Enhancing Patient Care and Promoting Innovation
The Department of Psychiatry is committed to enhancing patient care, training the next generation of clinicians, generating new knowledge to advance our understanding of psychiatric illnesses and disseminating knowledge into clinical practice. **We are making significant gains.** Despite ongoing capacity challenges, our dedicated team of 191 psychiatrists, nurses and support staff is delivering excellent care through Calgary’s four adult acute-care sites, the Alberta Children’s Hospital, the Southern Alberta Forensic Psychiatry Centre and the Claresholm Centre for Mental Health and Addictions.

Our capacity issues have been highlighted as part of the Mental Health Review, co-chaired by Dr. David Swann and Danielle Larivee. Our report to the committee included a need for a psychiatric intensive care unit, increased capacity for children and adolescents and community facilities to expand outpatient services in Calgary across the age spectrum.

We thank Dr. Bernard Sowa for all his work as deputy head of the department. This role has been divided into two separate areas of focus: Dr. Lisa Gagnon has assumed the position of quality assurance leader and has already made strides in improving the milieu of our crowded inpatient units; Dr. Lauren Zanussi is now the FMC site chief. We have important new members cross-appointed to the Department of Psychiatry: Dr. Zelma Kiss (Department of Clinical Neurosciences); Dr. Julie Brock (Psychology); Gina Dimitropoulos (Social Work); as well as recruiting Dr. Zahinoor Ismail (academic position in geriatric psychiatry and healthy brain aging), whose research in the area of cognition and dementia has been productive.

**We are serving our community.** With mental health clinics in all quadrants of the city, a large mental health program at the Sheldon M. Chumir Health Centre and psychiatrists who travel as far as Banff and Drumheller, we are working with communities to improve mental health. We provide psychiatric consultation services to a range of other facilities, such as Aventa (for women with addictions) and Wood’s Homes (for children with mental illness). In addition, we are improving access to treatment and flow of patients by reorganizing current community clinics and developing new clinics in conjunction with Primary Care Networks.

**We are doing more research.** Under the leadership of the newly appointed director, Dr. Paul Arnold, the Mathison Centre for Mental Health Research & Education (Mathison Centre) is helping the department become more research intensive by bringing together mental health researchers, coordinating conferences and events to share research findings and providing funding support for seed grants and graduate students. It also provides the department the opportunity to focus on child and youth mental health and liaise with the Canadian Mental Health Association, the Calgary Police Service and other community partners.

The Department of Psychiatry’s research productivity is increasing exponentially. A Web of Science search for core-content publications from Calgary that have the word psychiatry in their address now identifies nearly 1,800 publications. In the 1990s, the department produced approximately 40 papers per year. Between 2000 and 2009, its output increased to approximately 50 papers per year. Since 2012, there have been over 190 published papers each year. At the current pace, 2015 will be the most productive year in the department’s history in terms of both publications and citations, with over 6,000 citations per year now referencing the department’s publications.

**We are collaborating with institutes.** We continue to collaborate with the Hotchkiss Brain Institute (HBI) and the Alberta Children’s Hospital Research Institute. Through Mathison Centre funding made possible by the HBI, our researchers have access to pilot funding, which should translate into heightened success at national and international funding competitions.

**We are preparing for the future.** With excellent recruits, increased research funding and a continual search for innovative solutions to capacity issues, the Department of Psychiatry is poised to serve Calgary and the broader community in the coming years.

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**Message from Dr. Beverly Adams**

*Head of the Department of Psychiatry, Alberta Health Services and the University of Calgary*

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Inpatient Psychiatry

Inpatient psychiatry continues to work very hard with increasing acuity, complexity and volume of patients. Our staff continue to do more with the same resources. A barrier to patient discharge continues to be long-term care and community placement. While there have been significant gains in long-term care capacity in the system, individuals who are complex or have a history of problematic behavior, mental health diagnosis or addictions continue to be extremely difficult to place.

We have developed a core group of neuropsychiatrists, and Dr. Aaron Mackie continues to work on coordinating a neuropsychiatry fellowship. In addition to doing inpatient care, this group is embedding itself in neurology clinics (neuromunnoology, cognitive neuroscience, movement disorders, multiple sclerosis, epilepsy and traumatic brain injury), which has been well received by both patients and colleagues. In the future, we want to continue to expand outpatient consultation liaison psychiatry and try this model in other medical clinics.

Considerable work has gone into refining the “parallel process” in the emergency department. This has been well received by colleagues, patients and their families, and has reduced the length of time that patients stay in the department.

We still have multiple internal and external applications for psychiatrist positions. Although we desperately require more staff to fulfill patient needs and reduce waiting lists, we struggle with the lack of infrastructure or resources to support the work of staff. We are exploring alternate models.

We are also using a multi-pronged approach to address issues with patient aggression. This response has included examination of the root causes with working groups, initiatives to educate and train front-line staff, minor infrastructure modifications to increase safety, and increased advocacy for more appropriate use of provincial infrastructure and community placement.

Our executive team met with Dr. David Swann as part of the provincial government’s Mental Health Review. As requested, we provided him with a summary of actionable items. Many department members also attended focus groups to provide input into the review.

Considering that Calgary’s population is growing approximately 3–4% annually and is also experiencing difficult economic times, these principles highlight an increasing challenge and strain on our system to help the mentally ill within the Calgary Zone. Great efforts have been made over the past two years to improve integration between our clinics, improve collaboration and flow with our primary-care partners in the community and focus on efficient, timely patient care. Our teams in the community have been doing outstanding, innovative work to meet an ever-growing need.

OUTPATIENT CLINICS

Over the past two to three years, our outpatient general psychiatry clinics, including the northwest clinic, central clinic, northeast clinic and South Health Campus outpatient program, have undergone significant changes and self-evaluation. We have focused on recovery-based models that should provide more patient-centred care. Integration and collaboration between the clinics continues to grow, with the goal of decreasing barriers within our system.

Inpatient psychiatry continues to work very hard with increasing acuity, complexity and volume of patients.”

Dr. A. J. Fawcett
Section Chief, Inpatient, Consultation Liaison and Emergency Psychiatry

Outpatient Psychiatry

In April 2004, the provincial government released the Provincial Mental Health Plan for Alberta. The plan established principles for mental health policy and service delivery. In May 2006, the Senate Standing Committee on Social Affairs, Science and Technology tabled its federal report entitled Out of the Shadows at Last (2006, 57–58), which summarized these principles as the following:

- focus on client recovery
- choice of treatment models
- provision of community-based services
- integration of services and supports
- provision of evidence-based services
- consideration of social determinants of health (housing, income, etc.)

Considering that Calgary’s population is growing approximately 3–4% annually and is also experiencing difficult economic times, these principles highlight an increasing challenge and strain on our system to help the mentally ill within the Calgary Zone. Great efforts have been made over the past two years to improve integration between our clinics, improve collaboration and flow with our primary-care partners in the community and focus on efficient, timely patient care. Our teams in the community have been doing outstanding, innovative work to meet an ever-growing need.

COMMUNITY INVOLVEMENT

We have also been increasing collaboration with our community partners—the Calgary Police Service, the Primary Care Networks and Family Care Clinics—through pilot projects with the University of Calgary medical clinics.

The expanding population has shown not only an increase in people with mental health illnesses but more complex issues as well. Our department has introduced two new day hospitals: at Peter Lougheed Centre and at South Health Campus, which are designed as step-up, step-down units, where staff can provide intensive daily care to those in need who do not yet require inpatient care. Further, a zone-wide Day Hospital Committee has been established to evaluate efficacies, visions, goals and other processes around the city.

THE FUTURE

We are working to create and enhance environments which will help facilitate research as well as education throughout the Calgary zone. Our outstanding outpatient staff provide individual patient care, but also work within clinics and in the community to create a systematic, integrated and collaborative environment for the best evidence-based care of our patients.

Dr. David Tano
Section Chief, Outpatient Services (North)
Geriatric Psychiatry

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

FACILITIES AND SERVICES
Unit 48 at Rockyview General Hospital (RGH) has 20 beds, plus 2 overcapacity beds, and is the only designated acute-care geriatric psychiatry unit in southern Alberta. It frequently operates at overcapacity.

The Geriatric Mental Health Rehabilitation and Recovery Unit at Carewest Glenmore Park, a 20-bed sub-acute inpatient geriatric psychiatry unit, is a unique shared-care unit that focuses on group therapy and helps people who do not require acute care or involuntary admission.

Geriatric psychiatrists provide consultation-liaison support to medical-surgical wards at adult acute-care hospitals across Calgary, as well as to Primary Care Networks and seniors’ health programs. We work with a number of teams and programs that help seniors with substance abuse, people living in long-term care and people in transition units and assisted living, as well as seniors living at home or under community treatment orders.

The Geriatric Mental Health Outreach Team at RGH, comprising one full-time nurse and one full-time social worker, provides prompt follow-up and caregiver support to inpatients on psychiatry units and medical-surgical wards, speeding up patient discharge and reducing relapse and readmission to hospital.

NEWS
We continue to seek support for a dementia stabilization unit, a mental health-focused long-term care unit, a formal outpatient geriatric service and a second inpatient unit to supplement the 20 beds at RGH and serve our aging population. Our services that provide transitional support for patients from hospital to community are in need of additional staff.

Our application for a geriatric psychiatry residency program is undergoing revision and will be resubmitted to the Royal College of Physicians and Surgeons of Canada this year for consideration. There is limited availability of accredited geriatric psychiatry training programs across Canada; as residents often prefer to stay where they train, we hope that having our own program will help us replace some of our doctors, many of whom are approaching retirement and reducing capacity of their professional practices. Every year a couple of residents in Calgary’s general psychiatry program express an interest in more geriatric psychiatry training.

RESEARCH
Our section has one geographic full-time academic position dedicated to geriatric research within the Cumming School of Medicine, and we have an ongoing commitment to support research in geriatric mental health. Present projects include assessing neuropsychiatric symptoms with the Canadian Consortium on Neurodegeneration in Aging (a Canadian Institutes of Health Research study) and a neuroimaging and biomarker study looking at later-onset neuropsychiatric symptoms as risk markers for cognitive decline. Immersive therapy for mood disorders, management of dementia-related agitation and assessing novel pharmacological interventions for behavioural symptoms in dementia are other areas of interest.

We actively teach geriatric psychiatry to residents within psychiatry, geriatric medicine and family medicine. We also contribute to educational events, speaking frequently at conferences for general psychiatry and other disciplines with an interest in elderly care. Finally, geriatric psychiatrists strive to take a leadership role with physician-assisted death legislation.

There is limited availability of accredited geriatric psychiatry training programs across Canada; as residents often prefer to stay where they train, we hope that having our own program will help us replace some of our doctors, many of whom are approaching retirement and reducing capacity of their professional practices.

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

Dr. Suparna Madan
Section Chief, Geriatric Psychiatry
Addictions Psychiatry

The Claresholm Centre for Mental Health and Addictions (CCMHA), one hour’s drive south of Calgary, provides treatment and rehabilitation for adults coping with a mental illness who may also have chronic pain, addiction or benzodiazepine dependence with anxiety. Our facility, which is unique in Canada, helps people with bipolar disorder, mood and anxiety disorders, schizophrenia and substance abuse or other disorders to manage their illness and increase their independence. We perform joint admissions reviews and consultation with the 48-bed Lander Treatment Centre for addictions in Claresholm.

CCMHA currently provides 40 active psychiatry rehabilitation beds and 28 concurrent disorders (addiction) beds. Once patients are ready to return to their community, we co-ordinate follow-up support, outpatient programs and outreach services.

The Addiction Centre in Calgary continues to provide outpatient treatment to patients suffering from concurrent mental illness and substance abuse. The Opiate Dependence Program provides for the increasing needs of patients maintained on methadone and Suboxone. The Renfrew Recovery Centre provides medically supervised detoxification services in Calgary.

“\textbf{We are currently focused on working with other agencies to mitigate the rise in Fentanyl use in our city.}”

Dr. Hugh Colohan
Section Chief, Addictions and Outpatient Services (South)

NEWS

The Addictions and Claresholm portfolio is being expanded to include many of the outpatient sites south of the Calgary Zone. This expansion offers exciting opportunities for mutual learning and integration of services in the years to come.

Addiction Centre staff provide information on Fentanyl and naloxone rescue kits at a variety of sites in the zone. Training in the use of naloxone rescue is also available to patients at a variety of sites in the zone.

Psychiatric consultations to Adult Addiction Services, the former Alberta Alcohol and Drug Use Commission (AADAC) clinic in Calgary, are now provided weekly. Psychiatry, family medicine and public health residents continue to receive training in addiction medicine in both Claresholm and Calgary.

Forensic Psychiatry

The forensic psychiatry section provides assessment of and treatment for adults and adolescents with mental disorders within the legal system, and works to ensure the courts understand the individuals in order to make the most appropriate decisions for those individuals and the community.

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

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

Another service we offer is the Forensic Adolescent Program, which provides community-based outpatient assessment and treatment of adolescents mandated by the legal system.

Other services provided include mental health diversion, clinics in correctional facilities, a correctional transition team, telehealth and community geographic teams, the latter provide services to smaller centres in southern Alberta.

The Southern Alberta Forensic Psychiatry Centre (SAFPC), our inpatient facility in southern Alberta, has 25 beds for acute assessment and treatment of people in custody, as well as eight beds for those found unfit to stand trial or not criminally responsible by reason of a mental disorder (NCRMD).

A group home in southwest Calgary, the Lighthouse, has six beds to allow people who are NCRMD to gradually reintegrate to the community, depending on their mental stability and safety of the community.

NEWS

With the formal recognition of forensic psychiatry as a subspecialty, we are currently in the process of obtaining accreditation for subspecialty training in forensic psychiatry. Given the demands on our service for court-ordered assessments and treatment of mentally ill individuals in custody, as well as the increase in individuals who are NCRMD, we are working with Alberta Health Services and our stakeholders to optimize efficiencies in our service and enhance capacity.

“\textbf{We are working with Alberta Health Services and our stakeholders to optimize efficiencies in our service and enhance capacity.}”

Dr. Ken Hashman
Section Chief, Forensic Psychiatry

7 members of our section have passed the first subspecialty examination in forensic psychiatry in Canada.
In the last year we divided Child and Adolescent Psychiatry into inpatient and outpatient subsections, which has significantly advanced our services at the Alberta Children’s Hospital (ACH), the Foothills Medical Centre (FMC) and in the community.

We continue to work on the Integrated Pediatric Brain Health Initiative with ACH to further enhance our service delivery and research promotion.

**NEWS**

We have enhanced treatment capacity by opening 14 adolescent beds at Unit 23 at FMC, as well as eight beds at South Health Campus (SHC). The staff at the pre-existing child and adolescent unit at ACH and the adolescent units at FMC (Unit 26) and SHC (Unit 56A) have been doing an excellent job in providing ongoing care to children and youth with mental health issues.

A successful six-month pilot project was run at Wood’s Homes, creating a community psychiatric unit as an alternative to hospitalizing significantly ill children.

A new initiative requesting all Calgary-area child and adolescent psychiatrists to consider being on-call for ACH has increased the ranks from 7 to 22 psychiatrists and climbing.

In the spring and late fall we held sessions to help train general physicians and pediatricians to better recognize, diagnose and treat children with mental health issues.

The Autism+ service was created to meet community demand and centralize mental health services for children with autism at Neuropsychiatry Services, Richmond Road Diagnostic and Treatment Centre (RRDTC). Because of more children presenting with psychosis and mood symptoms, we enhanced the Mood and Anxiety Disorder Clinic and renamed it Mood, Anxiety and Psychosis Service.

We helped prepare a proposal for the Integrated Pediatric Brain Health Model of Care for Southern Alberta and submitted it to Alberta Health Services for further review. This collaboration with mental health, psychiatry, neurosciences and developmental pediatrics could, if approved, pave the way for Alberta to be a collaborative leader in developmental neurosciences and psychiatry.

**OUTPATIENT DEVELOPMENTS**

We work with different partners in the community to provide extensive outpatient services. We are increasing our availability in the community and the number of people we serve. Currently, 28 psychiatrists are seeing approximately 5,500 patients under the age of 18; in 2008, we saw about 2,500 patients under the age of 18.

Recently, we have developed a stepdown Intensive Outpatient Program (IOP) at SHC to accommodate the anticipated influx of adolescent patients. IOP at SHC is an intense follow-up offered to patients 24–48 hours after they are seen in the emergency department, and is meant to be an alternative to admission.

IOP will also take patients who are being pushed out of inpatient units. Historically, we may have kept patients for another week or more to complete work; now patients are safe to go but still receive intensive support by being seen daily on an ambulatory basis.

**RECRUITMENT**

We are in the process of recruiting more university-based academic child psychiatrists. We have two new recruits to support the inpatient and outpatient services with Unit 23 and the programs at RRDTC.

In addition, we have been actively promoting mental health literacy and the importance of support and early identification in treating children with psychiatric issues. We have worked closely with the Palix Foundation in this regard, attending its seminars and offering presentations in the community regarding Early Brain Development. We are collaborating extensively with CBE and CFS as well as developing training and assessment skills in the Neurosequential Model of Treatment in conjunction with the Child Trauma Academy.
Our medical students continue to show strong interest in pursuing psychiatry as a specialty program. Excellent faculty and residents involved in teaching have resulted in students again rating the psychiatry program, Course 7, as the number one preclinical course this year. About 15 per cent of the Cumming School of Medicine’s undergraduate class applies to psychiatry as a specialty option every year, compared to about 5 per cent elsewhere in Canada.

Course 7 is offered late in the curriculum, so extra effort is made to introduce psychiatry as a specialty, including a student-run psychiatry interest group that organizes talks by faculty, presents workshops and holds movie nights to spark students’ interest.

A six-week clerkship includes five weeks of adult psychiatry and one week of child and adolescent psychiatry. Self-declared students can take an optional three weeks of adult psychiatry and/or child and adolescent psychiatry. Our undergraduates can also take a variety of electives across the spectrum of psychiatry.

We continue to enjoy a very high retention rate for graduates becoming faculty—approximately 85 per cent. As the program continues to grow, we send residents for regular rotations to the South Health Campus.

Innovation is an important quality of our program, and we are using various tools to assess residents and our programming. We continue to use a 360-degree evaluation process in the Child and Adolescent psychiatry rotation, so residents can reflect on their collaboration skills and professionalism. Feedback for faculty is now occurring twice a year after each residency retreat, so preceptors know the teaching qualities we wish to reinforce. Our residents on the ONE45 electronic system will also evaluate all rotations to give information about the structure of the teaching environment.

Some of our faculty and residents have established a wonderful medical-education collaboration with a medical school in Tanzania, and we hope this relationship will develop long term into important advocacy and research.

Our formalized mentorship system has now gone through its fifth year, and we are preparing a research outcome study to review the benefits and challenges of this system.

Residents are now expected to present a formal research project by the time they complete their training. This is a requirement of the Royal College Specialty Committee in Psychiatry. Many of our residents are involved in clinical trials and are presenting other scholarly work. We continue to develop our teaching of research and links with partners in research at the Cumming School of Medicine (e.g., the Mathison Centre for Mental Health Research & Education and the Sheldon Kennedy Foundation).

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We continue to expand the range of fellowship opportunities in the department. This year, our recently accredited Royal College of Physicians and Surgeons of Canada subspecialty training program in Child and Adolescent Psychiatry was launched with two inaugural fifth-year residents, Drs. Ben Grintuch and Yuserly Rosas. Work is also underway on obtaining accreditation for our geriatric psychiatry and forensic psychiatry training programs.

Dr. Dina Munim finished her fellowship in Child and Adolescent Psychiatry in 2014, and Dr. Brienne McLane has completed her two-year requirement for neuropsychiatry fellowship at University of British Columbia and is back working at FMC.

“Innovation is an important quality of our program, and we are using various tools to assess residents and our programming.”

Dr. Jordan Cohen
Postgraduate Program Director

Dr. Cindy Beck
Fellowship Program Director

Dr. Nancy Brager,
Undergraduate Program Director
My current research is focused on the genomics of childhood neuropsychiatric disorders, particularly OCD.

Inhibition. In this project, which we affectionately label Spot for Science, we collaborated with the Alberta Science Centre (ASC) to engage children and their parents visiting the ASC in a 20-minute protocol. A third example is the Province of Ontario Neurodevelopmental Disorders (POND) network multi-site project of over 1,000 children with OCD, ADHD, and autism spectrum disorders, in which we are collecting genomic, behavioural and neurocognitive data, with a subset receiving neuroimaging.

Since moving to Calgary from Toronto, I plan to continue research on the genetics of OCD and other neuropsychiatric disorders. I will adapt newer technologies (e.g., next generation sequencing) and plans to conduct studies in both the community (similar to Spot for Science) and the clinic (e.g., pharmacogenetic studies of how genes influence treatment response). At the Mathison Centre and the University of Calgary, I know there will be many outstanding scientists and clinicians with whom I can collaborate in this work. The ultimate goal of all this is to identify more precise approaches to early identification and treatment of childhood neuropsychiatric disorders. Of course, as with all research, it cannot be entirely sure of the outcomes, but I expect the coming years to be exciting and productive!

Paul Arnold, BSc, MD, PhD, FRCPC
Director of the Mathison Centre
for Mental Health Research & Education
(Alberta Innovates - Health Solutions Transitional Health Chair in Child and Youth Mental Health)
Researcher Profiles

The Department of Psychiatry is proud to have many prominent researchers as faculty members. The researchers listed below are members of the University of Calgary’s Mathison Centre for Mental Health Research & Education and the Hotchkiss Brain Institute.

DR. DONALD ADDINGTON
Professor
Dr. Addington is active in research, education, clinical practice, and administration. His research activities include health services research and knowledge synthesis, with a focus on quality and outcome of schizophrenia and first-episode psychosis services. He has most recently developed a fidelity scale for first-episode psychosis services, which is being piloted in centers in both Canada and the United States.

Dr. Addington is also working with the Royal College of Physicians and Surgeons of Canada on a dissemination program for a recently published document on mental health core competencies for all Canadian physicians. Dr. Addington was one of the group of clinical and education specialists who developed this document.

DR. JEAN ADDINGTON
Professor

DR. PAUL ARNOLD
Associate Professor
Previously at the Hospital for Sick Children in Toronto, Dr. Arnold became the inaugural director of the Mathison Centre for Mental Health Research & Education in August 2015, and was at the time appointed Alberta Innovates – Health Solutions Translational Health Chair in Child and Youth Mental Health. Dr. Arnold’s research focuses on the genetics and neurobiology of childhood neuropsychiatric disorders. His translational research program will focus on gene discovery and knowledge translation that will contribute to prediction, prevention and early intervention. This will include development of the first laboratory in Alberta to focus on gene discovery in child and youth mental health. He currently receives funding from a number of major external funding agencies, including the U.S. National Institute of Mental Health and the Canadian Institutes of Health Research (CIHR). Dr. Arnold is also a practising child and adolescent psychiatrist with particular expertise in pediatric obsessive-compulsive disorder (OCD), and has now opened an OCD clinic in Calgary at the Alberta Children’s Hospital.

DR. CYNTHIA BECK
Assistant Professor
Dr. Beck is a psychiatrist with a research focus in mental health services and psychiatric epidemiology. Along with her collaborators, she has been using administrative data for health services research, and has looked at such issues as access to cardiac revascularization among individuals with substance use disorders. Most recently, she has been studying ways to improve the validity of administrative data. Her work also includes the use of survey data to analyze patterns of mental disorders and health services use. In terms of clinical research, she has received funding to study the use of motivational interviewing for treatment of cannabis use among individuals with first-episode psychosis.

DR. ANNE DUFFY
Professor

Dr. Duffy’s research interests are psychiatric epidemiology and pharmacoeconomics. He is researching the risk factors for major depression and bipolar disorder, while seeking ways to accurately chart the natural history of these disorders in real time. He is also documenting drug recommendations for these disorders in an effort to understand if they are truly undertreated. His teaching interests are mental disorders and their biological causes and the history of neuroscience and psychiatry.

DR. ANDREW GM BULLOCH
Professor

Dr. Bulloch’s research interests are psychiatric epidemiology and pharmacoeconomics. He is researching the risk factors for major depression and bipolar disorder, while seeking ways to accurately chart the natural history of these disorders in real time. He is also documenting drug recommendations for these disorders in an effort to understand if they are truly undertreated. His teaching interests are mental disorders and their biological causes and the history of neuroscience and psychiatry.

DR. MATTHEW HILL
Assistant Professor
Dr. Hill studies the role of the endocannabinoid system in the regulation of stress and emotional behaviour. Endocannabinoids are the brain’s endogenous version of Tetrahydrocannabinol, the psychoactive constituent of cannabis. Specifically, Dr. Hill is interested in the role of the endocannabinoid system in the effects of stress on neuroendocrine function, inflammation, emotional behaviour and metabolism. He uses a systems level approach, incorporating a range of neuroscience techniques from cellular and biochemical to behavioural. The results of this research have generally shown that endocannabinoids act as a buffer against the effects of stress and could be targeted for the treatment of mood and anxiety disorders.

DR. NADY EL-GUEBALLY
Professor
Dr. el-Guebaly is currently the research director of the Alberta Gambling Research Institute. His research involves a 10-year longitudinal interest in mediators of risk and resilience in a range of gambling and behavioral addictions. Dr. el-Guebaly is also chief examiner of the International Society of Addiction Medicine, editor-in-chief of the Canadian Journal of Addiction and senior editor of the Textbook of Addiction Treatment: International Perspectives. His major research interests have resulted in 260 peer-reviewed papers and chapters and 60 research grants.

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**DR. FRANK MACMASTER**
**Assistant Professor**

Dr. MacMaster’s research bridges psychiatry and neurology, focusing on cognition across the neuropsychiatric spectrum and healthy brain aging. His research is funded by CIHR, Brain Canada, the Kathy Taylor Chair in Vascular Dementia, the Joan and Clifford Hatch Foundation and the Alzheimer Society of Calgary. In collaboration with local and international researchers, Dr. Ismail has ongoing studies in clinical psychopharmacology (predictors of adverse drug reactions), epidemiology (prevalence studies of neuropsychiatric symptoms in neurodegenerative disease), cognitive and neuropsychiatric symptom screening (creation and validation of novel screening tools) and functional and structural neuroimaging of neuropsychiatric symptoms in neurodegenerative disease and preclinical at-risk populations. His recent accomplishments include a publication in the Journal of the American Medical Association in April 2014 on the use of antidepressants for agitation in Alzheimer’s dementia, and lead authorship of the Alzheimer’s Association research diagnostic criteria for the new syndrome, mild behavioural impairment, published in Alzheimer’s & Dementia. Dr. Ismail will also take over as chair of the Canadian Conference on Dementia.

Dr. MacMaster uses brain imaging platforms to develop targets, examine mechanism of action and evaluate biomarkers of response to brain stimulation in children and adolescents with neuropsychiatric disorders. He is currently studying the effects of repetitive transcranial magnetic stimulation and transcranial direct current stimulation on youth with mood disorders and children with Tourette syndrome, targeting brain regions known to be dysfunctional and looking for predictive biomarkers of response. His laboratory is identifying an indicator in the dorsolateral prefrontal cortex that may help predict patients’ responses to treatment for depression.

He is also studying the relationship between obesity and depression using brain imaging, animal models and epidemiological approaches. Dr. MacMaster’s other research interests include other psychiatric disorders found in young people, such as attention deficit hyperactivity disorder, schizophrenia and obsessive compulsive disorder.

Dr. MacMaster is the scientific director for the Strategic Clinical Network for Addictions and Mental Health for Alberta Health Services.

**DR. GLENDA MACQUEEN**
**Professor**

Dr. MacQueen studies factors that are associated with outcome in mood disorders, particularly following a first onset of illness. In addition to clinical dimensions of outcome, she examines cognitive function, structural and functional brain changes and physical health in patients with unipolar or bipolar disorder. She is also interested in understanding whether the cognitive and brain changes that occur in major depression and bipolar disorder can be prevented or reversed with various treatment approaches.

**DR. SCOTT PATTEN**
**Professor**

Dr. Patten focuses on the longitudinal epidemiology of major depression. His main goal is to integrate epidemiologic estimates of incidence, recurrence, prevalence, episode duration and mortality into a comprehensive epidemiologic picture. This work helps to identify risk and prognostic factors, information that helps examine trends, set priorities and identify opportunities for prevention.

Dr. Patten has expertise in methodological approaches to the analysis of longitudinal data. In addition, he has experience with all aspects of longitudinal and cross-sectional epidemiologic projects, including issues related to sampling, measurement and data collection.

He is also interested in the patterns of comorbidity of major depressive disorders with non-psychiatric conditions, especially neurological disorders.

**DR. TAMARA PRINGSHEIM**
**Assistant Professor**

Dr. Pringsheim’s primary research interest is the use of antipsychotic medications in vulnerable populations, including children, the elderly and individuals with neurodegenerative disorders such as Parkinson’s disease and Huntington disease. She is interested in helping physicians and patients improve standards of care by using knowledge synthesis and knowledge translation strategies to promote drug safety and effective treatment for neuropsychiatric disorders.

Dr. Pringsheim is involved in the creation of evidence-based guidelines for neurological and mental health conditions. She works for the American Academy of Neurology as an evidence-based medicine methodology consultant.

**DR. THOMAS RAEDLER**
**Associate Professor**

Dr. Raedler provides inpatient and outpatient psychiatric services at the Foothills Medical Centre. The focus of his clinical work and research activities has been on schizophrenia and, more recently, early psychosis and prodromal stages of psychosis.

As psychiatry clerkship director, Dr. Raedler is involved in student education. As medical director of the Psychopharmacology Research Unit (PRU) of the University of Calgary, Dr. Raedler is also involved in numerous phase II, III and IV clinical trials. Dr. Raedler is the past president of the Alberta Psychiatric Association and serves on the board of directors of the recently created Canadian Consortium for Early Intervention in Psychosis.

**DR. RAJAMANNAR RAMASUBBU**
**Associate Professor**

Dr. Ramasubbu is a clinician investigator and professor in the Department of Psychiatry and Clinical Neurosciences at the University of Calgary. Dr. Ramasubbu’s research interests focus on studying the neuroimaging and neurostimulation of mood disorders. His current studies include investigation of neural markers and predictors of treatment response to antidepressant treatment using functional magnetic resonance imaging, genetic imaging in mood disorders, and deep brain stimulation (DBS) treatment for treatment-resistant depression. Dr. Ramasubbu is the principal investigator of Pfizer Canada-funded projection machine-learning analysis of imaging markers in the individual prediction of antidepressant treatment response. He is also co-principal investigator in a project studying deep brain stimulation of the subgenual cingulate for treatment resistant depression, funded by Alberta Innovates - Health Solutions.

Dr. Ramasubbu is the chair of curriculum teaching in the psychiatry residency training program and supervisor for two postdoctoral fellows.

**DR. JIANLI WANG**
**Professor**

Dr. Wang’s research includes the epidemiology of workplace mental health problems, interventional research in workplace mental health and risk prediction research. He is currently leading CIHR-funded projects on the topics of workplace environmental factors for mental disorders and workplace mental health accommodations. He is also leading a CIHR-funded project on developing risk prediction algorithms for mental disorders. Dr. Wang is recruiting graduate students through the Department of Community Health Sciences.
Continuing Professional Development

The department has a sound support structure for continuing professional development. A geographic full-time psychiatrist, Dr. Steven Simpson, provides leadership through a continuing professional development committee.

Continuing Professional Development Committee

This committee plans and implements educational events based on the identified needs of the Department of Psychiatry, and also implements a series of regularly scheduled learning activities and events that fulfill the requirements of the Royal College of Physicians and Surgeons of Canada. Committee membership includes the director of continuing professional Development as chair, representatives for the site coordinators from Alberta Children’s Hospital, Foothills Medical Centre, Peter Lougheed Centre and Rockyview General Hospital and the four academic division chiefs. In addition, non-psychiatrist education coordinators from the clinical departments are invited to attend to help coordinate events schedules and develop needs assessments.

Activities and Events

The committee supports a range of activities:

- Region-wide rounds program linked by teleconference across Calgary and southern Alberta. This program hosted more than 20 rounds in 2015. Over 70 individual psychiatrists accessed these programs and 15 residents completed the evaluations.
- Site-based and divisionally-based ongoing education programs, e.g., journal clubs and lunch-and-learn rounds.
- Online education program (Psychiatry Online Literature Review Course) aimed primarily at rural psychiatrists from across Western Canada; currently 25 psychiatrists access this program.
- Continuing medical education in other departments and groups, supported by individual psychiatrists and psychologists.
- Healthy Minds Healthy Children, organized by the social work department at the Alberta Children’s Hospital.
- Provincial Concurrent Capable Learning Series of the Alberta Health Services’ addictions medicine group.

This structure is linked to the Cumming School of Medicine Office of Continuing Medical Education programs, where the department contributed to major events including:

- Annual Addictions Day Conference, November 2015
- Calgary Therapeutics Course
- Canadian Association for Cognitive Behavioural Therapies Annual Conference, May 2015
- Canadian Society for Addiction Medicine — Scientific Conference, November 2015

Looking ahead

A future focus for continuing professional development is developing skills transfer courses that are accredited at the Section 3–assessment level for the Royal College of Physicians and Surgeons of Canada’s Maintenance of Certification Program and the College of Family Medicine MAINPRO C. The first of these courses to be developed is a dialectical behavioral therapy course.

Special events in the last academic year addressed specific national and local education topics:

- Mood Day, February 2015
- Psychosis Day, February 2015
- Sebastian K. Littmann Research Day, March 2015
- Forensics Day, April 2015
- Women’s Mental Health Day, May 2015
- Sexual Medicine Workshop, May 2015
- Psychotherapy Day, November 2015
- Concurrent Disorders Telehealth series (addictions program of Alberta Health Services), throughout the year

2015 PSYCHIATRY GRAND ROUNDS

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
<th>Speaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan. 20, 2015</td>
<td>Clinical Trials in Psychiatry: Good, Bad or Just Unnecessary</td>
<td>Dr. Thomas Raedler</td>
</tr>
<tr>
<td>Feb. 03, 2015</td>
<td>Community Treatment Orders – A Tale of Two Provinces</td>
<td>Dr. Tom J. Hastings</td>
</tr>
<tr>
<td>Feb. 10, 2015</td>
<td>Functional Treatment Orders: Circuits and Symptoms</td>
<td>Dr. Madsukar Trivedi</td>
</tr>
<tr>
<td>Feb. 24, 2015</td>
<td>Inflammation and Depression: Circuits and Symptoms</td>
<td>Dr. Jan Felger</td>
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<tr>
<td>Mar. 03, 2015</td>
<td>Relational Suicide Assessment: Risks, Resources, and Possibilities for Safety</td>
<td>Dr. Douglas Flemons</td>
</tr>
<tr>
<td>Mar. 24, 2015</td>
<td>Optimization of Deep Brain Stimulation for Treatment Resistant Depression</td>
<td>Darren Clark, PhD</td>
</tr>
</tbody>
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Kellie McDonald, MSc
Albert Nobbs, Transgender Issues in the Movies
Chris Wilkes

Apr. 21, 2015
Post Partum Psychosis
Dr. Lisa Gagnon

Apr. 28, 2015
Is Ecstasy an Empathogen? And Other Questions About the Social Effects of Drugs
Dr. Gill Bedi

May 05, 2015
Update on the Epidemiology of Major Depression in Canada
Dr. Scott Patten

May 26, 2015
Reducing the Stigma of Mental Illness in Canada: How the truth through research is setting us free
Romie Christie

Jun 02, 2015
BI 409206 – A treatment option for cognitive impairment in Schizophrenia
Dr. Thomas Raedler

Jun 09, 2015
What is Traditional Chinese Medicine and How it Can be Integrated with Western Psychiatry
Dr. Wang (Beijing China)

Jun 30, 2015
Resident Presentations
Dr. David Pocock, PGY5; Dr. Stephanie Hyder, PGY5

Sep. 08, 2015
Update on Aggression Management and Risk Factors
Dr. Rachel Grimmnick

Sep 15, 2015
Sickness of the Mind – A Global Health Education and Advocacy Project
Dr. Kathy Fitch; Rita Wattson, PGY; Kimberly Williams PGY2

Sep. 17, 2015
Neurosurgical Approaches to Treating Intractable Psychiatric Disorders
Dr. Darin D. Dougherty

Sep. 22, 2015
Pharmacokinetics for Physicians and Clinicians
Dr. Ric Procyshyn

Sep. 29, 2015
Management of Early-Phase Schizophrenia: Impacting Illness Trajectories and Creating Opportunities
Dr. Christoph Correll

Oct. 06, 2015
Adult ADHD: Comorbidities and Executive Function
Dr. Timothy Bilkey

Oct. 20, 2015
Maximizing Treatment Outcomes of MDD in “Difficult” to Treat Patients
Dr. Michael Rosenbluth

Nov. 03, 2015
Frontotemporal Dementia: An important update for All psychiatrists, with a review of diagnosis, etiology, and treatment consideration
Dr. Aaron Mackie

Nov. 10, 2015
Schizophrenia and Hospital Length of Stay
Dr. Zahnoor Ismail

Nov. 24, 2015
Psychiatry Residents’ Rounds
Dr. Conor Liston
The 28th annual Sebastian K. Littmann Research Day took place on March 13, 2015, with Paul Grof as the keynote speaker (“Bipolar Disorders, the Curse of Heterogeneity”). Dr. Grof was a pioneer in the use of lithium for bipolar disorders and continues to be an important thought leader in issues surrounding the classification and treatment of these disorders. An interesting presentation by Dr. Frank Stahnisch and Stephen Pow also provided a fascinating historical perspective on the life of Dr. Sebastian K. Littmann—the second head of the Department of Psychiatry. The abstracts for both oral and poster presentations are archived in the University of Calgary’s digital repository (http://prism.ucalgary.ca/handle/1880/50399), and indexed in Google Scholar.

The following awards were presented:

- Best presentation by a resident: Dr. Kimberly Williams (“Fatigue risk management amongst University of Calgary resident physicians”),
- Most innovative project by a resident: Dr. Brooke Duncan (“Developing a feasibility study of online resiliency training for adolescents in an acute care psychiatric inpatient unit”), and
- Best presentation by a graduate student: Isabelle Vallerand (“Increased mortality associated with depression: a cohort study using The Health Improvement Network (THIN) database”).

Dr. Scott Patten
Department of Psychiatry Research Director

2015 Events

2015 Psychosis Day, February 5
2015 Mood Day, February 6
28th Annual Sebastian K. Littmann Research Day, March 13
Adverse Childhood Experiences & Mental Health Conference, March 17
Youth Mental Health Day, March 25
5th Annual Canadian Association of Cognitive and Behavioural Therapies, May 7-9
Women’s Mental Health Day Conference: Focusing on Perinatal Mental Health, May 22
Think Big: A Night Out with Your Brain – The Amazing Brain & Its Juggling Act, May 22
Shoppers Drug Mart: Run for Women, May 24 (Proceeds to Women’s MH Clinic)
Addiction Day and Networking Fair, May 29
HBI Research Day, June 4
Department of Psychiatry 13th Annual Invitational Golf Tournament, June 22
Open Minds Walk & Run 2015 (Schizophrenia Society of Alberta), August 29
Canadian Academy of Child & Adolescent Psychiatry Conference, Oct 4-6
Outrun the Stigma, October 18
Opening Minds Gala, October 18
The Department of Psychiatry Fall Social, October 22
Campus Alberta Depression Symposium October 28-30
Hotchkiss Brain Institute Town Hall, November 24
Psychopharmacology Research Unit

The Psychopharmacology Research Unit (PRU) focuses on conducting clinical trials as a way of finding new medications that will be more effective and better tolerated than the currently available treatments. We also participate in studies looking at new indications for established medications.

1. Study of PRC-063 in adolescent Attention Deficit Hyperactivity Disorder (sponsors: Purdue Pharma Canada; NCT02139111): this Phase III study examined the safety and efficacy of a new stimulant medication in adolescents with ADHD. Recruitment was completed in January 2015.

2. Study of EVP-6124 (Alpha-7 nAChR) as an adjunctive pro-cognitive treatment in schizophrenia subjects on chronic stable atypical antipsychotic therapy (sponsors: FORUM Pharmaceuticals; NCT01714661): the purpose of this Phase III study is to determine if EVP-6124 (an alpha-7 nAChR agonist) enhances the cognitive abilities of subjects with schizophrenia who are also taking stable antipsychotic therapy. Recruitment for this clinical trial ended in mid-May 2015.

3. Study to investigate the efficacy, safety, and tolerability of four different doses of BI 409306 compared to placebo given for 12 weeks in patients with schizophrenia on stable antipsychotic treatment (sponsors Boehringer Ingelheim (Canada) Ltd.; NCT02281773); the objective of this 12-week Phase II study is to investigate the efficacy, safety and tolerability of BI 409306 on cognitive dysfunction in schizophrenia. Recruitment is ongoing.

4. Real Life Assessment of Ability Maintena (ReJAM) (sponsors Lundbeck Canada; NCT02131415): the main objective of this non-interventional, Canadian Phase IV study is to describe the impact of treatment with Ability Maintena™ on global functional status. Recruitment is ongoing.

5. Adaptive Phase II Study to Evaluate the Safety & Efficacy of Sodium Benzoate as an Add-on Treatment for Schizophrenia in Adolescents (sponsors: BioNeurRx International (Taiwan) Corp; NCT01908192), Recruitment will begin in late 2015.

Dr. Thomas J. Raedler, Director, Psychopharmacology Research Unit

Workforce Planning + Recruitment

FUTURE NEEDS
Alberta Health Services’ Calgary Zone has a shortage of psychiatrists, as do almost all health jurisdictions in the country. Particular shortages are in child and adolescent psychiatry, geriatric psychiatry and forensic psychiatry. The overall need of our growing population significantly exceeds the growth in psychiatrist supply.

STRATEGIES AND RECRUITMENT
Our graduating residents are our primary recruitment candidates; we have approximately eight residents per year, and in the past the majority of them have joined the department after graduation. The department has also advertised in journals and on the Alberta Medical Association’s job website, www.albertadoctors.org.

The department has been approved for a subspecialty program in child and adolescent psychiatry by the Royal College of Physicians and Surgeons of Canada. Two positions are filled annually for a two-year program, leading to a specialization in child and adolescent psychiatry. We hope that this will result in a larger pool from which to recruit. Applications are also being processed for subspecialty training in geriatric and forensic psychiatry.

Awards + Achievements

Dr. Lloyd Maybaum was chosen by the Calgary Medical Society as “Physician of the Year”.

Dr. Scott Patten was awarded the Graduate Students’ Association Award for Supervisory Excellence.

Dr. Jordan Cohen was presented with the honour role award by the Class of 2016 in recognition of outstanding teaching for the Cumming School of Medicine.

Dr. Carl Adrian, Dr. Dale Danylik, Dr. Toba Oluboka, Dr. Philip Stokes, Dr. Jason Taggart, and Dr. Roy Turner were presented with Gold Star Teaching Awards for outstanding undergraduate medical teaching.

Dr. Hussam Bawa was recognized with a Certificate of Appreciation for four years of service as Physician Examiner for the Qualifying Examination Part II.

Dr. Keith Courtney was recently appointed as the Treasurer on the Board of Directors of the American Academy of Correctional Physicians.

Dr. Joe Raiche, was recently featured in the “2015 Top 40 Under 40” article of Calgary’s Avenue magazine.

The following department members received recognition from the Class of 2016 medical students for outstanding teaching.

Faculty Honour Roll Awards
Dr. Cindy Baxter
Dr. Jordan Cohen
Dr. Jason Taggart
Dr. Kathy Fitch
Dr. E. Kwan
Dr. Kanwal Mohan
Dr. Lisa Gagnon
Dr. Monique Jericho
Dr. Tim Ayas
Dr. Randall Krall (resident)

Earlier this year, Alberta Innovates — Health Solutions (AIHS) announced the recipients of the 2014 Postgraduate Fellowship Competition. Darren Clark and Emilie Magaud of the Mathison Centre were selected. They will receive a stipend of $50,000 per year plus a research allowance of $5,000 annually for up to three years. These fellowships are part of the AIHS Training and Early Career Development Program, which seeks to promote the development of individual trainees through experience in health research and innovation.

- Darren Clark (sponsoring supervisor; Rajamannar Ramasubbu): Optimization of subcallosal deep brain stimulation for treatment-resistant depression
- Emilie Magaud (sponsoring supervisor; Anne Duffy): Psychobiological pathways to mood disorders in high-risk offspring.
FALL SOCIAL – AWARDS
Dr. Jessica Lyons Perinatal Psychiatry Award presented to:
Dr. Lorraine Natho
Dr. Keith Pearce Award for Creativity & Innovation presented to:
Dr. Rita Watterson (Tanzania Project)
Dr. Patrick Conway Award for outstanding contribution to Mental Health by an International Medical Graduate presented to:
Dr. Bernard Sowa
Award for Excellence in Mental Health Care by a Community Program presented to:
Central Clinic
Award for Excellence in Inpatient Care presented to:
South Health Campus
Award for Excellence in Geriatric Mental Health presented to:
Peter Massier
System Transformation Awards Presented to:
Access Mental Health
Regional Housing
CAAMHP Community Clinics
Adult Community Clinics
Dr. Novin Ihsan received the Silver Couch resident teaching award.

APPOINTMENTS
Dr. Keith Courtney was recently appointed as the Treasurer on the Board of Directors of the American Academy of Correctional Physicians.
Dr. Sara Binder was recently appointed as a Board Member to the Canadian ADHD Resource Alliance.
Dr. Assen Alladin was elected President-Elect of the American Society of Clinical Hypnosis (2015-2016).
Dr. Anne Wilkes was appointed Co-Chair of the International Society for Bipolar Disorders (ISBD) Task Force.
Dr. Chris Wilkes was elected as a member of the International Association of Analytic Psychologists.

GRANTS
2014 Department of Psychiatry/Calgary Health Trust Research Grant Competition Successful Trainee Recipients:
- Dr. Kaitlin Chivers-Wilson (Resident, Department of Psychiatry): “Women, Violence and Trust: Exploring the relationship between plasma oxytocin and alexithymia”.
- Dr. Rachel Grimmelnic (Resident, Department of Psychiatry): “Augmentation of Clozapine with Long Acting Injectable Antipsychotics in Treatment Resistant Schizophrenia”.
- Laina Beth McAusland (Graduate Student, Medical Sciences): “Feasibility of the use of biofeedback as an intervention to target anxiety in young people at clinical high risk for developing psychosis”.
- Dr. Rita Watterson (Resident, Department of Psychiatry): “Descriptive Epidemiology of GAD in Canada”.

Successful Faculty Recipients:
- Dr. Anne Duffy (Professor, Department of Psychiatry): “Peripheral markers associated with the development of bipolar disorder”.
- Shawn Currie & Priscilla Liu (Information & Evaluation Unit, Department of Psychiatry/AHS): “Validating a New Measure of Client Experience in Addiction and Mental Health Services”.

Dr. Jean Addington
- Brain Canada grant of $1.5 million for Youth Mental Health.
- Dr. Addington was awarded three NIMH grants as principal investigator:
  - $2 million for the renewal of the “North American Prodrome Study 3 (NAPLS 3) Predictors and Mechanisms of Conversion to Psychosis”
  - $1.5 million for the University of Calgary’s participation in the 3-site study entitled “Cognitive Behavior Social Skills Training (CBSST) for Youth at Clinical High Risk of Psychosis (ReGROUP)”
  - $104,000 for the Harmony project which is an NIMH collaboration with two multisite studies in the UK and in Europe.

Dr. Paul Arnold
- Dr. Arnold was awarded the following grant, as principal investigator:
- Dr. Arnold was also awarded the AH$ Translational Health Chair for Child and Youth Mental Health, for a total of $3.6 million (2015-2022).

Dr. Anne Duffy
- Dr. Duffy was awarded the following grants, as principal investigator:
  - Alberta Innovates Health Solutions (AIHS): $50,000 “Identifying rare variants causing bipolar disorder: Pilot study” (2015-2016), co-applicant, Albert Wong, University of Toronto.
  - Hotchkiss Brain Institute & Department of Psychiatry, Oxford University Neuroteam Grant: $486,525 “Refined prospective clinical phenotyping in youth at familial risk of developing recurrent mood disorders” (2015-2017), co-applicant Dr. John Geddes, Oxford University.
  - Hotchkiss Brain Institute (HBI) Pilot Funding Grant: $20,000 “Epigenetic pathways associated with the early clinical stages of bipolar disorder” (2014-2015), co-applicant Dr. Gustavo Turecki, McGill University.

Dr. Matthew Hill
- Dr. Matthew Hill was awarded the following grant:

Dr. Zainoore Ismail
- Dr. Ismail was awarded six grants:
Dr. Frank MacMaster

Dr. Frank MacMaster was awarded the following grants as principal investigator:

- Scientific Director’s Operating Funds: $250,000 “Brain Imaging Studies of Brain Stimulation” (2015-2020).
- Addiction and Mental Health Strategic Clinical Network: $15,000 “Pilot Study of Transcranial Direct Current Stimulation for Treatment-Resistant Depression” (2015-2016).

Dr. Frank MacMaster was Co-Principal Investigator for the following grants:


Dr. Glenda MacQueen

Dr. Glenda MacQueen was co-investigator on the following grants:

- Type A Grant, Ontario Mental Health Foundation: $150,000 ($75,000 per year over two years) “Beyond silence: Comparing the impact of contact-based education with mental health literacy training on early intervention for healthcare workers with mental health issues” (2014 – 2016) Dr. Sandra Moll et al. (incl. Scott B. Patten).

Dr. Scott Patten

Dr. Scott Patten was awarded the following grants:

- Alberta Mental Health Strategic Clinical Network: $15,000 “Reselecting prescriptions for quetiapine for depression: Understanding influences on prescribing behaviour and identifying the knowledge to action gap” (2014-2015).

Dr. Pringsheim was awarded the following grants, as co-investigator or co-principal investigator:

- Shire Canada: $25,000 “Improving Care in Adults with Parkinson’s Disease and Dementia Complicated by Comorbid Depression and Anxiety” (2015-2016).
- Hotchkiss Brain Institute / Mathison Centre for Research & Education: $40,000 “Transcranial magnetic Stimulation for Tourette Syndrome” (2015-2016).
- Mathison Centre for Mental Health Research & Education: $20,000 “Transcranial magnetic stimulation for Tourette Syndrome” (2015-2016).

Dr. Rajamannar Ramasubbu

Dr. Rajamannar Ramasubbu was awarded a grant from the University of Calgary: $12,750 “Burden of Recovery: Living Without Depression Following DBS” (2014).
Dr. Thomas Raedler

Dr. Thomas Raedler was awarded the following grants, as principal investigator:

- SyneuRx International (Taiwan) Corp: “Adaptive Phase II Study to Evaluate the Safety & Efficacy of Sodium Benzoate as an Add-on Treatment for Schizophrenia in Adolescents” (2015 – ongoing).
- Boehringer-Ingelheim: “A Study to Investigate the Efficacy, Safety and Tolerability of Four Different Doses of BI 409306 Compared to Placebo Given for 12 Weeks in Patients With Schizophrenia on Stable Antipsychotic Treatment” (2015 – ongoing).

Dr. JianLi Wang

Dr. JianLi Wang was awarded two grants:

- Movember Foundation Mental Health Initiative Grant: $2.1 million dollars “Early Identification and Prevention of Major Depression in Male Workers” with 15 co-applicants from Alberta, British Columbia, Quebec and Ontario (2014-2017). Drs. Scott Patten and Andrew Bulloch were collaborators on this grant.
- Seed grant from Mathison Centre: $13,000 “Disclosing Personalized Depression Risk Information: A pilot study” (2015-2016).

Presentations

May 14-16, 2015

May 14-16, 2015

May 14-16, 2015

May 14-16, 2015


Cotto, S., Williams, J., Lavorato, D., Link S, el-Guebaly N, Disordered gambling and health functioning in individuals receiving disability benefits: Addiction counselors’ & their Treatment. 2014 Sep 18.


Konigk, Th. Bege, C. El-Guebaly N, Hodges JD, Patten S, Correll CU, Tandon D, O'Donnell D; Generalizability of an anti-stigma program for healthcare providers: using a pre-post randomized design. Addictive Behavior Patterns and Emotion Dysregulation. 2, 9.


GOVERNANCE

The Department of Psychiatry is an academic department that is a division of the University of Calgary, Cumming School of Medicine and a clinical department within Alberta Health Services (AHS), Calgary Zone. The two departments are linked through a single jointly-appointed department head and a single executive committee.

Department Head

The department head reports to the dean of the Cumming School of Medicine and to the associate zone medical director, AHS, Calgary Zone. The department participates in the activities of the Cumming School of Medicine through the involvement of its members in such activities as faculty-wide meetings, committees and collaborative teaching and research efforts. The primary role of the department head is to support, directly and indirectly, the teaching, research and service activities of the department’s members. Thus, the head has departmental responsibility for budget submissions and management, purchasing, curriculum planning, space and resource management, personnel recruitment, hiring and promotion, planning, program development and the annual evaluation of faculty and staff. Within the structure of the department, some of this work is distributed among the faculty and support staff, who give their time and talent generously in accomplishing these necessary departmental activities.

Sections

The Department of Psychiatry has six sections: Addictions and Outpatient Services (South – including Claresholm); Outpatient Services (North); Child and Adolescents Psychiatry; Forensic Psychiatry; Geriatric Psychiatry; and Inpatients, Emergency and Consultation-Liaison Psychiatry. The section chiefs are advisors to, and supporters of, the department head. At the departmental level, the section chiefs assist in curriculum development, program and faculty evaluations, and physical and human resource management. Beyond the department, the section chiefs are delegates of the department head, and may participate in local and provincial initiatives. The section chiefs are responsible for services within Addiction and Mental Health Services, Calgary Zone.

Performance Reviews and Promotions

The head of the Department of Psychiatry completes all the academic annual merit evaluations. The department’s promotions committee reviews recommendations for promotion for full-time faculty and part-time clinical or adjunct appointments, and recommendations for promotion are made to the dean based on the advice of the department head. The department’s Executive Committee reviews all initial clinical and adjunct appointments and subsequent re-appointments before recommendations are made to the dean. Members of the clinical department have their privileges reviewed annually and have a personal review with their program medical director every three years.

The Clinical Department of Psychiatry comprises 191 members:

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<th>SECTION</th>
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<tr>
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<td>Child and Adolescent Psychiatry</td>
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<td><strong>169</strong></td>
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DEPARTMENTAL COMMITTEES

Department of Psychiatry Executive Committee

This committee meets monthly and integrates the zone and university leadership. It comprises all the section chiefs, education directors, research director and the chief resident. It is responsible for recruitment and retention, policy and planning.

Departmental Geographic Full-time Faculty Committee

This committee meets on a monthly basis to advise the department head on academic planning and policy matters. Issues discussed include long-term planning, program development, teaching and research policy, faculty appointments and human resource planning, and other issues relating to strategic planning. This committee sometimes discusses policy matters that are to be taken to the department at large for discussion and voting.

Residency Training Committee (RTC)

This committee is chaired by the postgraduate training director, who is appointed by the associate dean of postgraduate medical education in consultation with the department head. The RTC meets on a regular basis throughout the year (usually monthly) and consists of the post-graduate training director, the chair of the psychotherapy committee and the director of resident research. The chairs of the curriculum and addiction committees are invited to meetings as needed. In addition, five elected residents from all levels of training, one representative from each of the major teaching sites involved in the program, the chief resident, and the resident Canadian Organization of Psychiatry Educators representative are part of this committee. The department head (ex-officio) may also attend this meeting. The RTC provides leadership and supervision in all aspects of residency education in psychiatry within the Cumming School of Medicine, the University of Calgary and its affiliated teaching hospitals and programs. It selects residents and reviews and approves resident rotations.

Undergraduate Medical Education Committee

Selected by the department head, the director of undergraduate medical education chairs the Undergraduate Medical Education Committee. The director, in consultation with the head, selects two or three additional members for the committee to oversee Course VII, clerkship and evaluations. This committee is responsible for undergraduate curriculum planning, calendar changes, and program requirements. It also oversees the clinical clerkship, a subcommittee of the Undergraduate Medical Education Committee.

Continuing Professional Development Committee

The purpose of this committee is to plan and implement educational events based on the identified needs of the Department of Psychiatry, and implement a series of regularly scheduled learning activities and events that fulfill the requirements of the Royal College of Physicians and Surgeons of Canada. Membership includes the director of continuing professional development (chair), representatives for the site coordinators from Alberta Children’s Hospital, Foothills Medical Centre, Peter Lougheed Centre and Rockyview General Hospital, and the seven section chiefs. In addition, non-psychiatrist education coordinators from the clinical departments may attend to help coordinate events schedules and develop needs assessments.

Fellowships Committee

This committee is responsible for facilitating and coordinating advanced clinical and research training in the department at the post-residency and post-doctoral level; this includes the selection and admission process for clinical fellows and funding, where applicable. The chair of the fellowships committee is selected by the department head. In consultation with the head, the chair selects five or six additional members for the committee to provide representation from the residency training committee and fellowship programs.
Key initiatives for Addiction and Mental Health in the Calgary Zone in 2015 included the following:

- Child and Adolescent Addiction and Mental Health is working collaboratively with Developmental Paediatrics and Neurosciences toward the development of a Brain Health initiative;
- The adult community mental health clinics have completed a service redesign and implementation is in progress;
- The auditor general Report on Addiction and Mental Health in Calgary was released in July 2015. The president and chief executive officer of AHS accepted all the recommendations made;
- Leadership focused on reducing aggression on inpatient units, which included mandating non-violent crisis intervention for all Addiction and Mental Health staff and requesting renovations on several acute-care units to improve safety;
- The Alberta government undertook a Leadership focused on reducing aggression on several acute-care units to improve safety;
- The South Health Campus Day Hospital Program opened in the Fall of 2015. In addition, improvements were made to the Peter Lougheed Centre Day Hospital and implemented in the Fall of 2015;
- Calgary Zone participated in provincial bed mapping for Addiction and Mental Health; and
- Rural Addiction and Mental Health is working on the coordination of services and supports across all populations in the Calgary rural areas.

Over capacity, especially in the emergency departments and on the inpatient units, across all sites and ages, continues to be an issue. Two significant leadership positions were filled in the Strategic Clinical Network in 2015: Allison Bichel accepted the position of senior provincial director and Dr. Frank MacMaster accepted the position of Scientific Director. Dr. Nick Mitchell continues in the position of Senior Medical Director.

- Work continues with all services to ensure that a recovery-based service delivery philosophy is embedded within clinical work;
- A working group has been developed with Disability Services to develop a short- and long-term plan for complex patients requiring specialized supportive living environments;
- The South Health Campus Day Hospital Program opened in the Fall of 2015. In addition, improvements were made to the Peter Lougheed Centre Day Hospital and implemented in the Fall of 2015;
- Calgary Zone participated in provincial bed mapping for Addiction and Mental Health; and
- Rural Addiction and Mental Health is working on the coordination of services and supports across all populations in the Calgary rural areas.

The Decision Support Team (DST), Addiction + Mental Health

OUR VISION:
To be recognized and valued as leaders in decision support and education within Addiction & Mental Health.

OUR MISSION:
To provide expertise, tools, and collaborative support for Addiction & Mental Health in the areas of evaluation, information management, research and education to help inform decision making, improve service delivery, and build capacity to deliver quality patient and family centered care.

Our name has changed, but not our promise and commitment to support the services and staff who serve Addiction & Mental Health (AMH), Calgary Zone. We continue to provide expertise and resources for evaluation, information management, education and research with excellence and integrity.

The Decision Support Team (DST) plays a critical role in improving patient care, planning mental health services and reporting progress to Alberta Health and Wellness and Alberta Health Services (AHS). It also plays an important part in the partnership between the Alberta Health Services, Calgary Zone, and the University of Calgary through its knowledge translation activities. DST continues to fulfill its mandate to play a significant part in the planning of AMH services and helping set priorities and strategic planning. The Calgary Zone AMH portfolio has set an example in innovation and quality treatment in Alberta—an accomplishment that is due in part to the hard work, dedication and passion of the DST staff.

The DST is comprised of talented individuals who are specialists in data management, program evaluation, system improvement, research, performance measures, outcome measurement, and education. These professionals form the three main branches of the DST team: education, evaluation and information management.

The education team was expanded to enable DST to provide more professional development opportunities for AMH staff, such as broadening the content and scope of the Calgary Zone AMH orientation for all new staff in AMH and developing online learning modules and workshops.

The evaluation team worked with AMH to help assess and evaluate the services it provides, including evaluating how these services performed during the 2013 flood and how those affected by the flood are dealing with the aftermath. Over the next year, this team will continue this valuable work with such projects as the Youth Addiction Services ACTION Day program evaluation and the development of a standard set of AMH comprehensive assessment forms across the province. The evaluation team will also participate in appropriate research initiatives.

The information management team provides clinicians, managers and leadership with timely, high quality and accurate clinical and administrative information required to make effective, informed decisions for the best quality care in addiction and mental health. The information management team also collaborates with other zone and provincial services to help AMH achieve its goals and help with strategic planning. All these teams in DST have taken on a greater provincial role in their work. From collaborating with and advising provincial working groups and committees to leading projects or participating as an active team member, DST has become a valued contributor to provincial initiatives.

Every summer, DST highlights its current projects and activities in its annual report. At the end of each fiscal year, the team produces a year end summary (YESS), which is a comprehensive data summary of clinical activity in AMH, Calgary Zone. YESS has become the official source of program statistics. The annual report and YESS are just two of many reports that are produced by DST and are available on the AHS internal website at Performance Measurement & Quality - Our Teams / Departments - AHS Insite, (http://iniste.albertahealthservices.ca/9355.asp).

“The DST is comprised of talented individuals who are specialists in data management, program evaluation, system improvement, research, performance measures, outcome measurement, and education.”

Dr. Shawn Currie, Director Decision Support Team, Addiction & Mental Health
Improvement + Innovation

The Department of Psychiatry, Calgary Zone, has always placed a high priority on quality assurance and improvement, and encouraged innovations in the provision of clinical services.

Over the course of the past year, the Quality Assurance Committee has met repeatedly to review safety concerns or incidents within the zone and make recommendations to ameliorate services. Dr. Lisa Gagnon has accepted a new quality assurance position for the department. She held a Town Hall meeting about aggression on our inpatient units and has led an initiative to improve safety for psychiatrists and clinical staff. She is also working on a project to improve the milieu on our busy inpatient units.

The link of family physicians to specialist care (psychiatry in this instance) is enormously important for the flow of patients in both practice systems. In the past year the department has renewed efforts to work with Primary Care Networks so that its most stable patients can be transferred to the care of family doctors, and reciprocally, more referrals from family physicians can be taken into its specialty psychiatry clinics for assessment and treatment.

In the past year there has been particular focus on patient complaints about care delivery. The department has engaged more front-line clinical medical leaders, who assist in the resolution of such complaints. Next year, staff plan to provide education on the critical incident review process, as well as the patient complaints process, through departmental grand rounds; these processes are key components of clinical quality assurance.

These quality improvement initiatives are still in their early phases, but hold substantial promise of improved patient-care delivery. Monitoring, evaluations and reporting will occur over the next year.

CHALLENGES

In 2015 the Department of Psychiatry successfully recruited nine physicians, and continues to actively recruit in underserved areas such as child and adolescent psychiatry. Recruitment continues for three positions in Child and Youth Mental Health. The absence of an academic alternate relationship plan, the shrinking sessional budget relative to the size of the department and the absence of new clinical services at various sites will compromise the ability of the department to recruit the physicians necessary to meet the expanding need for mental health services.

The major challenges for the Department of Psychiatry are both clinical and academic. Calgary has experienced a significant increase in population, which has, in turn, increased the number of patients accessing mental health services and overwhelmed both inpatient and outpatient programs. Capacity for patients with psychiatric disorders is an ongoing issue, with a need for more inpatient beds and urgent services across the age spectrum.

Looking to the Future

The Department of Psychiatry, Calgary Zone, worked with the zone and the provincial Addiction and Mental Health group to identify a series of initiatives that were aligned with the stated priorities of Alberta Health Services. Some initiatives will be realized over a multi-year time frame.

Ongoing priorities for Addiction and Mental Health include the following:

- Acute-care capacity for child and adolescent and adult mental health patients;
- Decreased percentage of Alternative Level of Care inpatients;
- Increased urgent-care services for mental health patients;
- Canadian Psychiatric Association targets for emergent (24 hours), urgent (14-day) and scheduled (30-day) care. Community clinic redesign and process improvements continue to be a priority for outpatient services, with a major focus on access improvement measures;
- Implementation of clinical care pathways in collaboration with the Addiction and Mental Health Strategic Clinical Network, including an adult and adolescent depression pathway, alcohol misuse pathway and complex high needs project; and
- Integration of research into our specialized and community clinics to foster improvement in patient care.
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
- Integrate mental health care with primary health care
- Work to reduce the stigma of mental illness

Our Values
- Best standards of clinical practice
- Highest ethical standards of professional conduct
- Prevention, access, care and sensitivity for patients and their families
- Patient-focused treatment decisions
- Evidence-based principles of treatment
- Advocacy for patients
- Leadership
- Lifelong learning
- Collegial support
- Respect for other health professionals
- Respect for multidisciplinary team approach
HOSPITAL SERVICE LOCATIONS

Alberta Children’s Hospital
2888 Shaganappi Trail NW, Calgary, Alberta T3B 6A8

Foothills Medical Centre
1403 29 Street NW, Calgary, Alberta T2N 2T9

Peter Lougheed Centre
3500 26 Avenue NE, Calgary, Alberta T1Y 6J4

Rockyview General Hospital
7007 14 Street SW, Calgary, Alberta T2V 1P9

South Health Campus
4448 Front Street SE, Calgary, Alberta T3M 1M4

calgary.ca/psychiatry