were made in 1989. Those recommendations did not take into consideration the explosion of demand in the psychiatry subspecialties of child and adolescent, geriatric and forensic psychiatry. It also did not anticipate the resur-

Continued from front page

gent interest in addictions psychiatry or the new emphasis on primary mental health care. Those changes were anticipated in our plan and are shown as the line marked Workforce Plan 2001.

While we may think that we are concerned with the next generation of psychiatrists in our Residency Training Program, some of our colleagues and residents are thinking further ahead. The Department congratulates all the recently and currently pregnant residents and members of the Department. We hope that you can take off the time you need and return to a practice pattern that suits your circumstances. We also support the men in the Department who take paternity leave. Have a productive fall,

Don Addington



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



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