# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Message from the Chair/Chief</strong></td>
<td>2</td>
</tr>
<tr>
<td><strong>Division Reports</strong></td>
<td></td>
</tr>
<tr>
<td>Child &amp; Adolescent Psychiatry – Dr. Sandra Fisman</td>
<td>4</td>
</tr>
<tr>
<td>Developmental Disabilities - Dr. Rob Nicolson</td>
<td>12</td>
</tr>
<tr>
<td>Forensic Psychiatry - Dr. Craig Beach</td>
<td>14</td>
</tr>
<tr>
<td>General Adult Psychiatry – Dr. Jeffrey Reiss</td>
<td>18</td>
</tr>
<tr>
<td>Geriatric Psychiatry – Dr. Lisa Van Bussel</td>
<td>27</td>
</tr>
<tr>
<td>Neuropsychiatry – Dr. Peter Williamson</td>
<td>32</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
</tr>
<tr>
<td>Undergraduate – Dr. Sandra Northcott</td>
<td>44</td>
</tr>
<tr>
<td>Postgraduate - Dr. Volker Hocke</td>
<td>45</td>
</tr>
<tr>
<td>Continuing Medical Education and Continuing Professional Development - Drs. Varinda Dua and Joel Lamoure</td>
<td>47</td>
</tr>
<tr>
<td><strong>Awards</strong></td>
<td>54</td>
</tr>
<tr>
<td><strong>Administrative Staff</strong></td>
<td>56</td>
</tr>
<tr>
<td><strong>Faculty</strong></td>
<td>57</td>
</tr>
<tr>
<td><strong>Research</strong></td>
<td>60</td>
</tr>
</tbody>
</table>
Message from the Chair/Chief  

Dr. Paul Links

Dear Colleagues,

The past year has brought about many changes to our Department and to the Schulich School of Medicine and Dentistry. These changes will provide better accountability and transparency to our operations and in the long run will ensure better sustainability of our operations during times of budgetary restraint. Within our Department, the Tithe Working Group (TWG) was given the mandate to examine models and approaches for the departmental tithe to ensure that we sustain and grow our current academic activity. In the course of its work, the TWG solicited opinions and information from the Chief Operating Officer of the Schulich School of Medicine, as well as receiving information on the tithing arrangements from the Departments of Surgery, Medicine, CNS, Obs-Gyn, Family Medicine, and Pathology. Subsequent to further adjustments made at the Finance Management Committee and Executive Committee, the recommendations of the TWG were presented at our June 17, 2013 Department Meeting. One of the core recommendations of the TWG was to annually review the tithe rate by the Chair, Department Executive and Finance Management Committee. This closer monitoring of the tithe will ensure that we sustain our Department’s academic activities while having the lowest possible impact to the tithe model.

The Schulich School of Medicine and Dentistry (SSMD) also is reviewing their budgetary process. The SSMD is moving to Activity Based Budgeting and a new funding allocation model. Several guiding principles were adopted to guide the new budget model including a commitment to make the budget process more transparent and accountable and to link budget allocations to agreed-upon deliverables related to teaching, research and administration. These changes are to begin in 2014 and will be implemented over the next two to three years. The transition period will assist those departments that receive decreased resources with the recalibration of the allocations to departments. Although the final allocations will not be known to May 2014, we anticipate that our Department will receive some reduction in our allocations with the new Activity Based Budgeting. We will have to adjust to these changes over the next two to three years. In addition going forward, we have the opportunity to maximize the allocation for our Department. This can be achieved by ensuring that our data related to our education and research activities are being fully captured and reported. For education, One45 is the database that is used across all departments in Schulich to capture the medical training days and the number of teaching hours. For research, the information on publications and grants will be pulled primarily from Acuity Star and therefore it is imperative that this information is well maintained, up to date and accurate. However in addition to the data is the work; each full-time clinical academic has a responsibility to participate in education and/or research and it is important that everyone contributes to these two areas fully. Enhanced participation will drive two of our three stated strategic objectives and will allow us to benefit as much as possible from the funding allocation available to us.

In spite of facing funding challenges both in terms of the hospital budgets and from the University, I am pleased to say that we have been able to acquire two new faculty members that will significantly foster the expansion of our mental health services research. As you know, the new Schulich Interfaculty Program in Public Health program has begun. The students are on campus, their new building is in full operation and one of the new faculty members in the Masters of Public Health Program (MPH) has joined the Department of Psychiatry as a basic
science member of the Department. Dr. Lloy Wylie has taken the Health Care Management position with the MPH program. Previously Dr. Wylie was the Acting Director of Policy and Planning for the First Nations Health Authority in BC. She completed her Doctor of Philosophy, Interdisciplinary Studies (School of Population and Public Health, Nursing and Political Science) University of British Columbia, Vancouver, BC, 2013. Dr. Wylie’s 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. Dr. Arlene MacDougall has joined the Department as a full time member and will be fulfilling the role as a clinician researcher with the Department. Dr. MacDougall completed her residency psychiatry program with the Department of Psychiatry & Behavioural Neurosciences at McMaster University and she also completed the Clinician Investigator Program, Royal College of Physicians and Surgeons of Canada during her training program. Before joining us, Dr. MacDougall completed a one-year Joint-Fellowship in Global Psychiatry and First Episode Psychosis with the Department of Psychiatry at Dalhousie University. Dr. MacDougall is working with the PEPP program for two days a week. In addition, she is pursuing her research interests in first episode psychosis, global mental health and mental health services development with the Northwest Territories.

The Strategic Planning for the Department of Psychiatry that started with our retreat on Friday, June 22, 2012 at the Lamplighter Inn in London is moving ahead as planned.

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 Work Group on Enhancing Community Collaboration. This work group has developed a proposal for a Consortium Model which would create the infrastructure needed to attract and maintain psychiatrists in community collaboration and will provide evaluation of this model of practice delivery. The model provides a coordinating office for the community collaborations; will develop procedures and set standards needed for effective community collaboration; will provide the infrastructure needed for the community collaborations and will recruit psychiatrists for participation in the Consortium. An initial business plan is being developed for the Consortium Model and we are investigating opportunities for pilot funding to launch this model of care.

Dr. J. Reiss is leading the Strategic Working Group on Being a Leader in Education and Distance Education. This working group is pursuing a plan to develop a CaRMS matched residency program located in Windsor. The target is to develop an application for the Royal College by the end of 2014 and to initiate the program by July 2015. The working group met with Windsor faculty in October 2013 and is also engaging the SWOMEN sites to participate in this development. 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 Work 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. The focus groups have involved 20-25 members of the faculty. The focus groups are identifying issues related to setting priorities for research in the Department, improving integration between clinical services and our research and revamping the Research Interest Group Rounds.

With our future in mind, the Department of Psychiatry and the Lawson Health Research Institute have partnered to support an External Consultant on Initiatives in Psychopharmacology. The overall aim of this proposal was to support an external expert academic psychiatrist, Dr. Sid Kennedy, Professor of Psychiatry, University of Toronto, to advise the Chair and Executive Committee, Department of Psychiatry and Dr. David Hill, the Scientific Director, Lawson Health Research Institute on how to develop a program of research on psychopharmacology. Dr. Kennedy will advise us about how to harness the opportunities (new research space, existing Department strengths, the Centre for Clinical Investigation & Therapeutics, etc.) within the Department and the Lawson Health Research Institute and how to carry out this research with the most appropriate safeguards and transparencies. In addition, he will provide input on how to interact with other resources and opportunities at Schulich School of Medicine and Dentistry and The University of Western Ontario. Dr. Kennedy made his first visit to the Department on Friday November 15, 2013 and he will be returning for a second time on Friday February 14, 2014. We look forward to receiving his expert advice about how to increase our impact in advancing psychopharmacologic management and other interventions for our major psychiatric disorders.

In closing, I want to thank the Department Executive Committee, the Department Advisory Committee, Deborah Lucas, Manager – Administration & 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.

Division of Child and Adolescent Psychiatry

Dr. Sandra Fisman, Chair

With full recognition of the field of Child and Adolescent Psychiatry as a psychiatry subspecialty by the Royal College of Physicians and Surgeons of Canada, the field is moving forward with great momentum. This progress has resulted from the appreciation that a separate body of knowledge and a different skill set and level of expertise are required to practice as a child and adolescent subspecialist. Child and adolescent subspecialists will now require two years of training in their PGY5 and 6 (or 6 and 7) years in an accredited program and success with the Royal College Subspecialty examination to practise in the field. A window will exist until 2017 for current practitioners in the field who have the Specialty Examination in Psychiatry to apply to the Royal College Credentials Committee for permission to write the subspecialty examination through a Practice Eligibility Route (PER). The first subspecialty examination will be held in the 2013/14 academic year (September 26, 2013) and more than 300 candidates are registered to sit the examination. Our Division of Child and Adolescent Psychiatry is dedicated to the new subspecialty process both for our faculty and trainees. Subspecialty training and a focus on a strengthened research agenda have been central themes for us over this past academic year in addition to very active continuing professional development activities and attention to the
undergraduate medical education program. We also continue to take pride in the
interprofessional composition of our Division and all of its activities.

In terms of our Division leadership over this past academic year, I became Division Chair in
February 2013 following a selection process chaired by Dr. Paul Links. I appreciate the
confidence that the selection committee have placed in my leadership at this important stage in
the field development. It has been my pleasure to fully return to the world of child and
adolescent mental health care and to re-experience the joy and reward in working with children,
youth, and their families, and working and collaborating with passionately devoted colleagues in
the academic Division, as well as with the community network of service providers for children
and youth.

Dr. Patricia Hall assumed the role of Program Director for Postgraduate Education in Child and
Adolescent Psychiatry at the start of the academic year. She chairs the Resident Training
Committee for Child and Adolescent Subspecialty training, and she coordinates the separate
core rotation in child and adolescent for our PGY3 trainees. Dr. Hall reports that the PGY3
residents participated in six months training in child and adolescent psychiatry. During the six
block rotation, residents spent three blocks in an inpatient setting and three blocks in an
ambulatory setting. Residents also completed two weeks of developmental disabilities clinical
training, family therapy training, one telepsychiatry consultation and one STACER during these
six months. Stephanie Rabenstein has been the coordinator of resident family therapy training
since February 2013. Training is a collaborative between the Child and Adolescent Mental
Health Program at LHSC and Vanier. CPRI is also providing family therapy supervision. A goal
for the program will be to shift it to more focus on family therapy process or models based on
that offered at University of Pennsylvania, developed by Dr. Ellen Burman, with a vision to have
a continuous experience throughout the core residency training years. Specifically, this model
will enable trainees to work with a family from supervised assessment to therapy termination.

Learning objectives were reviewed and updated for the academic year in preparation for the
Royal College accreditation of the Psychiatry Program which took place in October 2012. The
curriculum was reviewed for the PGY3 year, and with feedback from residents the number of
child and adolescent core module lectures was increased to 25 lecturers. Child and adolescent
psychiatry is also offered in the PGY1 curriculum. Clinically, PGY1 residents all participated in
one month clinical rotations on the inpatient unit at London Health Sciences, Child and
Adolescent Mental Health Care Program.

With the recognition of the important role of the primary care physician as a front line provider
for child and adolescent mental health, we are experiencing a welcome increase in the number
of family medicine resident requests for electives in child and adolescent psychiatry. In addition,
with the strong liaison between pediatrics and child and adolescent mental health (including
adolescent eating disorders), pediatric trainees are required to do child and adolescent
psychiatry electives. This will expand with the development of a community pediatric fellowship
in the next academic year. Dr. Sohail Makhdoom has coordinated the pediatric resident
electives.

The Division of Child and Adolescent Psychiatry Resident Rounds are held every third Thursday
between the months of September and May, and residents are also invited to participate and
attend Division Complex Case Rounds and Journal Club each held alternate months.
During the 2012-2013 year the Resident Training Committee (RTC) for Child and Adolescent Psychiatry met every six weeks. The RTC reviewed applications and interviewed one candidate for the July 2013 start. We were able to recruit Dr. Ray Egan and worked with the Postgraduate Education Office at Schulich to secure funding for Dr. Egan. Dr. Egan will start as a PGY6 on July 1, 2013. The practice eligibility route closes for PGY4 residents beginning the 2013/14 academic year, and therefore, the RTC has spent time anticipating and preparing for an expected increase in applications for the September 2013 deadline. The RTC has developed standardized interviewing and file reviewing criteria specifically for the subspecialty. Dr. Hall and Dr. Joy Abramson PGY3 participated in the first CAP COPE meeting in Montreal in September 2013. The meeting focused on increasing the number of accredited programs across the country. The CAP COPE is also planning to try and coordinate the application and interview process across the country. We remain excited and enthusiastic about our leading role as a desirable Canadian Child and Adolescent Subspecialty accredited training site.

Dr. Ben Loveday continues to coordinate the clerkship selectives in child and adolescent psychiatry. For the past two years, the Division has been offering senior medical students the opportunity to spend two weeks during their clerkship 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 interprofessional case conferences or treatment planning sessions. Students are also encouraged to give case presentations to the interprofessional 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, and this is a credit to the very enthusiastic physicians and interprofessional staff within the Division. Our services hosted 40 medical students during the 2011-2012 academic year, and 45 students during the 2012-2013 year, representing a notable increase.

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. Ajit Ninan continues to coordinate fourth year electives in child and adolescent Psychiatry. The 2012-2013 academic year demonstrated a continued interest and enthusiasm from medical students seeking elective experiences in child and adolescent psychiatry. In total, the Division of Child and Adolescent Psychiatry provided elective experiences to seven medical students. Three of the students were from Western University and four were visiting students. Our ability to support such enthusiasm encourages medical student consideration of a career in child and adolescent psychiatry. The Division's ongoing involvement with such training is truly appreciated.
Under the leadership of Dr. Naveed Rizvi, the Division of Child and Adolescent Psychiatry continues to provide a vibrant Continuing Professional Program. The Division of Child and Adolescent Psychiatry continues to offer CPD activities, both at the divisional and departmental level, with a focus on promoting evidence based practices and inter-professional learning with a plethora of local presentations by DCAP faculty, as well as invited regional, provincial, and nationally recognized experts offering a wide range of learning opportunities. Residents and faculty members are encouraged to present at the divisional CPD events. Our focus continues to be to promote knowledge, skill development and improve attitudes within an interprofessional learning environment. The CPD events were well attended through this academic year and well received by faculty members, allied health professionals, residents, medical students and allied health profession students as well as community partners.

Using videoconferencing technology to support knowledge transfer and community capacity building, DCAP continues to collaborate with the Western Hub of the Ontario Child and Youth Telepsychiatry program (OCYTP). Access to CPD events via videoconferencing have been regularly provided to Community partners including CPRI, RMHCL, and the Children Mental Health Agencies associated with the Western Hub of the Ontario Child and Adolescent Telepsychiatry Program.

**CPD events from July 2012 – June 2013**

A new CPD event titled “Complex Case Rounds” started in September 2012, alternating with Journal Club on the second Wednesday of the month. Objectives of these rounds have been to:

- Review a complex case presented by a member of an interdisciplinary/interprofessional team.
- Recognize the precipitating, perpetuating and exacerbating factors influencing clinical presentation, diagnosis and treatment of a complex case.
- Identify intervention strategies to improve service delivery and clinical care to children and families presenting with complex mental health issues.
- Become aware of community resources to help improve functioning of children and families struggling with complex mental health needs.

Complex case rounds are evaluated as an excellent learning event by the faculty member.

- **September 2012**, Dr. Pam Horne – Vanier Children’s Services, presented “Multiple Parent Disorder? A Case of Disrupted Attachment”
- **November 2012**, Dr. Ajit Ninan – CPRI, presented “A Case of Disrupted Attachment - Where to start?”
- **January 2013**, Dr. Rob Nicolson, CPRI, presented a case "A Riddle Wrapped in a Mystery inside an Enigma, but Perhaps There Is a Key"
- **March 2013**, Dr. Ben Loveday, RMHCL, presented "Prison Break: Escaping the Family Pattern"
- **May 2013**, Dr. Javeed Sukhera, LHSC, presented “The Existential Philosopher: Solving the diagnostic mystery of a complex 15 year old male”

**Division of Child & Adolescent Psychiatry Semi-Annual Meeting - February 28, 2013.** Our guest speaker was Dr. Shannon Arntfield who presented on ”Narrative Medicine.”
Annual Conference of the Division of Child and Adolescent Psychiatry - April 26, 2013: “Managing Pediatric Depression & Anxiety in the Community.” This all-day event offered seminars and workshops with a focus on improving the knowledge and skills of primary care providers to effectively manage pediatric depression and anxiety in the community. This event was extremely well received by our community and was attended by approximately 157 participants, ranging from family physicians, child psychiatrists, psychiatry residents, nurses, social workers, psychologists, school, child care workers as well as parents and families. Evaluation and feedback from attendees was extremely positive with regards to the format and contents of the CPD event. We would like to thank our guest speakers Dr. Katharina Manassis, Dr. Margaret Steele, Dr. Neal Stretch, Dr. Kerry Collins, Dr. Julie Eichstedt, Dr. Ben Loveday and Gord Clifford who presented at the conference and made this conference such an excellent learning opportunity.

Division of Child & Adolescent Psychiatry Annual Meeting - May 16, 2013. Our speaker this year was Dr. Javeed Sukhera, presenting "Mind the Gap: Addressing the Needs of Transition Age Youth in Southwestern Ontario."

Department of Psychiatry Annual CPD Morning of the Division of Child and Adolescent Psychiatry - June 13, 2013. Topic: “Exposure to Bullying and Peer Violence: Mental Health Implications in Children and Youth.” Dr. Habiba Nayyer, PGY2 presented a case and Dr. David A. Wolfe, PhD, ABPP, Head, CAMH Centre for Prevention Science; Senior Scientist, Social and Epidemiological Research (CAMH); Professor of Psychology and Psychiatry, University of Toronto, presented “Bullying: Development Implications and Prevention Strategies.”

Dr. Rizvi also coordinates the very successful Western Hub (WH) of the Ontario Child and Youth Telepsychiatry program (OCYTP) which had its sixth anniversary this year and past the 1000 consultations milestone. The Hub hosts both direct clinical consultations and education to children, youth and care providers in rural, remote and underserviced communities using teleconferencing technology and also supports knowledge transfer and community capacity building.

Western Hub continues to be a successful and collaborative partnership with Child and Parent 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 the Windsor Regional Hospital (WR).

During the previous fiscal year starting from April 2012 to March 2013, WH provided total of 301 telepsychiatry services to designated and non-designated sites including:
Clinical Consults: 259
Program Consultations: 26
Educational session: 16

During the current fiscal year starting April 2013 to March 2014, in the last two quarters from April to September 2013, the WH has completed 235 services as shown below:
MCYS continues to plan and develop an “expanded and enhanced” OCYTP service model as well exploring options to extend the base of access beyond the current designated child and youth mental health agencies. In alignment with the pending expansion, WH has taken a proactive approach and has started to offer telepsychiatry consultation services to various Family Health Teams in the Southwest region. These services are being very well received. To date health teams from Grand Bend, Kitchener, Wellesley, East Wellington and Upper Grand have all made referrals to the Western Hub. Referrals from designated sites to the Western Hub have also increased compared to previous years.

The Western Hub currently has 11 psychiatrists, who are all affiliated with the Division of Child Psychiatry, Department of Psychiatry, Schulich School of Medicine, and Western University. These consultants provide clinical and program consultations on a regular basis and their interest and expertise is instrumental in developing, maintaining and further expanding telepsychiatry services to our community. As we are expecting an increase number of consultations, we will be recruiting more consultants to our team.

Using the Ontario Telemedicine Network (OTN) videoconferencing facilities, WH now has the ability to arrange consultation at any of our partner locations without the need for consultants to travel to CPRI where the WH offices are physically located.

Psychiatry residents are encouraged to participate in telepsychiatry consultation at any time. PGY3 trainees are required to do one telepsychiatry consultation during the core child psychiatry rotation.

While continuing to provide vital educational and professional development sessions and professional to professional consults to the designated sites, WH also facilitates access to the Division of Child Psychiatry CPD events for these sites on a regular basis.

CHEO Centre of Excellence is now overseeing the coordination of OCYTP Provincial Education. In January or February 2014, in collaboration with Centre of Excellence, WH will be arranging OCYTP Provincial Education seminar series on FASD with a focus to provide education on inter-professional assessment and management in community.
To assess the impact of Child Telepsychiatry Services on “Capacity Building in the community,” i.e. promoting knowledge and level of expertise within the WH designated sites, WH is currently conducting a survey. Rhonda Persichilli has sent out a link to the online survey questionnaire. We would like to remind all the Division members to please complete this 10–15 minute online survey as your input is highly valuable.

Turning to research, Dr. Jeff Carter, Director of Research for the Division, expresses thanks to the site research coordinators (Dr. Carla Smith at Vanier, Brenda Davidson at LHSC, and Dr. Shannon Stewart at CPRI) for their assistance over the year. A strong focus for the Division has been its research agenda, and the details of Division productivity can be found in the Department of Psychiatry Annual Report. Through the past academic year, planning for the newest development regarding research in the Division has been the upcoming First Annual Research Half Day on the morning of November 25, 2013. Dr. Jana Davidson will be speaking on community collaboration, and we are working on the agenda for local speakers and poster presentations. Dr. Carter thanks Dr. Sandra Fisman and Brenda Davidson for their support in organizing this event.

Dr. Carter would also like to thank Dr. Marnin Heisel, Director of Research for the Department of Psychiatry. Dr. Heisel and Dr. Carter have spoken about strengthening research, and look forward to further collaboration between the Division and the Department in this regard. The Division is also working towards aligning our annual reporting with the Department to reduce the administrative burden on researchers that comes with multiple requests for the same information.

The Journal Club completed a successful season. In October 2012, Dr. Jeff Carter spoke on interventions for reducing aggressive behaviour, and in December 2012, Dr. Barrie Evans spoke on threat and risk of violence assessments in schools. Philip Baiden spoke on medication nonadherence in February 2013. Drs. Sandra Fisman and Marnin Heisel spoke on screening for suicidality in April 2013, introducing their new tool in development. In June 2013, Dr. Jeff St. Pierre spoke on selective mutism.

Dr. Javeed Sukhera was recently appointed as Academic Director, Global Health Curriculum at the Schulich School of Medicine and Dentistry. His role includes leading global health curricular learning including the organization and delivery of global health curricula to Schulich Medicine undergraduate medical students in London, Windsor and communities of the Southwestern Ontario Medical Educational Network (SWOMEN).

A word about clinical service - it is difficult to divorce clinical service issues from our academic mission. The Ontario Ministry of Health 10 Year Mental Health Strategy has identified the importance of early interventions and prevention in the design of mental health services and has determined initial implementation of the strategy by addressing regional gaps in service, especially at various points of transition, for children and youth, by age, or continuity of service among providers. These developments have been a backdrop to a number of important initiatives. We have been actively involved in a CAMH Ministry of Health sponsored collaborative that is using implementation science to develop and evaluate points of transition in child and adolescent mental health care. This initiative is province wide with different transition foci. In London, the focus is on the pathways between the community services and the emergency room at London Health Sciences. This work has been ably led by Dr. Javeed Sukhera who is also working on models of care that best serve transitional age youth. Under the leadership of Dr. Javeed Sukhera and CathyLee Benbow, the LHSC transition age project, supported by a generous grant from the LHSC Women’s Auxiliary and funded through London
Health Sciences Foundation, has recently hired a project facilitator and struck a steering committee with representation from both child and adolescent and adult mental health. A literature review has been completed and further activities are planned for the upcoming year to lay the groundwork for an innovative new system of care for transition age youth.

Beginning in November 2012, Dr. Heidi Haensel has worked with Sarah Parkinson, Advanced Practice Nurse, to develop a pilot clinic with the Women’s Service at LHSC that has focused on women’s mental health. They have worked with a model for prenatal mental health care which was developed in collaboration with our community partners. Through the support of the Children’s Health Foundation and a generous community donor, a fully financed clinical research fellowship in Maternal Child Health and Addictions is available for trainees who have completed postgraduate training in psychiatry, obstetrics, paediatrics and family medicine.

The RBC Centre for Families and Children at Risk is a project that strives to create a leading-edge model of care to help refugee children and families who are dealing with pre or post migration trauma and the resulting mental health issues. The new Centre will coordinate advanced mental health services to best help and ease the suffering of newcomer families. The project has established a steering committee which includes representation from Child and Adolescent Psychiatry including Dr. Javeed Sukhera, Dr. Kamran Kizilbash and Rita Van Meyel.

The DCAP has had a voice in a number of local and provincial initiatives; these include the MCYS sponsored Complex Care Committee, the Provincial Maternal Child Specialized Pediatric Advisory Committee, and the Provincial Management Committee (PMC) for the Phoenix Project. The latter is sponsored by the Association of Medical Services (AMS) which created Educating Physicians for a Future Ontario (EPFO) that became the CANMEDS roles that are so familiar to all of us and part of our education lexicon. AMS seeks, through the PMC, to recalibrate the humanity in medicine with the science, and deal with the “hidden curriculum” through support of AMS fellows and compassionate person centred research projects. This represents an exciting potential for our Department and our Division. A second wave of Phoenix fellows were selected in January 2013, for a total of 11 across the province with one of these, Dr. Shannon Arntfield at Western. Several faculty and some of our trainees have participated in Dr. Arntfield’s Narrative Medicine initiative at SSM&D.

Finally, I would like to thank, in addition to all of those individual contributions mentioned in the report, the members of the DCAP Advisory Committee. These include our academic leaders: Dr. Jeff Carter, Dr. Patricia Hall, Dr. Ben Loveday and Dr. Naveed Rizvi. Thank you to our school board representatives: Dr. Barrie Evans (TVDSB) and Susan Ralyea (London District Catholic School Board), both of whom will be retiring from their roles and leaving the Advisory Committee. We thank them for the wisdom and many contributions they have brought to the Division. This past year, we welcomed Dr. Susan Rodger Director for School-Based Mental Health, in the Faculty of Education at Western, and Dr. Mary Broga, who joined us as our Windsor representative. With Windsor as a potential training site, we look forward to strengthening the clinical academic relationship between London and the Southwest region. In June 2013, we also welcomed Regina Bell, Program Coordinator with the London Middlesex Children’s Aid Society. A special thank you to our Resident Representative, Dr. Joy Abramson, who did an outstanding job as resident representative to the committee.

Last, but certainly not least, thank you to Tracy Henebry for her support to myself as Chair for the Division of Child and Adolescent Psychiatry and as administrative support to the Subspecialty Program, and to Debra Martin for her support of the many activities of the Division.
over the past several years. We wish Debra the very best in her new role in the Department of Psychiatry and welcome Faye Slote to her role as administrative support to the Division.

Developmental Disabilities Division
Dr. Rob Nicolson, Chair

History
The Developmental Disabilities Division (DDD) was established within The University of Western Ontario’s (UWO) Department of Psychiatry in 2003, with primary goals of attracting academic leadership in developmental or intellectual disabilities, to provide a “home” in order 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 under a single umbrella.

Division Leadership
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 consists of Maria Gitta, Division Coordinator, and Betsy Schaefer, web and administrative support.

Maria has received two provincial awards this past academic year:

NADD Ontario: An association for persons with developmental disabilities and mental health needs. President’s Award is hereby presented to Maria Gitta, Service from 2000–2013, for the many years of leadership and support given to maintaining the NADD Ontario website and unfailing commitment to the field of dual diagnosis. May 31, 2013. Oakville, Ontario, Canada.

OADD Ontario Association on Developmental Disabilities: Hull Roeher Award of Merit presented to Maria Z Gitta in April 2013. This award is in honour of John Hull and G. Alan Roeher, each of whom made a significant contribution in the field of developmental disabilities within the Province of Ontario.

The award is presented to an individual who has made an outstanding contribution or special achievement in one of the following areas.

- Education: for promotion of education or training in the field of developmental disabilities
- Humanitarianism: for promotion of human welfare and/or social reform
- Research: for advancement of knowledge in the field of developmental disabilities
- Service: for enhancing services to individuals with developmental disabilities

The DDD 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 meets twice a year, and advises the leadership of the Division on potential areas of relevance to the DDD. Dr. Paul Links chairs this board.
**Education**

Education of physicians regarding developmental disabilities remains the Division’s greatest priority. We continue to enhance the educational opportunities for physicians and allied professionals in developmental disabilities. The educational opportunities at all three levels (undergraduate and graduate medical trainees and continuing medical education) are unique across Canada and certainly places the DDD on the vanguard of medical education at a national level regarding developmental disabilities.

In order to foster an interest in patients with developmental disabilities, the Division continues to offer the ‘The Dr. Greta Toni Swart Essay Award in IDD,’ an essay award annually in the amount of $1000 to student in any year of the Doctor of Medicine (MD) program or a graduate medical program or a resident program at UWO who submits the best essay on developmental disabilities. This year the award winner was Dr. Horace Cheng.

Drs. Nicolson and Rao provide lectures and seminars for psychiatry and family medicine residents. The number of psychiatry residents requesting rotations 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.

This past May 1, 2013 for our Spring CPD, the DDD organized an annual continuing medical education full day on Fetal Alcohol Spectrum Disorder for health care providers and professionals from the education and human services sectors. The event was held at the Lamplighter Inn and was very successful. We had presenters from Alberta and across Ontario, and the event was rated highly.

The DDD is responsible each September for the Department of Psychiatry Continuing Medical Education Rounds. This September 12, we had a novel event via an historical presentation of the changing terminology by Dr. Michael Mak, followed by a debate between Michelle Palmer, Executive Director of Community Living London arguing to continue the process of the changing the name of mental retardation to intellectual and developmental disabilities.

Drs. Nicolson, Rao, and Gillis continue to provide presentations to professional, community and advocacy groups, with the total audience for these presentations being well over 1,000 people once again during the past academic year.

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**

The Division collaborated with or supported five research projects this past year and appears set to do the same this year. Collaborations included Pamela Cushing, Associate Professor, PhD Anthropology, King’s University College at Western University for the faculty award of the 2013 C Kingsley Allison Research Award.
There were two 2013 award winners for the Dr. Ben Goldberg Research Award: Stephanie Bugden, MEd, PhD Candidate, The Numerical Cognition Laboratory, Psychology Department, at Western, for "Developmental Dyscalculia: A behavioral and neural investigation of the numerical and mathematical deficits" and Mackenzie Salt, PhD, McMaster University, for “Deficits or Differences: Are Individuals with Autism Spectrum Disorder Pragmatically Impaired?”

The DDD supported the OADD’s Research Special Interest Group annual research conference day, and several other smaller projects.

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

Division of Forensic Psychiatry
Dr. Craig Beach, Chair

We have had a very busy and productive 2012-2013 academic year in the Forensic Psychiatry Division – marked by a new forensic facility, new and transitioned staff, and academic infusion. The academic year culminated in our moving to Southwest Centre for Forensic Mental Health Care (Southwest Centre) in Central Elgin on June 19, 2013. The building is a 89-bed, state-of-the-art, purpose built forensic psychiatric facility that will maximize client recovery and the quality of work life for our staff. We had a wonderful grand opening celebration on June 14, 2013, and I would like to thank all staff for their work leading up to our move and for ensuring that the move transpired smoothly.

Below, I have summarized our key academic accomplishments for the academic year:

International Forensic Division Presentations
Violence Risk Assessment and Management; Suicide Risk Assessment and Management; and Psychiatric Malpractice, Mental Health and the Law Sea Courses Cruise (Montreal to Boston), Dr. Craig Beach and Mr. Louis DelSignore

National Forensic Division Presentations
Psychiatric Seclusion and Restraint Reduction, Canadian Academy of Psychiatry and the Law Annual Meeting, Mount Tremblant, Dr. Craig Beach

Local Forensic Division Presentations
• Posttraumatic Stress Disorder: Assessment and Management, Wendat, Midland, Ontario, Craig Beach
• Psychiatric Counseling Skills, Wendat, Midland, Ontario, Dr. Craig Beach
• Therapeutic Recreation, Wendat, Midland, Ontario, Dr. Craig Beach
• Borderline Personality Disorder, Wendat, Midland, Ontario, Dr. Craig Beach
• Substance Use Disorders in the Elderly, Wendat, Midland, Ontario, Dr. Craig Beach
• Suicide Risk Assessment and Management, Canadian Mental Health Association, Waterloo, Wellington, Dufferin, Dr. Craig Beach
• Specialized Mental Health, Foundation Cornerstone Dinner Fundraising Event, St. Joseph’s Health Care London, Dr. Sarah Jarmain and Dr. Craig Beach
• Forensic Psychiatry Program, Quality Committee of the Board, St. Joseph’s Health Care London, Mrs. Janice Vandevooren and Dr. Craig Beach
• Departmental Grand Rounds: “Psychopaths: Neurological Deficits by Design?” Dr. Marnie Rice
• St. Joseph’s Health Care London Annual Research Day: “Violence Among People with Psychosis: Epidemiology, Aetiology and Treatment” Dr. Sheilagh Hodgins

**Forensic Program Presentations**
- Understanding and Treating Metabolic Syndrome in Clients with a Serious Mental Illness, Dr. Jacqueline Duncan
- Mental Health and the Media: Communicating Ethically and Advocating Effectively, Dr. Praveen Kambam
- From Mentor to Tormentor: Mark Becker, Ed Thomas and Insanity on Trial in the Heartland, Dr. Phil Saragoza
- Faking It Behind Bars: Malingering and Correctional Psychiatry, Dr. Vasilis Pozios
- Dialectical Behavioural Therapy in Forensic Settings, Dr. Nina Desjardins
- Confidentiality, Privilege, Disclosure, Health Information Privacy, and Other Scary Legal Things, Professor Robert Solomon
- Attachment and the Forensic Psychiatry Patient: a Case for the Recovery-based Model of Care, Dr. Carol McDaniel

**Forensic Mental Health Journal Club and Forensic Complex Care Rounds**
- “The Effect of Length of Hospitalization on Re-arrest Among Insanity Plea Acquittees” and “Fear Keeps Insanity Acquittees in Hospital Longer Than Needed,” Dr. Craig Beach.
- “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**

A) "Psychosocial Factors in Forensic Admissions Database"
We are reviewing 340 closed files from 2000 to 2010. There are currently three active researchers working on this project. MaryEllen Ruddell and Dwayne Rennick began this work in early 2010. Valerie Momney joined the group in April 2011 just prior to Dwayne leaving Forensic Services. He remains as a consultant on the project. We added Donna Lynam in July 2012. We are most likely 1-2 years away from publication if possible.

So far we are noting information that is not currently collected and noting common factors within client situations. It is early days for sure. We are still in the data collection phase.
Objectives
The goal is to establish if there are psychosocial factors that could be positively correlated to an individual becoming involved in the Forensic system.

Implications
1. As we identify risk factors, there is potential to lobby government bodies for funding around programming for those who may be high risk.
2. Development of Program possibilities in house to prevent recurring admissions.
3. Collaboration with other Ontario Forensic programs to create a massive database for a wide variety of purposes.
4. Program development such as: enhancing intake procedures, development of a comprehensive tool upon intake to gather information for statistical purposes, assessing current tools we have in place to collect information.
5. As we know, clients come to our door with many complex issues, and we do not always have all the information up front. This project has possible implications to stimulate conversations, thus; enhancing existing support networks we work with.

B) Does participation in an in-patient psychiatric Adventure Based Counselling (ABC) program improve client outcome?

Objectives
The purpose of this research is to ascertain the potential direct benefit of an adventure based counseling group to individuals with severe and persistent mental illness within an inpatient forensic program.

Summary
Challenges that can be experienced by those living with a mental illness include, but are not limited to: low self-esteem; difficulty in forming relationships; isolation; low motivation; low tolerance to stress; extremely high levels of fear, confusion and passivity; unwanted effects of anti-psychotic medication; and the stigma of mental illness. Through purposefully exposing individuals to novel and uncertain tasks that provide the right balance of challenge and mastery, ABC aims to generate positive outcomes that will transfer to participants' daily lives plus provide an increase in mind-body connectedness which may assist in reducing the incidence of metabolic syndrome prevalent in our client population.

Participants will be adult inpatients at Southwest Centre for Forensic Mental Health Care between the ages of 18 and 65 living with a severe and persistent mental illness. Some participants may have co-occurring disorders. Measurements will be taken pre-, and post- and follow-up analyses include quality of life, depression, anger, coping, GAF, mindfulness, blood pressure, and Body Mass Index (BMI). Focus groups will gather anecdotal evidence of the quality of the program experienced by participants and its overall impact on their lives. It is hypothesized that participants in an ABC program will achieve increased psychological well-being; an increase in the use of positive coping skills; a decrease in high risk behaviours and improvement in metabolic parameters.

Forensic Division Trainees
Educationally, we have seen an increased interest in our training programs. This past academic year we have been fortunate to have medical students, postgraduate psychiatry residents, and observerships on a regular basis. In addition to a diverse range of clinical opportunities and rotations within our Division, a unique addition has been our weekly half-day comprehensive
forensic psychiatry didactic program.

Additionally, the following talks were given as part of the Department’s teaching curriculum:

**PGY4:**
Introduction to Forensic Psychiatry, Violence Risk Assessment and Management, Criminal Forensic Psychiatry, Civil Forensic Psychiatry, Psychiatric Malpractice, Psycho-legal Report Writing and Expert Psychiatric Testimony, Forensic Psychiatry Interviewing Course (Dr. Craig Beach)

Sexual Disorders and Sexual Offending (Dr. Jose Mejia)

**PGY5:**
Psychiatric Malpractice (Dr. Craig Beach)

**Psychiatric and Psychology Services**
On April 2, 2013, we were very pleased to announce the arrival of Dr. Nina Desjardins to our complement of psychiatrists. She brings with her a wealth of experience in forensic mental health care and, in addition, is spearheading program development, staff training, and research in dialectical behavioural therapy in a forensic setting.

We successfully recruited Dr. Carol McDaniel, Consultant Forensic Psychiatrist from the United Kingdom, who will be joining our team sometime in the fall of 2013.

Since the fall of 2012, we have engaged Dr. Helen Chagigiorgis as a part-time consultant forensic psychologist. Dr. Chagigiorgis has been instrumental in advancing our structured violence risk assessment and she will be providing leadership in implementing a manualized cognitive behavioural therapy (CBT) group treatment for our clients.

**Forensic Psychiatry Division Retreat**
On May 13, 2013, we held our first Forensic Psychiatry Divisional Retreat at beautiful Windermere Manor. The purpose of our day was to help shape the future direction of our Division. As part of this day, we were very fortunate to have two outstanding guest speakers: 1) “From Life Cycle to Ecocycle: Using History to Shape the Future” by Professor Brenda Zimmerman, Director, Health Industry Management Program, Schulich School of Business, York University; and 2) “Toward Meaningful Assessment of Medical Learners” by Dr. Chris Watling, Associate Dean, Postgraduate Medical Education, Schulich School of Medicine and Dentistry, Western University. We would like to offer a special thanks to Dr. Paul Links, Chair/Chief, Department of Psychiatry, Western University for his opening remarks and ongoing support of our Division and to Ms. Jane Parkinson, Learning and Development Services, Western University who facilitated our day.

In particular, this retreat was very helpful in identifying our strengths, opportunities, and challenges as a Division and, with those in mind, we are currently engaging in the initial planning steps towards Royal College Forensic Psychiatry sub-specialty training program development.
Division of General Adult Psychiatry
Dr. Jeff Reiss, Chair & Department Vice-Chair

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.

As usual, 2012/2013 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. Once again, Dr. Praful Chandarana organized the nationally acclaimed UWO Psychiatry Exam Preparation Course, which is taught by many divisional members. Dr. Chandarana is now developing a succession plan so that younger members can “carry the torch” into the future. Similarly, our research productivity has increased as can be attested to in the research section of this annual report. A major educational endeavour planned for the upcoming year involves 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 continues to progress. A new contribution for divisional/departmental CPD and PGME was the complimentary membership for the online psychiatric resource, Global Medical Education, which we were able to secure, with the kind assistance of Dr. Amresh Srivastava.

On the clinical front, with access to inpatient beds so often an issue, there has been much attention to the Emergency and Inpatient services. Our Centralized Emergency Psychiatric Service (CEPS), Inpatient and Ambulatory programs are engaged in developing and implementing solutions to the problem of admitted patients waiting for inpatient beds in the Emergency Department. These include the development of community-based crisis services and crisis beds, mobile crisis service, regular monitoring of length of stay and re-organization of the ambulatory care program. Working with City of London Crisis Services and the LHIN, we are pursuing a plan to house the community-based and operated integrated crisis services on the campus of Victoria Hospital. We were also successful in being awarded P4R funding to support a full-time psychiatrist on site with CEPS during the weekday working hours. This initiative will be evaluated over the next year. More recently we have also developed an escalation plan for various levels of access problems through the Emergency which includes opening four Mental Health Surge beds on a separate inpatient unit, when under extreme access pressure.

Ambulatory care development remains a focus as well. Based on a review of our ambulatory systems there has been a realignment of new referrals being more appropriately triaged to a team-based model of care. As well, our Day Treatment Program has been redesigned moving away from a fixed six week modular program to a more patient needs centered one which will provide stepped down or up care, respectively, from in- or outpatient care. We commenced work on two major funded ambulatory initiatives in conjunction with colleagues from the LHSC
Child and Adolescent Program, in which we received over a million dollars for each of these projects. With RBC support, we will create an At-Risk Centre to coordinate and develop services for new Canadians, with a focus on prevention and early intervention mental healthcare for children and families who have escaped from traumatic backgrounds. The LHSC Auxiliary awarded us with a major grant to enable us to develop a Transition Age Project, which will focus on developing accessible, coordinated assessment and early intervention tailored for people aged 16 to 25 years who have mental health difficulties. Lastly, at the end of the academic year, on June 21, 2013, the Mental Health Services at LHSC and at St. Joseph’s Health Care London completed a leadership retreat, with a major focus on improving access and flow through the ambulatory services.

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. Other examples, as described in greater detail in last year’s report, are 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.

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:

**London Health Sciences Centre - Based Services**

**Adult Eating Disorder Program**

The new adult eating disorder program has made significant strides in the last year, according to Physician Leader, Dr. Valerie Kaye. We have moved into our new location at 111 Waterloo Street. There is a consistent assessment plan for all referred patients and those that agree to continue in the program and have a diagnosis of eating disorder are assigned a case manager to support them moving through the program. Seriously low weight patients are streamed into a more intensive tract which includes more frequent medical monitoring pending inpatient treatment in another facility if weight gains cannot be made in an out-patient setting. Patients are offered an outpatient psychoeducational group which runs two hours per week for four weeks. Family and friends are encouraged to attend a daylong workshop to learn about eating disorders which is offered approximately every two months.

Once patient psychoeducation is completed, patients are offered an eight session Motivation Enhancement Group to prepare them to explore their readiness for recovery oriented treatment. On completion, if the patient expresses the desire to seek more intensive treatment we have them enter our Readiness Program which is once a week for four and a half hours. This includes an orientation to the Dialectical Behavior Therapy philosophy, a supported lunch, goal setting, and basic distress management skills.

In May 2013, we opened our day treatment service which is three days per week – 10 am to 6:15 pm. This program is Dialectical Behavior Therapy infused and offers a supported lunch and dinner each day, along with multiple groups that focus on goal-setting, mindfulness, emotion regulation, interpersonal effectiveness skills, and exploring other aspects of their eating
disorder. By the end of September 2013, the Day Treatment Service will be expanded by another day which will allow for more in vivo experience.

Also in September a transition/step down program will be beginning two days per week for four to six hours per day. This program is offered to patients who have completed our Day Treatment Service or have successfully completed and are returning from another treatment program. Longer term follow-up will be offered in a 90 minute weekly group in the late afternoon.

In conjunction with WOTCH, we will have a fully staffed apartment opening at the end of September 2013. This will provide 24/7 emotional and nutritional support for up to four patients while they are attending our Day Treatment Service. Our longer term goal is to have a setting that will allow for the whole program to be housed under one roof, thus offering much improved continuity of care. We are also hopeful that we can provide a small inpatient program at LHSC devoted to patients with eating disorders that are low weight or have more complex medical needs. This would allow us to provide the full spectrum of eating disorder care for patients in Southwestern Ontario.

Centralized Emergency Psychiatry Service (CEPS)
Emergency assessments are conducted in the emergency room by a team consisting of psychiatrists, residents, social worker and students, with nurse case managers. We work in collaboration with community partners including mental health agencies and family physicians in an effort to best serve our patients. Service Leader, Dr. Dan Lefcoe states, “There has been further evolution of CEPS services in the ER in the past year. CEPS nurse case managers are performing screens ahead of ER physicians to advise on disposition. Enhanced protocols have evolved for management of patients brought by police, with a new waiting area. New staff is expected this year, with the arrival of Dr. Georges Loba Gutierrez.”

Consultation-Liaison Service
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 screening in the ICU, regular formal teaching to ICU fellows and juniors on delirium, Mental Health Act education to non-psychiatric colleagues, enhanced educational opportunities for off-service residents and elective medical students through rotation development.

The past year has reflected many changes within the Consultation Liaison team. Dr. Rebecca King was welcomed as our much needed third Consultation Liaison psychiatrist, and has launched a very exciting outpatient practice with a focus in neuropsychiatric diseases and traumatic brain injury. We also welcomed a new psychologist, Dr. Ian Nicholson, and a new acting nurse case manager, Judy Wilson.

According to Service Leader, Dr. Jennifer Barr, 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 including implementation of delirium management protocols, 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)**
FEMAP provides ambulatory psychiatric services for youth aged 16-25 experiencing the recent onset of mood and/or anxiety symptoms with or without secondary substance use; FEMAP conducts clinical research on the same population. There are exclusion criteria for youth with prolonged histories of psychiatric problems, primary substance abuse/dependence, and significant cognitive deficits.

FEMAP clinicians conducted 2815 patient visits, and FEMAP psychiatrists conducted 138 new intakes from July 2012 to June 2013. On November 18, 2012, FEMAP had reached clinical capacity and had to temporarily suspend taking on new patients. Due to funds raised from generous supporters, FEMAP was able to reopen to new patients in May 2013. A part-time psychologist and family therapist will be added to the team shortly, also thanks to these donations.

Research activities at FEMAP include:

1. Functional brain imaging into the pathophysiology of mood disorders, marijuana use, self-injury and other aspects involving the neurocircuitry of reward-processing.
2. Systems evaluation research for the model of FEMAP as a clinically, and cost-effective paradigm.
3. Clinical evaluations of individual aspects of treatment at FEMAP such as the group therapy program that evolved from the trauma program group at Victoria Hospital.
4. Collaborative research related to the use of smart technology to facilitate clinical needs.

Physician Leader, Dr. Beth Osuch states that the goals for the next few years are to secure funding for the essential roles of: full-time reception, full-time intake and assessment, two days per week of the psychologist, two days per week for the addictions therapist, and one day per week for the family therapist. These personnel are crucial to the functioning of FEMAP to meet patients’ needs. More publications on completed research, and more grant applications, will be submitted related to research in brain imaging and service evaluation.

**GAAMHS (General Adult Ambulatory Mental Health Services)**
In keeping with the overarching principle of right patient, right service, right time, the General Adult, the largest ambulatory service in the Division, GAAMHS provides a variety of outpatient based services for patients and their families in the London-Middlesex County area. Ambulatory Service will continue 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 will try 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. 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. Expanding our services further, we are now involved in shared care at The Centre of Hope. We have also added an ongoing post-residency fellowship to our Program. The latter three initiatives mentioned having been all spearheaded by Physician Leader, Dr. Richard Owen.
**Inpatient Services**

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.

According to Service Leader, Dr. Volker Hocke, during the year 2012/2013 the process of implementing more therapeutic options was very successful. After having started skills training groups with support by OT and a motivational group for addictions with support from nursing management and refining the group processes, several more new open groups were conceptualized and implemented. 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.

The start of a medical directive mandating a metabolic screening for each admitted patient staying longer than three days has been a first major step in improving the physical health of our patient population. This project was initiated and championed by Dr. Kamini Vasudev.

We are expecting the HUGO (Healthcare Undergoing Optimization – electronic health record system) project to improve our documentation system to a new level.

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. In collaboration with WOTCH we now have 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. Further steps in improving the discharge process are on its way.

**Prevention & Early Intervention Program for Psychoses (PEPP)**

Program Highlights of PEPP, as described by Physician Leader, Dr. Rahul Manchanda, are as follows:

The program held a successful retreat in the fall of 2012. Working groups on screening and assessment, group interventions and case management were formed based on feedback. Each group developed recommendations for quality improvement which have since been adapted.

PEPP has formed a partnership with Wheable Secondary School that has resulted in a number of clients successfully entering a variety of apprenticeship programs.

We hired a patient with a background in web design to lead our website development committee in an effort to make the PEPP website more client and family friendly. A number of family members and another client also participated in this committee.
Our new psychometrist/teacher initiated the Duke of Edinburgh Award at PEPP. This award allows individuals to build leadership skills while learning new activities, maintaining an active lifestyle and volunteering. She has started a PEPP book club.

Five members of the team attended the International Early Psychosis conference in San Francisco. Three staff members, two clients and a family member attended the Ontario Early Psychosis Conference in Toronto. Several presentations were delivered in various secondary and post-secondary class rooms in addition to other community venues.

A successful partnership was formed with WOTCH. An experienced WOTCH case manager has been assigned to work with some of our post-PEPP clients.

PEPP held its Creative Minds Art Show in October of 2012.

At PEPP we continue to have a strong belief in patient and family centered care. PEPP managed to maintain a no-wait list policy despite a record number of new admissions. We currently have approximately 20 client volunteers who are actively involved in various aspects of the program. We have a number of PEPP parents who also help out. Recently a retired teacher has started to provide tutoring in math for a number of students.

Our regional outreach program continues to function well. PEPP provides a variety of supports including monthly education sessions on best practices for early psychosis intervention.

Research Highlights
Research in PEPP within the past year has primarily focused on continuing analysis of the results of our five year follow-up of clients as well as planning for our ten year follow-up study. Ethics approval for the latter has just been received. In addition, PEPP researchers continue to be involved in research on the stigma of mental illness and collaborative translational research concerning standards for early intervention programs for psychotic disorders. During the past year, ten publications have come out of PEPP and one manuscript is currently under review.

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)
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 Departments 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.
According to Service Leader, Dr. Lefcoe, goals over the next year are “to continue to meet high demand and acuity, whilst maintaining service integration with intra-program services and external care providers.”

St. Joseph’s Health Care - Based Services

Operational Stress Injury (OSI) Clinic
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 family 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.

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 Psychiatric Association, the Australian Centre for Posttraumatic Mental Health, the US DVA/DoD and the American Psychiatric Association. The specialized team of psychiatrists, psychologists, mental health nurses, 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. Over the past year, in collaboration with the Hamilton Anxiety Research and Treatment Center, Dr. J Don Richardson has been able to provide psychiatric services to veterans living in the Hamilton Niagara Region. To better serve veterans in the GTA area, two Parkwood OSI clinic psychologists provide direct psychological services to veterans in the GTA. Also, in 2013, the Parkwood OSI clinic has also been able to adopt an electronic treatment outcome monitoring system to further enhance treatment outcomes.

Medical Director, Dr. Don Richardson states, “The Parkwood OSI clinic will continue to strive to improve services and promote research in the area of posttraumatic stress disorder and other operational stress injuries. 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. Rebecca King joined the Department of Psychiatry on August 1, 2012. Her university appointment is at the rank of Assistant Professor in the Provost Stream. Dr. King’s initial clinical work in the Division of General Adult Psychiatry was with both inpatients and outpatients, but later was transitioned to Consultation-Liaison and outpatient services. Her expertise is with those patients who are in the “borderland” of medicine or neurology and psychiatry, which is where she is establishing her ambulatory practice, and intends to pursue research opportunities.

Dr. King completed her BSc in Behavioural Sciences at Memorial University in St. John’s, NL, and received her MD at Memorial University also. She relocated to London in 2006 and began
her residency in psychiatry at UWO. Upon completing her residency in June 2011 at Western, Dr. King did a fellowship in Psychosomatic Medicine at the Sloane-Kettering – Columbia University in New York City.

During her undergraduate years, as well as her medical education, Dr. King won several awards for academic and clinical excellence in these programs. She was active in volunteer work, sitting on committees and acting as coordinator/representative for various activities during medical school and her residency. In 2010, during her residency, Dr. King won the Senior Resident of the Year Award for top performance in a psychiatry residency program. She provided intradepartmental presentations during her residency and acted as Psychiatry Senior Resident Clerkship Educator from January to May 2009 and Supervisor for Pediatric Psychiatry Interviewing Skills.

**Dr. Michele Ngo** joined the Department of Psychiatry on September 1, 2012. Her university appointment is at the rank of Assistant Professor in the Provost stream. Dr. Ngo’s main clinical work is in with the FEMAP program (four days a week) as well as with the LHSC-VH in the Child and Adolescent mood and anxiety outpatient program (one day a week).

Dr. Ngo completed her undergraduate degree in Biochemistry and Molecular Biology in 2002 at The University of British Columbia, Vancouver. Also at UBC, in 2003 she received her BEd, following which Michelle relocated to London and in 2007 completed her Medical Degree at UWO. As many here know, she did her postgraduate work at UWO and completed her residency in psychiatry here in 2012.

During her education, Dr. Ngo won several awards including an Outstanding Student Initiative Scholarship at UBC during her undergraduate years, the BC Children and Family Research Institute Summer Studentship in 2001, The Dr. Archibald McCausland Memorial Prize in Psychiatry for the highest standing in psychiatry at the end of Year 4 and the Paul Patterson Award in our Department in 2012. In 2011 and 2012, she won the Senior Resident of the Year award in our Department at UWO.

From 2006 to 2009, Dr. Ngo was a Medical School Admissions Interviewer at UWO, from 2009-10, she was the President of the Psychiatry Resident Group at UWO and from 2011-12 she was the Chief Resident in our Department. During her residency, she was an active teacher in both postgraduate and undergraduate education as well as giving presentations at CME events.

Administratively, Dr. Ngo was an active member of various committees in our Department – Undergrad Medical Education, CaRMS, Physician Leadership, RTC and Executive Committees. She also served as the Resident Representative for UWO on the COPE Committee from 2010-11. Dr. Ngo has shown her support for research activities with several research endeavours, including some publications and poster presentations.

**Dr. Valerie Kaye** joined our Department on October 1, 2012. Her academic appointment is at the rank of Assistant Professor in the Provost Stream. Dr. Kaye’s clinical appointment is at London Health Sciences Centre where she is the Physician Leader for the new Adult Eating Disorders Program.

Dr. Kaye received her early education in Montreal and London, England and in 1972 she returned to Canada where she did a qualifying year at Carlton University in Ottawa. She returned to Montreal where she completed her BSc in Biology and Human Genetics at McGill University in 1976, followed by her MD in 1980. From 1980 to 1981 she did a rotating internship
at St. Paul’s Hospital in Vancouver, BC. Dr. Kaye did her psychiatry residency at UBC and received her Royal College certification in November 1996. From March 1997 to March 2009, Dr. Kaye participated in four hours per month of psychotherapy supervision in a small group, with the Vancouver Psychoanalytic Psychotherapy Society. The supervisor of these sessions, Dr. Steve Engelberg, is a registered psychoanalyst and psychiatrist from the University of Washington.

From July 1981 to June 1990, Dr. Kaye practiced in family medicine in British Columbia and also provided psychiatric consultant work from June 1982 to January 1994 for the Greater Vancouver Mental Health Service and the North Shore Mental Health Clinic, BC. From January 1992 to March 2009, she provided psychiatry consulting service to various programs (Eating Disorders, Inpatient General Psychiatry, Outpatient Group Psychotherapy, Persistent Pain) at St. Paul’s Hospital, the Lion’s Gate Hospital, Simon Fraser University and Heart Link Canada all in Vancouver, BC. From July 2001 to March 2009 she served in various positions at St. Paul’s Hospital, Vancouver - as the Psychiatric Director and the Acting Psychiatric Director of the BC Eating Disorders Program, as well as consultant work for the Persistent Pain Program.

By spring 2009, Dr. Kaye had relocated to Guelph, ON, where she was on courtesy staff at Guelph General Hospital. Beginning in April 2009, she took on the role as Psychiatric Director for the Eating Disorder Program at Homewood Health Centre until this fall when she joined our Department.

I’d like to also briefly mention and welcome some of the stellar new appointments that have subsequently occurred within the DGAP, effective after July 1, 2013. More extensive descriptions can be found in the Quarterly Newsletters and next year’s annual report.

**Dr. Arlene MacDougall** joins the Division as an Assistant Professor in the clinician-researcher stream. She will be 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 will continue 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** joins the Division with 0.4 of his time in Emergency Psychiatry, working with the CEPS (Centralized Emergency Psychiatry Services) Team.

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** joins 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.
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. Charles Chamberlaine

**Geriatric Psychiatry**
Dr. Lisa Van Bussel, Chair

Over the last academic year there have been notable accomplishments for Division members and with it the acknowledgment of our collective research, education and clinical expertise. The groundwork has been laid for a bright future and further academic growth.

Dr. Marnin Heisel assumed the position of Director of Research for the Department of Psychiatry as of November 1, 2012. As he takes on this larger Department role, the Division would like to acknowledge his many academic contributions in the areas of interpersonal psychotherapy, suicide risk screening, and prevention in late life.

In particular, his work with the Canadian Coalition for Senior’s Mental Health guidelines and toolkit for late life suicide screening and prevention has been recognized nationally and internationally. Most recently he presented on March 23, 2013 at the South Western Ontario Geriatric Assessment Network Team Exchange to community and hospital health care providers on suicide risk and assessment.

Dr. Amer Burhan returned to Department of Psychiatry and Division of Geriatric Psychiatry, as fulltime clinical academic in the fall of 2012, and with his return he brings a wealth of expertise in neuropsychiatry, ECT and TMS. Also, he is pursuing his Master of Science in Community Health (UofT), and in particular, he is interested in knowledge translation and continuing professional development. Within the past year, his impact has been felt as he taken on leadership for the ECT service at RMHC and initiated several research and educational projects. Welcome back Dr. Burhan!

Drs. Jennifer Fogarty and Iris Gutmanis reappointed and appointed respectively to adjunct positions with the Department of Psychiatry with strong ties to geriatric psychiatry. Both have contributed to educational and research activities with Division members.
Several members of the clinical programs affiliated with the Division of Geriatric Psychiatry have contributed to education and knowledge dissemination in the field of senior’s mental health. Florence Dean of the London Health Sciences’ Geriatric Mental Health Program has coordinated with Dr. A. Vasudev, the Continuing Professional Development Program for the Division and interprofessional teams. Karen Johnson of the Behavioral Response Team with LHSC has contributed to extensive training of interprofessional staff across the south west region, and in May 2013 she presented on Person-Centered Care at the Geriatric Medicine Refresher day. Joan Earl, LHSC, and Ann Jarvie, SJHC, have provided educational sessions on PIECES, GPA and Montessori techniques for long term care home staff and community partners. Tom Ross and Ed Black of RMHC have collaborated on research projects to assess the automated falls detection system research study for the RMHCL inpatient program. As well Bonnie Purcell, psychologist of LHSC GMHP and BRT has been identified as a provincial champion for the identification and management of addictions in late life. She has been involved in knowledge dissemination related to this important area. Finally, Patrick Fleming LHSC GMHP has been a member of the Provincial Team exchange for 30 years. Congratulations Patrick on your years of supporting older adults and their mental health needs.

Tony O’Regan retired from Regional Mental Health London in February 2013 and with his retirement leaves a legacy of care and commitment to those suffering from mental illness. Tony started his nursing career in England in 1971 and qualified in developmental disabilities nursing in 1974. Tony was awarded a Bachelor of Science with Honors in Nursing Studies from the University of Hertfordshire in 1993 and a Master of Science in Mental Health Studies from the University of London in 1997. In December 1997, Tony immigrated to Canada where he took up the position of Clinical Nurse Specialist in Geriatric Psychiatry at St Boniface Hospital in Winnipeg, Manitoba. In August 2005, Tony and his family settled in London, and he joined the SJHC Geriatric Program (within LHSC) as Clinical Nurse Specialist in Geriatric Psychiatry on the Geriatric Consultation Liaison Team, transferring to the RMHC site in February 2008. Tony plans to continue to fulfill his academic affiliations/appointments at Western University which include Adjunct Clinical Professor at the Arthur Labatt Family School of Nursing, and his cross appointment as a Lecturer within the Division of Geriatric Psychiatry, where he also represents the Division on the Division of Developmental Disabilities Advisory Board. He will continue on the Geriatric Psychiatry Symposium Planning Committee, where his incredible knowledge and connections, as well as talent for coming up with good titles, have contributed so much to this annual event for over five years.

Dr. Nalla Durai has been recruited to join LHSC Geriatric program from the Jesse Brown VA Medical Center in Chicago, Illinois, where he is an Associate Professor of Clinical Psychiatry, and Director of Training, PRIME Residency, Department of Psychiatry and Behavioral Sciences, University of Illinois School of Medicine in Chicago. He will be joining the Division in 2014. His clinical areas of expertise include consultation liaison psychiatry, shared care, and addictions in late life.

Research
Dr. Vasudev is an Assistant Professor in Geriatric Psychiatry and cross appointed to Clinical Pharmacology, Department of Medicine at Western University. He joined the Department of Psychiatry and Division of Geriatric Psychiatry at Western University in September 2010 from Newcastle Upon Tyne, UK. Since his arrival, he has been very actively involved in a number of research activities with a focus on cardiovascular factors in late life depression and psychopharmacology. As a junior faculty member, he has published and presented extensively in this area and has ongoing research grants and applications, thus showing great potential and commitment to applied clinical research investigations. He has demonstrated exceptional self-directed work and initiative in this area, while continuing to carry a full clinical work load and
active participation in divisional educational activities. This spring 2013, Dr. Akshya Vasudev’s application to ICES@Western for the faculty scholarship program was successful and becomes the first member of the Department of Psychiatry to have this affiliation.

Congratulations to Dr. Vasudev, who was awarded the AMOSO opportunity fund for two years, as well as Department of Psychiatry start-up funding for the study titled “Quantify the Medial Prefrontal Cortex (MPFC) responsiveness to Parasympathetic Nervous System (PNS) modifiers in Late Life Depression (LLD).” This study is actively recruiting and completion is expected in December 2013. Dr. Vasudev also reported on a new project in the works titled “Music therapy in the treatment of agitation in patients with dementia on an inpatient unit.”

Dr. Iris Gutmanis continues to play a significant role in program evaluation and research for a variety of related Division activities. As the evaluation lead for the SW-LHIN BSO project, she has established fruitful working relationships with provincial partners regarding evaluation of this new service delivery strategy. In addition, she is also contributing to the qualitative research “Exploring Theatre Based Knowledge Exchange Strategies.” It featured the data and interpretive findings from two separate, qualitative research projects transformed into stage plays. Respectively, the two studies/plays explored/re-enacted the negotiation of dementia care practices in long-term care (LTC) and home-based settings. Critical facilitation guides were developed to enable the kind of deep reflection necessary to identify the conditions and mechanisms identified in the original research as oppressive. The works were performed for care providers in community-based and LTC settings. The transformative learning that can result from watching/experiencing All Behavior Has Meaning or Advocating for Hilda is brought about during the facilitated post-viewing discussion. Other collaborators include Dr. Lisa Van Bussel and members of the Faculty of Health Sciences Mark Speechley and Cathy Ward-Griffin and successful PHD candidate Ryan Deforge.

Dr. Amer Burhan has been successful in receiving grant money from the Instructional Innovation and Development Fund for the “Assessment of the Feasibility of Virtual Interactive Case System in Teaching of Movement Disorders in Geriatric Psychiatry Patients.” He has collaborated with Dr. Mandar Jog (Professor of Neurology, Chair of Centre of Excellence in Parkinson Disease at Schulich School of Medicine and the Head of University Hospital’s Movement Disorder Clinic). Teaching clinical expertise and the cognitive processes involved in clinical reasoning is a core component of medical training at all levels. Simulated clinical cases would provide the opportunity for exposing students to a wider variety and a greater number of cases than they would otherwise encounter during clinical rotations. Virtual Interactive Case (VIC) software was developed for creating online simulations of patient encounters in clinics (http://pie.med.utoronto.ca/vic/). In addition to this work, he has published with Dr. Priya Subramanian, Luljeta Pallaveshi, and Dr. Abraham Rudnick on the “The Experience of Patients with Schizophrenia Treated with Repetitive Transcranial Magnetic Stimulation for Auditory Hallucinations” in the May 2013 Case Reports Psychiatry. As a collaborator with the 4th Canadian Consensus Conference on the Diagnosis and Treatment of Dementia (CCCDTD4), he has lead the article “Role of emerging neuroimaging modalities in patients with cognitive impairment: a review from the Canadian Consensus Conference on the Diagnosis and Treatment of Dementia 2012” which will be published in Alzheimer’s Research & Therapy in July 2013.
Continuing Professional Development

The Tenth Annual Geriatric Psychiatry Symposium “Leading and Learning Together: Celebrating a Decade of Success,” was held on Wednesday, November 7, 2012. With over 150 participants in attendance that featured two plenary speakers and twelve concurrent workshops, this full day event has continued to grow and welcomed participants from London, the surrounding counties, and across the province. Keynote Speaker Dr. Kiran Rabheru spoke on “The Changing Tide of Seniors Mental Health Care” and conducted a workshop on “Recognizing and Managing the Complications of Dementia: Behavioral and Psychological Symptoms of Dementia.” Plenary speaker Dr. Maggie Gibson, psychologist at Parkwood Hospital and recently elected President of the Canadian Association on Gerontology (CAG), presented “How Stigma Exacerbates Challenges at the Residential End of the Continuum of Care and What You Can Do About It.” In addition, there were twelve concurrent workshops on topics such as Polypharmacology, Mindfulness-Based Cognitive Behaviour Therapy, Communication Strategies, Geriatric Mental Health in the Emergency Department, Diogenes Syndrome (Hoarding), and Smoking Cessation.

The LHSC Geriatric Mental Health Program Continuing Professional Development group was set up in November 2011. This education group provides ongoing CPD presentations and has expanded its partners to include RMHCL, and other OTN sites. Florence Dean, RN, and Dr. Akshya Vasudev have helped organize and chair this CPD group since its development. Topics covered this past year include, ECT, Meditation, Centre for Cognitive Vitality, Addictions in Late Life, Mental Status Assessment, and Diogenes Syndrome.

The Division’s contribution to the Departmental Continuing Professional Development Rounds occurred April 11, 2013 with the topic: “Healthy Aging: Enhancing Psychological Resiliency and Well-Being in Older Adults” with a presentation by Dr. Marnin Heisel on “Enhancing Psychological Resiliency and Well-Being and Contributing to Healthy Aging.” Resident Dr. Grace Ferraria presented an excellent case study with the support from faculty Dr. Jennifer Oates.

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.

Dr. Amer Burhan presented at the Canadian Geriatrics Society meeting in Toronto, April 2013 on subcortical Dementia.

Subspecialty Training

The Division of Geriatric Psychiatry submitted an application to the Royal College of Physicians and Surgeons of Canada for approval of a two year subspecialization in Geriatric Psychiatry here at Western University. The application was sent in March 2012, and the decision from the accreditation committee was received in late May 2012. Unfortunately, the application was not approved in this round. The reapplication process will start in the fall of 2013. A process for appointment and implementation of the Geriatric Psychiatry Application Planning Group and subspecialty director has been developed.
Undergraduate Education
Dr. Helen Park coordinates the Undergraduate education for geriatric psychiatry. The 2012-2013 third year clinical clerks had an option to complete a two week selective during the six week block psychiatry rotation. A total of twenty-two clinical clerks have completed a geriatric psychiatry program rotation and of this rotations 15 were core rotations and 4 were selective rotations. These students were divided between LHSC and RMHC sites.

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

The Geriatric Postgraduate Education coordination is under the leadership of Dr. Jennifer Oates and continues to run a multi-disciplinary Geriatric Psychiatry lecture series. During the Geriatric Psychiatry rotations, the PGY3 residents receive training at both RMHC and LHSC sites. The residents are given an opportunity for a full range of clinical experiences from acute care to specialized inpatient treatment. 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. Eight residents had rotations in geriatric psychiatry this past year. Dr. Arany Shanmugalingam was the Resident Representative with Geriatric Psychiatry this year. The David Harris Award was established 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 12, 2013, was Dr. Rebecca Tudhope.

This is a sample of the Geriatric Psychiatry PGY-3 resident lecture topics and speakers.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychotherapy in the Elderly</td>
<td>Dr. Jennifer Oates</td>
</tr>
<tr>
<td>Psychology and neuropsychiatric Assessment</td>
<td>Dr. Ed Black &amp; Tom Ross</td>
</tr>
<tr>
<td>Psychopharmacology in the Elderly</td>
<td>Dr. Akshya Vasudev</td>
</tr>
<tr>
<td>Normal Aging</td>
<td>Dr. Helen Park</td>
</tr>
<tr>
<td>Driving Assessment (and other major geriatric assessment tools)</td>
<td>MaryAnne MacCallum &amp; Dr. J. Oates</td>
</tr>
<tr>
<td>Psychosis and Delirium</td>
<td>Dr. Noel Laporte</td>
</tr>
<tr>
<td>Mood Disorders in the Elderly</td>
<td>Dr. Akshya Vasudev</td>
</tr>
<tr>
<td>DAT and MCI Other Dementias, including FTD, Lewy Body Dementia and Vascular Dementia</td>
<td>Invited Lecturers hosted by Dr. Vasudev or Dr. Oates</td>
</tr>
<tr>
<td>Management of BPSD</td>
<td>Dr. Lisa Van Bussel</td>
</tr>
<tr>
<td>Presentation and Management of Addictions in the Elderly</td>
<td>Dr. Karin Kerfoot</td>
</tr>
</tbody>
</table>

Clinical Service Development
Provincially, there has been a focus on the care of the Elderly with the Ontario's Seniors Strategy "Living Longer, Living Well" by Dr. Samir Sinha, Provincial Lead. In this report, there is reference to senior mental health services and the Behavioral Supports Ontario (BSO) strategy. Within the Southwest region, the BSO is a strategy focusing on improvement in quality of care for older adults at risk or suffering from mental health, addiction, dementia and related behaviours. This initiative is based on the pillars of improving service coordination, collaboration and clinical outcomes through education, building capacity and clinical collaboration. The
Division of Geriatric Psychiatry is participating in the Behavioral Supports Ontario Project. Division members involved are Dr. Jennifer Oates, Dr. Akshya Vasudev, Dr. Amer Burhan, Dr. Lisa Van Bussele, Dr. Iris Gutmanis, Kelly Simpson and Jennifer Speziale. The project focuses on the development of enhanced services for seniors with mental health, addictions, dementia, and behavioral disturbance. Congratulations to this dedicated team for sharing their specialized knowledge and skills, and influencing and advocating for significant change and improvement in services for our region. BSO SWLHIN kickoff event occurred on February 2013, with over 150 participants in the day. Also, the hiring of BSO long term care position across 78 nursing homes in the SW LHIN occurred over the past year. With the combined efforts of SJHC, LHSC, and Alzheimer society staff over 3,000 training sessions for GPA, Pieces and Montessori have provided across the South West LHIN.

Drs. Oates and Vasudev have been working with the LHSC services to develop an intake system, and timely clinical response with Behavioral Response Team. The growth of the LHSC geriatric mental health services has made a significant impact on the community of London / Middlesex. Strong collaborations have been developed with Alzheimer Society London/Middlesex, McCormick Home and nursing homes in the London area.

The Division strives to improve the mental health care of older adults through their partnerships, clinical expertise, education and research activities. Growth and expansion of the Division’s faculty base through recruitment will support the core goals for expansion of education (subspeciality training) and research initiatives.

Division of Neuropsychiatry
Leadership in Neuroscience Research

Dr. 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 who brought the Autism Centre of Excellence to the University of Western Ontario. 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* including the dorsal anterior cingulate cortex, auditory cortex, and hippocampus and an *emotional encoding network* including the ventral anterior cingulate cortex, orbital frontal cortex, and amygdala. Von Economo neurons, which are particularly prominent in the human brain in the dorsal and ventral anterior cingulate cortex and the fronto-insular cortex, may have allowed synchronization of these regions in the human brain making representation and complex social relationships possible.

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*. Autism is likely associated with failure of the *representational network* and frontotemporal dementia may be associated with failure of several networks including the *representational* and *emotional encoding networks*. 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. Many of these regions are also associated with functional deficits in resting state networks associated with directed effort and self-monitoring (see Figure 1). The schizophrenia group was awarded a five year $739,755 renewal grant from the Canadian Institutes of Health Research this year 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 will be covered by a $6,235,244 grant from the *Canadian Foundation for Innovation* on which Dr. Williamson was a co-applicant. The characterization of the final common pathways of these disorders may open new avenues for treatment.
Figure 1: Preliminary 3.0 T resting state, default mode functional MRI ICA group differences in the ventral prefrontal cortex first major depression patients compared to schizophrenic patients in keeping with the proposed model.

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. 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.

The dissociative subtype was included in the new DSM V released this year, a spectacular achievement which was celebrated by the entire Department. 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,
Zurich, Switzerland and Bologna, Turin and Padova, Italy. Much of this work has been funded by the Canadian Institutes of Health Research. However, Dr. Lanius is one of four investigators from Harvard, New York University, Emory University and Western who were awarded $3,090,352 over four years from the National Institute of Mental Health in United States to study the effectiveness of a number of treatment strategies in posttraumatic stress disorders. Dr. Lanius has also received substantial funding from the Canadian Institute of Military and Veterans Health Research.

Dr. Frewen has published important work on social emotional processing in these patients in Social and Cognitive Affective Neuroscience, NeuroImage, European Journal of Psychotraumatology and Psychological Bulletin supported by grants from the Ontario Mental Health Foundation and the Canadian institutes of Health Research. In a fascinating paper published in the Social and Cognitive Affective Neuroscience, Dr. Frewen and his colleagues explored the neuronal basis of self-esteem. While self-attribution has been previously studied, Dr. Frewen demonstrated the role of negative emotion in self-attribution illuminating previous inconsistencies in the literature that had failed to take this into account (Figure 2). Dr. Frewen has recently received the American Psychological Association Division 56 Early Career Award in recognition of outstanding contribution to the study of psychological trauma.

**Figure 2:** Frewen et al (2012) showing correlates of negative self-esteem, particularly in the ventral medial prefrontal cortex during a functional MRI study comparing self and other emotion valenced appraisals.

**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. The First Episode Mood and Anxiety Program was awarded a *Provincial Innovation Fund* grant this year 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 in the last budget.

Dr. Derek Mitchell collaborates with Dr. Osuch on a number of projects on the cognitive neuroscience of affective disorders. In addition to the paradigm development on the above studies, Dr. Mitchell has become well known for his work on the brain mechanisms of conscious perception of emotional stimuli with the publication of an invited article in *The Neuroscientist* and papers on decision making and emotional regulation in *NeuroImage* and *Behavioural Brain Research* supported by grants from *Natural Sciences and Engineering Research Council of Canada* and the *Social Sciences and Humanities Research Council of Canada*. He has renewed his *Natural Sciences and Engineering Research Council of Canada* grant for five years this year and 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* this year.

**Autism**

Dr. Nicolson has been looking at the brain circuitry associated with autism supported by a *Canadian Institutes of Health Research* grant. 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 is one of six investigators awarded $1,950,000 by the *Ontario Brain Institute* to study autism and other neurodevelopmental disorders. Dr. Nicolson will coordinate the brain imaging aspects of this multidisciplinary clinical and genetic study. This study has recently been extended for a further five years with $12,500,000 support.

**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 has 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. His work on novel regulators of dopamine receptors was published in the *International Journal of Neuropsychopharmacology* this year.

**Educational Accomplishments**

Neuropsychiatry offers research training opportunities for residents within all core programs in order to prepare for a research fellowship or postgraduate degree. 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 an MSc and a PhD student in Medical Biophysics and a postdoctoral student with Dr. Osuch. Dr. Nicolson offers a clinical and research experience in autism to residents and co-supervises a PhD student in Medical Biophysics who successfully defended his thesis this year.

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. Mitchell has been very active with graduate training. Two students have completed their MSc degrees this year with Dr. Mitchell, and a PhD and an MSc student are in progress through the 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.

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.

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 the 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 the 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. 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.

Grants


12. Lanius, R.A. “Intergenerational transmission of trauma”, Judith Harris Foundation. January 2008 – December 2012 (extended to March 2015), $750,000 ($150,000/yr for five years)


17. Osuch, E. Funding from the Bell Canada initiative has been secured for one day a week for three years for FEMAP's addiction specialist. Approximately $222,461.10. 2012–2015.


Books

Chapters and Invited Publications


Peer Reviewed Publications


Selected Invited Presentations
1. Dr. Lanius, Workshop Presentation, “How understanding the neurobiology of complex trauma disorders can inform clinical practice: A social cognitive and affective neuroscience approach”, University of Zurich, Department of Psychology, Zurich, Switzerland, March 4 & 5, 2013.

2. Dr. Lanius, Colloquium Speaker, “The traumatized self: Clinical and neurobiological perspectives”, University of Zurich, Department of Psychology, Zurich, Switzerland, March 5, 2013.


5. Dr. Lanius, “Complex adaptations to psychological trauma: Clinical and neurobiological perspectives” TOPDD Conference, Baltimore, Maryland, April 27, 2013.


EDUCATION

Undergraduate Education in Psychiatry

Dr. Sandra Northcott, Director

It has been another busy year in undergraduate education.

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, Heidi Haensel, and Julie Richard. I would also like to express my sincere thanks to all the faculty members who participated in the lectures and small group sessions. The course has been very well received and students report that the course has prepared them well for their clinical clerkship.

In the past year, Dr. Sreelatha Varapravan has reorganized the learning objectives for PCCM (Patient Centred Clinical Methods) to emphasize clarity and concordance with the overall course objectives. The Psychiatry PCCM course, offered in second year, has undergone several successful changes to meet the challenge of being offered before the didactic component of Meds 5207. Significant training of the standardized patients has been put in place and the success of these innovations is confirmed by the positive feedback from students and faculty alike. In addition, efforts have been made to coordinate clinical vignettes with other PCCM courses to highlight objectives that extend across the curriculum.

This year we completed the second 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 & Anxiety Disorders, Urgent Consultation Service, ER Psychiatry (CEPS), or Forensics.

SWOMEN continues to play an integral role in training our clerks. Dr. Ranjith Chandrasena has coordinated the clerkship experience at the various sites. In the last year, we had clerks rotate in 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 are now able to teleconference the resident
teaching series as well. Thank you to Drs. Hollam Sutander, Vadim Beletsky and Rachana Bodani for their significant contributions during the past academic year. The resident teaching sessions remain one of the most highly rated educational experiences within the clerkship.

On June 11, 2013 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 shared by Drs. Jennifer Barr and Leslie Ritchie. The Clerkship Supervisor of the Year for London was awarded to Dr. Mark Watling with Dr. Brian Burke being recognized in Windsor. Dr. Sivakumaran Devarajan received the highest evaluations for the SWOMEN faculty.

In addition to the departmental awards, faculty have been recognized at the Schulich and National Level. Dr. Sandra Northcott received the Hippocratic Council Clinical Science Teaching Award in May 2013. Dr. Carla Garcia was awarded the CAME (Canadian Association for Medical Education) Certificate of Merit during their annual meeting in April 2013. The award recognizes faculty committed to undergraduate, postgraduate and continuing medical education.

One objective of the Undergraduate Education Committee has been to increase our visibility with first and second year medical students and to encourage clinical electives. A number of faculty provided half-day observerships to first and second year medical students throughout the year. On April 30, 2013, we held the second Taste of Psychiatry at Windermere Manor. Fifty-one medical students joined residents and faculty for presentations outlining the various clinical and research opportunities available within the Department. Complimenting the talks outlining the different divisions, Dr. Ngo gave a presentation titled, “Why I chose psychiatry” and Dr. Heidi Haensel talked on “Maintaining a Work-Life Balance.” 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.

The UGE committee was very excited to see so many Schulich students choose a residency in Psychiatry during the past CaRMS match. In the past academic year, we provided fourth year electives to 30 Schulich students and 27 visiting elective students. This doubled our numbers from the previous year.

I would also like to acknowledge the efforts of Ms. Melanie VandenBorre, our undergraduate administrative assistant. Melanie has been indispensable due to her communication and organizational skills.

The success of our undergraduate program reflects the dedication of so many of our interdisciplinary faculty and support staff. It has been very rewarding to work with a group of individuals who are passionate about psychiatry and eager to participate in undergraduate education.

Postgraduate Education in Psychiatry
Dr. Volker Hocke, Director

The academic year 2012-2013 started out with a continuation of preparation for the accreditation of our residency Program according to the standards of the Royal College of
Physicians and Surgeons. To prepare for accreditation, the Program had to review all details of our teaching, our evaluation tools and policies, and had to describe our processes in detail. We have to say a great thank you to faculty, residents, staff and the Residency Training Committee (RTC) members for their conjoined work and preparing us well for the day of the survey. The survey itself happened on October 1 and October 2. The surveyor expressed his great thanks and appreciation as to how well the accreditation was prepared. In January of 2013, we received the Royal College approval for our Program with a request of an internal review in two years. The review request was based on aspects that we just recently had implemented. We have built a mandatory research component to the Program; we had started sending out teacher evaluations; and we were in preparation of presenting more opportunities for career counseling and transition out of the Program into independent practice. The internal review is meant to confirm that these developments will continue and will be sustainable. In summary, the accreditation was a success for our Program.

The Department was able to support a second full time administrative staff for our Program. Many organizational aspects which had needed more attention in the past could now be addressed. Many members of our Department and the residents expressed their appreciation about this additional support because it made the Program run much smoother than before.

We would like to say thank you to Eva Adams who had managed the Program as a sole administrative staff for more than five years until she went on maternity leave in May 2013. Suzy Mendes has shadowed Eva for several months to learn all the little details that need a lot of attention to make the Program effective. After Eva Adams left, Carissa Peterson joined as the second staff for our Program.

After accreditation, the RTC decided to consolidate all the major changes we had done in the preparation for accreditation. The rotation schedule, the didactic teaching and the longitudinal educational experiences are now in place, well-aligned with each other and form a transparent body of educational experience.

Dr. Youri Rybak, a member of the RTC, took over the role of the curriculum portfolio lead and reviewed the appropriateness of our teaching in preparation for the next academic year.

With our increased staff support, we were able to sort out many glitches in the One45 evaluation software, create new evaluation objectives and forms, and monitor attendance and leave times much better.

The evaluation portfolio has developed a regular schedule for the residents to be assessed additionally to rotation assessments. Regular mock exams are now scheduled throughout the year as well as OSCE exams and structured observed interviews called STACERS.

Stephanie Rabenstein has joined our psychotherapy subcommittee to support our educational endeavors in family therapy. We are now able to provide family therapy on a proficiency level.

Members of the RTC developed a workshop for supervisors which was presented in March. The goal was to inform supervisors about new policies and the expectations in state of the art supervision.

Additionally, we started a subcommittee with resident representation and faculty representation to collect, discuss and solve problems around on-call services.
After a meeting in January 2013 between Dr. Chris Watling, Associate Dean, Postgraduate Education; Dr. Jeff Reiss, leader of the working group to expand our academic mission; the Program Director; and faculty from Windsor, the decision was made to expand and build a Windsor based stream of the residency Program. Several meetings are underway to work out the details to achieve the goal of starting the program in July 2015.

Dr. Arany Shanmugalingam started a project in the fall of 2012 with a goal of implementing a mentorship program for incoming first year residents. She did an extraordinary job in preparing the potential mentors, building a mentorship committee and developing an academic guideline as the foundation to continue this outstanding project. The initiative was very well-received and is a great success story.

Last but not least, we would like to welcome our new residents who joined us as of July 1, 2013.

Dr. Russlan Abouhassan
Dr. Kara Dempster
Dr. Milena Gosk
Dr. Charles Ho
Dr. Kristina Rice
Dr. Rickinder Sethi
Dr. Aturan Shanmugalingam
Dr. Sonia Wadhwa

Welcome to our Program.

**Continuing Professional Development**

*Dr. Varinder Dua, Director*

*Dr. Joel Lamoure, Assistant Director*

This report highlights the educational activities that have been pursued and completed in the Department of Psychiatry between July 2012 and June 2013. It focuses on the monthly Continuing Professional Development events, the weekly Coordinated Professional Development (CPD) activity at the hospitals, special CPD events, and Collaboration with the Canadian Psychiatry Association.

In keeping with a vision of collaboration and partnership, we have endeavored to promote inter-professionalism and ensure that the learning activities provided are evidence-based, balanced and as free of bias as possible. CPD has been able to advance objectives utilizing experts from across Western University, our LHIN as well as external speakers from a national and international scope of expertise across the mental health spectrum.

The programs offered through the Department meet the self-accreditation guidelines of the Royal College of Physicians and Surgeons of Canada (RCPSC) and as such, are approved group learning activities (Section 1) as defined by the Maintenance of Certification (MOC) program of the RCPSC. Participants at our CPD events are always encouraged to utilize the entire breadth and depth of the Section 2 MOC Program credits offered by the RCPSC to its Fellows so that they can enrich their learning portfolio and provide evidence-based care to their patients. Specifically the participants are also encouraged to use the content of the CPD for triggering Personal Learning Projects (PLPs) and to utilize this knowledge in managing their
patients. In addition, they can embrace their learning portfolio by engaging in inviting their peers to do focused chart audit feedback. Moving ahead, we will be striving to advance exposure in our CPD events to allow members of the Department to gain Section 3 credits, engaging in active feedback. We encourage all physicians to log all of your MOC credits by logging onto the RCPSC website and utilizing your customized MAINPORT.

The Department of Psychiatry and the hospital-based Coordinated CPD Program funds many of the CPD events. However, in some instances, we were successful in obtaining educational grants from the pharmaceutical industry. Educational grants are accepted in accordance with the Association of American Medical Colleges (AAMC) and Western’s guidelines related to interaction with industry. In addition, we adhere to the Canadian Medical Association (CMA) Code of Ethics, and the CMA policy “Physicians and the Pharmaceutical Industry” and the RCPSC guidelines that dictate the relationship of pharmaceutical industry to the Universities and Institutes of Learning.

The CPD Executive Committee (Department CPD) and the CPD Committee (Coordinated CPD) are the planning committees that provide input into the CPD programs and direction regarding future programs. Both of these groups are constituted of physicians and allied health professionals from the London Hospitals.

The monthly CPD programs are being televideo-conferenced to 14 sites and the weekly CPD activities are televideo-conferenced to 5 sites through the Ontario Telemedicine Network (OTN). We continue to utilize the pre-test and post-test tools for the participants in our monthly CPD activity for individuals to self-evaluate their knowledge base prior to and after completion of the CPD activity.

In closing to reflect on this year, we have been fortunate to collaborate with a strong support and administrative team. From Regional Mental Health Care, we’d like to thank Joanne Chapman. From Western University, we would like to thank Carissa Peterson for providing support for the CPD program. And, finally, we would like to welcome our latest addition, Bela Franze who joined us in June as the new Administrative Assistant for the CPD Program in the Department of Psychiatry.

We would also like to take this opportunity to thank both Dr. Paul Links and Ms. Deborah Lucas for their support.

We are pleased to recap all of the CPD events held during this past academic year as follows:

**Monthly Departmental Rounds**  
*September 2012 - June 2013*

These CPD 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 DSection 1.

The Department monthly CPD continued to take place on the second Thursday of the month and we had excellent speakers from within the Department, as well as external (Schulich School of Medicine & Dentistry, and national and international experts in the field) speakers. These
The Department’s Monthly CPD event held ten presentations that were well attended. Below is a list of these presentations.

<table>
<thead>
<tr>
<th>Dates</th>
<th>Speakers</th>
<th>Presentations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sept 13, 2012</td>
<td>Dr. Rob Nicolson</td>
<td>Genes, Evolution and Intelligence</td>
</tr>
<tr>
<td>Oct 11, 2012</td>
<td>Dr. Margaret Steele</td>
<td>The Dynamic Journey of Mentee to Mentor</td>
</tr>
<tr>
<td></td>
<td>Dr. Doug Jones</td>
<td></td>
</tr>
<tr>
<td>Nov 8, 2012</td>
<td>Dr. Marnie Rice</td>
<td>Psychopaths: Neurological Deficits by Design?</td>
</tr>
<tr>
<td>Dec 13, 2012</td>
<td>Dr. Paul Frewen</td>
<td>Altered States of Consciousness &amp; Psychotraumatology: A 4 – Dimensional Model</td>
</tr>
<tr>
<td></td>
<td>Dr. Ruth Lanius</td>
<td>The Dissociative Subtype of PTSD: Clinical and Neurobiological Evidence</td>
</tr>
<tr>
<td>Jan 10, 2013</td>
<td>Dr. Verinder Sharma</td>
<td>Postpartum Depression: Diagnostic Treatment and Research Issues</td>
</tr>
<tr>
<td>Feb 14, 2013</td>
<td>Dr. John G. Gunderson</td>
<td>Interpersonal Hypersensitivity: Borderline Personality Disorder’s Core</td>
</tr>
<tr>
<td>Mar 14, 2013</td>
<td>Dr. Joel Lamoure</td>
<td>Psychopharmacology of Pain and Overlap with Psychotropics</td>
</tr>
<tr>
<td>Apr 11, 2013</td>
<td>Dr. Marnin Heisel</td>
<td>Enhancing Psychological Resiliency and Well-Being and Contributing to Healthy Aging</td>
</tr>
<tr>
<td>May 9, 2013</td>
<td>Dr. J. Donald Richardson</td>
<td>Psychiatric Management of Military-Related PTSD</td>
</tr>
<tr>
<td>June 13, 2013</td>
<td>Dr. David A. Wolfe</td>
<td>Bullying: Development Implications and Prevention Strategies</td>
</tr>
</tbody>
</table>

**Learning After Five**

The Learning After Five Rounds is a self-accredited 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)

The Learning After Five events are a forum for physicians, students, and allied health to engage in interactive learning through small group activities. These events generally take place on the third Tuesday of each month at the Best Western Lamplighter Inn and Conference Centre.

<table>
<thead>
<tr>
<th>Dates</th>
<th>Speakers</th>
<th>Presentations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sep 18, 2012</td>
<td>Dr. Rachana Bodani</td>
<td>Cardiovascular Effects of Psychotropic Medications: Implications for Treatment</td>
</tr>
<tr>
<td>Oct 16, 2012</td>
<td>Dr. Chekkera Shammi</td>
<td>Use of Long-Acting Injectables in Schizophrenia-an Evidence-Based Review</td>
</tr>
<tr>
<td>Nov 6, 2012</td>
<td>Dr. Kiran Rabheru</td>
<td>Depression in the Elderly</td>
</tr>
<tr>
<td>Dec 18, 2012</td>
<td>Ms. Jessica Stovel</td>
<td>The Interface Between Psychiatry and Neurology</td>
</tr>
</tbody>
</table>
### Weekly Co-Ordinated CPD Monday Rounds

The Coordinated CPD Program provides an educational opportunity for healthcare professionals at Regional Mental Health Care London and St. Thomas, and the Mental Health Care Program at Victoria Hospital, London Health Sciences Centre.

The CPD Committee includes representatives of this target audience and is responsible for the planning of the program. 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.

During the 2012-2013 academic year, 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, which included assertive community treatment teams located in Strathroy, Woodstock and St. Thomas. A total of 30 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. A summary of the events is provided below:

<table>
<thead>
<tr>
<th>Date</th>
<th>Speaker</th>
<th>Presentation Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sept 10, 2012</td>
<td>Dr. Paul Links</td>
<td>Psychiatric Patient Discharge: Optimizing Patient Outcomes and Minimizing Risk of Suicide</td>
</tr>
<tr>
<td>Sept 17, 2012</td>
<td>Prof. Edward Shorter</td>
<td>Electroconvulsive Therapy: Yesterday, Today and Tomorrow</td>
</tr>
<tr>
<td>Sept 24, 2012</td>
<td>Dr. Richard O'Reilly</td>
<td>Best Practices Using Community Treatment Orders</td>
</tr>
<tr>
<td>Oct 1, 2012</td>
<td>Dr. Deborah Corring</td>
<td>Evaluation of the Establishment of a Recovery-Oriented Milieu in a Psychiatric Hospital Tertiary Care Inpatient Unit</td>
</tr>
<tr>
<td>Date</td>
<td>Speaker</td>
<td>Presentation Title</td>
</tr>
<tr>
<td>------------</td>
<td>----------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Oct 15, 2012</td>
<td>Spiritual Care Team</td>
<td>Making Room for Questions that Empower Care</td>
</tr>
<tr>
<td>Oct 22, 2012</td>
<td>Dr. Kamini Vasudev</td>
<td>Quality Improvement for Physical Health in Severe Mental Illness: Food for Thought</td>
</tr>
<tr>
<td>Oct 29, 2012</td>
<td>Dr. Jennifer Tiffney</td>
<td>Circadian Rhythm Sleep Disorder: A case presentation</td>
</tr>
<tr>
<td>Nov 19, 2012</td>
<td>Dr. Michael Szul</td>
<td>CPSO Perspectives on Opioid Prescribing</td>
</tr>
<tr>
<td>Nov 26, 2012</td>
<td>Dr. Christopher Ryan</td>
<td>Complementary/Alternative Medicine in the Treatment of Depression</td>
</tr>
<tr>
<td>Dec 3, 2012</td>
<td>Dr. George LobaGutierrez</td>
<td>Executive Dysfunction in Borderline Personality Disorder: An Overview</td>
</tr>
<tr>
<td>Jan 7, 2013</td>
<td>Dr. Varinder Dua &amp; Dr. Joel Lamoure</td>
<td>Emerging Antipsychotics – Are they any Different?</td>
</tr>
<tr>
<td>Jan 21, 2013</td>
<td>Dr. Margaret Steele &amp; Dr. Robin Walker</td>
<td>South Western Ontario Academic Health Network (SWAHN)</td>
</tr>
<tr>
<td>Jan 28, 2013</td>
<td>Dr. Rachana Bodani</td>
<td>Aboriginal Mental Health in Canada</td>
</tr>
<tr>
<td>Feb 4, 2013</td>
<td>Dr. Louis Charland</td>
<td>Anorexia Nervosa: In the grip of a passion</td>
</tr>
<tr>
<td>Feb 11, 2013</td>
<td>Ms. Marleen VanLaethem &amp; Ms. Kathy White</td>
<td>Mental Health Care in the Age of Social Media: Reflecting on ethical concerns</td>
</tr>
<tr>
<td>Feb 25, 2013</td>
<td>Dr. David LeMarquand</td>
<td>Exploring the Link Between Pornography and Violence</td>
</tr>
<tr>
<td>Mar 4, 2013</td>
<td>Acharya Vivek Gupta</td>
<td>Making Sense of Stress</td>
</tr>
<tr>
<td>Mar 18, 2013</td>
<td>Dr. Ross Berringer</td>
<td>Medico-Legal Hot Spots for Psychiatrists</td>
</tr>
<tr>
<td>Mar 25, 2013</td>
<td>Dr. Maryna Mammoliti</td>
<td>Doctor, I have this rash: Review of cutaneous drug reactions in psychiatric practice</td>
</tr>
<tr>
<td>Apr 8, 2013</td>
<td>Dr. Vadim Beletsky</td>
<td>Tattoos, Piercing and Mental Health</td>
</tr>
<tr>
<td>Date</td>
<td>Speaker</td>
<td>Presentation Title</td>
</tr>
<tr>
<td>------------</td>
<td>----------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Apr 9, 2013</td>
<td>Ms. Julie Zamprogna Ballés &amp; Mr. David Nash</td>
<td><em>Physician-only session</em>&lt;br&gt;Presenting Evidence at CCB Hearings: Navigating the conundrums</td>
</tr>
<tr>
<td>Apr 15, 2013</td>
<td>Ms. Elizabeth Weldon, MTO</td>
<td>Assessing Fitness to Drive</td>
</tr>
<tr>
<td>Apr 22, 2013</td>
<td>Ms. Nancy Michienzi-James</td>
<td>A Peer to Peer Computer Training Program for Mental Health Consumers</td>
</tr>
<tr>
<td>Apr 29, 2013</td>
<td>Dr. Amresh Srivastava</td>
<td>DSM 5: Hope or Hype</td>
</tr>
<tr>
<td>May 6, 2013</td>
<td>Dr. Rahul Manchanda</td>
<td>LAls: Clinical Recommendations</td>
</tr>
<tr>
<td>May 13, 2013</td>
<td>Dr. Peter Giacobbe</td>
<td>Deep Brain Stimulation for Depression: Current Status and Future Directions</td>
</tr>
<tr>
<td>May 27, 2013</td>
<td>Dr. Lindsey George</td>
<td>Collaborative Mental Health Care: Challenges &amp; Possibilities</td>
</tr>
<tr>
<td>Jun 24, 2013</td>
<td>Dr. George Bartokis</td>
<td>Neuroglialpharmacology and the Impact of Antipsychotic Medications on Intracortical Myelination</td>
</tr>
</tbody>
</table>

**Needs Assessment**

In January of 2012, we conducted a needs assessment regarding educational activities for future programming. Though there were a low number of respondents, some suggestions for topics and improvement were noted, including an interest in online learning modules, webinars, and podcasts. We have continued through the current academic year to engage in proactive steps to appeal to the self-identified needs of members in the Department of Psychiatry.

**CPD Evaluation Tool**

The final version of the CPD Evaluation Tool was implemented in 2012 and has continued to be used through the past academic year with success. This initiative came from evaluations and needs-based assessments and is retained in keeping with self-accreditation guidelines pursuant to the Royal College.

**2012-2013 CPD Awards**

- **Best CPD Presentation by Junior Resident** Dr. Sharon Grace Ferreira
- **Best CPD Presentation by Senior Resident** Drs. Arany Shanmugalingam and Joy Abramson
- **Best CPD Presentation by Junior Faculty** Dr. Paul Frewen
- **Best CPD Presentation by Senior Faculty** Drs. Ruth Lanius and Verinder Sharma and Margaret Steele

**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

Special Events

Electroconvulsive Therapy: An Age Old Treatment with a New Twist
On Tuesday, December 11, 2012, a successful half-day symposium, featuring presentations by experts in the field of electroconvulsive therapy was held at the Wickware Amphitheatre at RMHC London. The program included an introduction with the basics of ECT (Dr. Noel Laporte), role of anesthesia (Dr. William Sischek), optimizing ECT outcomes to maximize efficacy and patient safety (invited guest speaker, Dr. Kiran Rabheru), parameters around parameter selection (Dr. Amer Burhan), and the program finished with maintenance ECT (Dr. Rabheru).

This event was open to the medical staff of St. Joseph’s Regional Mental Health Care London and St. Thomas, London Health Sciences Centre Mental Health Care Program; nursing staff involved in ECT treatment; as well as the physicians, psychiatrists and residents in Psychiatry, at Western. Attendance numbered 85 people (60% of the audience was comprised of medical staff: psychiatrists, family physician, and psychiatry residents).

Thanks to the planning committee members: Dr. Varinder Dua, Chair, Dr. Michael Fisman, Ms. Krista Harloff, Dr. Noel Laporte, Dr. Mary McDonagh, Dr. Richard Owen, Dr. Arany Shanmugalingam, Ms. Kathy White, and program assistants Joanne Chapman and Carissa Peterson. A special note of thanks to Dr. Laporte for acting as the moderator for the day.

Medicine Update for Psychiatry: 10th Annual
Our 10th Annual Medicine Update for Psychiatry was held on April 6, 2013 at Ivey Spencer Hall. The Theme of the event was: HIV and its interface with Psychiatry. We had sessions covering the Medical Overview of HIV, Managing Metabolic Complications of HIV, the Triple Diagnoses: HIV, SMI and SUD, HIV and Neurocognitive Disorders, Antiretrovirals and Common Psychiatric-Antiretroviral Drug – Drug Interactions and New Understanding of HIV Pathogenesis and the Key Role of Immune Activation. Our sincere thanks again to Linda Bruce at the Western CPD Office for her continued logistical and administrative support of this initiative.

Upcoming Events

3rd Annual Mental Health Symposium
This year’s Annual Mental Health symposium’s theme will be “Anxiety Disorders: Emerging Trends in Pathophysiology and Management.” The full-day symposium will be held on
Friday, October 25, 2013 at the Best Western Lamplighter Inn and Conference Centre in London, Ontario. We welcome a blend of external and internal expects, who will be able to address anxiety disorders across the spectrum.

The Symposium is open to all psychiatrists, physicians and allied health.

The full day program will feature:

**Plenary Sessions:**
- Dr. Randi McCabe – “Emotional Intelligence in Anxiety Disorders”
- Dr. Randolph Nesse – “Anxiety Disorders: An Evolutionary Perspective and its Clinical Relevance”

**Workshops:**
- The Burden of Triple Diagnosis: Anxiety, Mood Disorders and Substance Use Disorders – Dr. Viraj Mehta
- Transdiagnostic Treatments for Anxiety Disorders – Dr. Martin M. Anton
- Managing the new DSM-5 OCD- Related Disorders – Dr. Peggy Richter
- Optimizing Treatment Outcomes for Depression and Anxiety; From Neurobiology to Insurance Companies – Dr. Michael Rosenbluth
- Part 1- Treatment Resistance in Anxiety Disorders,
- Part 2 – Applying the Motivational Enhancement Strategies – Dr. Randi McCabe
- Relationships between Anxiety and Physical Illness: Implications for Assessment and Treatment - Dr. Heather Getty
- Treatment Resistant Anxiety Disorders: Obstacles in Psychopharmacology - Dr. Mark Watling

Finally, we continue to enjoy and work collaboratively with the Western CPD office and are actively involved in some of the current CPD initiatives (homecoming, academic detailing, and annual medicine update for psychiatry) and also engage in planning future CPD initiatives/programs.

We have always cherished lifelong learning and educational scholarship and both these pillars of learning form the basis for this 2012-2013 annual report. We hope to continue to foster this spirit and quest in the future.

**AWARDS**

Congratulations to all on their achievements!

**Drs. Craig Beach and Javeed Sukhera** have been accepted into the Future Leaders of Western (FLOW) Program for junior faculty at an early career stage who are likely to become leaders in research and/or education and/or advocacy in Canada.

**Dr. Paul Frewen** was awarded the American Psychological Association Division 56 early career award for contributions related to study of psychological trauma. The award recognizes
psychologists in the early stages of their careers who have shown outstanding achievement or who have made outstanding contributions to the study of psychological trauma.

**Dr. Carla Garcia** was awarded the CAME (Canadian Association of Medical Education) Certificate of Merit Award in April 2013 for her contributions to undergraduate medical education.

**Dr. Ruth Lanius** has been successfully reappointed for a second five year term as the Harris-Woodman Chair in Psyche and Soma.

**Dr. Paul Links** received the Weill Cornell Borderline Personality Disorder Resource Center’s "Distinguished Achievement in the Field of Personality Disorders Annual Award" for 2013.  
**Dr. Derek Mitchell** received a NSERC Discovery Grant for five years in the amount of $165,000 total (33,000 per year) for “Diverse effects of emotionally salient stimuli on brain and behavior.”

**Dr. Sandra Northcott** received the Hippocratic Council Clinical Science Teaching Award as voted by the London graduating class of 2013.

**Dr. Richard Owen** received the LHSC President's Award for Living Our Core Values - How We Serve Our Patients for 2013.

**Dr. Naveed Rizvi** received the Schulich Award for Excellence in Teaching/Distinguished Commitments/Oustanding Service in Continuing Medical Education for 2013.

**Dr. Margaret Steele** was awarded the Canadian Certified Physician Executive (CCPE) Credential for fulfilling eligibility criteria through a peer review/assessment process demonstrating she has leadership capabilities, knowledge and skills needed for successful performance and, more important, to direct, influence and orchestrate change in Canada's complex health care system.

**Dr. Akshya Vasudev** has been accepted into the Faculty Scholars Program in ICES@Western (Institute for Clinical Evaluative Sciences - http://www.iceswestern.ca/AboutUs.aspx)

**Dr. Amresh Srivastava** has been appointed Visiting Professor to the Department of Psychiatry and Neurosciences of the Maimonides University, Buenos Aires, Argentina.

**Department of Psychiatry Annual Awards for the Academic Year 2012-2013**

**Dr. Vadim Beletsky** received the Paul Patterson Resident Award in Dr. Patterson's memory to a resident who has demonstrated enthusiasm and ability as an educator.

**Dr. Brian Burke** – UGE Clerkship Supervisor of the Year Award – Windsor

**Dr. Charles Chamberlaine** for Clinician of the Year

**Dr. Sivakumaran Devarajan** - UGE Clerkship Supervisor of the Year Award – Rural

**Dr. Mohamad Elfakhani** – PGE Junior Resident of the Year Award

**Dr. Jack Ellis** received an honorable mention for the Clinical Innovation Award
Dr. Sharon Grace Ferreria – Best CPD Presentation by a Resident

Dr. Heidi Haesel received the Clinical Innovation Award

Ms. Bonnie Ideson received the Administrative Staff Award

Dr. Ruth Lanius/Dr. Verinder Sharma/Dr. Margaret Steele (3 way tie) – Best CME Presentation by Faculty

Dr. Michelle Ngo for the COPE Examination Resident Award

Dr. Helen Park – Excellence in Postgraduate Education in the Division of Geriatric Psychiatry

Dr. N. Raj Rajakumar received an NSERC Discovery Grant for $25,000 per year for 5 years (2013-2018) for his project: Molecular mechanisms of spatial memory.

Dr. Leslie Ritchie/Dr. Jennifer Barr - UGE Clerkship Seminar Leader of the Year Award

Dr. Jonathan Tan – PGE Senior Resident of the Year Award

Dr. Rebecca Tudhope received the Dr. David Harris Award

Dr. Mark Watling - UGE Clerkship Supervisor of the Year Award

Dr. Peter Williamson for 25 years of service with Western

Promotions

Dr. Greg McCarthy has been promoted to Associate Professor with a Continuing Appointment as of July 1, 2013.

Dr. Ajit Ninan has been promoted to Associate Professor with a Continuing Appointment as of July 1, 2013.

Dr. Volker Hocke, Associate Professor, has received a Continuing Appointment as of July 1, 2013.

Psychiatry Administrative Staff for 2012-2013 Academic Year

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deborah Lucas</td>
<td>Administrative Officer</td>
</tr>
<tr>
<td>Colleen Chryssoukakis</td>
<td>Administrative Assistant to Chair of Department of Psychiatry, Schulich School of Medicine &amp; Dentistry, Western University / Chief of Psychiatry, London Health Sciences Centre and St. Joseph's Health Care London</td>
</tr>
<tr>
<td>Bonnie Ideson</td>
<td>Faculty Human Resource Consultant</td>
</tr>
<tr>
<td>Bernice James</td>
<td>Financial Officer</td>
</tr>
<tr>
<td>Suzena Mendes</td>
<td>Administrative Assistant, AFP, CME/CPD, PGE, general Department support</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
</tr>
<tr>
<td>-----------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Rodger Moran</td>
<td>Acuity STAR Assistant</td>
</tr>
<tr>
<td>Melanie VandenBorre</td>
<td>Administrative Assistant, Undergraduate Education</td>
</tr>
<tr>
<td>Eva Adams</td>
<td>Program Coordinator, Postgraduate Education</td>
</tr>
<tr>
<td>Carissa Peterson</td>
<td>Administrative Assistant, CME/CPD, PGE</td>
</tr>
<tr>
<td>Debra Martin</td>
<td>Administrative Assistant, Division of Child and Adolescent Psychiatry, and Division of Geriatric Psychiatry</td>
</tr>
<tr>
<td>Hanna Siemiarczuk</td>
<td>Administrator, ECP, SWOMEN, Division of Social &amp; Rural Psychiatry</td>
</tr>
<tr>
<td>Irene May</td>
<td>Secretary, ECP, SWOMEN, Division of Social &amp; Rural Psychiatry</td>
</tr>
<tr>
<td>Maria Gitta</td>
<td>Coordinator, Developmental Disabilities Division</td>
</tr>
<tr>
<td>Beth LeCourtois</td>
<td>Administrative Assistant, Division of Forensic Psychiatry</td>
</tr>
<tr>
<td>Sarah O’Flanagan</td>
<td>Administrative Assistant, Research</td>
</tr>
<tr>
<td>Julia Hamel</td>
<td>Administrative Assistant to Chair of General Adult Psychiatry and Site Chief, RMHC</td>
</tr>
<tr>
<td>Tracey Jansen</td>
<td>Administrative Assistant to Site Chief, RMHC</td>
</tr>
<tr>
<td>Tracy Henebry</td>
<td>Administrative Assistant to Chair, Child and Adolescent Psychiatry</td>
</tr>
<tr>
<td>Division</td>
<td>Social &amp; Rural Psychiatry</td>
</tr>
<tr>
<td>---------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>Division</td>
<td>Social &amp; Rural Psychiatry</td>
</tr>
<tr>
<td>Division</td>
<td>Social &amp; Rural Psychiatry</td>
</tr>
<tr>
<td>Division</td>
<td>Social &amp; Rural Psychiatry</td>
</tr>
</tbody>
</table>


phenomenological experiences: Trying to survive while living under the proverbial "sword of Damocles". *Crisis, 33*(5), 265-272.


Kumar, K., Castellani, C., Maiti, S., O'Reilly, R., & Singh, S. (In press). Search for missing schizophrenia genes will require a new developmental neurogenomic perspective. *Journal of Genetics*.


MacDonald, A.A., Monchi, O., Seergobin, K.M., Ganjavi, H., Tamjeedi, R., MacDonald, P.A. Parkinson’s disease duration determines effect of dopaminergic therapy on ventral


Books and Book Chapters


**Manuals and Guidelines**


Other Publications


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


disorders. Poster presented at the World Psychiatric Association Congress, Prague, Czech Republic.


Dixon, D., Takhar, J., & Eadie, J. (2013, April 21-23). Residents’ perceived and unperceived learning needs for non-expert canMEDS role. Poster presented at the Canadian Conference on Medical Education Annual Conference, Quebec City, QC.


Gupta, M.A. & Vujcic, B. (2013, June 1-5). _Zolpidem use among ≥40 years age group with no insomnia diagnosis and polypharmacy (≥40 medications) is associated with a significantly higher frequency of injuries: Results from a nationally representative sample._ Poster presented at the SLEEP 2013, 27th Annual Meeting of the Associated Professional Sleep Societies, Baltimore, MD. [Abstract published in: SLEEP, Volume 36, 2013, Abstract Supplement, A207].


Hampson, E. (2013, February 7-8). _Modulation of working memory by estrogen levels in women._ Paper presented at the Lake Ontario Visionary Establishment (L.O.V.E.) 42nd Annual Conference, Niagara Falls, ON.

presented at the Society for Behavioral Neuroendocrinology, Atlanta, GA. [Abstracted; www.sbn.org/meetings/2013/program/x613e/SBN%202013%20Program%20Book.pdf].


Neurobiology to Public Policy, San Francisco, CA. [Abstract published in; Early Intervention in Psychiatry 6 (Suppl.1): 36]).


McDonald, C., O'Hara, S., Post, L., Silcox, S., Harris, K, & **Gutmanis, I.** (2013, April 30). *Developing a geriatric interdisciplinary team clinic: Preliminary findings.* Poster presented at a Pre-Conference Event at The Regional Geriatric Programs of Ontario 2013 Annual Education Day at the 32nd Annual Ontario Gerontology Association Conference, Toronto, ON.


McVicar, N., Li, A.X., Suchy, M., Hudson, R., **Menon, R.S., & Bartha, R.** (2012, October). *Simultaneous In-Vivo temperature and pH mapping using a PARACREST-MRI.* Presented at the International CEST Imaging Workshop, Baltimore, MD.


Menon, R.S. (2013, May 23). *How to succeed in Science.* Presented at the Canadian Association of Neuroscience, Toronto, ON.


Menon, R.S. (2012, October 30). *Medical device innovation in Canada.* Presented at the Standing Committee on Health, House of Commons, Ottawa, ON.


Neufeld, E., Heisel, M.J., & Flett, G.L. (2013, February 1). *Validating the Reasons for Living Scale-Older Adult Version (RFL-OA) among community-residing older adults: Investigating the association between late-life suicide ideation and reasons for living.* Poster presented at the “Research to Action: Technology, Innovation and Health”, the 2013 annual symposium of the Lawson Health Research Institute Aging Rehabilitation and Geriatric Care Program and The University of Western Ontario Faculty of Health Sciences, London, ON.

Ngo, M., & Isserlin, I. (2012, September 30 – October 2). *Body weight as a prognostic factor for day hospital success in adolescents with anorexia nervosa.* Poster presented at the Canadian Academy of Child and Adolescent Psychiatry, Annual Conference, Montreal, QC.


Richardson, J.D., St. Cyr, K., McIntyre-Smith, A., Haslam, D., Elhai, J.D., & Sareen, J. (2012). Examining the association between psychiatric illness and suicidal ideation in a sample of treatment-seeking Canadian peacekeeping and combat veterans with posttraumatic stress disorder PTSD. Presented at the Institute for the Annual Canadian and Military Veteran Health Research Forum, Kingston, ON.

Rnic, K., McDermott, R., & Dozois, D.J.A. (2013, June). Exploring the relation between excessive reassurance seeking and cognitive organization. Poster presented at the Annual Meeting of the Canadian Psychological Association, Quebec City, QC.


Shamblaw, A., Botha, F.B., & **Dozois, D.J.A.** (2013, June). *Cultural variables associated with the stigmatization of depression among Asians: Accounting for differences between Asians and Caucasians.* Poster presented at the Annual Meeting of the Canadian Psychological Association, Quebec City, QC.


**Sharma, V., Xie, B., Campbell, M.K., Penava, D., Hampson, E, Mazmanian, D., & Pope, C.** (2012, September 27-29). *Diagnostic conversion from major depressive disorder to bipolar disorder in the postpartum period: a prospective study of pregnant*
women. Poster presented at the Canadian Psychiatric Association Annual Conference, Montreal, QC.


Shrivastava, A., Campbell, R., Mooser, R., Forchuk, C., Johnston, M., Brigden, V., Watts, P., Belmont, C., Mustin-Powell, J., & Stitt, L. (2013). *Re-Hospitalization of psychiatric patients: The patients or the illness or treatment?* Abstract published at the Regional Mental Health Annual half day, London, ON.


Shrivastava, A., Johnston, M., Terpstra, K, & Bureau, Y. (2013). *Cannabis and transition to psychosis, a model of neurobiological pathway.* Abstract published at the Regional Mental Health Annual half day, London, ON.


Smith, W., & Richardson, J.D. (2012). Tailoring PTSD treatment: Treating co-morbid depression in military related PTSD. Workshop presented at the ISTSS Annual Conference, Los Angeles, CA.


Steele, M.M. (2013, April 26). Key strategies to deal with self-harm and suicidal behaviour. Workshop presented at the 2013 Child and Adolescent Psychiatry Annual Conference Managing Pediatric Depression and Anxiety Disorders in the Community - Knowledge to Practice, London, ON.


Physicians of Canada: Rural and Remote: 2013 from Sea to Sea to Sea Medicine Course, Victoria, BC.

**Steele, M.M., Stretch, N., & Davidson, B.** (2013, April 4 - 6). *Referral patterns and training needs in child and adolescent mental health among primary care physicians in Canadian rural/remote areas.* Workshop presented at the Society of Rural Physicians of Canada: Rural and Remote: 2013 from Sea to Sea to Sea Medicine Course, Victoria, BC.

**Stewart, S.L.** (2013, June 19-21). *Adolescent addictions supplement.* Presented at the 13\textsuperscript{th} Annual International Association of Forensic Mental Health Services Conference, Maastricht, The Netherlands.


**Stewart, S.L.** (2013, June 19-21). *Youth justice custodial facilities.* Paper presented at the 13\textsuperscript{th} Annual International Association of Forensic Mental Health Services Conference, Maastricht, The Netherlands.

**Stewart, S.L.** (2013, June 3). *InterRAI children’s and youth’s mental health.* Paper presented at the Mental Health Annual Research Day Retreat, Lawson Health Research Institute, London, ON.

**Stewart, S.L.** (2013, May 22). *Assessing mental health needs of children and youth with the interRAI suite: Supporting an integrated, lifespan approach to needs assessment and care planning.* Presented at the CHRI Seminar Series, Children’s Health Research Institute, London, ON.


**Stewart, S.L.** (2012, November 7). *InterRAI assessments: Supporting an integrated approach to child/youth mental health assessment and treatment planning across service sectors.* Paper presented at the Youth Justice Provincial Advisory Committee, Brampton, ON.


the gait and brain study. Paper presented at the International College of Geriatric Psychoneuropharmacology, Sevilla, Spain.


External Grant Funding


Burhan, A.M. (Principal Investigator), & Jog, M. *Assessment of the Feasibility of Virtual Interactive Case System in Teaching of Movement Disorders in Geriatric Psychiatry Patients*. 2012 Schulich School of Medicine & Dentistry Instructional Innovation and Development Fund Faculty Grant. $9421.00.


Chiu, S., (Principal Investigator). *Exploring Curcumin and Curcumin Derivatives as Putative Epigenetic Target of Histone Decaytylase (HDAC) Inhibition in Parkinson’s Disease. Phase 1: Study of Lipocurc in Park 7 Genetic Model of Parkinson’s Disease*. Michael J Fox Foundation. $98,720 USD. 2012.


Erickson, P. (Principal Investigator), Vingilis, E ., & Stewart, S.L. (Co-Investigators). *Connecting Youth in Custody with Mental Health Services.* Canadian Institute of Health Research. $589,000; 2013-2016.


Hampson, E. (Principal Investigator). Androgens and Estrogens in the Human Nervous System. NSERC Discovery Accelerator Supplement. $120,000; 2010-2013.


Heisel, M.J. (Principal Investigator). Promoting Psychological Resiliency to Late-Life Depression and Suicide Risk. Canadian Institutes of Health Research (CIHR) New Investigator Award; Institute of Aging and Institute of Gender and Health. $300,000; 2007-2012.


Lanius, R.A., McKinnon, M. (Co-Principal Investigators), Hall, G., Levine, B., MacQueen, G., & Neufeld, M. Neural and Behavioural Correlates of Autobiographical
Memory Performance in Patients with Post-Traumatic Stress Disorder and/or Major Depression Following Motor Vehicle Crash. Canadian Institute of Health Research. $354,985; 2009-2013.


Lanius, R.A. (Principal Investigator), & Van Der Kolk, B. Functional Neuroanatomy of Bilateral Eye Movement During Trauma Script Imagery. EMDR Association/Institute/Foundation. $50,000; 2012-2014.


Norman, R.M.G. (Principal Investigator), Hampson, E., & Sorrentino, R. The Role of Evaluative Processes in Reducing the Stigma of Mental Illness. Social Sciences and Humanities Research Council of Canada. $90,420; 2010-2013.


Reiss, J.P. (Principal Investigator), Glover, C., & Benbow, C. Creation of the full-time Psychiatrist model in the Emergency Department. Ontario Ministry of Health Pay-for-Results Funding. $200,000; 2013-2014.

Richardson, J.D. (Principal Investigator), & Forchuk, C. A Canadian Model for Housing and Support for Homeless Veterans. Human Resources and Skills Development Canada. $1,981,472; 2012-2014.

Sharma, V., (Principal Investigator), & Varapravan, S. A Prospective, Randomized, Double-Blind, Placebo-Controlled, Phase 2 Safety and Efficacy Study of Oral ELND005 as an Adjunctive Maintenance Treatment in Patients with Bipolar II. Elan Pharmaceuticals. Up to $35,000 per participant; 2013-2015.

Sharma, V., (Principal Investigator), & Varapravan, S. THE SPD489-322 Phase 3, Multicenter, Randomized, Double-Blind, Parallel-group, Placebo-controlled, Flexible Dose Titration, 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. Shire Development Inc. Up to $13,000 per participant; 2013-2014.


**Stewart, S.L.** (Principal Investigator). *Development, Piloting, Statistical Analysis of interRAI Child and Youth Mental Health (ChYMH-DD Previously named ChYIDD) Suite of Tools.* London Community Foundation.  $100,000; 2012-2013.


**INTERNAL GRANT FUNDING**


**Bartha, R.** (Principal Investigator).  *Interaction of Vitamin D and Memantine for Alzheimer Disease Treatment.* The University of Western Ontario, 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 Inpatient Sample.*  Seed funding grant from The University of Western Ontario Department of Psychiatry.  $5,000 (2008-2013).


Heisel, M.J. (Principal Investigator), Schreier, G., & Flett, G.L.  *Assessing Psychological Risk and Resiliency Factors Associated with Suicide Ideation and the
Desire to Hasten Death Among Community-Residing Older Adults.  Lawson Health Research Institute Internal Research Fund Award.  $15,000; 2010-2012.


Richard, J. (Principal Investigator), O'Reilly, R., Corring, D., & Dua, V.  Use and Effectiveness of Community Treatment Orders for Patients in the Early Phase of Psychosis.  Seed funding grant from The University of Western Ontario Department of Psychiatry.  $4,590; 2013-2014.


Subramanian, P. (Principal Investigator).  A Qualitative Study of the Experience of Patients Treated with Repetitive Transcranial Magnetic Stimulation (Rtms) for auditory hallucinations.  Seed funding grant from The University of Western Ontario Department of Psychiatry.  $5,000; 2012.


Subramanian, P. (Principal Investigator).  The Relation Between Ego-Strength and Functioning in Individuals with Schizophrenia - A Combined Feasibility and Exploratory Study.  Seed funding grant from The University of Western Ontario Department of Psychiatry.  $958; 2009-2013.
Subramanian, P. (Principal Investigator).  *Transcranial Direct Current Stimulation in the Treatment of Postpartum Depression.* Seed funding grant from The University of Western Ontario Department of Psychiatry. $7,500; 2011-2013.


Vasudev, A. (Principal Investigator), Mitchell, D.G., & Shoemaker, K.  *Quantify the Ventro Medial Pre Frontal Cortex (vMPFC) Responsiveness to Parasympathetic Nervous System (PNS) Modifiers in Late Life Depression (LLD).* Department of Psychiatry Seed Funding Competition. $7,500; 2012-2014.

Vasudev, A., (Principal Investigator), Shariff, S., Garg, A., & Kurdyak, P.  *Cardiovascular Risk and Mortality in Patients with Late Life Depression: a Matched Cohort Study.* AMOSO Opportunities Fund. $65,000; 2013-2015.

Vasudev, A. (Principal Investigator), Shariff, S., Garg, A., & Kurdyak, P.  *Cardiovascular Risk and Mortality in Patients with Late Life Depression: A Matched Cohort Study.* ICES Western Faculty Scholarship Program. $45,000; 2013-2015.

Vasudev, K., (Principal Investigator), Vasudev, A, Kim, R., & Schwartz, U.  *LEPR Polymorphism for Mirtazapine Induced Weight Gain in Depression in an Older Aged Population.*  Seed funding grant from The University of Western Ontario Department of Psychiatry. $7500; 2012-2013.


**Media Appearances and Other Knowledge Translation Activities**


Heisel, M.J.  *Suicide Risk and Resiliency among Older Adults.*  (2013, April 6). Keynote presentation at “New Frontiers in Geriatric Care” – the 3rd Annual Geriatric Clinic Day, Southlake Regional Health Centre, New Market, ON.


Heisel, M.J.  *Preventing Suicide among Older Adults: From Clinical Guidelines to Sensitive Healthcare.*  (2012, December 11). Workshop at “Suicide Risk Assessment Conference and Workshop” – A conference of the Ontario Hospital Association, Toronto, ON.


Heisel, M.J., Wilson, K., & Moore, S.L.  (2012, November 1). *Suicide Prevention Among Older Adults: Enhancing Risk Assessment and Care Provision with the Canadian Coalition for Seniors’ Mental Health Late-Life Suicide Prevention Knowledge Translation Tools.* Training Workshop Presented to the London Health Sciences Centre’s Geriatric Community Mental Health Team and Behavioural Support Team, London, ON.

Heisel, M.J., Wilson, K., & Moore, S.L.  (2012, September 24). *Suicide Prevention Among Older Adults: Enhancing Risk Assessment And Care Provision With The Canadian Coalition For Seniors’ Mental Health Late-Life Suicide Prevention Knowledge Translation Tools.* Training workshop presented to The Beverly Centre Glenmore, Calgary, AB.

Links, P.S.  *Youth Suicide Prevention Project Expedited Knowledge Synthesis (EKS).*  (2013, January 30). Workshop, Ottawa, ON.


Purcell, B.  *Alcohol-Related Problems in Long Term Care.* (2013, February 22).  Workshop presented to RN’s, RPN’s, and PSW’s at the Behavioural Supports Ontario Kick-off Day, Stratford ON.

Shrivastava, A.  *DSM-5: Hope or Hype?* (2013, April 29).  Lecture, Department of Psychiatry CME, London, ON.

Shrivastava, A.  *Research Methodology.* (2013, March 5).  Lecture at LTMG Hospital, Mumbai, India.

Shrivastava, A.  *Assessment of Suicide Risk.* (2013, February 27).  Workshop, Mysore, India.

Shrivastava, A.  *Need for Training and Education for Primary Care Physicians for Suicide Prevention.* (2013, February 27).  Lecture, Mysore, India.


Shrivastava, A.  *Workshop for Student’s Mental Health Needs at the INDUS University.* (2013, February 25).  Workshop at INDUS University, Ahmedabad, India.

Shrivastava, A.  *Global Challenges in Suicide Prevention.* (2013, February 22).  Lecture at KEM Hospital, Mumbai, India.
