Message from the Chair/Chief

Dear Colleagues,

We continue to implement our Strategic Plan for the Department that was formulated from our retreat on Friday, June 22, 2012 at the Lamplighter Inn in London. Approximately 50 members of the Department attended the day and arrived at three strategic priorities.

The retreat confirmed the Department’s support for the three proposed strategic directions:

1. Enhance Community Collaboration
2. Be a leader in education and distance education, fully engaging Windsor & SWOMEN
3. Enhance clinical research programs directly impacting patient care across the life course.

Three strategic working groups have been established to continue to work on the above strategic priorities. Dr. Links is chairing the Strategic Working Group on Enhancing Community Collaboration. This Working Group has been involved in developing a Project Management Proposal in conjunction with Thames Valley Family Health Team. The project that is funded by the St. Joseph’s Health Centre Foundation, London, will focus on developing strategies to utilize...
the unspent sessional dollars provided for psychiatric care to family health teams and community agencies in the London area. The working group has also initiated a plan for a continuing professional development conference on collaborative care, and Dr. V. Dua is chairing the planning committee for this event.

Dr. J. Reiss is leading the Strategic Working Group on Being a Leader in Education and Distance Education. This Working Group has been successful in developing a CaRMS matched residency program located in Windsor. The CaRMS match is to begin with matching two residents for the program in July 2015. This working group is examining approaches to move our CPD activities to a more distributed program and to have distributed sites develop and deliver more CPD activities for the Department. Additionally, taking better advantage of OTN technologies for webcasting and archiving CPD products is being pursued.

Dr. M. Heisel is leading the Strategic Working Group on “Enhancing Clinical Research Programs directly impacting patient care across the life course.” Dr. Heisel has met with research leaders, department researchers and has convened three focus groups to solicit input on addressing the gap between the clinicians and researchers in the Department. As a result of this work, the Research Interest Group has been re-focused on resident research projects, and the meetings will be used to have the research-intensive faculty provide formative project feedback to each resident. Dr. Heisel has been working on processes to facilitate better engagement of the clinical and basic science faculty. Under Dr. Reiss’ leadership, we have developed plans for a “Permission to Contact procedure” at London Health Sciences Centre Ambulatory Mental Health intake that would ensure that all adult patients are approached to seek their potential participation in clinical research projects.

In spite of the many funding challenges that exist to support clinical research, I am pleased to highlight some of the clinical research that continues to grow within our Department. An active group of researchers and clinicians have been collaborating on suicide-related research projects. Dr. Links and colleagues completed an CIHR-funded planning meeting that brought together experts in masculinity, suicidology, psychological resiliency, personality assessment, clinical and health systems research, knowledge translation and consumer survivors. The objectives of the meeting were to develop: 1) a novel interdisciplinary team focused on suicide among men; 2) a synthesis report outlining our Multidimensional Theory of Suicide in Middle-Aged and Older Men; 3) development of specific proposals for submission to CIHR and other funding agencies; and 4) knowledge translation of the current status and future directions for theory-based suicide prevention targeting men. The planning meeting was held in London, Ontario on January 15-17, 2014, and the feedback from the meeting indicated that participants felt it was highly successful in achieving our meeting objectives. From this initial meeting, the group developed a proposal for the CIHR Team Grant that was submitted to CIHR in August 2014.

Dr. Marnin Heisel recently received project funding of $575,255 from Movember Canada, a grass-roots organization dedicated to raising awareness of men’s health problems and raising funds to support men’s health research, to implement, finalize, disseminate, and evaluate Meaning-Centered Men’s Groups for men facing retirement. Eligible participants for this community-outreach intervention study will include soon-to-be- or newly-retired men over 60 who may be vulnerable to the onset of depression and suicide risk by virtue of low perceived Meaning in Life (MIL), a psychological resiliency factor that Dr. Heisel has shown to be protective against the presence, intensity, onset, and exacerbation of suicide ideation (Heisel, 2009; Heisel & Flett, 2006, 2008, in press). Participants must be cognitively-intact, and cannot meet diagnostic criteria for an active mental disorder or endorse severe suicide ideation, and,
consistent with the focus of this preventive intervention study, must not be receiving psychotherapy. Participants will be recruited into a 12-session, 90-minute, once-weekly session of a meaning-centered men’s group. The intervention will be delivered in community settings in order to enhance participant comfort and access to services. The present study is predicated on the premise that men low in recognition of Meaning in Life (MIL) and facing retirement may be primed to develop depression and suicide ideation, and that intervening to enhance MIL should promote mental health and well-being and mitigate the onset of depression and risk for suicide.

Dr. Paul Frewen was promoted to the rank of Full Professor in the Departments of Psychiatry and Psychology at the University of Western Ontario. Dr. Frewen’s primary appointments are with the Neuropsychiatry Division (Psychiatry) and the Personality and Measurement Area (Psychology). He continues his active research program on the psychobiology of trauma-related disorders including developing innovative treatment approaches for PTSD. He recently was awarded OMHF Type A Grant for two years in the amount of $119,214 for the “Randomized Controlled Trial of Internet-Based Mindfulness Therapy for PTSD as Adjunct to Evidence-Based Treatment.”

In partnership with Dr. David Hill, Scientific Director, Lawson Health Research Institute, we requested an external consultation on the “Opportunities to Develop Psychopharmacology Research at Western University, Department of Psychiatry, Schulich School of Medicine & Dentistry.” Dr. Sid Kennedy, Professor of Psychiatry, University Health Network, University of Toronto, provided the consultation completed in July 2014. The full report is available online on the Department website on the Research page at: http://www.schulich.uwo.ca/psychiatry/docs/S%20Kennedy%20Psychopharmacology%20Report1. Dr. Kennedy’s main recommendations included: recruiting a midcareer clinician-scientist with expertise and an international reputation in treatment outcome studies including psychopharmacology, device therapies (e.g. TMS, Deep Brain Stimulation) and psychosocial treatments and to host a special event at Western on “Advances in Understanding and Treating Mood Disorders” to promote ongoing interest.

The Department remains committed to provide training in all the Royal College approved subspecialties. The Subspecialty Program in Child and Adolescent Psychiatry has taken in their first resident as of July 2013. Dr. Raymond Egan is now entering his second year of subspecialty training. The Program has two residents starting the subspecialty training this year.

Dr. Michele Doering has assumed the position of Program Director for the Geriatric Psychiatry Subspecialty Program. She and members of the Geriatric Division completed and submitted the application for subspecialty residency in geriatric psychiatry with the goal to be able to offer it in 2015.

Dr. Brian Daly is a recent addition to our Clinical Faculty and a forensic psychiatrist at the Southwest Centre for Forensic Mental Health Care. Dr. Daly will be assuming the role of Program Director for the Forensic Psychiatry Subspecialty Program. He and members of the Forensic Division have been working on the subspecialty application for Forensics, and the application was submitted for approval in June 2014.

In closing, I want to thank the Department Executive Committee, the Department Advisory Committee, Deborah Lucas, Manager – Administration and Finance, Colleen Chryssoulakis, Administrative Assistant, and all the administrative staff for another productive and progressive
year. And to the Faculty, I want to thank you for your commitment to our Department, to our students, to our patients and staff.

Dr. Paul Links
Professor and Chair, Department of Psychiatry
Schulich School of Medicine & Dentistry, Western University
Chief of Psychiatry, London Health Sciences Centre and St. Joseph’s Health Care London

DIVISION REPORTS

Division of Child and Adolescent Psychiatry (DCAP)

As I reflect on the 2013/2014 academic year for our Division, it can best be encapsulated as a year of firsts and beginnings. It was our first year of subspecialty training with Dr. Raymond Egan as our first PGY5 trainee. In July, Ray will be joined by Drs. Caroline Armstrong and Joy Abramson as we work to develop our full capacity (which will be two candidates in each year.) Thank you to Dr. Patty Hall for her leadership as Program Director and to the RTC who have taken on various training portfolios. This November, the Program will have its first internal review which is scheduled for 18 months from the time that a Program receives Royal College accreditation. We will be the second Program in the country to have an internal review; University of Toronto was recently reviewed. I would like to express a special thank you to Tracy Henebry who is blazing a new trail in supporting the postgraduate development.

In September 2013, the first CAP Subspecialty exam was held, and several of our Division members bravely took the exam. Congratulations to the 100% who passed. Continuing Professional Development continues to flourish under Dr. Naveed Rizvi’s stewardship. The Annual Symposium on April 25 was a product of CPD coming together with the growing Maternal Child Mental Health Program including Dr. Heidi Haensel and Sarah Parkinson, CNS, who have nurtured and developed this “baby” with a village of community partners. The collaboration and cooperation of the various internal and external partners to the program resulted in a very successful day with wonderful feedback. A special thank you to Faye Slote whose support of the Division generally and the Symposium specifically has been incredible. Faye, too, is a beginning. It is hard to believe that she has just completed her first year with us.

Another very important first this year was the Annual Research Half Day for the Division. Selecting the theme of collaboration, Dr. Jeff Carter led this very successful venture with Faye’s administrative support and Brenda Davidson’s attention to detail. Jeff is planning the second day for November 7, 2014 with the theme of transitions.

Our Annual Research Report, published with the Department of Psychiatry Annual Report and also on the DCAP web link on the Department of Psychiatry website, is impressive and reflective of the research growth in the Division and Jeff’s research leadership. Thank you to Jeff for coordinating the mandatory research projects for our subspecialty residents.

We were not, unfortunately, the final selected site for the national CIHR’s Boeckh Collaborative Grant. Our group application TRAM: CAYNIM (which included us as one of the final five selected collaborative sites) was one of three final sites (with Montreal and Toronto). The project led by Dr. Ashhok Malla in Montreal was the final selected site and will address early
intervention. Thank you to Drs. Graham Reid, Allan Lescheid, Margaret Steele, Javeed Sukhera and Stacey Espinet who joined me in submitting our site proposal. The project has served in bringing together many potential collaborative partners, across academic centers in Canada.

Although not a beginning, the Clinical Clerkship selectives (under Dr. Ben Loveday’s direction) and electives (under Dr. Ajit Ninan’s direction) continue to be very positively regarded.

Another “new” will be a Community Pediatric Fellowship with Dr. Pam Horne leading the child and adolescent component.

Clinical innovation is alive and well. Dr. Javeed Sukhera is playing a major role in some very significant clinical innovations. He is leading the Transition Age Youth Project and has worked diligently with the Pediatric Emergency Physicians and John McKay from C-IT to implement the Emergency to Community Care Pathway for children and adolescents presenting to pediatric emergency with mental health issues. This was our local project that evolved from our gap analysis with our community partners with the CAMH Southwest Collaborative and has potential to be a model for the province.

Continuing with firsts, Faye Slote is developing the DCAP component of the newly designed Department of Psychiatry website that is about to be launched.

I do want to thank the members of the DCAP Advisory Committee which was expanded this year to include a parent advisor, Lindsay Neil, Kathryn Lambert our community representative who is a program supervisor at London Middlesex CAS, Dr. Susan Rodger, Director of the Mental Health Program at the Faculty of Education and Dr. Mary Broga, representing the Distributed Medical Education Program in Windsor.

Congratulations to Dr. Patty Hall who received the Deans Award of Excellence - Postgraduate Education and to Drs. Heidi Haensel and Rob Nicolson, who received the Postgraduate and Undergraduate Awards in teaching at the Department of Psychiatry awards dinner this past June.

Finally, through the generosity of the Children’s Health Foundation (CHF) at LHSC/Children’s Hospital, a launch of DBT capacity building has become possible culminating with an Advanced DBT training workshop on September 22 and 23. We will also be doing evaluative research on the effectiveness of our DBT interventions at LHSC/Children’s and Regional Mental Health Care’s Adolescent Program. Leading progress and leading change is rewarding, but it can take its toll. At our Annual DCAP meeting in May, Dr. Alyson Byrne presented the work that she is undertaking at Ivey with Dr. Lorraine Crossan on Character in Leadership. This values based approach has the potential to help us to continue our energetic leadership and coach us in how to care for ourselves in the process so that we don’t risk burning ourselves out.

Please see directly below for reports from the leaders in the DCAP.

Dr. Sandra Fisman
Chair, Division of Child and Adolescent Psychiatry

Dr. Jeff Carter: Research
I would like to thank the site research leads (Dr. Carla Smith at Vanier, Brenda Davidson at LHSC, and Dr. Shannon Stewart at CPRI) for their assistance over the year, and Faye Slote for
providing administrative support. I would also like to thank Dr. Marnin Heisel, Director of Research for the Department of Psychiatry. We have spoken a few times about strengthening research, and I look forward to further collaboration between the Division and the Department in this regard. The Division is aligning our annual reporting with the Department to reduce the administrative burden on researchers. All researchers in the Division are completing the core training required by the Lawson Institute and Western’s Health Sciences Research Ethics Board, and Dr. Heisel has been instrumental in arranging for training.

Last year, the Division successfully held the First Annual Research Half Day on November 13, 2013. Dr. Jana Davidson from the Children's and Women's Mental Health Programs Children's and Women's Health Centre of British Columbia spoke on “Developing Clinical Questions and Getting Them Answered – A Case Example,” and Dr. Graham Reid graciously invited me to join him in speaking about “Making partnerships work: Lessons from a community-based research program in children’s mental health.” Many members of the Division presented nine posters, and the award went to Dr. Heather Jacques and her colleagues for “Adopting the Collaborative Problem-Solving Model on an Inpatient Unit: Year One Progress Report of Staff Variables.”

This year, the Second Annual Research Half Day will be held the morning of Friday November 7, 2014. The theme is “Transitions,” and Dr. Simon Davidson from the Children’s Hospital of Eastern Ontario will provide the keynote address. We are working on the agenda for local speakers and poster presentations.

The Journal Club completed a successful season. In October, Dr. Devita Singh spoke on boys with gender dysphoria, and in December, I asked, “Does Therapeutic Approach Matter?” Kirk Elliot spoke on neurobiological implications of addictions in February. In April, Dr. Raymond Egan provided a critical appraisal of a study on risperidone for the treatment of aggression in children with Attention Deficit/Hyperactivity Disorder. In June, Dr. Ajit Ninan spoke on predictive factors regarding side effects of psychotropic medications in children.

**Dr. Ben Loveday: Undergraduate Medical Education Clerkship**

During the past academic year, the DCAP has continued to offer senior medical students the opportunity to spend two weeks in a clinical rotation with a Child and Adolescent Psychiatry service. There are ten distinct services in London and one in Windsor that have been available. During rotations, senior medical students participate in mental health assessment interviews, participate in family assessments and meetings, attend group therapy sessions, and attend and participate in inter-professional case conferences or treatment planning sessions. Students are also encouraged to give case presentations to the inter-professional team and to facilitate at least one scholarly discussion about an important clinical aspect of a current case. Medical students have consistently rated these clinical experiences as "excellent" or better, as we are fortunate to have very enthusiastic physicians and inter-professional staff within the DCAP. Our services hosted over a third of the medical school class.

We also provide high quality elective experiences to both Western students seeking more exposure to child psychiatry, as well as visiting students from other centers. During the 2013-2014 academic year, we hosted five elective students from Western, and six visiting elective students.

In addition to clinical exposure to Child and Adolescent Psychiatry practice, all senior medical students receive case-based seminars during their clerkship block in the following topics: 1. interviewing skills particular to the assessment of young people, 2. anxiety disorders among
youth, 3. ADHD and disruptive behavior disorders, 4. mood disorders, 5. eating disorders, 6. developmental disabilities, and 7. childhood trauma. Our lecturers are consistently rated by students as "excellent" or better.

**Dr. Naveed Rizvi: “CPRI Hub” Tele-Mental Health Service**

Ontario Child and Youth Telepsychiatry Program (OCYTP) Expansion and Transition to Tele-mental Health services

In April of 2014, as part of the Ontario’s comprehensive mental health addiction strategy, the Ministry of Children and Youth services (MCYCS) announced the transition of OCYTP to the new “Tele-Mental Health Service.”

The Tele-Mental Health Service will continue to be a consultation-based model. All publicly funded professionals working with children and youth including MCYCS Children’s Mental Health Agencies, School boards, Hospital Outpatient Programs, Family Health Teams, Aboriginal Health Access Centers, Friendship Centres and trained professionals in youth justice settings and professionals in other community based agencies will be able to refer to the Tele-Mental Health Services.

Utilizing videoconferencing equipment through the Ontario Telemedicine Network (OTN), specialized mental health consultations will be provided by the three Hubs:

1. Hospital for Sick Children (formerly known as the Central Hub)
2. Children’s Hospital of Eastern Ontario (formerly known as the Eastern Hub)
3. Child and Parent Resource Institute (formerly known as the Western Hub) which is a collaborative partnership between Child and Parents Resource Institute (CPRI), Division of Child and Adolescent Psychiatry, Schulich School of Medicine and Dentistry, Western University, London Health Sciences Centre (LHSC), St. Joseph’s Health Care, London and Hôtel-Dieu Grace Hospital in Windsor.

Six “Coordination Agencies” have been selected to coordinate promotion, access, outreach, partnership development and to provide organizational support for Tele-Mental Health Services for the six assigned geographical service-areas. Three services-areas are dedicated to general population service providers and three overlapping service-areas are dedicated to First Nation, Metis, Inuit and urban aboriginal service providers. The six Tele-Mental Health Coordination Agencies are:

1. Hands TheFamilyHealthNetwork.ca in North Bay, Parry Sound
2. Woodview Mental Health and Autism Services in Burlington
3. Algoma Family Services (CAMH-Sault Ste Marie – Algoma Branch)
4. Southwest Ontario Aboriginal Health Access Centre in Chippewa of the Thames First Nation/Muncey
5. Dilico Anishinabek Family Care in Fort William First Nation
6. Weechi-it-te-win Family Services in Fort Frances

All referring organizations, professionals as well as former “Designated Agencies” will access Tele-Mental Health Services through the Coordination Agencies. All referring organizations will have equal access to the Service.

**Service Delivery at CPRI Hub:** CPRI Hub continues to provide clinical consultations, program consultations, and education and professional development to mental health agencies operated
by MCYCS, but also to other child and youth healthcare providers including Family Health Teams, pediatricians, school boards, etc.

The “CPRI Hub” team continues to provide leadership in implementation and expansion of Tele-Mental Health Services at the regional and provincial level.

Consultant psychiatrists at “CPRI Hub” are all affiliated with the Division of Child Psychiatry, Department of Psychiatry, Schulich School of Medicine, and Western University. Their interest and expertise has been instrumental in maintaining Tele-Mental Health Services.

Using the Ontario Telemedicine Network (OTN), consultations are arranged at any of the CPRI Hub partner locations eliminating the need for consultants to travel to CPRI where the Hub offices are physically located.

Referrals:

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<th>Q1 2014</th>
<th>Q2 2013</th>
<th>Q3 2013</th>
<th>Q4 2014</th>
<th>YTD</th>
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<tbody>
<tr>
<td>Number of Referrals</td>
<td>122</td>
<td>111</td>
<td>127</td>
<td>124</td>
<td>484</td>
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<td>Referrals Withdrawn</td>
<td>3</td>
<td>7</td>
<td>11</td>
<td>8</td>
<td>29</td>
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<tr>
<td>Redirect to Central Hub</td>
<td>17</td>
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<td>1</td>
<td>8</td>
<td>29</td>
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<tr>
<td>Non materialized (client cancellations)</td>
<td>6</td>
<td>6</td>
<td>3</td>
<td>13</td>
<td>28</td>
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- The majority of referrals continue to come from children’s mental health agencies, formally called designated sites (72%).
- 123 referrals (25%) have come from Health Teams in Grand Bend, Kitchener, Wellesley, East Wellington, Windsor, Mount Forest, South Grey and Upper Grand.
- Have also received 3 physician referrals

Clinical Consultations –Total - 422

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<th>Q3</th>
<th>Q4</th>
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<td>Initial Consultations</td>
<td>87</td>
<td>74</td>
<td>72</td>
<td>71</td>
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<td>Follow up consultations</td>
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<td>36</td>
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<td>Professional to Professional (client not present)</td>
<td>2</td>
<td>4</td>
<td>5</td>
<td>1</td>
<td>12</td>
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<tr>
<td>Total Clinical Consultations</td>
<td>108</td>
<td>104</td>
<td>113</td>
<td>97</td>
<td>422</td>
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Program Consultations and Education Sessions: CPRI Hub continues to provide educational sessions at the regional as well as provincial level. Recent provincial educational seminar series arranged by CPRI hub and coordinated by CHEO Centre of Excellence, on Fetal Alcohol Spectrum Disorders, was very well-received.
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<tr>
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<td><strong>Education Sessions</strong></td>
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**Technical Performance Outcomes:** Four technology failures accounted for less than 1% of the scheduled consultations not being completed due to temporary network problems at the remote site.

**Training Opportunities for Residents:** CPRI Hub provides an excellent opportunity for residents in the specialties of family medicine, pediatrics, psychiatry as well as for child and adolescent psychiatry fellows, to gain training and experience in telepsychiatry and rural mental health care. Residents are encouraged and are welcomed to participate in telepsychiatry consultation at any time during their training. PGY3 psychiatry residents are required to do one telepsychiatry consultation during the core child psychiatry rotation.

**Research:** Western Hub (WH, now known as CPRI Hub) completed a study to evaluate the overall influence of WH Telepsychiatry services on improving practice of clinicians in the areas of symptom identification, implementing therapeutic intervention, collaborating care and access to professional development. An online survey was developed and distributed to clinicians working in six children’s mental health agencies affiliated with the Western Hub. A survey was also sent to Western Hub consultants to assess their perspectives.

Results of the study showed:

1. Telepsychiatry consultations improved the practice of clinicians working in rural communities in the areas of: symptom identification, implementing therapeutic interventions, collaborating care and access to professional development.
2. Clinicians report increased ability to implement strategies gained from telepsychiatry in provision of care for their other community clients.
3. Clinicians value the increased accessibility for clinical consultations as well as the collaboration between consulting psychiatrist and community teams.

Results of the study were also shared with OCYTP, MCYCS children’s mental health agencies affiliated with the Western Hub and were presented as a poster at the Division of Child and Adolescent Psychiatry 2013 Research Half Day.

**Dr. Naveed Rizvi: Continuing Professional Development**

2013-2014 has been a busy and successful year for the CPD activities of the Division. The DCAP continues to offer CPD activities, at the departmental, divisional and community level, with an emphasis on inter-professional learning, promoting evidence based practices enhancing community partnerships and capacity to address youth and family mental health issues.

While encouraging and supporting the residents and DCAP faculty members to present at the CPD events, nationally and internationally renowned guest speakers and experts were are also invited to present at the 2013-2014 CPD events. The CPD events were well attended by faculty members, allied health professionals, residents, medical and allied health students as well as
community partners. Attendees evaluated the CPD events as: excellent learning opportunities in the areas of knowledge acquirement, skill development and in improving practice attitudes.

Using OTN videoconferencing and collaborating with “CPRI Hub,” (formerly known as “Western Hub”) of the “Tele-Mental Health Service” (formerly known as “Ontario Child and Youth Telepsychiatry Program”), regular access to DCAP CPD events was provided to community partners including CPRI, RMHCL, and the Children Mental Health Agencies associated with the CPRI Hub of the Tele-Mental Health Services.

Dr. Rizvi would like to thank Dr. Fisman, Chair of the Division of Child and Adolescent Psychiatry, and DCAP Annual Conference Planning Committee members (Dr. Heidi Haensel, Dr. Laura Lyons, Dr. Ben Loveday, Dr. Brooke Nofftle, Julie Jeanson, RN, Sarah Parkinson, RN, MScN and Heather Struckett, RM, BHSc) for their support, advice and participation in planning the April 2014 Annual Conference. Thanks to our residents (Dr. Joy Abramson, Dr. Grace Ferreria and Dr. Charles Ho) for volunteering at the Annual Conference in April 2014. Dr. Rizvi would also like to express appreciation and thanks to Faye Slote, CPD Administrative Assistant for Division of Child and Adolescent Psychiatry, for her dedication and unrelenting efforts in arranging and organizing DCAP CME events.

**Division of Child and Adolescent Psychiatry CPD events during the year 2013-2014:**

**Complex Case Rounds** (alternating with Journal Club on the second Wednesday of every other month):

- July 10, 2013 - Kathryn Lambert - “Community Protocol to Protect Infants Living in High Risk Environments”
- September 11, 2013 - Dr. Kamran Kizilbash - “Complex PTSD in Children of Military Families”
- November 13, 2013 - Dr. Patty Hall & Dr. Julie Eichstedt - "The treatment of a complex youth within a fragmented health care system"
- January 8, 2014 - Dr. Naveed Rizvi -"A case presenting with severe aggression, impulsivity, hyperactivity, emotional dyregulation and developmental delay”
- March 12, 2014 - Dr. Devita Singh - “Gender Dysphoria or Dress Euphoria?”
- July 9, 2014 – Dr. Javeed Sukhera – “Subjectivity in Psychiatric Diagnosis: Psychosis versus Schizotypal Personality”

**DCAP Journal Club** (alternating with Complex Case Rounds on the second Wednesday of every other month, coordinated by Dr. Jeff Carter):

- October 9, 2013 - Dr. Devita Singh - “A Follow-up Study of Boys with Gender Dysphoria”
- December 11, 2013 - Dr. Jeff Carter - “Does therapeutic approach matter?”
- February 12, 2014 - Kirk Elliot - “Neurobiological Implications of Addiction and Emerging Treatment Practices”
- April 9, 2014 - Dr. Raymond Egan - "Critical Appraisal of a New Experimental Study Testing the Helpfulness of Respiridone for the Treatment of Severe Aggression in Children with ADHD"
- June 11, 2014 - Dr. Ajit Ninan - “Side Effects of Psychotropic Medications in Children: Predictive Factors”
February 27, 2014, Division of Child and Adolescent Psychiatry Semi-Annual Meeting:
Speaker: Dr. Stella Ng, PhD
Topic: "Clinicians' work at the clinic-school interface: Supporting children with disabilities and chronic conditions"

April 25, 2014 - Child and Adolescent Psychiatry Annual Conference: “Mother Child Mental Health- Managing Risks and Promoting Resiliency in Families:” The conference was a full day event with morning plenary and workshop sessions from 8:30 am to 12:00 noon followed by an afternoon session with workshops and a keynote address from 1:00 pm to 4:30 pm. The Conference was attended by 105 participants including psychiatrists, family physicians, pediatricians, psychologists, residents and allied health professionals, including nursing and social work, children and youth workers, Children Aid Workers, school counselors, teachers and parents.

Plenary: Chaya Kulkarni, BAA, MEd, and EdD - “Recognizing and Responding to Vulnerabilities in Poor Mental Health during Infancy”

Keynote: Dr. Heidi Haensel, MD, FRCPC - "Tending the "Mother Land:" Caring for mother's mental health to promote resiliency in children"

Workshops:
- Kathryn Lambert, MSW, and Julie Smith, MSW - “Accessing and navigating child protection services to promote child safety and family resilience”
- Heidi Haensel, MD, FRCPC, and Dr. Laura Lyons, MD, CCFP - “Myths and Facts about Substance Use and Psychiatric Medications in Pregnancy and Breastfeeding”
- Dr. Jeff Carter, PhD, (with Marion Whitfield, MSW, and Wendy Tapp-Moore, CYW) - “The tangled web of children’s behaviour and parents’ mental health – and what we can do about it”

May 15, 2014 - Division of Child and Adolescent Psychiatry Annual Meeting:
Speaker: Dr. Alyson Byrne, Post-Doctoral Fellow, Ian O. Ihnatowycz, Institute for Leadership, Ivey Business School, Western University - “Leading the Self so that You Can Lead Others: A leadership character perspective”

Speaker: Dr. Margaret Steele, FRCPC, Vice Dean, Hospital and Interfaculty Relations - “Talent Management: Opportunities for Leadership Development”

June 12, 2014 - Child and Adolescent Psychiatry CPD Grand Rounds:
Guest Speaker: Dr. Niva Piran, PhD, CPsych - “Developmental Theory of Embodiment”
Resident Case Presentation: Dr. Caroline Armstrong

Department of Psychiatry Monthly Child and Adolescent Psychiatry Residents Rounds (Third Thursday of each month, except March, June, July and August): DCAP closely collaborates with the Department of Psychiatry CPD Committee to organize Child and Adolescent Psychiatry Resident Rounds on a wide variety of child and adolescent topics.
Upcoming Events:
DBT Training and Consultation – Strategies and Approach While Working with Youths and Families”
Monday, September 22 and Tuesday, September 23, 2014, 8:30 am- 4:30 pm, Best Western Lamplighter Inn & Conference Centre, London, ON

DCAP Complex Case Round and Journal Club, alternating on the second Wednesday of every other month
12:00–1:00 pm, LHSC-Victoria Hospital, B8-035. Videoconferencing to RMHCL Room C431 and CPRI Morgan Room 2-25 and Children Mental Health Agencies associated with the CPRI Hub of the Tele-Mental Health Services

Division of Child and Adolescent Psychiatry Semi-Annual Meeting
Thursday, February 26, 2015, 4:30-6:30 pm, Best Western Lamplighter Inn and Conference Centre, London. Topic/Speakers - TBA

Division of Child and Adolescent Psychiatry Annual Meeting
Thursday, May 28, 2015, 4:30-6:30 pm, Best Western Lamplighter Inn and Conference Centre, London. Topic/Speakers - TBA

Child and Adolescent Psychiatry Annual Conference
Friday, April 17, 2015, 8:30 am-4:30 pm, Four Points Sheraton London. Topic/Speakers - TBA

Child and Adolescent Psychiatry CPD Grand Rounds
Thursday, June 11, 2015, 8:30-10:30 am, LHSC—Victoria Hospital, Zone B, 2nd Floor, Auditorium Room 119 (B2-119). Topic / Speakers - TBA

Dr. Javeed Sukhera: Transition Age Services
The London Health Sciences Centre Transition Age Project (TAP) is well into phase one which includes an in-depth needs assessment including both LHSC and community partners. In addition, a research protocol has been submitted titled: "Evaluating the Mental Health Needs of Transition Age Youth in London and Middlesex" to Western University's Office of Research Ethics. TAP has also convened an advisory committee which held its first meeting in April 2014. The needs assessment is scheduled for completion in December 2014 with plans for phase two to focus on capacity building and collaboration with hospital and community-based organizations and agencies to augment strategies already in place and to strengthen connections among them, particularly in terms of access and intake.

Other Important Initiatives

Dialectical Behavioural Therapy Grant: Dr. Sandra Fisman, Dr. Javeed Sukhera and Julie Jeanson were the recipients of a substantial grant from the Children’s Health Foundation for building capacity for Dialectical Behavioural Therapy across LHSC and RMHC programs. This grant will help subsidize a two day training event to take place on Monday, September 22 and Tuesday, September 23, 2014, from 8:30 am - 4:30 pm, at Best Western Lamplighter Inn & Conference Centre, London, ON. The grant will also fund online training for selected LHSC/Children’s staff and evaluative clinical research.

The workshop titled “DBT Consultation: Training, Strategies and Approaches When Working with Youths and Families” will be organized under the auspices of the DCAP CPD program with the organizational leadership of Dr. Naveed Rizvi. The workshop will be led in London by two
trainers from Behavioral Tech based in Seattle Washington, including Dr. Lawrence Katz, who was a trainer for the London Hospitals DBT Intensive Skills Training program in 2006 and trained the adolescent team at RMHC. The workshop is intended for mental health professionals who have basic training in DBT and would like to further advance their skills in implementation of DBT principles, strategies and approach for the treatment of transition age youth and families. Currently, capacity building is underway and metrics are being chosen for common program evaluation. Aside from training staff and clinicians, goals include expansion and enhancement of existing Dialectical Behavioural Therapy informed outpatient services to increase quality care, reduce wait times and disrupt the cycle of repeated inpatient admissions for patients who engage in self-harm, experience suicidal ideation and development of inpatient expertise.

Inpatient Programs:
The LHSC Child and Adolescent Mental Health Care Program - Inpatients has been pursing significant programmatic changes to improve and enhance patient care. The interprofessional team has been piloting an innovative interprofessional communication tool and studying its effectiveness on patient safety. In addition, the inpatient unit has been actively partnering with MindYourMind and advertising the Be Safe safety planning mobile app that arose from the Southwest Ontario Service Collaborative. The unit has continued to pursue enhanced training in Collaborative Problem Solving for both clinical and frontline staff.

The RMHC Inpatient Adolescent Unit has begun a developmental process of introducing DBT capacity building with the first phase of on-line training of outline staff. An implementation plan will be rolled out this fall in conjunction with the Advanced DBT Training workshop and with facilitation by DBT trained outreach nurses.

Dr. Patricia Hall- Postgraduate Education
Over the past year, Child and Adolescent Psychiatry (CAP) Lectures have been provided to the PGY1 and PGY3 residents and for residents in the subspecialty program. The curriculum committee in the CAP subspecialty program has reviewed all curriculum and has developed new curriculum including an orientation to Child and Adolescent Psychiatry for Subspecialty Residents as well as psychopharmacology curriculum. Information about the subspecialty program and other agenda items of the RPC is shared at CAP Division meetings, CAP Advisory meetings, Department of Psychiatry Advisory Committee meetings and in departmental newsletters. If more specific information is required or if there are any questions, please feel free to contact the CAP Postgraduate Education office. Thank you to all faculty and staff involved in running the curriculum.

Residents have also participated in other educational opportunities including CAP Resident Rounds, CAP Complex Case Rounds and CAP Journal Club. Residents involved in CAP Rounds for the past year include: Dr. Mehtaab Uppal, Dr. Joy Abramson, Dr. Habiba Nayyer, Dr. Raymond Egan, Dr. Pat Montaleone, Dr. Senthuran Gunaratnam and Dr. Grace Ferreria. Dr. Ray Egan has also participated in Journal Club over the past year.

Clinical rotations over the year include planned core rotations for PGY1, PGY3 and subspecialty residents. Electives are also available for PGY1, senior residents and subspecialty residents. PGY2 residents are given an orientation information package including learning objectives for the PGY3 year. Please see the CAP residents’ handbook for more information which is on the Department website. For faculty working with subspecialty residents, learning objectives are also available on the Department website, and are also sent out prior to the start of the rotation.
Thank you to Ms. Stephanie Rabenstein, the Family Therapy Coordinator, for ensuring family therapy skills are incorporated into the CAP clinical teaching units.

I would like to take this opportunity to update the Department on the membership of the CAP Resident Program Committee (RPC): Dr. Sarah Armstrong, Psychotherapy Coordinator; Dr. Jeff Carter, Research Director; Dr. Javeed Sukhera, Curriculum Coordinator and LHSC Site Representative; Dr. Ben Loveday, RMHC Site representative; Dr. Sohail Makhdoom, CPRI Site representative; Dr. Pamela Horne, Evaluations Coordinator, Vanier Children’s Services Representative and Safety Committee Representative; Dr. Yousha Mirza, Windsor Site Representative; and Dr. Sandra Fisman, CAP Division Chair; Dr. Patricia Hall, Program Director; Ms. Tracy Henebry, Program Administrator. The RPC has been busy over the past few months preparing for our internal review by the Royal College which will occur on November 4, 2014. Thank you to all faculty who have provided their time and expertise preparing the pre-survey questionnaire for the Royal College.

The Resident Program Committee in Child and Adolescent Psychiatry is pleased to welcome Dr. Caroline Armstrong and Dr. Joy Abramson to the subspecialty program starting July 1, 2014. We would also like to congratulate Dr. Ray Egan PGY6, who has successfully completed the first year of subspecialty training and has been promoted to a PGY7 resident this July. Congratulations also to Dr. Jonathon Tan who graduated in June 2014, will be participating in the CAP Practice Eligibility Route and has accepted a position in Calgary. As a reminder, applications for July 2015 are due in September 2014. Two spots are available. Please refer to the Department website for more information in regards to application requirements. For any questions concerning the subspecialty program, please contact Dr. Patricia Hall, Program Director or Tracy Henebry, Program Administrator.

Developmental Disabilities Division

History
The Department of Psychiatry at Western University has a long history of service and commitment to people with developmental disabilities (Autism Spectrum Disorder and Intellectual Disability). Indeed, the number of psychiatrists working with patients with developmental disabilities is probably greater here than anywhere else in the country. However, there is a dearth of professionals across the country with expertise in the assessment and treatment of people with developmental disabilities.

The Developmental Disabilities Division (DDD) was established within Western University’s Department of Psychiatry in 2003 and is the only academically-based program in psychiatry for developmental disabilities. The primary goals of the DDD are to provide academic leadership in developmental disabilities, to develop and maintain a critical mass of individuals working within the field, and to facilitate the continued development of education and research in developmental disabilities. Further information on the Division is available on the Division’s web page (http://ddd.uwo.ca/).

Governance and Administration
Dr. Rob Nicolson is the Chair of the DDD. Regarding the Division’s educational goals, the responsibilities have been divided among a triumvirate, with Dr. Nicolson taking the undergraduate education lead, Dr. Jay Rao the postgraduate education lead and Dr. Greg Gillis the lead for community and continuing medical education.
Staff members within the Division include Maria Gitta, Division Coordinator, and Betsy Schaefer, who is responsible for the maintenance of the Division’s web page and other administrative duties.

The DDD has an Advisory Board whose role is to advise the Division leadership regarding potential areas of relevance to the Division. The Advisory Board consists of members of community service agencies, college and university representatives, school board representatives, and representatives of the Ontario Ministry of Community and Social Services. The Board, chaired by Dr. Paul Links, meets twice a year.

**Education**

Education of physicians regarding developmental disabilities remains the Division’s greatest priority. The educational opportunities available through the Division for undergraduate students, residents, and practicing physicians at all three levels of medical education (undergraduate, graduate and continuing medical education) are greater than at the vast majority of medical schools across Canada and certainly places the DDD on the vanguard of medical education at a national level regarding developmental disabilities. Further, we continue to enhance the educational opportunities for medical practitioners and allied professionals in developmental disabilities.

At the undergraduate medical student level, Dr. Nicolson provides an annual lecture for second year medical students on developmental disabilities. Drs. Nicolson, Makhdoom and Rao provide supervision to third year medical students during rotations on developmental disabilities; and seminars are given to all third year students on developmental disabilities during their child psychiatry rotation. Several fourth year elective rotations in developmental disabilities have also been available, and students from Western University and other Ontario medical students have participated in these rotations. Dr. Nicolson has won the award for undergraduate teaching in child psychiatry for the past two years.

In order to foster an interest in patients with developmental disabilities, the DDD continues to offer “The Dr. Greta Toni Swart Essay Award in IDD,” an essay award annually in the amount of $1,000 to student in any year of the Doctor of Medicine (MD) program, graduate medical program or a resident program at Western University who submits the best essay on developmental disabilities. This year the award winner is Emily Rae Harrison, MD Candidate 2015. Her essay is in the fall issue of the DDD Clinical Bulletin and can be found on our website at [www.ddd.uwo.ca](http://www.ddd.uwo.ca). Go to [http://www.ddd.uwo.ca/bulletins.html](http://www.ddd.uwo.ca/bulletins.html).

For graduate trainees (residents), Drs. Nicolson, Makhdoom and Rao provide supervision during mandatory developmental disabilities rotations for all PGY3 psychiatry residents. The number of psychiatry residents requesting rotations in excess of the required two weeks in developmental disabilities continues to increase, a strong indicator of the quality of the teaching provided and the increasing recognition of the importance of developmental disabilities in psychiatric practice. Additionally, pediatric residents are expected to spend several days seeing patients with developmental disabilities during their rotations at CPRI. Residents in family medicine have also completed rotations in developmental disabilities.

The DDD also provides a number of educational opportunities related to developmental disabilities for practicing physicians. In April 2014, the Division’s annual spring CPD focused on three areas of relevance to practicing physicians: a) sleep disorders and interventions (Dr. Graham Reid); b) multifactor assessment of mental health and health issues in adults with
developmental disabilities (Dr. Jay Rao) and c) genetic testing (Nolan D’Souza, Medical Genetics Program of Southwestern Ontario).

The DDD is responsible each September for the Department of Psychiatry’s Continuing Medical Education Rounds. In 2013, a novel approach to CPD occurred in the form of a debate, rather than the traditional lecture format. A presentation on the history of terminology in intellectual disabilities was presented by Michael Mak (resident PGY4), and this was followed by a debate between Dr. Nicolson and Michelle Palmer, Executive Director of Community Living London titled: “Resolution - Changing the Diagnostic Nomenclature from Mental Retardation to Intellectual Disabilities Is Necessary and Important.”. The debate was lively and fostered lively discussion among the presenters and audience members.

Additionally, during the past year, Drs. Nicolson and Gillis did a presentation on developmental disabilities and attention-deficit/hyperactivity disorder at the Annual Clinical Day in Family Medicine.

Drs. Nicolson, Rao and Gillis continue to provide presentations to community and advocacy groups, with the total audience for these presentations being well over 1,000 people once again during the past academic year. Among these are Dr. Nicolson’s lectures at CPRI on the diagnosis and medical treatment of autism spectrum disorder and his lecture on the diagnosis and medical treatment of people with developmental disabilities for Development Service Worker students at Fanshawe College.

The Division continues to clearly meet the goal of increased education in developmental disabilities for professionals and advocates, and this strength has been recognized by individuals and organizations nationally. The DDD is a national leader in education on developmental disabilities for physicians and health professionals.

Research
As one of the primary goals of the Division is to foster research in developmental disabilities, the Division collaborated with or supported several research projects this past year. Summaries of the projects can be found at [www.ddd.uwo.ca/awards.html](http://www.ddd.uwo.ca/awards.html).

One project funded in the amount of $9,000 was to Kaitlyn Gain for her pilot study of transitions to adulthood and teaching life skills to young adults. Ms. Gains is a doctoral student in the School of Occupational Therapy, Western University. Kaitlyn’s advisor is Dr. Angela Mandich.

Pamela Cushing, Associate Professor, Anthropology, King’s University College at Western University received the faculty award for the 2013-2014 C. Kingsley Allison Research Award from the DDD in the amount of $6,500. With the award, she will extend her research on the impact of electives in developmental studies on students at Western University.

The Annual Dr. Benjamin Goldberg Research Award is intended to provide seed money in grants of $500 to $3,000 to students registered as a student at a community college or university in Southwestern Ontario who seek to gain a better understanding of the health and mental health conditions of people living with intellectual and developmental disabilities and/or conducting research of relevance to the field of intellectual and developmental disabilities, thereby, helping to improve the lives of individuals with this condition. Due to a lack of appropriate applications this past year, there was no recipient of the award.
Additionally, Dr. Nicolson is involved in a large, multisite, comprehensive research program titled The Province of Ontario Neurodevelopmental Disorders (POND) Network. The POND Network’s research focus includes developmental disabilities in addition to attention-deficit/hyperactivity disorder and obsessive-compulsive disorder. The project, with collaborators in Toronto, Hamilton, and London, will undertake research extending from “bench to bedside,” and will include the development of animal models, the assessment of genetic and clinical features in neurodevelopmental disorders, and clinical trials of new treatments. This work is funded by the Ontario Brain Institute through 2018, with the funding amount exceeding $18 million.

The DDD has also supported the Ontario Association on Developmental Disabilities (OADD) Research Special Interest Group annual research conference day.

Summary
Interest in developmental disabilities, both academically and educationally, continues to grow at Western University. We continue to enhance the visibility and importance of professional education and research relevant to developmental disabilities at Western University and within Ontario and to solidify the role of the Division of Developmental Disabilities as a national leader in education and research.

Dr. Rob Nicolson
Chair, Developmental Disabilities Division

Division of Forensic Psychiatry

It has been an exciting time in forensic psychiatry, and we have had a very busy and productive 2013-2014 academic year.

Chief among our accomplishments this academic year is that we have submitted the Royal College application for an accredited PGY6 Sub-specialty Training Program in Forensic Psychiatry. We will know the results of our submission in October 2014. We are confident that our application will be approved, in which case our inaugural subspecialty residents will begin in our Program in July 2015. I would like to specifically acknowledge and thank Dr. Brian Daly for his exceptional work, vision, and leadership throughout the lengthy application process. Special thanks also to Drs. Flett, Links, Hocke, and Jarmain for their assistance and support.

We recently (June 19, 2014) celebrated our one-year move into Southwest Centre for Forensic Mental Health Care, and we have certainly realized the anticipated benefits to both client recovery and the quality of work life for our staff.

Below I have summarized our other key accomplishments for the 2013-2014 academic year:

International Forensic Division Presentations
“Stalking Assessment and Management,” “Suicide Risk Assessment and Management,” “Borderline Personality Disorder, Violence Risk Assessment and Management,” Sea Courses Rhine River Cruise, Dr. Craig Beach
National Forensic Division Presentations
“Southwest Centre for Forensic Mental Health Care: the Good, the Glam, and the Glitches,”
Canadian Academy of Psychiatry and the Law Annual Meeting, Lake Louise, Alberta, Ms. Janice Vandevooren and Dr. Craig Beach

Local Forensic Division Presentations:
“Community Risk Assessment and Management,” Dr. Craig Beach
- Canadian Mental Health Association, Wellington, Waterloo, Dufferin
- Wendat, Midland, Ontario
- Ontario Telemedicine Network

“Ontario Mental Health Law,” Wendat, Midland, Ontario, Dr. Craig Beach

“Clinical Documentation Best Practices,” Wendat, Midland, Ontario, Dr. Craig Beach

“Ontario Crown Attorneys’ Association and the Ministry of the Attorney General Trial Advocacy,”
Western University, Dr. Craig Beach


“Does Substance Use Mitigate or Aggravate Insanity Defenses? Preliminary Findings of RMHC-Forensic 100 Study,” Research Half Day, Regional Mental Health Care London, London, Ontario, Dr. Ajay Prakash, Ms. Hana Reheb, Dr. Simon Chiu, Ms. Liz Goble, Ms. Maureen Kononiuk, Dr. Zach Cenovsky, Dr. Yves Bureau, Mr. Larry Lalone, Dr. Arun Prakash, Dr. Sam Swaminath, Dr. Bill Komer, Dr. G. Sidhu

Forensic Program Presentations
- “Alcohol Intoxication, Blackouts and Their Forensic Implications,” Dr. Brian Daly
- “Parents Who Kill their Children: Motives and Prevention,” Peter Jaffe & Dr. Ajay Prakash
- “Forensic Report Writing Session,” Dr. Brian Daly
- “Morbid Jealousy & Phenomenology of Stalking,” Dr. Nnamdi Ugwunze
- “Confidentiality, Privilege, Disclosure, Health Information Privacy and Other Scary Legal Things,” Professor Robert Solomon
- “Dialectical Behavioural Therapy in Forensic Settings,” Dr. Nina Desjardins

Forensic Mental Health Journal Club
“Forensic labeling: An empirical assessment of its effects on self-stigma for people with severe mental illness,” Dr. Ajay Prakash
Forensic Division Publications


Current Forensic Division Research Projects

Psychosocial Factors Database Research Project: Ms. Mary Ellen Ruddell, Principal Investigator; Co-investigators: Ms. Donna Lynam & Ms. Val Momney. This research is an attempt to determine psychosocial determinants that are statistically linked to individuals entering the forensic system. All 340 closed-chart audits have been completed, results will be collated, and then we will draft a paper for hopeful publication.

Adventure Based Counselling: Ms. Mary Ellen Ruddell, Principal Investigator, Co-investigators, Dr. Rod Balsom, Ms. Heather Dehn, Ms. Karen Lewis & Dr. Craig Beach. This research attempts to answer the question “Does participation in an in-patient psychiatric Adventure Based Counselling (ABC) program improve client outcome?” Four program groups have completed the research assessment questionnaires. Presentation of a paper for publication is anticipated for December, 2014. We would like to particularly acknowledge the support and contributions of psychology students at Western University.

Healthy Living Initiative: Ms. Jean Marie Steward & Ms. Mary Ellen Ruddell. This program group addresses diabetes and Metabolic syndrome as well as patients’ general well-being through holistic measures. It includes nutrition, fitness, happiness, leisure, support and spirituality. We have completed a literature review and anticipate submitting a Research Ethics Board proposal by January, 2015.


Faculty Enrollment in Courses
Future Leaders of Western (FLOW), London, Ontario, September 2013 – Present, Dr. Craig Beach

Committees
Co-Chair, Seclusion and Restraint Minimization Committee and Chair, Workforce Development Sub-Committee, St. Joseph’s Health Care London, Dr. Craig Beach

Forensic Division Trainees
Educationally, we have continued to see an increased interest in our training program from trainees in all disciplines. We had three PGY1 residents (Drs. Shanmugalingam, Gosk, and Pramudith) and one PGY5 resident (Dr. Ajay Prakash) do extended rotations in our program.

Additionally, we were involved in the following as part of the Department’s postgraduate teaching curriculum:
PGY3:
- Forensic Psychiatry Interviewing Skills, Dr. Craig Beach

PGY4:
- Introduction to Forensic Psychiatry and Forensic Ethics, Dr. Carol McDaniel
- Violence Risk Assessment and Management, Western University, Dr. Craig Beach
- Criminal Forensic Psychiatry, Dr. Craig Beach
- Civil Forensic Psychiatry, Dr. Craig Beach
- Psycholegal Report Writing and Psychiatric Testimony, Dr. Brian Daly
- Sexology and Sexually Deviant Behaviour, Dr. Jose Mejia
- Child and Adolescent Forensic Psychiatry, Dr. Jose Mejia
- Conduct Disorder and Antisocial Personality Disorder, Dr. Jose Mejia
- Forensic Psychiatry Interview Course, Dr. Brian Daly & Dr. Craig Beach
- Mock Trial, Department of Psychiatry, Dr. Craig Beach & Dr. Brian Daly

PGY5:
- Psychiatric Malpractice, Dr. Craig Beach

Psychiatric Services
Dr. Carol McDaniel, Consultant Forensic Psychiatrist from the United Kingdom, joined our team in October 2013. Dr. McDaniel is a devoted teacher, and her areas of research interest include attachment disorders among forensic mental health clients.

On February 18, 2014, Dr. Brian Daly, a forensic psychiatrist from Oregon, joined our program. Dr. Daly brings with him expertise in criminal forensic psychiatry and concurrent disorders, and he will play key roles in seclusion and restraint minimization, forensic psychiatry education and sub-specialty training program development.

We are looking forward to Dr. Heather Flett joining our program in September 2014. Dr. Flett is currently a staff psychiatrist in the Mood and Anxiety program at the Centre for Addiction and Mental Health (CAMH). She previously worked in the Law and Mental Health Program at CAMH. She will be working on our forensic outreach team. Her clinical interests include the treatment of individuals within a recovery-based model of care, including persons with psychotic, mood and anxiety, and concurrent disorders. She is an expert in motivational enhancement therapy. She is passionate about teaching and education. Dr. Flett was previously the Postgraduate Education Director for the CAMH site, and she is currently enrolled in the Education Scholars Program at the University of Toronto.

We successfully recruited Dr. Nnamdi Ugwunze from the United Kingdom, and we anticipate him joining our team at Southwest Centre early in the new year. Dr. Ugwunze will work on our forensic outreach team. He brings experience in forensic psychiatry, addictions, and assertive community treatment.

Dr. Jack Ellis, forensic outreach psychiatrist and former Physician Leader for the Forensic Psychiatry Program, retired on June 25, 2014 after an illustrious career in forensic psychiatry. Thanks to Dr. Ellis for his countless contributions, leadership, and compassion for our clients.
Finally, I would like to thank all members of our Division for their vision, dedication and hard work as we continue to build what we hope will soon become a preeminent forensic psychiatry division in North America.

Dr. Craig Beach
Chair, Division of Forensic Psychiatry

Division of General Adult Psychiatry

Overview
The largest Division in the Department, the DGAP is primarily based out of the London Health Sciences Centre, is the academic home of acute care psychiatry, and to an increasing extent involved in continuing mental health care, spanning a broad range of services, as described later in this report. The primary clinical catchment area for the divisional activities is the London-Middlesex area; though we have expanded regional mandates in several areas.

The DGAP has the responsibility to provide the core educational experiences required by medical students, psychiatry residents, as well as those from family medicine and other specialties, in addition to trainees in related health disciplines. As such, the Division’s influence extends beyond producing competent general psychiatrists.

2013/2014 was a very productive academic year for the Division. DGAP faculty organizes and delivers much of the Department’s undergraduate, postgraduate, and continuing medical education/continuing professional development. On a sad note, Dr. Praful Chandarana, who developed and organized for many years the nationally acclaimed UWO Psychiatry Exam Preparation Course, passed away. Fortunately, shortly before his passing he was able to make an appearance at the course, which is taught by many divisional members. A major educational endeavour had involved working with SWOMEN/Windsor partners to foster undergraduate and continuing education/CPD, and the special project of developing a freestanding affiliated residency program in General Psychiatry housed in Windsor continues to progress. There will be a separate CaRMS match in early 2015 with two positions for PGY1, effective July 2015.

The Division’s research productivity has increased as can be attested to in the research section of this annual report. The DGAP continues to maintain strong collaborations with our Neuropsychiatry Division regarding brain imaging studies, particularly with the following clinical services: PEPP – Schizophrenia, FEMAP – Mood and Anxiety Disorders, and Traumatic Stress Service – PTSD. The PEPP and FEMAP services as well are at the forefront of producing high impact clinical outcomes and health services research. Another example of health systems research includes how the Division continues to be very active in SMART e-health technology research, and is a hub site for the multi-sited evaluation of the Transitional Discharge Model. Psychopharmacological research remains an important part of the DGAP’s mandate, with researchers actively spanning the range from the provincial population level (ICES) to the individual genome. Lastly, we are exploring a novel method of enhancing recruitment to clinical research projects, which if successful will have beneficial effects for divisional researchers as well as other researchers in the Department.

Clinical demands have been significant over the academic year, with insufficient access to inpatient beds causing intense downstream pressures on most other areas of the program from ambulatory services, CL, and of course CEPS and the Emergency Department. This has been the case despite a myriad of innovative approaches we have undertaken to date to tackle this
problem, not the least of which was to create a number of surge or overcensus inpatient beds. To further address the problem we commissioned an external review by two experts, which led to the Dawe-Gordon report. Somewhat overlapping this review, we simultaneously became involved with a process titled TPS. The Mental Health Program became the second one in LHSC, after the Emergency Department, to adopt the Toyota Production Stream (TPS) process, and it is now known as the Mental Health System Design (MHSD) project. At the end of the academic year, we had just started to have the first of many large group Knowledge Transfer training sessions on the philosophy and methodology of TPS. I will provide an update on this in next year’s Annual Report.

The following is an overview of the Division’s varied clinical-academic programs along with individual goals for the next academic year written in conjunction with the respective medical leaders, who are listed:

**London Health Sciences Centre - Based Services**

**Adult Eating Disorder Program (Dr. Valerie Kaye)**
The Adult Eating Disorder Program continues to grow with increasing referrals and programming as evidenced by the ISO assessments conducted over the last year. We are focusing on educating our referral base as to the services which we offer given our limited resources. The most exciting development is the purchase of the Bethesda House from the Salvation Army. This will allow our entire program to be located at one site, including our residential beds. Renovations are underway to ensure that this facility provides state-of-the-art eating disorder treatment. All things going well, we hope to move in early spring 2015. We will be sharing space with the PEPP program, and we look forward to a long and happy connection.

Our outpatient services include: A thorough assessment completed by a psychiatrist and nurse practitioner, a group based psychoeducation program for patients and a separate daylong education program for friends and family. There is no individual therapy or dietary sessions offered outside of the day treatment program. If patients are extremely low weight, medical assessment is available with occasional monitoring and recommendations pending entry into a hospital-based treatment program. Physician follow-up is still required in the community. No ongoing psychiatric services are available. We continue to work with our outreach partners in surrounding communities to provide clinical education and coordination of care.

The intensive day treatment program is running close to capacity (8 patients) and has been well received by clients. It is 12 weeks in duration and offers intensive DBT infused group programming 4 days per week as well as some individual appointments. Residential services have been available since September 2013 for patients in the day treatment program. This provides support for patients who require more intensive meal support and assistance with symptom interruption. We have a four bed apartment on Commissioners Road, near LHSC, that is staffed 24/7 by CMHA mental health workers. If patients participate in residential treatment, this is typically available for the first five weeks of their stay at which time they are encouraged to return home where they can practice the skills they have learned in a more independent environment. More residential beds may be available once we move to our new site.

Following day treatment, a transition (step-down) program is available on Tuesdays and Fridays from 9 until 1300 hours. This is available to anyone who has graduated from an intensive treatment program. Our intention is to support patients as they reintegrate into their normal lives and use their new skills to more fully put their eating disorder behind them. For patients
who cannot commit this much time or want ongoing support after transition, a once weekly Aftercare group has been available. Unfortunately, the numbers have been low, and this may need to be put on hold.

After several months of development, a once weekly two hour outpatient group for individuals with Bulimia Nervosa was launched in July 2014. This 20 session, 6 month stand-alone treatment group seeks to reduce and eliminate binge eating and compensatory behaviors through the implementation of normalized eating and the use of strategies to challenge disordered thinking.

The LHSC AEDS research group has recently received ethics approval and began collecting data for a longitudinal program evaluation project that tracks patient outcome over a two-year period using gold standard assessment measures of disordered eating. The number of patients accessing services at LHSC has recently been analyzed and is currently being used in discussions for program development. Other data, including referral information and patient's symptom data has been recently entered for analysis and results will be forthcoming.

A proposal has been submitted to the Ontario government aimed at funding up to four hospital beds for eating disorder patients who require medical intervention. This would include patients who have a BMI below 16 and require nutritional restoration due to risk of re-feeding syndrome, patients with diabetes, cardiac, electrolyte or other medical complications that cannot be managed on an outpatient basis. To date, we have had to refer our very low weight referrals to Credit Valley or Toronto General Hospitals.

Centralized Emergency Psychiatry Service (CEPS) - Dr. Viraj Mehta
The CEPS team is comprised of various health care practitioners working together to provide emergency psychiatry to the London community. The team includes psychiatric nurse case managers, psychiatrists, social worker(s), residents, medical students, and on-call psychiatry staff. Expansions within the last year of the program have meant that the ER is now equipped with full-time psychiatrists during the day with the addition of a needed full-time registered social worker, Ms. Jeanne Webber, in order to help bridge the gap between hospital services and those available within the community. Refinement of the Emergency Department’s (ED) protocols regarding mental health patients, capacity development of the ED staff, and the introduction of services and expertise provided by CMHA-Middlesex/ADSTV Transitional Case Managers (TCMs) and Addiction-TCMs has allowed for better access to services for our patient population. As patient volumes increase and working environments become more complex, the CEPS team will undoubtedly encounter new challenges in the upcoming years. As the ED and LHSC MH services completes their transformations, the CEPS team will maintain its goal to continue to adapt and adjust to both systems in order to provide optimal psychiatric care in a community that has shown the need for a dynamic emergency psychiatry team.

Consultation-Liaison Service - Dr. Jennifer Barr
Consultation-Liaison Psychiatry is a specialized service that deals with the overlap of physical health and mental health care issues. The primary mandate is to provide timely psychiatric consultation to adult patients admitted to medical/surgical units at the University Hospital and Victoria Hospital sites. Accomplishments in the last year include: successfully working with Critical Care colleagues to implement structured delirium management protocols, regular formal teaching to ICU fellows on delirium, Mental Health Act education to non-psychiatric colleagues, enhanced educational opportunities for off-service residents and elective medical students through rotation development.
Goals for the upcoming year include: development of a Psychosomatic Medicine Continuing Professional Development module, working further with our Critical Care Colleagues at both an academic and clinical level to enhance the early recognition and management of ICU delirium, ongoing service focus on education of psychiatric residents, off-service residents, medical students, and our medical colleagues. Another important goal is to work with existing outpatient mental health resources to facilitate pathways to care for bedded medical and surgical patients.

**FEMAP (First Episode Mood and Anxiety Program) - Dr. Elizabeth Osuch**

**Clinical:**
- FEMAP clinicians conducted 2187 patient visits, and saw
- 109 new patients from July 2013 to June 2014.

This was in spite of having lost 0.8 FTE of psychiatrist time from a maternity leave from December 2013 onwards. We continued to run a stabilization group for young women with trauma exposure, and we hired a psychologist two days/week on fundraising monies. An Addiction services specialist is still employed one day per week; and a family therapist is employed one day per week.

**Research/Network activities have continued:**
- Functional brain imaging into the pathophysiology of mood disorders, marijuana use, self-injury and other aspects involving the neurocircuitry of reward-processing.
- Systems evaluation research for the model of FEMAP as a clinically- and cost-effective paradigm.
- Clinical evaluations of individual aspects of treatment at FEMAP such as the young women’s stabilization group.
- Collaborative research related to the neurocircuitry of reward-processing and cannabis use in youth (Steve Laviolette).
- Collaborative research related to using brain imaging to differentiate unipolar depression from bipolar disorder (Vince Calhoun).
- Network involvement with the Canadian Depression Research and Intervention Network (CDRIN) as part of the provincial hub and the national network.

**Goals:**
- Stable funding for FEMAP, clinical
- More publications on completed research
- CIHR and other grants
- Continued teaching of clinical skills/research at FEMAP

**GAAMHS (General Adult Ambulatory Mental Health Services) - Dr. Richard Owen**

GAAMHS continues with its overarching principle of right patient, right service, right time. The largest ambulatory service in the Division, GAAMHS provides a variety of outpatient based services for patients and their families in the London-Middlesex Country area. Ambulatory Service continues its primary focus on access to treatment and flow of patients from the three primary areas of referral: inpatients, community, and Emergency Department. Clinically, the service tries to prevent barriers to treatment by maintaining broad-based inclusion criteria. In addition to individual assessments and pharmacological treatment, group psychotherapy streams exist for CBT and DBT covering a wide range of diagnostic entities. GAAMHS also provides specified groups in a Track to Wellness format: Stabilization skills, Activation Skills and Managing Emotions Skills. This helps to further identify subsequent treatment streams.
patients may move on to as well as assist in transitioning patients from hospital. ECT assessment and treatment are also provided. Physicians are providing psychiatric care for over 6,000 patients and allied health responsible for over 40,000 patient visits per annum.

**Inpatient Services - Dr. Volker Hocke**

Crisis and short-term inpatient treatment for adults is the focus of this service of 74 beds located at the Victoria Hospital, B-Tower, Level 7. The inpatient service provides care to adults who present with mental health difficulties that embrace the entire spectrum of mental illness such as mood disorders, suicidal behaviour, anxiety disorders, schizophrenia and other psychotic disorders, mental disorders of aging, concurrent substance abuse problems, and acute symptoms of distress related to family or personal crisis. It is also the site where much of our Department’s educational and training activities take place.

During the year 2013/2014, the process of implementing more therapeutic options continued with differentiating the contents of the groups and adding a patient handbook. Information groups about community resources with representatives from the agencies take place on a monthly basis. Groups about emotion regulation, depression management, and relaxation are also very well regarded by patients and treatment teams.

In collaboration with WOTCH/CMHA, we now have addiction transitional case managers additional to the transitional case managers (TCMs) available. This new project has been a great success and is highly appreciated by patients, treatment teams and families. In turn, these same TCMs are part of a larger project funded by the Council of Academic Hospitals of Ontario (CAHO), Adopting Research to Improve Care (ARTIC) Program, titled “Implementing the Transitional Discharge Model,” which also incorporates peer-support workers.

The HUGO (Healthcare Undergoing Optimization – electronic health record system) project was implemented to improve our documentation system to a new level. The system change had a deep impact on our charting system. Necessary steps of adaptions are still in progress and will take a longer period of time.

The inpatient unit is chronically challenged with high patient volumes and high admission rates. A major focus of the program is on improving patient flow, access and facilitating discharge. Additional surge space was built into the inpatient unit and is now providing 74 beds plus 9 surge unit beds.

**PEPP (Prevention & Early Intervention Program for Psychoses) - Dr. Rahul Manchanda**

Further to the Retreat in the Fall of 2012 and subsequent working groups, we have continued to implement the changes to screening and assessment and group interventions, including plans to initiate a new group on Stigma in the fall of this year. The work of the Website Development Group is nearing completion. The partnership with WOTCH continues with successful management of a number of our post-PEPP clients. Unfortunately, we have not been able to transfer any of our patients to RMHC due to their current policy of not accepting any referrals. Clinically, we have had a very busy year with an increase in the number of number of new referrals exceeding previous years.

PEPP held a successful fundraiser – “The Big Night” - in October 2013.

Dr. Arlene MacDougall joined the medical research team with 60% research as her portfolio. She has been awarded as lead investigator, a Grand Challenges Canada “Stars in Global Health” Phase one grant for her project “Community Recovery Achievement Through
Entrepreneurism (CREATE): A new paradigm from recovery from serious mental illness in Low Resource Settings.” Dr. MacDougall has also developed a pilot study of novel use of participatory video as a group-based intervention that promotes the recovery of individuals with early psychosis through narrative development. Dr. MacDougall continues to be involved in mental health system development and evaluation initiatives in the Northwest Territories.

We continue to examine patterns and predictors of five year outcomes for patients treated within PEPP determinants of personal and psychological recovery and stigma of mental illness. During the past year, there have been seven journal articles published or in press and four conference presentations based on work within our Program.

**Plans for 2014-2015:**
After many years of hoping to be a community-based program, we now have the opportunity of moving to the Riverview site in the community. The staff and patients are very excited by this opportunity and are mindful of the challenges that this presents in providing inpatient/outpatient services. The program is actively engaged in the planning for renovations, the move and how the service would be implemented.

In addition to the research projects reported above, we have initiated a 10 year follow-up of patients treated within PEPP. Such a long-term outcome of patients in early intervention program is rare. Dr. MacDougall will initiate research into determinants of insight in patients with first episode psychosis.

Dr. MacDougall and Dr. Carr have completed the MWB (Mindfulness Ambassador Council [MAC] without Boarders) facilitators’ certificate training program. The plan is for Drs. MacDougall and Carr to introduce this mindfulness based intervention with individual PEPP clients and in PEPP groups. There is a plan to do a pilot study to evaluate such an adapted MAC intervention for early psychosis.

Dr. Manchanda has decided to retire as of July 1, 2015 and negotiations are underway for the arrival of Dr. Lena Palaniyappan in the next year and integration of his interests in the clinical implications of neuro imaging findings into our research program.

**Traumatic Stress Service**
For patients who have experienced acts of violence, emotional, physical and/or sexual abuse, severe neglect, catastrophic events such as motor vehicle accidents, natural disasters, or war-related trauma, a phase-oriented approach utilizing individual and group therapies, along with tailored pharmacotherapy is offered. Dr. Kamini Vasudev continues to provide medical/psychiatric support to the service.

A second area of service is our assessment and treatment unit affiliated with clients referred from the Workplace Safety and Insurance Board (WSIB). Strong links exist between the service and our neuroimaging research program in trauma.

**UCS (Urgent Care Service) – Dr. Dan Lefcoe**
The mandate of the UCS is to provide a timely response to patients in need of urgent ambulatory mental health assessment whether referred by family physicians, the Emergency Department at LHSC and SJHC Urgent Care Clinic. Psychiatrists, Dr. Dan Lefcoe and Dr. Charlie Chamberlaine, work together with nurse case managers and trainees, seeing all new referrals within 72 hours of notification.
St. Joseph’s Health Care - Based Services

Operational Stress Injury (OSI) Clinic – Dr. Don Richardson
Located at the Parkwood Hospital site, the OSI clinic is part of a national network of ten OSI outpatient clinics funded by Veterans Affairs Canada. The OSI clinic provides specialized mental health services to Veterans, members of the Canadian Forces (Regular and Reserve), the Royal Canadian Mounted Police (RCMP) and their families with service related psychological/psychiatric illness. The Clinic serves a very large catchment area, including all of Southwest and Northwest Ontario, the Greater Toronto Area (GTA) and the area around Lake Simcoe and Georgian Bay, including the city of Barrie. Dr. J. Don Richardson provides direct psychiatric services to the Hamilton-Niagara region in collaboration with the Hamilton Anxiety Research and Treatment Center, and two Parkwood OSI clinic psychologists in the GTA provide direct psychological services.

The OSI clinic follows a standardized assessment and treatment protocol, including evidence-based psychotherapy and psychiatric care based on clinical practice PTSD guidelines developed by the Canadian and American Psychiatric Association, the Australian Centre for Posttraumatic Mental Health, and the US Department of Veterans Affairs (DVA)/Department Of Defense (DoD) treatment guidelines. Furthermore, to enhance treatment outcome the Parkwood OSI clinic also makes use of an electronic treatment outcome monitoring system to enhance treatment outcomes.

The specialized team of psychiatrists, psychologists, mental health nurses and social workers provides comprehensive assessment and treatment in collaboration with community providers. The clinic is also involved in providing education, outreach and research. Currently, there are two psychiatrists, Dr. J. Don Richardson and Dr. David Haslam, working predominantly with younger veterans. For the older Korean and World War II veterans, the clinic has access to psychogeriatric consultation services by Dr. David Harris.

Dr. Don Richardson states, “The Parkwood OSI clinic will continue to strive to improve services and support research in Military and Veteran Mental Health; especially military related posttraumatic stress disorder. Future goals include enhancing services to the community through the Ontario Telemedicine Network (OTN), improving outreach services to the GTA, Hamilton and Niagara region and further developing training opportunity for residents and psychiatrists interested in veterans’ mental health.”

New Appointments

Dr. Arlene MacDougall - Joined the Division as an Assistant Professor in the clinician-researcher stream on September 30, 2013. She is based at PEPP (Prevention & Early Intervention Program for Psychoses) located at LHSC-Victoria Hospital. Her research interests include the measurement and improvement of autobiographical memory and insight deficits associated with psychotic disorders. In addition, she continues to build upon her system development work and research in the area of global mental health, including Northern and Aboriginal populations within Canada.

Dr. MacDougall obtained her MD at the University of British Columbia and subsequently completed her psychiatry residency, masters in neuroscience and Clinician Investigator Program training at McMaster University. Dr. MacDougall then went on to complete a Joint-Fellowship in Global Psychiatry and First Episode Psychosis at Dalhousie University.
Dr. Georges Loba Gutierrez - Joined the Division with 0.4 of his time in Emergency Psychiatry, working with the CEPS (Centralized Emergency Psychiatry Services) Team, on October 10, 2013.

Dr. Loba Gutierrez obtained his Doctorats en Médecine degree at the Université libre de Bruxelles in Brussels, Belgium. Georges completed his psychiatry residency here at Western University. Prior to that he completed a residency in psychiatry at the Université libre de Bruxelles, and worked as a psychiatrist in a Regional hospital and two penitentiaries in Belgium.

Dr. Lloy Wylie – Joined the Department and the Division as a full-time basic scientist who has taken the Health Care Management position with the Masters in Public Health program in the Schulich Interfaculty Program in Public Health on September 1, 2013. Previously, Dr. Wylie was the Acting Director of Policy and Planning for the First Nations Health Authority in BC.

Dr. Wylie completed her Doctor of Philosophy in Interdisciplinary Studies (School of Population and Public Health, Nursing and Political Science) at the University of British Columbia, Vancouver, BC, in 2013. Her research interests are in the areas of health services and health systems transformation, social determinants of health, Aboriginal health, health governance, health care access for socially excluded populations, community engagement, health policy and comparative analysis of health systems.

Divisional Awards
While elsewhere in the report, awards given to departmental members can be found; this year the Division chose to recognize one of its ranks for exemplary clinical service, as well as for professionalism and collegiality. The award was presented at the Departmental Awards Ceremony in June.

Clinician of the Year – Dr. Volker Hocke

Dr. Jeff Reiss
Chair, Division of General Adult Psychiatry
Vice Chair, Department of Psychiatry

Division of Geriatric Psychiatry
Knowledge translation for high quality care

The Division of Geriatric Psychiatry at Schulich continues to build its clinical and academic portfolio fueled by the energy of its members and the network of collaborators locally and nationally. In this report, we will highlight some of the activity themes on the clinical, educational and research fronts across our clinical academic sites and Southwestern Ontario Geriatric Alliance Network (SWOGAN).

Our guiding principle is providing leading edge quality of care to the increasing number of seniors in our community using the principles of knowledge translation and education in the service of quality improvement. This requires refining our clinical operation to allow integration of clinical services across the continuum from maintaining healthy aging in the community to optimizing quality of life and function for those in terminal stages of illnesses like dementia and mental illness with complex medical co-morbidity. We believe that building evidence-informed models and pathways of care, educating trainees and staff and conducting high quality applied
clinical research will serve our seniors and the society at large. We recognize that with the increased need for high quality mental health care for seniors we need to continue to identify lean and efficient processes in responding to mental health needs of our seniors and expand our capacity by leveraging partnerships with community agencies and other stakeholders in the community locally and abroad.

**Clinical Update**

Our two geriatric psychiatry academic sites at London Health Sciences Centre (LHSC) and St. Joseph’s Health Care London (SJHC) continue to thrive to cover clinical mental health needs for seniors. LHSC geriatric mental health clinic and Middlesex BSO teams continue to respond to referrals from family physicians, specialists and community agencies in Middlesex County. SJHC’s geriatric psychiatry program responds to referrals from similar sources in the region, covering counties in Southwestern Ontario, in addition to referrals from schedule one mental health facilities in Middlesex and the surrounding counties. Additionally, the geriatric psychiatry program at SJHC receives requests for sub-specialized assessment and management in clinics such as the geriatric and cognitive neuropsychiatry and the ECT clinic. Seniors presenting with acute mental health distress to LHSC psychiatry are assessed and managed in the inpatient schedule psychiatric beds staffed by geriatric psychiatrists and are usually referred for specialized longer stay if their illnesses requires further stabilization or specialized treatment including multidisciplinary specialized inpatient team management and interventions such as ECT and other evolving forms of neuromodulation like repetitive transcranial magnetic stimulation (rTMS). There are several teams within the geriatric mental health program across the two main academic sites including LHSC, Middlesex BSO team, RMHC London geriatric psychiatry outreach team, Discharge Liaison team, geriatric psychiatry day program at RMHC London, acute psychiatry inpatient beds, geriatric psychiatry inpatient general beds and dementia unit beds. Currently, the geriatric psychiatrists at LHSC include Dr. Akshya Vasudev, and Dr. Nalla Durai who just joined our program after a long career within the VA system of care in the United States. Dr. Durai comes with vast clinical experience, keen interest in education and a special interest in mental health in seniors with medical comorbidity. His research interest fits well within the Division mainly around quality improvement and access to care research. Dr. Jennifer Oates left the Division after serving the Middlesex community as a resident in psychiatry with a declared interest in geriatric psychiatry and later as the clinical director of geriatric mental health service at LHSC. She contributed tremendously to the evolution of residents’ experience in geriatric psychiatry as the coordinator of the geriatric psychiatry postgraduate portfolio, setting up rotations for psychiatry and non-psychiatry residents and organizing geriatric psychiatry seminars and lectures. Dr. Oates moved with her family to Victoria, BC, where she will be practicing within the Royal Jubilee Hospital and UBC Psychiatry Department. We wish Jennifer the best of luck in her new role on the west coast and we thank her for her numerous contributions in London clinically and academically.

Dr. Oates departure created a gap in services, which Division members, including Drs. Lisa VanBussel, Michele Doering and Amer Burhan filled by doing two to three half day clinics per week at LHSC Geriatric Mental Health Clinic (GMHC); a great start for what we hope to be a long term integration of services across the two main clinical academic sites. Furthermore, the LHSC site was able to secure the recruitment of Dr. Arany Shanmugalingam, a recent graduate with a declared interest in geriatric psychiatry and more than a year of electives in the field. Dr. Shanmugalingam will be on a temporary contract until summer of 2015 while she explores options for further formal training in geriatric psychiatry. Also, we are excited that we were able to recruit Dr. Vinod Bhatnagar from sunny Florida who will join the LHSC site in the summer of 2015. Dr. Bhatnagar is trained in the US in geriatric psychiatry and has a long experience in clinical trials in the area of pharmaceutical agents in dementia. He is an excellent teacher.
especially in the area of continuing medical education. At his senior level of career, Dr. Bhatnagar will add his depth of experience clinically and academically to further enhance the clinical and academic mission of the LHSC GMH and our Division as a whole.

The Behavioural Response Team (BRT) at LHSC was busy this past year with assessing higher risk geriatric mental health clients, and continued relationship building and collaborating with other geriatric and mental health services in London and Middlesex county. The winter/spring saw a PIECES and Gentle Persuasive Approach (GPA) education blitz for schedule one hospital staff who work with geriatric patients; areas of LHSC hospital sites were included (but were not limited to) the inpatient mental health unit, ACE unit, SAMU, and Emergency Departments. The BRT also hired a six month contract therapeutic recreation specialist to work with geriatric patients, experiencing behaviours in the Emergency Department (CEPS) and also with the same population on the inpatient mental health floor. Some of the goals being measured with this role include enhancing quality of patient hospital experience, increasing staff skill/confidence with non-pharmacological behavioural interventions, and decreasing patient length of stay.

The SJHC London site has 4.6 geriatric psychiatry FTE resources; this includes Drs. Lisa VanBussel, HaeyRun (Helen) Park, Amer Burhan, Michele Doering and Michael Fisman. The site is also supported by a 0.5 FTE family physician resource for the inpatient units, adding to the multidisciplinary specialized team that includes RNs, SW, OT, PT, psychology, and RT. We have 0.6 FTE geriatric psychiatry vacancies that we are interviewing to fill with at least two interested candidates.

Over the last year, Division members from SJHC site continued to work on enhancing models of care in the inpatient units now that the final count of beds is stabilized at 42 inpatient beds divided into an 18 bed dementia unit and 24 beds general geriatric psychiatry unit. In collaboration with the Centre of Addiction and Mental Health (CAMH) in Toronto, Dr. Burhan developed an evidence-informed model of care for neuropsychiatric symptoms of dementia for our dementia unit. This model is being implemented moving forward to optimize quality of care and harm reduction for patients being treated with psychotropic medications. This model has been presented in several national meetings including the upcoming Canadian Academy of Geriatric Psychiatry and Coalition for Seniors Mental Health in Toronto in September 2014. Discussion about a revised model of care for the geriatric psychiatry ambulatory services at SJHC is underway. Additionally, Dr. Burhan developed and implemented an evidence-informed model of care for the electroconvulsive therapy (ECT) service at SJHC with a policy to regulate a safe and effective practice. Geriatric psychiatry is a high utilizer of the service and also a high participant in providing care with the service.

Like the Middlesex BRT, the SJHC site continues to run a busy integrated regional psychogeriatric program and behavioral support Ontario service with a clinical and educational mandate to facilitate care of seniors with mental health needs across the southwest LIHN region that covers London, Bruce, Elgin, Grey, Huron, Middlesex, Norfolk (west), Oxford and Perth. A mix of on-site and OTN visits for clinical case conferencing, direct assessment and management and education are provided.

Dr. Iris Gutmanis continues to serve on the steering committee of the BSO initiative and is involved in the evaluation and quality improvement of this project.

Moving forward, our two academic sites that share the academic mission of the Division and are integrated in several academic projects will be moving more and more towards clinical integration to facilitate continuity of care and to enhance teaching and research.
Education Update:
Our Division continues to be quite active at all levels of education at the two academic sites and within the SWGAN network. The following are some highlights:

Undergraduate Medical Education:
Our faculty members at both sites were able to provide high quality core and elective rotations to around 30 medical students at all levels in acute and chronic seniors’ mental health care, inpatient, ambulatory and outreach to community and long term care facilities. Dr. Helen Park continues to coordinate this portfolio and assure optimum clinical experience. Also, we continue to contribute to the didactic teaching at the clerkship level giving two seminars on therapeutics in geriatric mental health and dementia. These seminars are delivered to every block of medical clerks that rotate every eight weeks. Members of our Division also contribute to clinical methods skill workshops among other activities.

Postgraduate Medical Education:
The geriatric postgraduate education coordination has transitioned from the leadership of Dr. Jennifer Oates in July 2014 to Dr. Lisa Van Bussel. The residents are given an opportunity for a full range of clinical experiences from acute care to specialized inpatient treatment. The required six month core rotation in geriatric psychiatry is offered to PGY3 residents and includes a three month rotation at the acute geriatric mental health site and three months at the chronic, tertiary care site. Residents are offered a wide range of exposure to inpatient, ambulatory and outreach care in acute and chronic phase assessment and management. Faculty in our Division delivered no less than 15 lectures and seminars at different PGY levels covering a wide range of topics in geriatric psychiatry.

We are also able to work with Family Medicine and Geriatric Medicine to provide their residents with training in geriatric psychiatry. We also continue to provide seminars on topics in geriatric psychiatry when needed for our colleagues in these specialties.

There is a David Harris Award to recognize the resident trainee who best fulfills and encompasses the pillars of excellence in the care of older adults with mental health illnesses. The 2012 recipient, presented at the Awards Ceremony on June 2014, was Dr. Sharon (Grace) Ferreria.

Also over the last year and in collaboration with Dr. Arany Shanmugalingam and members of the ECT curriculum committee, Dr. Burhan developed the first formal evidence-based competency-based spiral (multi-level) curriculum for ECT in our PGE program, which was a deficiency identified by external reviewers of our program a couple years ago.

This year’s Excellence in Postgraduate Education Award in Geriatric Psychiatry went to Dr. Akshya Vasudev. This award acknowledges excellence in the area of clinical supervision, lectures or seminars and is selected by the psychiatry residents.

Subspecialty Residency in Geriatric Psychiatry:
Our Division has now completed and submitted the application for accreditation from the Royal College. We were able to leverage the comprehensive network of collaborators in the area to assemble a comprehensive experience for sub-specialty residents in geriatric psychiatry, cognitive neurology, movement disorders, neuroradiology, community and rural experiences
and scholarly projects. We anticipate approval of this program by fall of 2014 and to welcome our first resident by July 2015.

Continuing Education:
Members of the Division have been active in presenting locally, regionally, nationally and internationally. Dr. Marnin Heisel presented in several national venues and was the speaker on suicide in the national geriatric psychiatry review course. Dr. Heisel was featured in the London Free Press after receiving a substantial grant to study suicide prevention in older males. Drs. Amer Burhan, Helen Park and Mr. Tom Ross presented a workshop on using technology to monitor falls in advanced dementia inpatients at the international psychogeriatric meeting in Seoul Korea in October 2013. Dr. Burhan and Dr. Shabbir Amanullah presented on access to geriatric mental health services in the annual meeting for the association of general hospital psychiatry. Geriatric psychiatry presented at the monthly Department of Psychiatry rounds in May 2014. The session was moderated by Dr. Burhan and featured a case presentation by Dr. Pramudith Manujaya Maldeniya followed by a presentation by Dr. Elizabeth Finger who gave a thorough overview and update on Frontotemporal dementia and related illnesses.

The eleventh Annual Geriatric Psychiatry Symposium “Leading and Learning Together: A Journey of Dementia,” was held on Wednesday, November 6, 2013. With over 150 participants in attendance with 2 plenary speakers and 12 concurrent workshops, this full day event has continued to grow and welcome participants from London, the surrounding counties, and across the province. Keynote speaker, Naomi Feil, spoke on “Validation Principles and Techniques: Empathic Communication for the Frail and Disoriented Elderly” and Plenary speaker, Dr. Christopher Patterson, Professor, Division of Geriatric Medicine, Department of Medicine, Chief, Geriatric Services, Hamilton Health Sciences, spoke on “Dementia: Insights from the 4th Canadian Consensus Conference.” In addition, there were twelve concurrent workshops on such topics as end of life care, person-centered approach to dementia care, delirium and subcortical dementia.

The Division of Geriatric Psychiatry contributes to several ongoing learning events supported by Specialized Geriatric Services - Fall education series and events, SGS interdisciplinary ground rounds, (monthly on Thursdays), and the Spring SWOGAN team exchange. The focus is on the learning and development of interprofessional health care partners. There were over 100 participants to the SWOGAN fall education and spring team exchange at which Dr. Burhan was the guest speaker discussing neuropsychiatric aspects of Parkinson disease.

The LHSC Geriatric Psychiatry CPD program conceived in 2012 continues to be able to provide quality education in a relaxed environment for the multidisciplinary team at LHSC. The program is broadcasted to partners at RMHC, Parkwood and the Alzheimers Society. We have had a number of quality speakers through the year. Our star speaker this year was Dr. Simon Davies from CAMH who enthralled the audience with the latest in management of anxiety disorders. Other topics included were as follows: frailty and dementia; therapeutic presence; therapeutic recreation and dementia care; living at home with dementia; how occupational therapy can increase functional performance; alcohol addiction in the elderly; and cognitive vitality. We are looking forward to finishing out the year with topics about delirium as well as the Public Guardian and Trustee role for the geriatric population.

Other CE and CPD activities included a hands-on ECT workshop that Dr. Burhan lead with Dr. Varinder Dua for the psychiatry team from the Sault Ste. Marie area and the graduating psychiatry residents; two seminars for the Schulich CPD office: one lead by Dr. Burhan on “e-portfolio” and another one by Dr. Doering on “mentoring difficult trainees,” both are core
requirements of the teaching certificate faculty development series of which Dr. Burhan and Doering are committee members. Other notable committees that our Division members participated on included the Maximizing Medical Education with Technology Committee commissioned by the Associate Dean’s office, and the Masters in Translational Neuroscience Development Committee, both of which included Dr. Burhan.

**Research Updates:**
Our faculty continues to contribute high-level translational research in several areas of focus: In the area of Psychological resilience, meaning of life and suicide prevention, Dr. Marnin Heisel continues to be on the leading edge on this area of research, and his work is recognized locally, nationally and internationally. He was awarded a grant of over half a million dollars from the Movember initiative to study suicide prevention in older males. Dr. Heisel continues to lead research at the Department of Psychiatry level through his role as the Director of Research.

In the area of applied clinical research, Dr. Akshya Vasudev and Dr. Amer Burhan were both successful as co-investigators on a large CIHR funded project through the aegis of the Canadian Collaboration of Neurodegeneration and Aging. A number of research streams will be investigating various neurobiological, ethical and treatment modalities for patients suffering from dementia across Canada. Akshya and Amer will join the Gait and Brain Lab at Parkwood Hospital where Dr. Manuel Monterro Odasso is the project lead exploring Motor Exercise and Cognition in patients with mild cognitive impairment for this project. In addition, Dr. Amer Burhan and Dr. Lisa Van Bussel are Co-investigators on another project with the CCNA initiative under the leadership of Dr. Nathan Herrmann titled “prevention of neuropsychiatric symptoms of dementia.” Recruitment will occur over the next five years.

Dr. Vasudev has secured an AMOSO innovation fund grant to investigate the role of Automatic Self Transcending Meditation (ASTM), a particular form of meditation which has already shown beneficial effects on depression, anxiety and cardiovascular autonomic parameters in a pilot study. The AMOSO funding will help in recruiting a large population sample of patients with late life depression. His co-investigators on this project are Dr. Amer Burhan, Dr. Stephen Wetmore (Chair of Family Medicine) and Ms. Ronnie Newman (Research Director of Art of Living Foundation). The study is currently recruiting well.

Dr. Vasudev has had a productive year at the Institute of Clinical Evaluative Sciences (ICES) as a faculty scholar. He has completed one project on prevalence and usage of sedative antidepressants in patients with dementia in long term care, and this work is being prepared for publication. He also has learned immensely from the teaching provided by Dr. Amit Garg and his team here at Western. In his final year, he looks forward to participating in other collaborative projects with other faculty scholars, as well as members of the Department of Psychiatry.

Drs. Burhan and Van Bussel continue to explore the utility of technology in monitoring risk events in advanced dementia patients. Dr. Van Bussel was successful in obtaining a grant from AMOSO to study the utility of a fall emergency response system through ceiling mounted infrared camera, and Dr. Burhan was awarded the SJHC President Award to study the utility of a portable wrist worn actigraph device to measure agitation in this patient population.

In the area of neuromodulation, Dr. Burhan was successful in obtaining funding from the SJHC foundation to acquire added equipment to set up a complete neuromodulation service with TMS, neuronavigation, EEG and tDCS. This will be developed as a clinical service and will be available for researchers in clinical translational research. Projects are underway to explore the
impact of rTMS on cortical excitability in Alzheimer’s patients in collaboration with the human threshold lab at Lawson research institute.

In terms of educational research, Dr. Burhan continues to collaborate with colleagues from adult psychiatry and with neurology on validating the virtual interactive case program (VIC) as an educational and competency assessment simulation tool. Two projects were in the area on movement disorders and suicide assessment, and funding for these projects came from local grants, including the Instructional Innovation Development Funds (Schulich CPD) and the Fellowship in Teaching Innovation from the Western Teaching Support Centre.

Division members, including Drs. Amer Burhan, Lisa Van Bussel and Gutmanis, are contributing to the development of the Centre for Cognitive Vitality and Brain Health at Parkwood Hospital. This Centre brings together the expertise of the disciplines of geriatric medicine, psychiatry, neurology and physical medicine to advance research, education and service delivery as it relates to those who suffer from or are at risk of cognitive disorders.

Also, Dr. Burhan was a collaborator on the NIH funded naturalistic multi-centre trial investigating the efficacy of Citalopram in the treatment of agitation in Alzheimer’s disease. Results from this important trial are now published in JAMA, and the first author, Dr. Anton Porsteinsson, will be our guest speaker in November both for the Cognitive Vitality and Brain Health rounds and the annual geriatric psychiatry symposium.

Finally, at the Division leadership level, Dr. Lisa Van Bussel, after serving as the Chair of the Division for over five years, decided to step down from that role. Dr. Van Bussel led the mission of the Division through difficult transitions and worked hard with members of the Division and affiliated hospitals to maintain the clinical and academic mission of the Division locally and throughout the southwestern LIHN. Dr. Van Bussel will continue her contribution to the Division through her role as PGE Coordinator and as the Chair of the annual geriatric psychiatry symposium in addition to her role as Physician Lead for the Geriatric Psychiatry Program at SJHC where she contributes to the development of the Cognitive Vitality and Brain Health initiative. The Division would like to thank Dr. Van Bussel for her contributions over the years and looks forward to her continuing support to the clinical and academic mission of the Division. After a formal search process, Dr. Amer Burhan was selected as the Chair of the Division of geriatric psychiatry effective July 2014. Dr. Burhan will be continuing the process of moving the mission of the Division forward and focusing future efforts on a model of knowledge translation that integrates the clinical process across sites and utilizes education and applied research as essential day-to-day ingredients in the delivery of high quality evidence-informed care.

Amer M. Burhan
Chair, Division of Geriatric Psychiatry
Division of Neuropsychiatry

“The challenge of our time is not to discover a gene for a particular neuropsychiatric disorder but to understand the final common pathway of the disorder with advanced brain imaging techniques.” Peter Williamson

The Division of Neuropsychiatry was created in 2002 to provide academic leadership in neuroscience research within the Department of Psychiatry. It provides a home for basic science researchers within the Department and facilitates more effective collaboration between imaging researchers at the Robarts Research Institute, the Lawson Health Research Institute and clinical research groups. The Division also allows the development of advanced training opportunities within the Department at resident, fellowship, MSc, PhD and postdoctoral levels through collaboration with the Departments of Medical Biophysics, Anatomy and Cell Biology, Psychology and the Neuroscience Graduate Program. The Division contributes to clinical service provision through a consultation role with the Department of Clinical Neurological Sciences and with the Acquired Brain Injury program at Parkwood Hospital.

Research Accomplishments
During the first five years, four vertically integrated research programs were developed: a schizophrenia group led by Dr. Williamson, the Tanna Schulich Chair in Neuroscience and Mental Health, a posttraumatic disorders group led by Dr. Ruth Lanius, the Harris-Woodman Chair in Psyche and Soma, a mood and anxiety disorders group led by Dr. Beth Osuch, the Rea Chair in Mood and Anxiety Disorders and an autism group led by Dr. Rob Nicolson. Highlights of collaborative clinical and basic science research over the last year in each of these areas are reviewed below.

Schizophrenia: Over the last two decades, molecular genetic studies have dominated the investigation of neuropsychiatric conditions. Some promising genetic correlates of neuropsychiatric disorders have emerged but none explain more than a small fraction of cases. The challenge of our time is to find the neuronal circuits associated with these disorders. Dr. Williamson and Dr. John Allman, an evolutionary biologist at the California Institute of Technology, proposed in their book, The Human Illnesses: Neuropsychiatric Disorders and the Nature of the Human Brain, Oxford University Press, 2011, that the neuronal pathways that underlie neuropsychiatric conditions mirror unique human capabilities.

Central to understanding the human brain is the capacity for the representation of the thoughts, feelings and actions of self and others across time. Brain structures such as the frontal pole, temporal pole, and fronto-insular cortex are highly developed in humans and may be associated with these functions. This representational network receives input from a directed effort network and an emotional encoding network. Conditions like schizophrenia might result from a failure of the directed effort network while bipolar disorders may arise from failure of the emotional encoding network. From this perspective, neuropsychiatric disorders are seen as selective failures of brain networks involved in the integration of cognition, affect and perception.

The model provides a framework for understanding brain imaging findings of the group at the University of Western Ontario over recent years in collaboration with Dr. Rahul Manchanda and the Prevention and Early Intervention in Psychosis Program (PEPP), Dr. Ravi Menon and Dr. Jean Théberge. Altered glutamatergic metabolites have been found in key parts of the directed...
effort which correlate with social deficits and gray matter losses in first episode schizophrenic patients over time. The schizophrenia group received a five year $739,755 renewal grant from the Canadian Institutes of Health Research to examine the structural, functional, and metabolic correlates of these changes in first episode schizophrenic and depressed patients in collaboration with Dr. Osuch. Much of the equipment and overhead for this study is covered by a $6,235,244 grant from the Canadian Foundation for Innovation on which Dr. Williamson was a co-applicant.

Figure 1 shows preliminary data from the Canadian Institutes of Health Research study from 24 first episode schizophrenic and 24 first episode depressed patients. Note an increase directed effort networks in schizophrenic patients as predicted by the model. Under the direction of Dr. Théberge, glutamatergic metabolite differences between schizophrenic and depressed patients are being examined at 7.0 T. At this higher field strength it is possible to examine the synthesis of glutamate in response to cognitive tasks which involve directed effort such as the Stroop Task. Characterization of the final common pathways may lead to a brain imaging test for early diagnosis of these disorders in the foreseeable future.

Figure 1: Preliminary 3.0 T resting state differences (frontal pole seed) between 24 first episode schizophrenic patients and 24 first episode depressed patients showing a deficit in the directed effort network in schizophrenic patients as predicted by our model. Courtesy of Kristen Ford, presented at Biological Psychiatry Meeting, New York, 2014.

Posttraumatic Stress Disorders: Dr. Ruth Lanius and Dr. Paul Frewen continue to make groundbreaking contributions to the understanding of posttraumatic stress disorders. In the lead article of the June 2010 issue of the American Journal of Psychiatry, Dr. Lanius described a new subtype of posttraumatic stress disorder which was included in DSM-5 in 2013. The dissociative subtype is characterized by overmodulation of affect, while the more common undermodulated type involves the predominance of reexperiencing and hyperarousal symptoms. In this model, reexperiencing/hyperarousal reactivity is viewed as a form of emotion dysregulation that involves emotional undermodulation, mediated by failure of prefrontal inhibition of limbic regions. In contrast, the dissociative subtype of PTSD is described as a form of emotion dysregulation that involves emotional overmodulation mediated by midline prefrontal inhibition of the same limbic regions. Both types of modulation are involved in a dynamic interplay and lead to alternating symptom profiles in PTSD. These findings have important implications for treatment of PTSD, including the need to assess patients with PTSD for dissociative symptoms and to incorporate the treatment of dissociative symptoms into stage-oriented trauma treatment.
Dr. Lanius has published numerous articles on posttraumatic stress disorders in recent years in journals such as *Archives of General Psychiatry*, *Human Brain Mapping*, *Psychological Medicine*, *Journal of Clinical Psychiatry*, and she has given invited lectures in Los Angeles, Chicago, Boston, Baltimore, Philadelphia, Zurich, Switzerland and Bologna, Turin and Padova, Italy, Stockholm, Sweden and Leiden, the Netherlands. Dr. Lanius received the Richard P. Klut Award for Journal of Trauma and Dissociation 2012 Best Article and was First Runner up for the Major Sir Frederick Banting MC, RCAMC Award for Military Health Research from the Canadian Institute for Military and Veteran Health Research.

Dr. Frewen, with Dr. Lanius, completed the Norton text, *Healing the Traumatized Self: Consciousness, Neuroscience, Treatment*, which is now in press and expected to be published in the fall of 2014. He received an Ontario Mental Health Foundation grant for a project titled *Randomized Controlled Trial of Internet-based Mindfulness Therapy for PTSD as Adjunct to Evidence-based Treatment*. He gave the Traumatic Stress Section keynote address at the meeting of the Canadian Psychological Association (CPA) in Vancouver in June. He was selected as the inaugural international co-editor for the forthcoming journal *International Journal of Multidisciplinary Trauma Studies*. In recognition of the clinical significance of his research program, he was awarded both the CPA’s Scientist-Practitioner Early Career Award and the Traumatic Stress Section Early Career Award.

**Mood and Anxiety Disorders:** The First Episode Mood and Anxiety Program provides an excellent base for both clinical and brain imaging research. Dr. Osuch has been studying neurofunctioning and cognitive interactions in major depression and marijuana use in youth with functional and structural brain imaging in a project funded by the *Ontario Mental Health Foundation*. In another project, funded by the *Pfizer Psychiatry Research Program*, Dr. Osuch is examining the potential of functional brain imaging techniques to diagnose first episode bipolar versus unipolar depression. The ability to do so would have important clinical implications as antidepressants given to bipolar depressed patients can exacerbate the illness. Dr. Osuch is also conducting genetic studies, in collaboration with Drs. Laviolette and Rushlow, to advance translational science in the study of cannabis use and the brain. The First Episode Mood and Anxiety Program was awarded a *Provincial Innovation Fund* grant from the Ontario government recognizing the innovative approach to care developed by Dr. Osuch. Dr. Osuch is a member of the *National Network of Depression Research Centres* to which the Federal Government pledged $5,000,000.

Dr. Mitchell has become well known for his work on decision making and emotional regulation supported by grants from *Natural Sciences and Engineering Research Council of Canada*, the *Social Sciences and Humanities Research Council of Canada* and the *Canadian Institutes of Health Research*. Of particular interest is some recent work from *Social Cognitive and Affective Neuroscience* on the neural correlates of regulating positive and negative emotions in medication-free major depression (Figure 2). Depressive cognitive schemas play an important role in the emergence and persistence of major depressive disorder. This study adapted emotion regulation techniques to reflect elements of cognitive behavioural therapy to delineate neurocognitive abnormalities associated with modulating the negative cognitive style. The results suggest that depression is associated with both a reduced capacity to achieve relief from negative affect despite recruitment of ventral and dorsal prefrontal cortical regions implicated in emotion regulation, coupled with a disconnect between activity in reward-related regions and subjective positive affect. Dr. Mitchell is also co-principal investigator with Dr. Elizabeth Finger on a grant examining patients with frontotemporal dementia awarded from the *Canadian Institutes of Health Research*. 
Figure 2: BOLD response for the whole brain analysis of negative trials and the relation to regulation efficacy. Top-left-main effect of group demonstrates greater activity in the left (A) and right (B) VLPFC of the control relative to the major depression group. Bottom-left-Main effect of instruction shows enhanced activity for reduce negative relative to attend negative trials in the (C) left VLPFC, (D) left middle temporal gyrus, (E) left temporoparietal junction, (F) left DLPFC and (G) right DLPFC. Top-right-Group x instruction interaction revealed that whereas brain activity was attenuated in the control group on reduce relative to attend negative trials, activity was enhanced in the MDD group within the (H) left lingual gyrus, (I) right postcentral gyrus, (J) right inferior parietal lobe and (K) right amygdala. Bottom-right-Negative regulation efficacy was positively correlated with percent signal change in the reduce vs attend conditions in the DLPFC (F) of the control group, but not the MDD group.

Autism: Dr. Nicolson is a co-investigator on several multi-center grants doing research on neurodevelopmental disorders. His research is focused on clinical description (phenotyping), clinical trials of medications, and brain imaging in autism spectrum disorder and intellectual disability. Findings from this brain imaging study have implicated many brain regions associated with unique human capabilities like ‘theory of mind’ or the ability to perceive the intentions and feelings of others. Dr. Nicolson was one of 6 investigators awarded $1,950,000 by the Ontario Brain Institute to study autism and other neurodevelopmental disorders. Dr. Nicolson coordinates the brain imaging aspects of this multidisciplinary clinical and genetic study. This study has been extended for a further five years with $18,750,000 support. A further $2,500,000 has been obtained from Brain Canada to support this multi-centre study. The study is one of the
largest and possibly one of the most important studies of its kind, offering the hope that the pathophysiology of this disorder may be elucidated in our time.

Basic Science: Basic science investigations include innovative signalling studies led by Dr. Rushlow and Dr. Raj Rajakumar. Dr. Rajakumar co-authored the 10th Edition of Barr's *Human Nervous System*, a standard neuroanatomy textbook used around the world and published by Williams & Wilkins. He received a five year renewal of his *Natural Sciences and Engineering Research Council of Canada* grant on the molecular mechanisms of spatial memory. Dr. Rajakumar also plays an important role as a neuroanatomy consultant to the brain imaging studies. Dr. Rushlow collaborates on the basic science aspects of Dr. Lanius’ *Canadian Institute of Military and Veterans Health Research* study and also collaborates with Dr. Steve Laviolette on opiate addiction. Recent work with Dr. Laviolette has examined the long-term effects of adolescent THC exposure on adult psychopathology.

Educational Accomplishments
Neuropsychiatry offers research training opportunities for residents within all core programs in order to prepare for a research fellowship or postgraduate degree. Of particular note this year was the work of Dr. Kara Dempster who completed a research elective with Dr. Williamson on neuropsychological correlates of glutamatergic changes in schizophrenia, which was presented at the Biological Psychiatry meeting in New York. Dr. Dempster also won a $2,000 PSI Foundation Resident Research Prize for her paper based on this work. Both Dr. Williamson and Dr. Rushlow sit on the Royal College Clinical Investigator Program committee to facilitate transition from specialty training to an MSc or PhD degree at Western upon completion of core training requirements.

Over the last 20 years, Dr. Williamson has co-supervised MSc and PhD students in Medical Biophysics and the Neuroscience Graduate Program with Dr. Dick Drost, Dr. Jean Théberge and Dr. Terry Thompson. With this unique multidisciplinary approach, students develop a skill set in neurophysiology, neuroanatomy, clinical neuropsychiatry, medical biophysics and the application of brain imaging techniques. Dr. Rob Bartha at Robarts Research Institute was one of our first graduates, others have gone on to faculty positions at Harvard, Pittsburgh and Wayne State. Dr. Williamson continues to co-supervise a PhD student in Medical Biophysics and a postdoctoral student with Dr. Osuch. Over the last year, Dr. Williamson has also supervised two visiting MD/PhD students from the University of Copenhagen in Denmark.

Dr. Lanius offers a very popular advanced postdoctoral training experience to postdoctoral students. Over the last few years, she has attracted MSc and postdoctoral fellows from the University of Mannheim in Germany and the University of London, UK. Dr. Lanius also provides research experience for residents in psychiatry and family practice. Dr. Frewen is active in undergraduate teaching in the Psychology Department and supervises two MSc students in the Neuroscience program.

Dr. Mitchell has been very active in teaching at the undergraduate level in Anatomy and Cell Biology and supervises three PhD students in Graduate Neuroscience Program and Anatomy and Cell Biology. Drs. Rushlow, Rajakumar, and Frewen also offer training at the MSc and PhD levels through the Neuroscience Graduate Program and Anatomy and Cell Biology. Both Dr. Rajakumar and Dr. Rushlow have an active teaching load in Anatomy and Cell Biology. Dr. Rushlow and Dr. Laviolette have established a very popular and well-received new fourth year Medical Science course titled ‘Neurobiology of Mental Illness.’
Editorial Appointments
Dr. Williamson is a member of the Advisory Board of Acta Psychiatrica Scandinavica and a member of the Editorial Board of Schizophrenia Bulletin. Dr. Lanius is an Associate Editor of the European Journal of Psychotraumatology, an Editorial Board member of Frontiers in Affective Disorders, Journal on Borderline Personality Disorder and Dysregulation and Biology of Mood & Anxiety Disorders, and a Consulting Editor of the Bulletin of the Menninger Clinic. Dr. Frewen is co-editor of the International Journal of Multidisciplinary Trauma Studies and Dr. Mitchell is Consulting Editor of Emotion.

Research Panel Appointments
Dr. Williamson is past Chair of the BSB panel at the Canadian Institutes of Health and has served at the Center for Scientific Review at the National Institute of Health in United States in recent years. Dr. Lanius has recently retired from panels at both the Canadian Institutes of Health and the National Institute of Health. Dr. Nicolson has recently served on a panel at Canadian Institutes of Health and Dr. Mitchell has served on a panel at the National Science Foundation in United States. Drs. Rushlow and Rajakumar have served on panels at the Ontario Mental Health Association.

Media Coverage
Dr. Williamson’s work has been highlighted in articles in Science News, Scientific American Mind and the Globe and Mail in recent years. During the last year, his work has been highlighted by ISTOE Magazine, a weekly news magazine similar to Time in Brazil and The Dana Foundation, New York. Dr. Lanius has been interviewed on CBC radio’s The Current and The National. Dr. Osuch’s First Episode Mood and Anxiety Disorders Program received extensive coverage with interviews on CBC radio’s National News and CBC television’s The National and the London Free Press.

Awards
Dr. Paul Frewen

Dr. Ruth Lanius
Department of Psychiatry, Western University of Canada, Best CPD Presentation by Faculty (2012-2013)

The Richard P. Kluft Award for Journal of Trauma and Dissociation 2012 Best Article for Brand BL’, Lanius R’ (shared first authorship), Loewenstein RJ, Vermetten E, Spiegel D. “Where are we going? An update on assessment, treatment, and neurobiological research in dissociative disorders as we move towards the DSM-5” (2013)

Canadian Institute for Military and Veteran Health Research, MVHR Forum 2013 First Runner up, Major Sir Frederick Banting MC, RCAMC Award for Military Health Research, Edmonton, Alberta, (November 2013)

Recognition: For Excellence from the Commander Surgeon General, Canadian Forces Health Services Group. Mental Health Research Symposium, Magnetoencephalography & Neuroimaging in Post-Traumatic Stress Disorder and mild Traumatic Brain Injury(DRCD/DND), The Hospital for Sick Children, Toronto, ON, February 14, 2014
EDUCATION

Undergraduate Education in Psychiatry

It has been another busy year in undergraduate education. We were very excited to learn that seven of the Schulich School of Medicine and Dentistry’s graduating class chose a residency in Psychiatry. Fortunately, four of those students remained in London. Psychiatry was the third most popular speciality for that graduating class.

Friday, May 30, 2014 wrapped up another year of Meds 5207 (Psychiatry and the Behavioural Sciences). For many medical students, Medicine 5207, Psychiatry and the Behavioural Sciences, is their first exposure to psychiatry, and we strive to make it a positive experience. During Medicine 5207, second year medical students are provided with five weeks of didactic lectures and small group sessions covering a variety of topics including child and adolescent mental health, anxiety disorders, mood disorders and psychotic disorders. Thanks to Dr. Mark Watling (London) and Dr. John Vilella (Windsor) for organizing the course. We need to acknowledge the hard work of the week captains, Drs. Mark Watling, Sreelatha Varapravan, Priya Subramanian, Heidi Haensel, and Julie Richard.

Psychiatry Patient Centred Clinical Methods, offered in second year, has undergone several successful changes under the direction of Dr. Sreelatha Varapravan. An ongoing challenge is the fact that Clinical Methods begins prior to the didactic lectures provided in Meds 5207.

This year a number of faculty participated in the Professional Portfolio Course for first and third year medical students. As of September 2014, the course will be expanded to include second year students as well. Students are asked to write a reflective piece on a moment during their clinical training and the faculty then provide feedback. Educational sessions are provided for the faculty.

Faculty also generously provided their time to facilitate PCCIA (Patient Centered Care – Integration and Application). PCCIA takes place in small groups for two-three hours a week, where students discuss psychosocial aspects of medicine related to the current learning block. Students are provided an opportunity to discuss topics not normally covered in the traditional curriculum, such as resource allocation, socioeconomic determinants of health and current events as they relate to medicine.

For the past three years, Dr. Rahul Manchanda has been organizing, “Meet the Professor” sessions for our clinical clerks. During each rotation the clerks have the opportunity to have lunch with a professor and learn about the research and clinical interests of that faculty member. The series helps highlight the breadth of opportunity within the Department.

This year we completed the third year of our revised clerkship under Dr. Carla Garcia’s direction. Students are able to complete a two-week selective in child & adolescent, general
adult, geriatric, psychosis, adult consultation-liaison, mood and anxiety Disorders, Urgent Consultation Service, ER Psychiatry (CEPS), or forensics.

SWOMEN and Windsor continue to play an integral role in training our clerks. In the last year, we had clerks rotate in Windsor, Chatham, Sarnia, St. Thomas and Stratford.

The Wednesday Seminar Series continues to be teleconferenced to our various SWOMEN sites with Windsor offering an equivalent series. We also teleconference the resident teaching series to the SWOMEN sites. Thank you to Dr. Jonathan Tan for his significant contributions during the past academic year. The resident teaching sessions remain one of the most highly rated educational experiences within the clerkship.

On May 7, 2014, we held our third Taste of Psychiatry. Fifty-three medical students joined residents and faculty for presentations outlining the various clinical and research opportunities available within the Department. It was great to see such interest from the medical students. I would like to thank the residents and faculty who came to share their enthusiasm about pursuing psychiatry as a career. Each year we try to have presentations from different Divisions and research interests.

As a Canadian undergraduate medical program, we are accredited by the Liaison Committee for Medical Education (LCME) and the Committee on Accreditation of Canadian Medical Schools (CACMS). Accreditation is an ongoing quality improvement process that culminates in an external site review once every eight years. Our index year was 2013-2014. The Schulich School of Medicine & Dentistry undergraduate medical program will have its full site survey from April 12-15, 2015. In January 2015, practice site surveys will begin, and faculty from our department may be asked to participate.

On June 11, 2014, the Department held its Annual Awards Night and Social. During the academic year, clinical clerks are asked to evaluate their lecturers and supervisors. These scores are tabulated annually to determine the clerkship seminar series leader and the clerkship clinical supervisor for London, SWOMEN and Windsor. The award for the highest rated clerkship seminar series leader was awarded to Dr. Martyn Judson. The Clerkship Supervisor of the Year for London was awarded to Dr. Julie Richard. Dr. John Vilella was recognized as the Clerkship Supervisor of the Year in Windsor. Dr. Mirela Bucur received the highest evaluations for SWOMEN.

Ms. Naomi Mudachi, Schulich Meds 2017, won the COUPE (Canadian Organization of Undergraduate Psychiatric Education) Best Paper Award for Medical Student for her paper, "Stalking of Psychiatrists: A Comprehensive Approach to Prevention and Management". Ms. Mudachi will receive her award at the CPA in Toronto.

Congratulations to Drs. Priya Subrmanian, Sreelatha Varapravan, Iouri Rybak and Amer Burhan who were recently awarded the 2014 Fellowship in Teaching Innovation. Their project, “Enhancing Suicide Risk Assessment Skills through Simulations in a Virtual Environment,” hopes to improve medical students’ skills in assessing suicidal risk using virtual interactive cases.

I would like to express my sincere thanks to all the faculty members who participated in lectures and small group sessions throughout the year. As outlined above, it is the contribution of so many faculty which makes our Department a dynamic learning opportunity for so many students. I would also like to acknowledge the efforts of Ms. Melanie VandenBorre, our
undergraduate administrative assistant. Melanie has been indispensable due to her exceptional communication and organizational skills.

Dr. Sandra Northcott
Director, Undergraduate Education

Postgraduate Education in Psychiatry

The academic year 2014-2015 began with the completion of our internal review by Western on July 8-9. Thank you to the residents, teaching faculty and Residency Program Committee for their involvement. We will be informed about the outcome by the Royal College in January of 2015.

We would like to congratulate Carissa Peterson and her husband on the birth of their daughter, Eleanor, and we welcome back Eva Evangelista (Adams) who will be covering Carissa’s maternity leave.

With the increased staff support in the PGE office, we are working to improve the capabilities of the One45 system. New for this year is the pilot on-call evaluation system, which will allow residents to anonymously evaluate their on-call supervisors and to issue on-call evaluation forms to their supervisors electronically for feedback.

We continue this year to monitor lecture attendance and resident leaves within the One45 system with the goal of improved tracking and feedback at semi-annual reviews. Feedback about the new online process has been very positive.

One of the most exciting pieces of news in our office is the start of the Windsor stream of our residency program. We are offering two additional resident positions in Windsor to start in July 2015. We have posted the Windsor stream through CaRMS and will hold CaRMS interviews for both London and Windsor together in January and February 2015.

The Western Psychiatry Mentorship Program was an initiative that was implemented at the start of the academic cycle in 2013, created by a former resident of our program. The program was designed to help ensure that incoming residents experienced a smooth transition into residency, under the mentorship of a more senior resident. Starting residency can be a challenging time, and it can be overwhelming to balance clinical duties with finding one’s way around a new city and adjusting to a new environment. The mentorship program aims to alleviate the stress that accompanies making the leap from medical school to post-graduate training. The model as it currently stands, involves a PGY2 resident as the mentor and a new PGY1 resident as the mentee. This particular structure was based on the thought that as individuals who had recently made the transition into residency themselves, PGY2 residents would be able to provide the most current information and guidance for their mentees.

In the first year of the program, an attempt was made to meet as a group on a routine basis to make sure that the goals of the program were being met. The year began with a social event hosted by Dr. Karin Kerfoot, a staff psychiatrist of our program, giving mentors and mentees a chance to meet each other in an informal setting. Periodically throughout the year, there were separate meetings to check-in with mentees as well as mentors to find out how the program was working for them, to brainstorm new ideas of how the program might run in the future and
to troubleshoot any issues that individuals had encountered. Dr. Kerfoot, the physician lead of the program, ran all sessions.

Overall, the first year of the mentorship program has been a success and we are continuing to develop new ideas on how the program can be expanded upon and improved for the future.

Last but not least, we would like to welcome our nine new residents who joined us as of July 1, 2014.

Dr. Sumit Chaudhari  
Dr. Jennifer Dela Paz  
Dr. Kimberly Fielding  
Dr. Sheena Ghoudasara  
Dr. Jonathan Gregory  
Dr. Nina McCurdy  
Dr. Laura Powe  
Dr. Elyse Ross  
Dr. Michael Thomson

Welcome to our program!

Dr. Volker Hocke  
Director, Postgraduate Education

**Continuing Professional Development**

I am pleased to report on our Continuing Professional Development (CPD) activities for the academic year July 2013 to June 2014, as well as stimulate discussion on future growth and potential opportunities.

The CPD Executive Committee (Department of Psychiatry CPD) and the Coordinated CPD Committee (hospital based CPD) are comprised of physicians and allied health professionals from the London hospitals. It is their role, as the planning committees, to oversee and develop a CPD program that is responsive to identified learning needs. One source is your suggestions on evaluation forms. You are encouraged to continue to put forward suggestions for topics or speakers as a means to continue to guide future program development.

CPD programming continued to provide clinical educational activities and presentations featuring expert speakers from the Western University community, our region, as well as international guests. The Coordinated CPD Program continued to provide Monday weekly mental health rounds at noon, and the Department of Psychiatry’s Thursday morning CPD program and the evening Learning After Five program continued to thrive. A successful third annual mental health symposium – “Anxiety Disorders: Emerging Trends in Pathophysiology and Management” was held at the Lamplighter in the fall 2013. (A full listing of the CPD events is listed later in this report.)

The monthly and weekly CPD Programs adhere to the guidelines to maintain self-approved accreditation status as group learning activities (Section 1) defined by The Royal College of Physicians and Surgeons of Canada (RCPSC). Other special events, for example, the annual
symposium met accreditation criteria for Section 1 Maincert credits as defined by RCPSC, and Mainpro-M1 credits as defined by the College of Family Physicians of Canada.

I would like to remind physicians to consider Section 2 credits offered by the RCPSC to its Fellows to enhance your learning portfolio and provide evidence-based care to your patients. You are encouraged to use content of the CPD to generate Personal Learning Projects (PLPs) and to translate this knowledge in the care of your patients. Another learning opportunity is to invite your peers to participate in a focused chart audit and provide feedback.

For many years, we have successfully delivered the Thursday morning CPD program, as well as the Coordinated CPD program at noon on Mondays by televideo to our participants in the outlying areas.

There have been many discussions (formally and informally) about potential growth and opportunity for the future of CPD programs that includes expanding partnership links, access, and technological modes of delivery. At times, this growth seems slow, partly because it will involve change that needs to be planned in a purposeful manner to maintain self-approved accredited status of events and successful delivery.

We continued to enjoy and work collaboratively with the Western, Schulich School of Medicine & Dentistry’s CPD office and are actively involved in some current CPD initiatives (homecoming, academic detailing, and an annual medicine update for psychiatry) and look forward to engaging in planning future CPD initiatives/programs.

The following is a recap of all the CPD events held during this past academic year –

**Monthly Departmental Rounds**
The monthly *Continuing Professional Development Rounds* are a self-approved group learning activity (Section 1) as defined by the Maintenance of Certification Program of The Royal College of Physicians and Surgeons of Canada, and participants who engage in this activity are able to claim 2.0 MOC credits under Section 1.

The monthly *CPD Rounds* provide a learning forum for physicians, mental health professionals, residents and students. There were 10 presentations well attended that featured excellent speakers from within the Department, as well as external (Schulich School of Medicine & Dentistry), national and international experts in their field. The *CPD Rounds* continued to take place on the second Thursday of the month hosted from the Auditorium at Victoria Hospital, London Health Sciences Centre.

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<thead>
<tr>
<th>Dates</th>
<th>Speakers</th>
<th>Presentations</th>
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<tr>
<td>Oct 10, 2013</td>
<td>Dr. Verinder Sharma</td>
<td>Mood and Anxiety Disorders: The Blessings and Pitfalls of DSM-5</td>
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<td>Nov 14, 2013</td>
<td>Dr. Peter Jaffe</td>
<td>Parents Who Kill Their Children: Motives and Prevention</td>
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<td>Dec 12, 2013</td>
<td>Dr. Kristen Ford, Dr. Justine Renard</td>
<td>Marijuana Use, Depression and Cognitive Consequences</td>
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<tr>
<td>Jan 9, 2014</td>
<td>Dr. Richard O’Reilly</td>
<td>Ethics – Thanks for the “Gift:” Psychiatry and the</td>
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### Dates | Speakers | Presentations
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Feb 13, 2014 | Dr. Arlene MacDougall Mr. Bill Hill | Aboriginal Mental Health: Our Journey
Mar 13, 2014 | Dr. Sandra Ulch | Stress, Distress and Dermatological Disease
Apr 10, 2014 | Dr. Jitender Sareen | Suicide Risk Assessment
May 8, 2014 | Dr. Elizabeth Finger | Frontotemporal Dementias: Update on Diagnosis and Treatment
June 12, 2014 | Dr. Niva Piran | Developmental Theory of Embodiment: Research Program and Clinical Implications

**Learning After Five**

*Learning After Five* is a self-approved group learning activity (Section 1) as defined by the Maintenance of Certification Program of The Royal College of Physicians and Surgeons of Canada. (2.0 credits)

*Learning After Five* events provide a forum for physicians, students, and allied health to engage in interactive learning through small group activities. The *Learning After Five* program is an evening event that generally takes place on the third Tuesday of each month at the Best Western Lamplighter Inn and Conference Centre.

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<th>Dates</th>
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<tr>
<td>Oct 15, 2013</td>
<td>Dr. Glenda MacQueen</td>
<td>The Interface between Mood and Anxiety Disorders: Unlocking the Doors</td>
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<td>Oct 24, 2013</td>
<td>Dr. Michael Rosenbluth</td>
<td>Managing the Care of Complex Borderline Personality Disorder Patients</td>
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<td>Oct 29, 2013</td>
<td>Dr. Allan Young</td>
<td>Neurocognitive Dysfunction in Bipolar Depression and its Management</td>
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<td>Nov 19, 2013</td>
<td>Dr. Christoph Correll</td>
<td>Controversies and Advances in the Management of Mood Disorders</td>
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<tr>
<td>Dec 10, 2013</td>
<td>Dr. Akshya Vasudev</td>
<td>The Art and Science of Medicating the Elderly</td>
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<td>Jan 21, 2014</td>
<td>Dr. Valerie Kaye</td>
<td>Eating Disorders Program at LHSC: An Experiential Journey</td>
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<tr>
<td>Feb 25, 2014</td>
<td>Dr. Ayal Schaffer</td>
<td>A Discussion of Shifting Perspectives on Diagnosis and Management of Major Mental Illness</td>
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<tr>
<td>Mar 25, 2014</td>
<td>Dr. Ross Norman</td>
<td>Historical Perspectives on Obsessive Compulsive Phenomena</td>
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<td>Apr 15, 2014</td>
<td>Dr. Carol McDaniel</td>
<td>Inside the Mind of a Psychopath</td>
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<td>May 20, 2014</td>
<td>Dr. Amer Burhan</td>
<td>The Utility of Brain Imaging in Neuropsychiatry Clinic</td>
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<tr>
<td>June 26, 2014</td>
<td>Dr. Fiore Lalla</td>
<td>Quality Improvement Initiatives Related to LAIs</td>
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**Weekly Coordinated CPD Program**
The *Coordinated CPD Program* provides an educational opportunity for healthcare professionals at Regional Mental Health Care London, Southwest Centre for Forensic Health Care and the Mental Health Care Program at Victoria Hospital, London Health Sciences Centre.

The *Coordinated CPD Program* is a self-approved group learning activity (Section 1) as defined by the Maintenance of Certification Program of The Royal College of Physicians and Surgeons of Canada.

The weekly presentations continued to be hosted from the Wickware Amphitheatre at RMHC London on Mondays from 12:00–1:00 pm. Televideo-conferencing delivered the program to our participating sites that included assertive community treatment teams located in Strathroy, Woodstock and St. Thomas. A total of 31 presentations featured a diverse range of topics related to mental health and a variety of speakers that showcased the expertise of the psychiatry residents, staff and other invited specialists.

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<tr>
<th>Date</th>
<th>Speaker(s)</th>
<th>Title of Presentation</th>
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<tr>
<td>Sept 9, 2013</td>
<td>Dr. Marnin Heisel</td>
<td>Translating Clinical Research Findings on Older Adult Suicide Prevention for Frontline Care Providers: Evaluating the Canadian Coalition for Seniors’ Mental Health Late-Life Suicide Prevention Knowledge Translation Project</td>
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<td>Sept 19, 2013*</td>
<td>Dr. Allen Frances</td>
<td>The Joys and Perils of Psychiatric Diagnosis *Cerenzia Research Lecture, Annual Research Day (Thurs)</td>
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<tr>
<td>Sept 23, 2013</td>
<td>Dr. Volker Hocke</td>
<td>Residency Training in Psychiatry - Current Status &amp; Future Directions</td>
</tr>
<tr>
<td>Sept 30, 2013</td>
<td>Dr. Arany Shanmugalingam</td>
<td>OMG: Spirituality, Religion and Psychiatry</td>
</tr>
<tr>
<td>Oct 7, 2013</td>
<td>Dr. Varinder Dua</td>
<td>Maximizing MOC Credits: Practical Tools &amp; Tips <em>(physicians only session)</em></td>
</tr>
<tr>
<td>Oct 21, 2013</td>
<td>Dr. Paul Links, Ms. Leanna Reiss, Dr. Ravi Shah</td>
<td>Southwestern Ontario Suicide Inquiry for Quality Improvement</td>
</tr>
<tr>
<td>Oct 28, 2013</td>
<td>Dr. Mark Reddington</td>
<td>Fetal Alcohol Spectrum Disorder in the Adult</td>
</tr>
<tr>
<td>Nov 4, 2013</td>
<td>Dr. Ofer Agid</td>
<td>Pharmacotherapy of Refractory Schizophrenia</td>
</tr>
<tr>
<td>Nov 18, 2013</td>
<td>Dr. Diane Eastwood, Ms. Alison Lebold, Ms. Valerie Monney, Ms. Kathi Stilson, Dr. Priya Subramanian</td>
<td>Exploring Recovery-Oriented Care: The Role of Psychosocial Rehabilitation (PSR)</td>
</tr>
<tr>
<td>Dec 2, 2013</td>
<td>Dr. Stan VanUum</td>
<td>Drug-Induced Hyperprolactinemia</td>
</tr>
<tr>
<td>Dec 9, 2013</td>
<td>Dr. Jon Tan</td>
<td>The Principles of Adult Learning and Modern Medical Education</td>
</tr>
<tr>
<td>Dec 16, 2013</td>
<td>Dr. Maryna Mammoliti</td>
<td>Social Media and Psychiatry</td>
</tr>
<tr>
<td>Jan 6, 2014</td>
<td>Dr. Brian Misiaszek</td>
<td>Hoarding and Diogenes Syndrome</td>
</tr>
<tr>
<td>Jan 13, 2014</td>
<td>Dr. Rachana Bodani</td>
<td>Psychiatry and Oncology: <em>A review of mental health in the cancer population</em></td>
</tr>
<tr>
<td>Jan 20, 2014</td>
<td>Dr. Donald Farquhar</td>
<td>The Relationship Between Mental Health, Mental Illness and Chronic Physical Conditions</td>
</tr>
<tr>
<td>Date</td>
<td>Speaker(s)</td>
<td>Title of Presentation</td>
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<tr>
<td>Jan 27, 2014</td>
<td>Dr. Paul Frewen</td>
<td>Neurophenomenology of Trauma-related Disorders: Distinguishing dissociation from general distress</td>
</tr>
<tr>
<td>Feb 3, 2014</td>
<td>Dr. Valerie Kaye</td>
<td>Eating Disorders: An experiential journey</td>
</tr>
<tr>
<td>Feb 10, 2014</td>
<td>Ms. Marleen VanLaethem, Ms. Kathy White</td>
<td>What’s Sex Got To Do With It?  Issues of intimacy and sexuality regarding our patients</td>
</tr>
<tr>
<td>Feb 24, 2014</td>
<td>Dr. Cheryl Willsie</td>
<td>CNS-I: Investigating Psychiatric Manifestations of Central Nervous System Lesions</td>
</tr>
<tr>
<td>Mar 3, 2014</td>
<td>Dr. Alan Eppel</td>
<td>Medication Treatment of Affective Dysregulation in Bipolar Disorder and Borderline Personality Disorder: Swimming against the current of conventional opinion</td>
</tr>
<tr>
<td>Mar 17, 2014</td>
<td>Dr. Lisa VanBussel, Mr. T. Ross, Ms. K. Michael, Ms. L. Hillier</td>
<td>Clinical Fall Monitoring in Inpatient Geriatric Psychiatry</td>
</tr>
<tr>
<td>Mar 24, 2014</td>
<td>Dr. Vadim Beletsky</td>
<td>Split Encapsulated Self</td>
</tr>
<tr>
<td>Mar 31, 2014</td>
<td>Dr. JC Lai</td>
<td>Understanding Autism Spectrum Disorders</td>
</tr>
<tr>
<td>Apr 7, 2014</td>
<td>Dr. Mohamad Elfakhani</td>
<td>A Look at Peer Support: Moving forward through shared experience</td>
</tr>
<tr>
<td>Apr 14, 2014</td>
<td>Dr. Elizabeth Osuch</td>
<td>The Challenge of Diagnosis in Mood Disorders: Where we are and where we're going (or How to work in the unknown)</td>
</tr>
<tr>
<td>Apr 28, 2014</td>
<td>Dr. Pierre Blier</td>
<td>Pharmacological Basis for the Therapeutic Action of Atypicals in Major Depressive Disorders</td>
</tr>
<tr>
<td>May 5, 2014</td>
<td>Dr. James Ross</td>
<td>Clinical Teaching: Helping learners construct new knowledge</td>
</tr>
<tr>
<td>May 14, 2014*</td>
<td>Dr. David Goldbloom</td>
<td>Mental Health Commission of Canada: Research in action</td>
</tr>
<tr>
<td>May 26, 2014</td>
<td>Dr. Robert Zipursky</td>
<td>The Myth of Schizophrenia as a Progressive Brain Disorder</td>
</tr>
<tr>
<td>June 2, 2014</td>
<td>Dr. Carole Orchard</td>
<td>Why should I invest my time in Interprofessional Collaborative Teamwork? What’s really in it for me?</td>
</tr>
</tbody>
</table>

**Third Annual Mental Health Symposium – “Anxiety Disorders: Emerging Trends in Pathophysiology and Management”**

A one-day symposium featuring experts in the field of anxiety disorders was held on October 25, 2013. The day was a success and well attended with 120 participants and featured keynote presentations by Dr. Randi McCabe, “Emotional Intelligence in Anxiety Disorders;” and by Dr. Randolph Neese, “Anxiety Disorders: An Evolutionary Perspective and its Clinical Relevance.” Participants had the opportunity to attend two of the seven workshops offered:
- The Burden of Triple Diagnosis: Anxiety, Mood Disorders and Substance Use Disorders
- Transdiagnostic Treatments for Anxiety Disorders
• Anxiety Disorders: Navigating the Conundrums around Disability Claims and Insurance Companies
• Part 1 - Treatment Resistance in Anxiety Disorders
• Part 2 - Applying Motivational Enhancement Strategies
• Relationships Between Anxiety and Physical Illness: Implications for Assessment and Treatment
• Treatment Resistant Anxiety Disorders: Obstacles in Psychopharmacology

Positive feedback and comments assist with development of future symposia.

2013-2014 CPD Awards
Best CPD Presentation by Faculty - Dr. Verinder Sharma
Best CPD Presentation by Resident - Dr. Lauren Mussen

Criteria for Awards: Highest overall average peer and audience evaluations from live site. This is based on the Likert scale based evaluation tools that cover the Guidelines and principles of both adult and postgraduate education and focus on the following areas:

- Overall Presentation Effectiveness
- Content Relevance
- Used Effective Teaching Methods
- Met the Stated Learning Objectives
- Enhanced my Knowledge
- Satisfied my Expectations
- Conveyed Info that Applied to my Practice
- Allocated at least 25% of the Time for Interaction
- Free from Commercial or other Bias

Upcoming Events: Fourth Annual Mental Health Symposium
We are very excited to announce on September 26, 2014, we will host our Fourth Annual Mental Health symposium on “Best Practices in CTOs”. Planning for this initiative began in January 2014.

The symposium is open to all psychiatrists, physicians and allied health members. The overall conference goal is to formulate and understand optimal use of CTOs in the severe and persistent mental illness population.

The full day program will feature:
Plenary Sessions:
Professor John Dawson – “Rationale for CTOs and How They Are Used Globally”

London Research:
Dr. Julie Richard – “CTO Use in Early Psychosis”
Cathy Plyley – “CTO Use in ACT Teams”

Workshops:
• Why CTOs are A Better Option to Jail – Justice Edward F. Ormston
• CTOs: Staying on the Right Side of the CCB – Dr. Sandra Northcott
• CTOs: Legislative and Policy Issues in Ontario – Anne Bowby
• CTOs and the Role of the CTO Coordinator – Joe Skufca and Cathy Plyley:
• What Interventions Can be Required Under a CTO: Can a Specific Residence be Specified – Professor John Dawson and Dr. Richard O’Reilly
• A Fictional Case Illustrating Problems and Potential Solutions - Dr. Varinder Dua
• Using CTOs in the Early Stages of Psychosis - Dr. Raj Harricharan

Position & Panel:
Professor John Dawson and Dr. Richard O’Reilly – “Clinicians often Fail to Use CTOs when they would Greatly Help People”

For Registration Details:
http://www.schulich.uwo.ca/psychiatry/education/cpd/other_accredited_events.html

The CPD programs rely on the organization and skills of our strong support staff and before closing, I would like to extend thanks to Bela Franze and Faye Slote with the Department, and Joanne Chapman with St. Joseph’s Regional Mental Health Care. And lastly, with thanks to both Dr. Paul Links and Ms. Deborah Lucas for their guidance and support.

Continuing Professional Development in the Department of Psychiatry is committed to fostering collaborative learning and incorporating inter-professional activities.

Dr. Varinder Dua
Director, CPD
RESEARCH REPORT

Peer-Reviewed Journal Publications


Guaiana, G., Chiodo, D., Gupta, S., Davies, S.J., & Koesters, M. Agomelatine Versus Other Antidepressants for Depression. *Cochrane Database of Systematic Reviews.*


Richardson, J.D., Contractor, A., Armour, C., St Cyr, K.C., Elhai, J.D., & Sareen, J. (In Press). Predictors of Long-Term Treatment Outcome in Combat and Peacekeeping Veterans with Military-Related PTSD. *Journal of Clinical Psychiatry*.


Youash, S, Xie, B, & Sharma, V. (2013). Influence of Health Information Levels on Postpartum Depression. Archives of Women’s Mental Health, 16(6), 489-98.

Books and Book Chapters


Bluhm, R., & Lanius, R.A. (2014). Importance of the Developmental Perspective in


**Manuals and Guidelines**


**Other Publications**


**Conference Presentations, Workshops, Invited Lectures & Abstracts**


Arbeau, K., Stewart, S. L., Reif, K., & Theall, L. (2014, June 19-22). *Collaborative Action Plans (CAPs): Building effective capacity through the interRAI Youth Justice Custodial Facilities (YJCF)*. Poster Presented at the International Association for Forensic Mental Health Services, Toronto, ON.

Long-term Outcomes of Bilateral Salpingo-Oophorectomy on Memory. Presented at the 16th Biennial World Congress of Gynecological Endocrinology, Florence, Italy.

Discharge of Adolescents in Adult Mental Health Beds in ON Against Medical Advice. Presented at the 2013 Canadian interRAI Conference, Ottawa, ON.

Prevalence and Correlates of Adolescents’ Insight into Mental Illness: Findings from the ON Mental Health Reporting System. Presented at the 64th Annual Meeting of the Canadian Psychiatric Association, The Westin Harbour Castle, Toronto, ON.

The Role of Metabolic and Structural MRI in the Early Diagnosis of Alzheimer’s Disease. Presented at the Neuropsychiatry Group Seminar, Western University. London, ON.

Prostate Imaging with Sodium MRI. Invited lecture at the CIHR Team Grant and OICR Smarter Imaging Program (SIP) – Prostate Workshop. London, ON.

Alzheimer Disease: Can Alzheimer disease be detected by MRI before subjects begin to experience cognitive decline? Invited lecture at the Western Senior Alumni Program, Western University. London, ON.

Management of Diabetes on a Palliative Care Unit: A Retrospective Observational Study. Poster presented at Hospice Palliative Care Ontario 2014 Annual Conference, Toronto, ON.

Investigating the Cross-Sectional And Longitudinal Associations Between Cognitive Functioning and Suicide Ideation Among Community-Residing Older Adults. Poster presented at London Health Research Day 2014, London, ON.

The Research Journey: Understanding bladder management on a palliative care unit from the nursing perspective. Poster presented at the Faculty of Health Science Research Day, London, ON.

Testing a Framework for Comprehensive Evaluation of Outcomes for Patients in Community Mental Health Services: Final results of a study of
assertive community treatment. Presented at the Canadian Psychiatry Association Annual Conference, Vancouver, BC.


Collins, K.A. (2014, May). *Cognitive Behaviour Therapy and Interpersonal Therapy with Children and Adolescents*. Presented to Psychiatry Residents (PGH 2&3), Schulich School of Medicine, Western University, London, ON.


Dozois, D.J.A. (2013, April). *Cognitive Behavioural Therapy for Anxiety Disorders*. Workshop presented to the Department of Psychology, Novi Sad University, Novi Sad, Serbia.

Dozois, D.J.A. (2013, April). *Practice-Based Evidence*. Presented to the Department of Psychology, Novi Sad University, Novi Sad, Serbia.


Eynan, R. (2013, November 30). *Core Competencies in Suicide Risk Assessment and Management: Implications for training in lower and middle income Countries (LMICs)*. Presented at the 7th SAARC Psychiatric Federation International Conference, Mysore, India.


Fisman, S. (2013, September 6). *Mentorship Perspective-Concrete Solutions, Future Leaders of Western (FLOW)*. Presented at the Schulich School of Medicine & Dentistry, Department of Medicine Continuing Medical Education Program. London, ON.


Reorienting the Health System to What Truly Matters – Values of Health Care, London, ON.


Heisel, M.J. (September 11, 2013). *Using the Geriatric Suicide Ideation Scale-Screen (GSIS-Screen) to Enhance the Detection of Suicide Risk and Provision of Sensitive Care with Older Adults at-risk for Suicide.* Invited workshop for Specialized Geriatric Services Clinicians, Guelph, ON.

Heisel, M.J. (2013, November 4). *Suicide Risk Assessment and Intervention with Older Adults: enhancing sensitive care during difficult life transitions.* Invited workshop to the Canadian Hearing Society In-Service for the Hearing Care Counseling Program, Mississauga, ON.

Heisel, M.J. (2013, November 7). *Enhancing Psychological Resiliency and Well-Being in Later Life: The role of meaning in life.* Invited presentation The University of Western Ontario Schulich School of Medicine and Dentistry Mini Medical School 2013, London, ON.


Heisel, M.J. (2014, January 23). Interpersonal Psychotherapy (IPT) with Older Adults. Guest lecture to PGY4 residents enrolled in an IPT training course, Department of Psychiatry, Schulich School of Medicine and Dentistry, UWO, London, ON.


Heisel, M.J. (2014, June 17). A Brief Update on Research in the Department of Psychiatry at Western. Invited presentation at the Lawson Mental Health Annual Retreat, London, ON.


Heisel, M.J. (2014, July 18). Suicide Prevention among Older Adults: Enhancing Sensitive Risk Assessment and Care Provision with at-Risk Individuals. Invited workshop presented at the Suicide Prevention Awareness Conference, Hosted by the Horizon Cross Cultural Center and the Jacquelyn Bogue Foundation, Orange County, CA.


Heisel, M.J., Kaplan, M.S., Cukrowicz, K., & Erlangsen, A. (2014, April 9). Suicide Prevention Among Older Adults: From risk to resiliency and from theory to practice. Pre-conference workshop presented at “Never Alone,” the 47th American Association of Suicidology Annual Conference, Los Angeles, CA.


Osuch, E.A. (2014, April 14). The Challenges of Diagnosis in Mood Disorders: Where we are and where we’re going (or ‘How to work in the unknown’). Invited Speaker, Continuing Professional Development Program, London Health Science Centre, London, ON.

Osuch, E.A. (2014, May 2). The First Episode Mood and Anxiety Program as a Model of Mental Health Care Delivery for Youth. Invited Lecture, Institute Mental Health Research, Ottawa, ON.


Purcell, B. (2013, October 15). Handling Challenging Behaviours in Long-Term Care. Presented at Mount Hope Center for Long Term Care, In-Service Training, London, ON.

Purcell, B. (2014, January 22). Screening Tools in Geriatric Mental Health Care. Seminar presented to the Psychology Residents of Western University, in the London Clinical Psychology Residency Program, Victoria Hospital, London, ON.


Reiss, J.P. (2014, April 10). Moderator, Opening and Closing Comments for Suicide Risk Assessment. Presented at the University of Western Ontario, Schulich School of Medicine, Department of Psychiatry, Continuing Education Rounds, London, ON.


Shrivastava, A. (2013, February 27). Healthy Mind Healthy Life. Invited Lecture at the JSS University, Maysore, India.

Shrivastava, A. (2013, February 27). Identification of Suicide Risk. Invited Lecture at the JSS University, Maysore, India.


Shrivastava, A. (2013, August). Brain Mind and Behavior. Poster presented at the University, as visiting Professor, Buenos Aires, Argentina.


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Steele, M. (2014, May 22). *How to Hold an Effective CDP Meeting.* Presented at the Schulich School of Medicine and Dentistry, Western University, London, ON.


Steele, M., & Stretch, N. (2014, March 27). *Youth Suicide and Self-Harm Behaviour: Your role as a primary care physician.* Presented at the Society of Rural Physicians of Canada 22nd Annual Rural And Remote Medicine Course, Banff, AB.


Summerhurst, C., Wammes, M., Wrath, A., Vingilis, E., & Osuch, E.A. (2013, November 28). Treatment Effectiveness of an Early identification and Intervention Program for Mood and Anxiety Disorders in Late Adolescents and Young Adults. Poster presented at the Innovation Fund Showcase, Toronto, ON.


Vandevooren, J., & Beach, C. (2014, March 2-5). *Southwest Centre for Forensic Mental Health Care: The good, the glam, and the glitches.* Presented at the Canadian Academy of Psychiatry and the Law, Lake Louise, AB.


Williamson, P.C. (2014). *Do the Neuronal Pathways that Underlie Neuropsychiatric Disorders Mirror Unique Human Capabilities?* Presented at the Biology-Philosophy Evolution Discussion Group, Department of Philosophy, Western University, London, ON.


**External Grant Funding**


Bartha, R. (Principal Investigator), Rajakumar, N., & Borrie, M.J. (Co-Investigators). *Predicting Progression to Dementia in the ADNI Cohort*. Canadian Institutes of Health Research, Catalyst Grant. $99,576; 2012-2016.


Calhoun, V. (Principal Investigator), Liu, J., Osuch, E.A., Plis, S., Adali, T., & Salakhutdinov, R. (Co-Investigators). *Identifying Multi-Task/Multimodal Brain Imaging*


First Nations Health Authority (Principal Investigator), Caron, N., & Wylie, L. (Co-Investigators). *Aboriginal Cancer Care, CIHR Planning Grants*. Canadian Institutes for Health Research. $25,000; 2013.


Health Engagement Network (MHEN) – Connecting Clients with their Health Team. Canada health Infoway, (75%), TELUS and Lawson Health Research Institute (25%). $1,797,226; 2011-2014.

Implementing the Transitional Discharge Model TDM ARTIC Project. Council of Academic Hospital of ON. (CAHO), Adopting Research to Improve Care Program (ARTIC). $1,400,046; 2013-2015.


Hampson, E. (Principal Investigator). Estrogen in the Prefrontal Cortex: Implications for cognitive functioning and mood in women. Canadian Institutes of Health Research. $500,000; 2010-2015.

Heisel, M.J. (Principal Investigator). Preventing Suicide Among Older Adults: Enhancing resiliency, reducing risk, and translating knowledge to practice. Ontario Ministry of Research and Innovation (ON). $190,000; 2009-2013.


Lanius, R.A., (Principal Investigator), Van der Kolk, B. (Co- Investigator). Functional Neuroanatomy of Bilateral Eye Movement During Trauma. EMDR


Prasad, C. (Principal Investigator), Vasudev, A., Potter, B., Mantulak, A., Napier, M., & Prasad, N. (Co-Investigators). *Psychosocial Aspects of Inborn Errors of Metabolism: A pilot project*. Department of Paediatrics Internal Research Fund, Western University. $6,000; 2012-2013


Tibbo, P. (Principal Investigator), Bartha, R., Bernier, D., Beyea, S., Good, D., McAllindon, H., Milliken, H., & Song, X. (Co-Investigators). *Quantitative Proton
Spectroscopy of White Matter at 4T Tesla in First Episode Psychosis Part II: A clinical study. Canadian Institutes of Health Research, Operating Grant. $186,963; 2010-2013.


Wylie, L. (Principal Investigator). Engaging for Change: Coordinated Strategies for Improving Health Services for Aboriginal Peoples, AMS Phoenix Fellowship. Associated Medical Services, Phoenix Project. $25,000; 2014.


INTERNAL GRANT FUNDING

Bartha, R. (Principal Investigator). *Interaction of Vitamin D and Memantine for Alzheimer Disease Treatment.* The University of Western ON., Schulich Academic Development Awards. $8,400; 2013-2014.


Heisel, M.J. (Principal Investigator). *Evaluating the Measurement Characteristics of the Geriatric Suicide Ideation Scale (GSIS) in an Older Adult Inpatient Sample.* Western University Department of Psychiatry Seed Fund Competition. $5,000; 2008-2014.


Heisel, M.J. (Principal Investigator), Schreier, G., Flett, G.L., Moore, S.L., Norman, R.M.G., Eynan, R., & Links, P.S. (Co-Investigators). *The Development and Validation of the Desire to Hasten Death Scale for Older Adults (DHD-OA).* Lawson Health Research Institute Internal Research Fund Award. $15,000.00; 2013-2015.


Richard, J. (Principal Investigator), O’Reilly, R.L., Corring, D., & Dua, V. (Co-Investigators). *Use and Perceived Effectiveness of Community Treatment Orders for Patients in the Early Phase of Psychosis and for Patients on Assertive Community Treatment Teams*. Department of Psychiatry, Western University. $4,590; 2013-2014.


Ross, J. (Principal Investigator), Watling, C. (Co-Investigator). *UWO Internal Psychiatry Grant*. Psychiatry. $15,000; 2012-present.


Vasudev, A. (Principal Investigator), Shariff, S., Garg, A., & Links, P.S. *Cardiovascular Risk and Mortality in Patients with Late Life Depression: A matched cohort study*. ICES@Western. $45,000; 2013-2015.

Vasudev, A. (Principal Investigator), Shoemaker, K., & Mitchell, D.G.V. (Co-Investigators). *Quantifying the Ventro Medial Prefrontal Cortex (VMPFC) Responsiveness to Parasympathetic Nervous System (PNS) Modifiers in Late Life Depression (LLD)*. Western University Department of Psychiatry Seed Fund Competition. $7,500; 2012-2014.

Vasudev, A. (Principal Investigator), Shoemaker, K., & Mitchell, D.G.V. (Co-Investigators). *Quantifying the Ventro Medial Prefrontal Cortex (VMPFC) Responsiveness to Parasympathetic Nervous System (PNS) Modifiers in Late Life Depression (LLD)*. AMOSO Opportunities Fund, $65,000; 2012-2014.

Vasudev, A. (Principal Investigator), Shoemaker, K., Mitchell, D.G.V. & Willse, C. (Co-Investigators). *Quantifying the Ventro Medial Prefrontal Cortex (VMPFC) Responsiveness to Parasympathetic Nervous System (PNS) Modifiers in Late Life Depression (LLD)*. ADF Small Grant Application, Western University, $7,500; 2012-2014.

Vasudev, K. (Principal Investigator). *Genetic risk factors for Clozapine induced metabolic side effects*. AMOSO Opportunities Fund. $65,000; 2012-2014.


Wylie, L. (Principal Investigator). *Culturally Based Programming to Promote the Emotional, Spiritual, Physician and Mental Health of Indigenous Youth; Western - Strategic Support for CIHR Success*. Research Western. $24,000; 2014.
Industry Funded Grants


Sharma, V., (Principal Investigator) & Varapravan, S. (Co-Investigator). The SPD489-322 Phase 3, Multicenter, Randomized, Double-blind, Parallel-group, Placebo-controlled, Flexible Dose Tritration, Efficacy and Safety Study of SPD489 in Combination with an Antidepressant in the Treatment of Adults with Major Depressive Disorder with Inadequate Response to Prospective Treatment with an Antidepressant. $3,000; 2013.

Contract

MacDougall, A. (Principal Investigator), Delva, N., & Reid, A. (Co-Investigators). The Dalhousie-Northwest Territories Partnership: a longitudinal collaborative partnership to develop mental health and addiction services in the NWT through i) new models of clinical service delivery, ii) training and education, iii) program development and (iv) research and evaluation. Dalhousie-Northwest Territories Partnership. $150,000; August 2013 – March 2015

Media Appearances and Other Knowledge Translation Activities


Heisel, M.J. (Radio Interview) – Canada’s Elderly at High Risk of Suicide, Can’t Afford Mental Health Care: Experts. (January 8, 2013). CBC Radio One.

Heisel, M.J. (Radio Interview) - Canada’s Elderly at High Risk of Suicide, Can’t Afford Mental Health Care: Experts. (January 8, 2013). Radio West.

Heisel, M.J. (Community Presentation) – The Importance of Hope. (May 14, 2013). Presentation at a Townhall Discussion on Assisted Death, Guelph, ON.


Heisel, M.J. (Newspaper Article) – Canada’s Elderly at High Risk of Suicide, Can’t Afford Mental Health Care: Experts. (July 29, 2013). Canadian Press.

Heisel, M.J. (Radio Interview) - Canada’s Elderly at High Risk of Suicide, Can’t Afford Mental Health Care: Experts. (July 30, 2013). The Rick Gibbons Show.


Heisel, M.J. (Radio Interview) - Movember Canada Grant to Test Meaning-Centered Men’s Groups for Men Facing Retirement. (October 25, 2013). Fanshawe College Radio


Osuch, E.A. (Radio Interview) - Neuroimaging About Non-Suicidal Self-Injury and Brain Neurocircuitry. (June 17, 2014). CJBK Radio with Alan Coombs.


Osuch, E.A. (Television Interview) - Neuroimaging About Non-Suicidal Self-Injury and Brain Neurocircuitry. (June 18, 2014). CTV London with Jan Sims.


Purcell, B. (Community Presentation) - Working with Seniors with Mental Health Issues. (June 18, 2014). Presented at the McNay Street Apartments, London, ON.

Technical Reports


**Björkgren, A. Declercq,** et al. interRAI (CAPs) for use with the interRAI Developmental Disability (ChYMH-DD) Assessment Instrument, Research Version 1 Standard Edition. Washington, DC: interRAI.


Department of Psychiatry & Other Annual Award Recipients for the Academic Year 2013-2014

Department Awards
Dr. Jonathan Tan
Dr. Paul Patterson Resident Award
Carissa Peterson
Administrative Staff Award
Suzena Mendes
Administrative Staff Award
Dr. Amer Burhan
Clinical Innovation Award

Undergraduate Education Awards
Dr. Julie Richard
UGE-Clerkship Supervisor of the Year Award
Dr. Mirela Bucur
UGE-Clerkship Supervisor of the Year Award – Rural
Dr. John Villela
UGE-Clerkship Supervisor of the Year Award – Windsor
Dr. Martyn Judson
UGE- Clerkship Seminar Leader of the Year Award

Postgraduate Education Awards
Dr. Craig Stewart
PGE-Junior Resident of the Year Award
Dr. Pat Montaleone
PGE-Senior Resident of the Year Award

CME/CPD Awards
Dr. Lauren Mussen
Best CPD Presentation by a Resident
Dr. Verinder Sharma
Best CME Presentation by Faculty

Division of Child and Adolescent Psychiatry Awards
Dr. Heidi Haensel
Award of Excellence in Postgraduate Teaching
Dr. Rob Nicolson
Award of Excellence in Undergraduate Teaching

Division of Geriatric Psychiatry Awards
Dr. Akshya Vasudev
Excellence in Postgraduate Education
Dr. Grace Sharon Ferreria
Dr. David Harris Award

Division of General Adult Psychiatry
Dr. Volker Hocke
Clinician of the Year

Research
Dr. Rahul Manchanda
Research Award

25 Years of Service with Western University
Dr. Verinder Sharma
Dr. Richard O’Reilly
Ms. Hanna Siemiarczuk

Schulich Excellence in Education Awards for Graduate/Postgraduate, Schulich Educator Awards
Dr. Patricia Hall

Nomination for 2014 Champion of Mental Health Awards
Dr. Richard Owen
Dr. Robbie Campbell
<table>
<thead>
<tr>
<th>Division of Child and Adolescent Psychiatry</th>
<th>Division of Developmental Disabilities</th>
<th>Division of Forensic Psychiatry</th>
<th>Division of General Adult Psychiatry</th>
<th>Division of Geriatric Psychiatry</th>
<th>Division of Neuro-psychiatry</th>
<th>Division of Social &amp; Rural Psychiatry (formerly)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Professor</td>
<td>Associate Prof.</td>
<td>Assistant Prof.</td>
<td>Full Professor</td>
<td>Associate Prof.</td>
<td>Full Professor</td>
<td>Full Professors</td>
</tr>
<tr>
<td>*Fisman, Sandra</td>
<td>*Nicolson, Rob</td>
<td>Loba Gutierrez, George</td>
<td>*Reiss, Jeffrey</td>
<td>*Chiu, Simon</td>
<td>*Williamson, Peter</td>
<td>O’Reilly, Richard</td>
</tr>
<tr>
<td>Steele, Margaret</td>
<td>Rao, Jay</td>
<td></td>
<td>**Links, Paul</td>
<td>Lanius, Ruth</td>
<td></td>
<td>Sharma, Verinder</td>
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<tr>
<td>Associate Prof.</td>
<td></td>
<td></td>
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* = Division Chair  
** = Department Chair/Chief  
9 Full; 30 Associate; 37 Assistant = 76 TOTAL
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<th>Division of Social &amp; Rural Psychiatry (formerly)</th>
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**Total – 116**
Psychiatry Administrative Staff for 2013-2014 Academic Year

Deborah Lucas  Manager, Administration and Finance
Colleen Chryssoulakis  Administrative Assistant to Chair of Department of Psychiatry, Schulich School of Medicine & Dentistry, Western University /Chief of Psychiatry, London Health Sciences Centre and St. Joseph's Health Care London
Debra Martin  Faculty Human Resource Consultant
Bernice James  Financial Officer
Vicki Douvalis  Financial Assistant (part-time)
Melanie VandenBorre  Administrative Assistant, Undergraduate Education
Eva Adams  Program Coordinator, Postgraduate Education
Suzena Mendes  Administrative Assistant, AFP, CME/CPD, and general Department support ; Program Coordinator, Postgraduate Education (secondment)
Carissa Peterson  Administrative Assistant, Postgraduate Education; CME/CPD
Bela Franze  Administrative Assistant, CME/CPD; Division of Geriatric Psychiatry; Division of Adult Psychiatry
Faye Slote  Administrative Assistant, CME/CPD; Division of Child and Adolescent Psychiatry; Division of Forensic Psychiatry
Beth LeCourtois  Administrative Assistant to Chair, Division of Forensic Psychiatry
Hanna Siemiarczuk  Administrator, ECP, SWOMEN
Irene May  Secretary, ECP, SWOMEN (part-time)
Maria Gitta  Coordinator, Developmental Disabilities Division
Betsy Schaefer  Administrative Assistant, Developmental Disabilities Division (part-time)
Sarah O’Flanagan  Administrative Assistant, Research (part-time)
Julia Hamel  Administrative Assistant to Site Chief, Mental Health Care Program, LHSC
Tracey Jansen  Administrative Assistant to Site Chief, RMHC
Tracy Henebry  Administrative Assistant to Chair, Child and Adolescent Psychiatry