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The Department of Psychiatry had a transition in leadership as I assumed the Chair/Chief role beginning on January 2, 2012. Over the last year, the Department has undergone significant change serving to build on the strengths established under Dr. Fisman’s leadership. In my year-end report, I want to discuss the three areas of change: 1) the changes to the Departmental executive structure; 2) our Strategic Planning process and 3) changes to key leadership roles.

**Executive Structure**

Based on the external review completed in 2010, changes to the executive structure of the Department of Psychiatry had been recommended. In January 2012, I established an implementation committee to formulate plans for a new departmental executive committee and departmental organizational structure. The implementation committee included: Dr. Sarah Jarmain, Deborah Lucas, Dr. Ross Norman and Dr. Jeff Reiss.

The implementation committee established the following principles that directed their decision-making about changes to the executive committee and departmental organizational structure:

- Provide greater clarity and transparency around decision-making,
- Create a decision making body,
- Enhance the academic commitment and mission,
- Improve the engagement of Windsor and South Western Ontario,
- Contribute to enrichment of psychiatric care and service delivery through academic ventures,
- Achieve greater alignment of funding decisions with Departmental strategic priorities.

The new organizational structure is outlined in the Organizational Chart for the Department of Psychiatry (soon to be available on the website) and includes the development of a smaller Departmental Executive Committee, a new Advisory Committee and the new role of Vice Chair of the Department of Psychiatry. The Executive Committee
meets twice per month and the minutes of the committee are available for Faculty on the OWL website (https://oldowl.uwo.ca/webct/entryPage.dowebct?insId=5116011&glcid=URN%3AX-WEBCT-VISTA-V1%3A8f2fcef2f-ac1d-3921-012d-73ab656f8834&insName=University+of+Western+Ontario&actionType=). Our new Advisory Committee meets monthly and the minutes of this committee are also available to Faculty to review. We plan to seek feedback on the new executive structure in the Fall of 2013 and will provide an opportunity for all Faculty to input into this process.

The Strategic Planning
The Strategic Planning Session for the Department of Psychiatry took place on Friday, June 22, 2012 at the Lamplighter Inn in London. Approximately 50 members of the Department attended the day and there was a lot lively and open discussion. Jane Parkinson Senior Facilitator, Learning & Development – Western University joined Paul Links, Chair/Chief in the facilitation of the retreat which successfully engaged Faculty in the development of our strategic plan. Dean Michael Strong of the Schulich School of Medicine & Dentistry (SSMD) spoke to the group about the Strategic Vision for SSMD and affirmed our efforts to align with the broader strategic directions and goals of SSMD. Participants asked many good questions and identified many relevant issues.

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.

The report on the Department of Psychiatry Retreat was reviewed with the Executive and Advisory Committees of the Department and circulated to all Faculty members. From our committee discussions, we have decided that working groups should be formed for each of the strategic directions. The goal of the working groups will be to develop an action plan, time line and deliverables for each of the strategic areas. We are asking the working groups to meet over the next 6-9 months and report back to the Executive and Advisory Committees in the late spring of 2013. Faculty members will be requested to participate in the working groups so that broad representation is ensured. The leaders for the three strategic working groups are:

- Dr. Paul Links will lead the working group on “Enhance Community Collaboration.”
- Dr. Jeff Reiss will lead the working group on “Be a leader in education and distance education, fully engaging Windsor & SWOMEN.”
- Dr. Marnin Heisel will lead the working group on “Enhance clinical research programs directly impacting patient care across the life course.”
Leadership Roles
Dr. Jeff Reiss assumed the position of Vice Chair in the Department of Psychiatry, Schulich School of Medicine and Dentistry, UWO for a two-year renewable term beginning on October 15th, 2012. Dr. Reiss’ responsibilities related to this role include chairing and leading the Departmental Working Group on Tithe Review and being the Departmental lead on distant education activities with Windsor and SWOMEN. A long-term goal of this assignment is to develop a freestanding psychiatric residency program with our Windsor and SWOMEN partners. The role of the Vice Chair will be regularly reviewed and may be modified as new priorities and issues arise for the Department.

Dr. Marnin Heisel was chosen as our next Director of Research for the Department of Psychiatry and his 5-year renewable term began November 1st, 2012. Dr. Heisel will continue with our current research activities such as the annual Academic Research Day, our monthly research rounds, the annual report of research activities and the annual seed funding competitions.

Dr. Patty Hall has begun as the first Program Director for our Child and Adolescent Psychiatry Subspecialty Program, Schulich School of Medicine, Western University. We received a letter of approval from the Royal College in January 2012. Our program was one of the first programs in the country to be accredited. At the present time, Western is one of 5 programs accredited out of the 16 psychiatry programs in the nation who are applying for accreditation in Child and Adolescent Psychiatry. Our residency program in Child and Adolescent Psychiatry has a Residency Program Committee that has representation for each training site and one elected resident. Meetings are currently quarterly, but will change to every 6 weeks once our first resident starts in July 2013.

The members of the Residency Program Committee:
Dr. Patricia Hall, Program Director
Dr. Sandra Fisman, Interim Chair, Child and Adolescent Psychiatry
Dr. Leanna Isserlin, LHSC representative, Curriculum
Dr. Sohail Makhdoom, CPRI representative
Dr. Pamela Horne, Vanier Children’s Services representative
Dr. Ben Loveday, RMHC-L representative
Dr. Sarah Armstrong, Evaluations
TBA- Windsor/SWOMEN representative
Dr. Joy Abramson, PGY3, resident representative, CAP COPE representative

The Coming Year
Although the next year will require us to cope with the current fiscal realities, there are many opportunities ahead for the Department. The Division of Geriatric Psychiatry is planning to re-submit an application to the Royal College of Physicians and Surgeons of Canada via the Postgraduate office, Schulich School of Medicine & Dentistry for two geriatric psychiatry subspecialty-training positions. We are planning to re-submit our application in May 2013 and we are optimistic that this application will be successful and will contribute to the increased capacity of Geriatric Psychiatry academic and service
delivery, necessary with the aging demographic. Dr. Akshya Vasudev will take the lead in preparing our resubmission.

Enhancing our research productivity will continue to be an important objective over the next year. Currently, we have many important research initiatives underway so I will only be able to acknowledge a few in my report. Further details are available in the enclosed report from the Director of Research. This year, Dr. Peter Williamson and his team were awarded a $739,755 CIHR grant, entitled “Candidate Neuronal Circuits in Schizophrenia”. (Williamson, P.C. - Principal Investigator; Co-investigators - Manchanda, R.; Menon, R.; Neufeld, R.; Osuch, E.; Pavlosky, W.; Rajakumar, N. and Théberge, J.). Also, Dr. Elizabeth Osuch was awarded a $100,000 grant to improve diagnosis of bipolar disorder in youth from Pfizer Canada’s first-ever Psychiatry Research Awards Program. Dr. Ruth Lanius, Harris-Woodman Chair has international research collaborations in Holland, Germany, Boston and California with top researchers in the field of Post-Traumatic Stress Disorder. Dr. Ruth Lanius has been able to recruit a number of Masters and Doctoral students from Germany.

Under the leadership Cheryl Forchuk, Professor and Associate Director of Nursing Research at the Arthur Labatt Family School of Nursing, Faculty of Health Sciences, with a cross appointment to the Department of Psychiatry, Schulich School of Medicine & Dentistry, University of Western Ontario, we are developing “high tech” solutions to facilitate the recovery for people with lived experience of mental illness. This research is a collaboration with industry, Telus Communications and Research in Motion, Canada Infoway, University of Sherbrooke and government funding agencies.

The Department is actively seeking to increase our role in Western Graduate educational programs. Meetings with Dr. M. Poulter have started to ensure active participation of our Department in the development of the Schulich School of Medicine & Dentistry Neurosciences Program. The Department is committed to participation in the development of the Masters in Public Health, School of Public Health through Department of Psychiatry’s history of experience with community collaborations, suicide-related research and interest in Aboriginal Mental Health. Drs. Links, Norman and Srivastava have been interacting with Dr. Abdur Rab Interim Director for the MPH program to ensure that mental health is well integrated into the Masters program.

Finally, to ensure the financial vitality of the Department over the next 3-5 years, we have undertaken a review of our Departmental tithe. The Departmental Working Group on Tithe Review has been given a mandate to examine models and approaches for increasing the Departmental tithe to at least maintain our current research activity and to avoid anticipated deficits. From the committee’s work, a final report and recommendations will be provided to the Department Chair, the Executive and the Financial Management Committee (FMC) by early in the Spring of 2013.

I want to thank Deborah Lucas and all of the administrative staff for working so diligently to achieve the many changes outlined above. Also, I want to thank the members of our Executive and Advisory Committees and all the other faculty members who have
demonstrated with their actions and their energy their dedication to our Department. Together we are achieving our vision of making the Department a true centre of excellence for psychiatric care and discovery.

Paul Links, MD, FRCP(C)
<p>| Department of Psychiatry – Full Time Clinical Academics – June 30, 2012 |
|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|
| Child &amp; Adolescent Psychiatry Division | Developmental Disabilities Division | Forensic Psychiatry Division | General Adult Psychiatry Division | Geriatric Psychiatry Division | Neuropsychiatry Division | Social &amp; Rural Psychiatry Division |
| Armstrong, Sarah Armstrong, Sarah | Nicholson, Robert Nicholson, Robert | Beach, Craig Beach, Craig | Barr, Jennifer Barr, Jennifer | Doering, Michele Doering, Michele | Chiu, Simon Chiu, Simon | Campbell, Robbie Campbell, Robbie |
| Haensel, Heidi Haensel, Heidi | | | Chandarana, Praful Chandarana, Praful | Park, Hae-Ryun Park, Hae-Ryun | Osuch, Elizabeth Osuch, Elizabeth | Dua, Varinder Dua, Varinder |
| Hall, Patty Hall, Patty | | | Ganjavi, Hooman Ganjavi, Hooman | Van Bussel, Lisa Van Bussel, Lisa | Williamson, Peter Williamson, Peter | Duggal, Vikas Duggal, Vikas |
| Horne, Pamela Horne, Pamela | | | Garcia, Carla Garcia, Carla | | | Goldman, David Goldman, David |
| Isserlin, Leanna Isserlin, Leanna | | | Harricharan, Rajendra Harricharan, Rajendra | | | Guaiana, Giuseppe Guaiana, Giuseppe |
| Kizilbash, Kamran Kizilbash, Kamran | | | Haslam, David Haslam, David | | | Jarmain, Sarah Jarmain, Sarah |
| Loveday, Ben Loveday, Ben | | | Hertzman, Daniel Hertzman, Daniel | | | McCarty, Gregory McCarty, Gregory |
| Makhdoom, Sohail Makhdoom, Sohail | | | Hocke, Volker Hocke, Volker | | | Mehta, Viral Mehta, Viral |
| Ninan, Ajit Ninan, Ajit | | | Kerfoot, Karin Kerfoot, Karin | | | Nowicki, Aleksandra Nowicki, Aleksandra |
| Rizvi, Naveed Rizvi, Naveed | | | Laporte, Noel Laporte, Noel | | | O'Reilly, Richard O'Reilly, Richard |
| Steele, Margaret Steele, Margaret | | | Lefcoe, Daniel Lefcoe, Daniel | | | Rybak, Yuri Rybak, Yuri |
| | | | Manchanda, Rahul Manchanda, Rahul | | | Sharma, Verinder Sharma, Verinder |
| | | | Northcott, Sandra Northcott, Sandra | | | Srivastava, Amresh Srivastava, Amresh |
| | | | Owen, Richard Owen, Richard | | | Subramanian, Priya Subramanian, Priya |
| | | | Reiss, Jeffrey Reiss, Jeffrey | | | Surti, Bhadresh Surti, Bhadresh |
| | | | Richard, Julie Richard, Julie | | | Takhar, Jatinder Takhar, Jatinder |
| | | | Ross, James Ross, James | | | Varapravan, Sreelatha Varapravan, Sreelatha |
| | | | Sanjeev, D. Sanjeev, D. | | | |
| | | | Tidd, Christopher Tidd, Christopher | | | |
| | | | Vasudev, Kamini Vasudev, Kamini | | | |
| | | | Watling, Mark Watling, Mark | | | |
| 12 | 2 | 2 | 22 | 5 | 4 | 18 |
| Assistant Professor | 33 | Assistant Professor | 24 | Full Professor | 9 | Paul Links – Chair/Chief |
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<td>Administrative Officer</td>
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<tr>
<td>Irene May</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>
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<td>Bonnie Ideson</td>
<td>Faculty Human Resource Consultant</td>
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<tr>
<td>Suzena Mendes</td>
<td>Administrative Assistant, AFP, CME/CPD, and general Department support</td>
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<tr>
<td>Rodger Moran</td>
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<tr>
<td>Melanie VandenBorre</td>
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<tr>
<td>Eva Adams</td>
<td>Program Coordinator, Postgraduate Education</td>
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<td>Debra Martin</td>
<td>Administrative Assistant, Division of Child and Adolescent Psychiatry, and Division of Geriatric Psychiatry</td>
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<td>Patti Giles</td>
<td>Secretary, ECP, SWOMEN, Division of Social &amp; Rural Psychiatry</td>
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<td>Maria Gitta</td>
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<td>Colleen Chryssoulakis</td>
<td>Administrative Assistant, Developmental Disabilities Division</td>
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<td>Beth LeCourtois</td>
<td>Administrative Assistant, Division of Forensic Psychiatry</td>
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<td>Jacqueline DiMattia</td>
<td>Administrative Assistant, Research</td>
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<td>Cathy Kramer/ Marilyn Hodgins</td>
<td>Administrative Assistant to Chair of General Adult Psychiatry and Site Chief, RMHC</td>
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<td>Tracey Jansen</td>
<td>Administrative Assistant to Site Chief, RMHC</td>
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<td>Tracy Henebry</td>
<td>Administrative Assistant to Chair/Chief, Child and Adolescent Psychiatry</td>
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# Department of Psychiatry Annual Awards for the Academic Year 2011-2012

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<tr>
<th>Award</th>
<th>Recipient</th>
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<tbody>
<tr>
<td>Senior Faculty Award</td>
<td>Dr. Sandra Fisman</td>
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<tr>
<td>UGE-Clerkship Supervisor of the Year Award – Local</td>
<td>Dr. Praful Chandarana</td>
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<td>(May 31, 2011 – April 30, 2012)</td>
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<tr>
<td>UGE-Clerkship Supervisor of the Year Award – Rural</td>
<td>Dr. Mirela Bucur</td>
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<td>(May 31, 2011 – April 30, 2012)</td>
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<td>UGE-Clerkship Supervisor of the Year Award – Windsor</td>
<td>Dr. Giovanni Villella</td>
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<td>(May 31, 2011 – April 30, 2012)</td>
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<td>UGE-Clerkship Seminar Leader of the Year Award (May</td>
<td>Dr. B. Zev Grynspan</td>
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<td>31, 2011 – April 30, 2012)</td>
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<td>UGE-Clerkship Resident Teaching Award (May 31,</td>
<td>Dr. Aziz Haque</td>
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<td>2011-April 30, 2012)</td>
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<td>Dr. Paul Patterson Resident Award (In Paul Patterson's</td>
<td>Dr. Michelle Ngo</td>
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<td>memory to a Resident who has demonstrated enthusiasm and</td>
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<td>ability as an educator $100.00)</td>
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<td>PGE-Junior Resident of the Year Award</td>
<td>Dr. Rachana Bodani</td>
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<tr>
<td>PGE-Senior Resident of the Year Award</td>
<td>Dr. Michelle Ngo</td>
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<td>Best CME Presentation by a Junior Resident</td>
<td>Dr. Rebecca Tudhope</td>
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<tr>
<td>Best CME Presentation by a Senior Resident</td>
<td>Dr. Juliana Li</td>
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<tr>
<td>Best CME Presentation by Junior Faculty</td>
<td>Dr. Kamini Vasuedev</td>
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<tr>
<td>Best CME Presentation by Senior Faculty</td>
<td>Dr. Sarah Jarmain</td>
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<tr>
<td>Diploma in Child and Adolescent Psychiatry</td>
<td>Dr. Michelle Ngo</td>
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<tr>
<td>Division of Child and Adolescent Psychiatry Award of</td>
<td>Dr. Rob Nicolson</td>
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<tr>
<td>Excellence in Postgraduate Teaching</td>
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<tr>
<td>Division of Child and Adolescent Psychiatry Award of</td>
<td>Dr. Ben Loveday</td>
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<tr>
<td>Excellence in Undergraduate Teaching</td>
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<tr>
<td>Division of General Adult Psychiatry-Clinician of the Year</td>
<td>Dr. Jennifer Barr</td>
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<tr>
<td>Division of Geriatric Psychiatry Excellence in Postgraduate</td>
<td>Dr. Helen (HaeRyun) Park</td>
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<tr>
<td>Education</td>
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<td>Dr. David Harris Award</td>
<td>Dr. Rachana Bodani</td>
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<tr>
<td>Division of Social and Rural Psychiatry-Faculty</td>
<td>Dr. Richard O'Reilly</td>
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<td>Research Award</td>
<td>Dr. Paul Frewen</td>
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<td>Over 25 Years of Service with Western University:</td>
<td>Dr. Bhadresh Surti and</td>
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<td>Colleen Chryssoulakis</td>
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<td>Promotion to Associate Professor with Continuing</td>
<td>Dr. Varinder Dua</td>
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<td>Appointment (July 1, 2012)</td>
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<tr>
<td>Promotion to Full Professor (July 1, 2012)</td>
<td>Dr. Ruth Lanius</td>
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Child and Adolescent Psychiatry has “come of age”, with the full recognition of the field as a psychiatry subspecialty by the Royal College of Physicians and Surgeons of Canada. This has been based on the recognition that a separate body of knowledge, skill set and expertise is required to practise as a Child and Adolescent Subspecialist. In addition, the Ontario Ministry of Health 10 Year Mental Health Strategy has identified the importance of early interventions and prevention and have determined initial implementation of the strategy by addressing regional gaps in service, especially at developmental transitions, for children and youth. These developments have been a backdrop to a busy and productive year for our Division.

In the course of the past year, we have had several important and positive leadership changes in the Department of Psychiatry and the faculty which have filtered into the Division of Child and Adolescent Psychiatry (DCAP). Dr. Paul Links was welcomed as the new Chair / Chief for Psychiatry in January 2012, succeeding myself. Dr. Margaret Steele assumed the role of Vice Dean of Hospital and Interfaculty Relations at Schulich School of Medicine & Dentistry in September 2011. To ensure a smooth transition at this important time, the membership of the DCAP endorsed my interim leadership for the Division in September 2011. It has been my pleasure to fully return to the world of Child and Adolescent Mental Health Care since January 2012, and to re-experience the joy and reward in working with children, youth, and their families, and with passionately devoted colleagues in the academic division, as well as with the community network of service providers for children and youth.

Dr. Margaret Steele left, in our hands, an outstanding Division that is a flagship academic division in Canada. The success of the DCAP is a tribute to the direction she set, but also to the ongoing efforts of the membership and leaders in the Division. Each of the leaders will report on their portfolios, but I would like to thank them individually for their tremendous contributions.

Dr. Patricia Hall has assumed the role of Program Director for Postgraduate Education in Child and Adolescent Psychiatry. She chairs the newly formed Resident Training Committee for Child and Adolescent Subspecialty training and she coordinates the separate core rotation in Child and Adolescent for our PGY-3 trainees. Our first subspecialty trainees will be accepted into the program in July 2013.
Dr. Sohail Makhdoom coordinates the Child and Adolescent training experience for paediatric residents.

Dr. Ben Loveday coordinates Undergraduate rotations for medical students. In the course of his parental leave this year, Dr. Ajit Ninan stepped seamlessly into this role. Dr. Ninan continues to coordinate elective experiences in Child and Adolescent Psychiatry.

Dr. Leanne Isserlin took over the PGY-1 and CARMs portfolio for the Department of Psychiatry in the fall of 2011.

The strength of these leaders is demonstrated by the increasing numbers of medical students from Schulich at Western and other universities requesting electives in Child and Adolescent Psychiatry and the establishment of a national reputation for delivery of excellent education in psychiatry.

**Dr Ben Loveday:**

**Case Based Seminars**
A number of allied health instructors were unable to continue in this role requiring several positions to be filled. A complete revamping of team members occurred with an attempt to have 3 members on each team (at minimum 2 members on a team). A request was made for each team to review the power point slides that are utilized in the seminars to ensure that the content was clinically relevant, current and appropriate for clerks. Any revisions were submitted for review and update on the Web CT site. All teams participated in this exercise.

I also arranged a timing change for the interviewing skills lecture from week 5 into the psychiatry clerkship orientation day, thereby opening up a seminar time in the Child Psychiatry Week 5. This opening was filled with a new seminar lecture focusing on Developmental Disabilities, with a team of 3 lecturing psychiatrists sharing this responsibility.

**Clinical Experience - Selectives**
Throughout this academic year, Child and Adolescent psychiatry has offered 2-week long selective experiences for clinical clerks in nine separate services. We supervised a total of 38 clinical clerks, providing exposure and involvement in psychiatric assessments, group/family sessions, interprofessional case conferences, and “bedside” teaching.

Active recruitment of new psychiatry staff and interprofessional staff to the team of clerkship supervisors has continued. The addition of new members to our teaching team has offset some of the interprofessional losses that were sustained by the team during the year.
Dr Ajit Ninan:

Elective Experiences
For the academic year 2011 to 2012, the Division of Child and Adolescent Psychiatry has continued to respond to a high degree of interest from medical students seeking elective experiences. We had a total of 13 elective rotations provided to medical students in settings including CPRI, Vanier Children Services and LHSC. Rotations were created to match the student's expressed interests within child and adolescent psychiatry. Medical students included those from Western University, Queen's and Ottawa as well as international medical schools. Electives were provided for between 2 to 4 weeks. We also provided 4 observerships for medical students during this time period as well. It is wonderful that interest in children's mental health and child/adolescent psychiatry remains high which has resulted from the excellent quality educational experiences that our division provides. Thank you.

Child and Adolescent Psychiatry Postgraduate Education

Dr. Patricia Hall:

Accomplishments:
I established and chaired a working group for postgraduate education in Child and Adolescent Psychiatry. The group met monthly in 2011 to work on an application to the Royal College for subspecialty accreditation. The application was submitted in October, 2011 and required clearly articulated goals for the residency program and the educational objectives of the residents; outline of the administrative structure; information about resources; and an organized program of rotations and other educational experiences, both mandatory and elective. The program developed specific objectives aligned with the OTR and STR for the subspecialty as written by members of the Royal College Specialty Committee. The curriculum is divided into 2 years, including PGY5 crossover with the general program. The program application received accreditation by the Royal College in January 2012. The Education group was “promoted” to an official Residency Training Committee and currently meets quarterly. The group will meet every 6 weeks once the first resident starts. I am now a Program Director and sit on the Royal College Special Committee and the CAP COPE.

I have had several meetings with the Postgraduate Dean in terms of accreditation and funding for the subspecialty program.

I coordinated the Child and Adolescent Psychiatry Lecture Modules for 2011-2012, and prepared the lecture schedule for the DCAP curriculum for 2012-2013 for PGY-3 residents.

I coordinated the clinical rotations of the PGY-3 rotations for the 2011-2012 year.

I met with Dr. Ngo PGY-5 to provide leadership and guidance to complete her Diploma in Child and Adolescent Psychiatry.
I met with PGY-3 residents to discuss rotations based on learning needs. I also met with the PGY-3 residents to discuss resident issues in DCAP.

I attended RTC meetings for the general program that occur monthly and I attended the Child and Adolescent Advisory board meetings quarterly.

I have updated the Resident Training Handbook in DCAP. I distributed the Family Therapy Training Manual. I have also updated the website for applications to the subspecialty.

I am a liaison between Child and Adolescent Psychiatrists and residents. I have been involved in providing advice to both faculty and residents on supervisory issues in CAP.

I liaise with the PGY-1 Coordinator for PGY-1 resident training experiences in DCAP.

I wrote the summary and objectives for CAP training for Accreditation of the general program.

Challenges:
I am now the program director for the subspecialty program. The coordinator position for the general program may need to be filled by another person.

Objectives for Upcoming Year:
Continue as Program Director of the Subspecialty CAP program. We need to continue to work on funding sources for the subspecialty program and ensuring adequate resources and very much appreciate the bridge funding that had been provided by Child and Adolescent Psychiatry for career training by MCYS through CPRI. I have already coordinated the 2012-2013 year for CAP training for general residents. I may need to start training other faculty to take over the coordinator position for 2013-2014. I will continue to discuss with leadership, the best approach to this.

Research in the Child and Adolescent Division
We have had a burst of significant research accomplishments under the leadership of Dr. Jeff Carter, research coordinator for the DCAP. Faculty have been successful in obtaining peer review grants and have published and presented their work at local and national conferences and to some extent internationally.

Dr. Jeff Carter:

Research:
The Research Coordinators group has continued to meet regularly. The chair, Dr. Jeff Carter, thanks Dr. Julie Eichstedt for her previous participation and welcomes Brenda Davidson as the new representative for LHSC. Other representatives are Drs. Carla Smith from Vanier and Shannon Stewart from CRPI. We are in the early stages of planning the Division’s first Research Half-Day, anticipated for the fall of 2013. The emphasis may be on sharing preliminary findings and works in progress and on building connections within the
Division. The group has noted overlap across sites, such as suicidality and self-harm being studied at LHSC (with the guidance of Dr. Marnin Heisel) and CPRI (projects led by Dr. Stewart and C.A. Hamza); best practices for trauma at Vanier and trauma research at CPRI (projects led by Dr. Richard Zayed and Dr. Stewart); and control measures at Vanier and CPRI. Several members of the Division are participating in a study co-led by Dr. Graham Reid and Dr. Stewart regarding patterns of service use within children’s mental health agencies. Other projects at CPRI include Dr. Ajit Ninan leading a study on the side effects of psychotropic medications, Philip Baiden leading a study on childhood abuse and cannabis use, and Dr. Jennifer Crotogino leading a study on outcomes among children and youth with dual diagnoses. Other projects at LHSC include Dr. Eichstedt leading a study regarding waiting times, and the Child and Youth Mental Health Project to improve knowledge and skills among family physicians, general practitioners, and paediatricians, led by Dr. Margaret Steele.

We have had many successful research presentations this year. In February, Dr. Michelle Ngo successfully defended her diploma dissertation, “Body weight as a prognostic factor for day hospital success in adolescents with anorexia nervosa.” The Journal Club had a busy year. Dr. Stewart spoke on her work with InterRAI, an international consortium striving to promote evidence-based practice. Dr. Stewart is an Associate InterRAI Fellow and is the lead for developing several InterRAI child and youth measures. Centres across the province are currently participating in pilot-testing of a children’s mental health measure. Liz Phoenix from LHSC presented on core beliefs and cognitive organization in depressed adolescents. Dr. Eichstedt presented on the development of a survey regarding how anxiety is managed at children’s mental health centres across Ontario. From Vanier, Dr. Pamela Horne spoke on diagnosis in early years, and Dr. Jeff Carter presented on the results from standardized measures, and led a discussion on the new DSM-V criteria regarding trauma. Dr. Chris Watson presented on “Characteristics of psychiatric inpatients with a first admission for psychosis,” and Chester Kam from CPRI presented on a predictive model of length of stay. Dr. Leanna Isserlin presented on the complex case rounds model.

Continuing Professional Development

Dr. Naveed Rizvi continues to coordinate a vibrant Continuing Professional Development Program and there are a plethora of local presentations by DCAP faculty, as well as increasing presentations regionally, provincially, nationally and internationally. He also coordinates the very successful Western Hub of the Ontario Child and Youth Telepsychiatry program (OCYTP) which had its 5th anniversary this year. 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.

Dr. Naveed Rizvi:

With a focus on promoting evidence-based practices and inter-professional learning, the Division of Child and Adolescent Psychiatry continues to offer CPD activities, both at the Divisional and Departmental level.
During the year July 2011 - June 2012, the Division hosted the regular annual CPD events including the Semi-Annual Meeting in February 2012, the Annual Conference in April 2012, the Annual Meeting of the Division in May 2012 and the Annual CPD morning in June 2012, as well as the monthly Journal Club.

While encouraging and supporting the residents and faculty members to present at the Divisional CPD events, the Division also invites nationally and internationally renowned guest speakers with expertise in a variety of clinical and research areas of interest.

Community partners including CPRI, RMHC-L, and the Children Mental Health Agencies associated with the Western Hub of the Ontario Child and Adolescent Telepsychiatry Program, have been regularly provided with access to CPD events via videoconferencing.

The CPD events were well attended and well received by faculty members, allied health professionals, residents, medical and allied health profession students, as well as community partners.

During the year July 2011 to June 2012 the Division of Child and Adolescent Psychiatry organized the following CPD events:

**Diploma Dissertation presentation by Child and Adolescent Psychiatry Graduate on February 16, 2012.** Dr. Michelle Ngo presented her research paper on "Body weight as a prognostic factor for day hospital success in adolescents with anorexia nervosa”.

**Semi Annual Meeting of the Division of Child and Adolescent Psychiatry on February 16, 2012.** Dr. Ajit Ninan presented a talk on “Using the Psychotropic Medication Monitoring Checklist in Residential Care – a pilot project”.

**Annual Conference of the Division of Child and Adolescent Psychiatry, on April 20, 2012.** This year's topic was “Transcultural Child and Adolescent Psychiatry”. The speakers were Dr. Cécile Rousseau, Dr. Mohammed Baobaid, and Dr. Bhooma Bhayana.

**Annual Meeting of the Division of Child and Adolescent Psychiatry on May 17, 2012.** Dr. Paul Links presented on "Borderline Personality Disorder in Adolescents”. This interesting talk sparked lively discussion and some practical direction in the treatment of this group of young people.

**Annual CPD Morning of the Division of Child and Adolescent Psychiatry on June 14, 2012.** This year's topic was “Children presenting with suspiciousness, odd beliefs, irrational behaviour and social withdrawal – Assessment, Differential Diagnosis and Management”. Dr. Joy Abramson presented a case and Dr. Rob Nicolson was the faculty speaker.

**Monthly Child and Adolescent Psychiatry Residents Rounds on the 3rd Thursday of the month.** Division closely collaborates with the Department of Psychiatry CPD
Committee to organize Child and Adolescent Psychiatry Resident Rounds on a monthly basis, held the third Thursday of each month, except March, June, July and August. Psychiatry residents presented a wide variety of child and adolescent topics.

**Monthly Child and Adolescent Psychiatry Journal Club continues** on the 2nd Wednesday of alternating months.

**Upcoming events and future directions:**

A new CPD event entitled “Complex Case Rounds” will be starting in September 2012, alternating with Journal Club on the 2nd Wednesday of the month.

The Division Semi-Annual Meeting will be in February 2013, the Annual Conference on April 26, 2013, the Division Annual Meeting in May 2013, and the Annual CPD Morning will be in June 2013. Stay tuned for details.

With input from the faculty members, the Division will be planning a Review Course for the Child and Adolescent Psychiatry Subspecialty examination. Details to follow.

I would like to express appreciation and thanks to Dr. Sandra Fisman, Interim Chair of the Division of Child and Adolescent Psychiatry, the CPD Committee of the Department of Psychiatry, and faculty members for their ongoing support and advice. I would also like to thank Debra Martin and Suzy Mendes for their patience, commitment and efforts in organizing the CPD events.

**Western Hub, Ontario Child and Youth Telepsychiatry Program**

To address mental health needs of children and youths living in remote communities of South Western Ontario, the “Western Hub” of the Ontario Child and Youth Telepsychiatry Program (OCYTP), continue to provide clinical, program and professional to professional consultations as well as educational and professional development activities to the designated sites. These sites include:

1. Trellis Mental Health and Developmental services, Guelph and Fergus
2. Huron Perth Centre for Children and Youth, Stratford and Clinton
3. Oxford-Elgin Child & Youth Centre, Woodstock and St Thomas
4. Woodview Children’s Centre, Brantford
5. Haldimand Norfolk R.E.A.C.H.
6. St Clair Child and Youth Services, Pt. Edward
7. Bluewater Youth Centre, Goderich

During the year 2011-2012, the Western Hub provided 227 Clinical Consultations and 10 Program Consultations to the designated mental health agencies. Western Hub consultants are members of the Division of Child and Adolescent Psychiatry offering a wide range of expertise for Telepsychiatry consultations.
To support knowledge transfer and capacity building, the Western Hub regularly provides educational sessions and professional development opportunities to designated agencies as well as participating in the provincial educational seminars of the OCYTP to sites across the province. These sessions include 11 resident rounds and journal club through the Division of Child and Adolescent Psychiatry, Schulich School of Medicine & Dentistry, Western University.

To develop knowledge of and experience in addressing the mental health care needs of children and youth living in the remote communities, Western Hub continue to offers training opportunity to psychiatry residents by inviting them to conduct Telepsychiatry Consultation under the supervision of consultant psychiatrists.

In collaboration with the Central and Eastern hubs, Western Hub participated in the Telepsychiatry Clinical Practicum at the combined annual meeting of the Canadian Academy of Child and Adolescent Psychiatry and the American Academy of Child and Adolescent Psychiatry in October 2012. The Telepsychiatry practicum exemplified Ontario as a leader in the field of Telepsychiatry and was very well attended. Participants from Canada and other countries rated the event as an excellent learning opportunity with the hands-on experience of using Video conferencing for clinical, education and program consultations.

By surveys, questionnaires and regular meetings with the community partners at designated sites, the Western Hub team continues to maintain collaborative relationships with designated sites and to monitor performance indicators.

OCYTP is now fully integrated with Ontario Telemedicine Network (OTN). This has markedly improved the audio / video quality of videoconferencing and has improved availability of consultants. During the next year, we are expecting to increase the number of Telepsychiatry Services to our designated sites as well as to further expand the referral base to more diverse community partners.

The Western Hub team would like to express sincere appreciation and thanks to the consultant psychiatrists and to Western Hub partners and designated sites for their support, collaboration and commitment.

Clinical Service
In terms of clinical service, this past year has witnessed the last phases of acute care hospital restructuring at London Health Sciences Centre. For Child and Adolescent Psychiatry this has translated into a transition to all services covering the 16 and 17 year old age group, with a goal of including inpatient, day treatment, outpatient, crisis emergency, eating disorders, and consultation liaison by the end of 2012. With the expansion in beds from 11 to 16 (including 4 eating disorder beds), as well as ambulatory, consultation-liaison and crisis-emergency services we were able to recruit Dr. Javeed Sukhera from Rochester, New York. Dr. Sukhera will lead the development of the transition services for 16 and 17 year olds and their linkage with Adult services.
Over this past year we have had a focus on Women’s Mental Health and through a process of Appreciative Inquiry, hospital, Schulich and community partners have created a vision and a model for Prenatal Mental Health Care that will be implemented as a pilot in the Women’s Program at LHSC, in collaboration with our community partners. Dr. Heidi Haensel and Sarah Parkinson, Advanced Practice Nurse, have led the development of the ideal model of care and will continue to lead the pilot implementation. 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 July 1, 2013.

With the affirmation of clinical program leads, our physicians continue to work with our administrative partners to continually improve the integration, linkage and continuity of our clinical programs for children and adolescents in London. Dr. Kamran Kizilbash, Inpatient lead, Dr. Patty Hall, Outpatient lead, Dr. Javeed Sukhera, Transition Youth lead, Dr. Heidi Haensel, Consultation-Liaison lead, Dr. Ajit Ninan as Medical Director at CPRI, and Dr. Sandra Fisman as overall Physician Leader for LHSC and RMHC Adolescent Unit all contribute to the success of this network. It is the collegiality of the Child and Adolescent Psychiatrists that is a key success factor in this collaboration.

The DCAP has a voice in a number of local and provincial initiatives; these include the MCYS sponsored Complex Care Committee at CPRI, 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 now 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.

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; our School Board representatives Dr. Barrie Evans (TVDSB) and Susan Ralyea (London District Catholic School Board), and our previous community representative Dr. Bruce Connell. Dr. Connell is much appreciated for his many years of service to the DCAP and we wish him well in his retirement. Dr. Susan Rodger, Director for School-Based Mental Health, joined us in August 2012 as our community representative and we warmly welcome her. In the fall Dr. Mary Broga, who is Vice President of Patient Services at Hotel Dieu, Windsor and psychologist at Maryvale will join us as our Windsor representative and we look forward to enhancing our mutual relationship between London and the South West region.

Last, but certainly not least, thank you to Tracy Henebry for her support to myself as Interim Chair for the DCAP and Physician Leader for Child and Adolescent Clinical Services at RMHC and LHSC, and to Debra Martin for her support of the DCAP through the year; and
her support for the annual symposium, the Semi-Annual and Annual Meetings, and the DCAP Newsletter, among the multitude of other things.

Sandra Fisman, MD, FRCPC
Developmental Disabilities Division and the Autism Centre of Excellence

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 support.

The Advisory Board consists of members of community service agencies, college and university representatives, school board representatives, and representatives of the Ontario Ministry of Community and Social Services. The board 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.
Drs. Nicolson, Sohail Makhdoom, Linda Plowright and Simran Ahluwalia at the Child and Parent Resource Institute (CPRI) provide educational and training activities at the facility. A lecture by Dr. Nicolson to second year medical students on developmental disabilities continues to be well-received. Drs. Nicolson and Rao also continue to teach elective students from UWO, Canadian and international universities.

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 a 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.

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.

The DDD is responsible each September for the Department of Psychiatry Continuing Medical Education Rounds. In September of 2011, the guest presenter was Marshalyn Yeargin-Allsopp, M.D., a medical epidemiologist and Chief, of the Developmental Disabilities Branch; National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention (CDC). Dr. Yeargin-Allsop has presented internationally and published extensively on the epidemiology of developmental disabilities, including autism and cerebral palsy. Her presentation focused on the current state of research on autism prevalence and diagnosis from a global, cross-cultural perspective.

Dr. Yeargin-Allsopp also discussed the latest research about what autism is, how the definition has changed over time, presented current autism prevalence estimates, described what is known about who is at risk, and emphasized the importance of early identification and diagnosis. The presentation highlighted the CDC's activities in the area of autism and present a public health framework which is used to increase awareness of autism spectrum disorders, monitor its occurrence, and identify modifiable risk factors.

Additionally, the DDD organizes an annual continuing medical education day on developmental disabilities for practicing community psychiatrists, pediatricians, and family doctors, nurses and other health providers. This annual refresher day in developmental disabilities is one – if not the only one -- of very few such events held for physicians nationally.

In addition, Drs. Nicolson, Rao, and Gillis are each involved in providing 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 DDD, in ongoing partnership with the UWO Autism Centre of Excellence (ACE), continues
providing lectures for parents and community agencies on developmental disabilities. And over the last few years, we have arranged for some of the outside speakers to provide lectures to community members in addition to the academic lectures.

The DDD and ACE presented monthly education and service rounds at CPRI. These consist of a case presentation and discussion of research literature relevant to the case. Attendance has been good and the feedback has been positive.

Maria Gitta and Dr. Greg Gillis continued their provincial involvement in the ongoing development of the Developmental Disabilities Primary Care Initiative along with educators from the other five provincial medical schools and other health educators.

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. Clearly, in the nine years since the inception of the Division, the DDD has become a national leader in education on developmental disabilities for physicians. In the coming year, we will continue to develop new avenues of medical education and make greater use of electronic media and the internet in order to expand our educational scope. As a step towards this goal, we continue to videotape the presentations by the invited speakers and put these videos on the website.

Research
As education, research, and clinical service in developmental disabilities are all integrally related, with each informing the other, a strong academic and research focus for the DDD is essential. The bimonthly research rounds which were held in past years have been replaced by the monthly education and service rounds described above. Attendance at these newer rounds has been greater and has also had a greater diversity in terms of the professional background of the attendees. The emphasis on the relationship between research and clinical service has provided for better opportunities for discussion at each presentation. Importantly, students in a variety of medical and professional disciplines have been active participants in these rounds.

The Department of Psychiatry Annual Report Research section lists research information on developmental disabilities and autism.

Summary
Interest in developmental disabilities, both academically and educationally, continues to grow at The University of Western Ontario. In partnership with the Autism Centre of Excellence at the University of Western Ontario (also part of the Department of Psychiatry), we expect to 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.

Rob Nicolson, MD
I would like to thank everyone in the Forensic Psychiatry Division and Department of Psychiatry, Western University for such a warm welcome, and for your assistance in navigating a new system and a new city. I am really enjoying my job and my life in London.

We have had a very productive academic year in the Forensic Psychiatry Division. We are very busy planning for our up-coming move to a new 89-bed, state-of-the-art forensic psychiatric facility in St. Thomas in 2013 (see link to the virtual tour of Regional Mental Health Care’s [RMHC] two new mental health facilities: http://www.sjhc.london.on.ca/newmentalhealthfacilities). The excitement about our move is palpable. The new space will allow us to better assist clients in their recovery and will also improve work life for our staff.

Academically, we have just launched our new home page for the Division of Forensic Psychiatry, Western University (see link: http://www.psychiatry.med.uwo.ca/987651234forenA.asp). Among other areas, our website describes our clinical services, education and training opportunities, and up-coming events. I would like to extend a special thanks to Ms. Janice Vandevooren, Forensic Psychiatry Program Director, St. Joseph’s Health Care London, RMHC St. Thomas, for her assistance with the website content and to Mr. Sibi Samivel for his assistance with the website design.

This is a particularly exciting time to work in forensic psychiatry at Western University, and our goal is to be the leader in forensic mental health science in Southwestern Ontario and beyond. To that end, we recently updated and finalized our strategic plan. Examples of the types of initiatives we are currently prioritizing include:

1. implementing evidence-based risk assessment instruments and risk management instruments;
2. offering and researching mental health interventions that maximize each client’s recovery;
3. building and strengthening our academic training programs; and
4. increasing our academic and community partnerships.

As next year will be our last year in our existing facility in St. Thomas, we were delighted to host RMHC's 13th Annual Research Half Day on May 16, 2012. The event was well attended and the research posters and presentations covered a myriad of interesting topics in psychiatry. A highlight included the 8th Annual Tony Cerenzia Research Lecture by Professor Sheilagh Hodgins, Institute of Psychiatry, who gave a very interesting and illuminating talk on Violence Among People with Psychosis: Epidemiology, Aetiology, and Treatment.

On June 28, 2012, we were very fortunate to have Dr. Jacqueline Duncan, RMHC's incoming Physician Leader, Psychosis Program, join us for a very inspiring talk on Understanding and Treating Metabolic Syndrome in Clients with a Serious Mental Illness. Congratulations Dr. Duncan on your new role, and we look forward to on-going collaboration with the Psychosis Program, RMHC.

Educationally, we have seen an increased interest in our training program, and we take pride in our commitment to providing trainees in all disciplines the best educational experience possible. To that end, we customize educational experiences of varying duration depending on a trainee’s specific interests, education goals, and level of training. Some particular highlights of our educational opportunities are outlined here: http://www.psychiatry.med.uwo.ca/987651234forenC.asp. We are very excited that forensic psychiatry is now a Royal College of Physician and Surgeons of Canada psychiatric sub-specialty, and we are in the beginning phases of working towards fellowship development and accreditation.

We are also actively involved in a number of clinical research projects, including an outcome study on adventure based counseling and another study analyzing relevant psychosocial factors among clients admitted to a forensic hospital. Further details on our current research projects are provided here: http://www.psychiatry.med.uwo.ca/987651234forenRES.asp

Finally, I would like to thank all members of the Forensic Psychiatry Division for their vision and hard work, and I look forward to another productive academic year.

Craig Beach, M.D., MSc., D.A.B.P.N.
Division of General Adult Psychiatry

Dr. Jeff Reiss
Chief, Department of Psychiatry, LHSC
Professor & Chair
Division of General Adult Psychiatry
Department of Psychiatry
Schulich School of Medicine & Dentistry
Western University

Overview

Primarily based out of the London Health Sciences Centre, our division (DGAP) is the academic home of acute care psychiatry, spanning the continuum of mental healthcare, as described later in this report, and the largest division in the department.

Entrusted to the DGAP is 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 psychiatric generalists.

Again, we have had a very productive academic year. Much of the department’s undergraduate, postgraduate, and continuing medical education/continuing professional development are delivered by DGAP faculty. The nationally acclaimed UWO Psychiatry Exam Preparation Course, organized by our Dr. Praful Chandarana, and taught by many divisional members, continued being a success. Dr. Chandarana is now developing a succession plan so that younger members can “carry the torch” into the future. Several DGAP members were also significantly involved with the planning of the successful Addiction Disorders Symposium, held at the Lamplighter Inn. 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.

On the clinical front, there have been many new initiatives. The new Ambulatory Care model was finalized with the launch in the summer 2012. A great deal of attention has been given to our P4R (Pay-for-Results) Emergency Department (ED) strategies, focusing on wait time reduction through the streamlining of the Mental Health ED processes and enhancing the diversion of the mental health population to the most appropriate care resources within or external to the ED. The long-awaited Adult Eating Disorders Program was initiated at the very end of the academic year (see detailed services section below).
Through funding obtained from Bell Canada, a 3-year Addiction Disorders grant has begun with additional services and clinical upgrading of LHSC staff through Addictions Services of Thames Valley, in order to better serve our patients with concurrent mental and addiction disorders. There were two other major funded initiatives that we worked on during the academic year, which were announced into the following academic year. Together with LHSC Child and Adolescent Program, we have 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 has awarded us with a major grant to enable us to develop a Transition Age Project, which will focus on developing accessible, coordinated assessment and intervention tailored for people aged 16 to 25 years who have mental health difficulties.

Building on existing research strengths in clinical outcomes, program evaluation, smart health technologies, educational scholarship, and neuroimaging, the DGAP will endeavour to develop new clinical research programs in collaboration with other Divisions and Departments/Faculties. I’d like to specifically highlight a couple of such activities. With Lawson’s, Dr. Cheryl Forchuk as project leader, and working with RMHC and community mental health agency partners, the Mental Health Engagement Network (MHEN) project was initiated. Funded by Canada Health Infoway in conjunction with TELUS, this supra-million dollar project will empower patients with mood or psychotic disorders with handheld phones for secure communication with their care providers, and online access to their personalized health record, complete with self-help and monitoring tools. Again partnering with RMHC in conjunction with over 10 other Ontario hospitals, our application for the Council of Academic Hospitals of Ontario (CAHO), Adopting Research to Improve Care (ARTIC) Program was the top-rated one of 35 submissions, and consequently one of the only three funded projects. We will receive funding in excess of a million dollars to study “Implementing the Transitional Discharge Model”, as a putative means of supporting patients through the discharge from hospital process.

The following is an overview of the division’s varied clinical programs along with individual goals for the next academic year written in conjunction with the respective medical leaders:

**London Health Sciences Centre - Based Services**

**Centralized Emergency Psychiatry Service (CEPS)**
Emergency assessments are conducted in the emergency room by a team consisting of psychiatrists, residents, 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, “The CEPS team moved even further into the front lines of the Emergency room this past year. Nurse Case Managers now conduct screening Psychiatric interviews on behalf of the ER Physicians, improving access and flow through the Emergency. We are fortunate to have a full time
CEPS Social Worker now, Jeanne Weber, enhancing assessment and brief interventions for Emergency patients.”

**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.

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. Consultation Liaison Psychiatry also looks forward to the return of Dr. Rebecca King from her CL fellowship and the incorporation of her specialized skill set into the further expansion of our service.

**Eating Disorders Program**
The Adult Eating Disorders Program just commenced serving its first patients at the very end of academic year reported on here. In the fall of 2012, Dr. Valerie Kaye is being recruited to take on the physician leadership of this program. The program is being developed to provide primarily ambulatory care, including a day treatment setting, although a residential treatment unit is envisioned as well, in addition to inpatient consultation-liaison support. The unit is also to become the regional hub for Eating Disorders, associated with outreach workers, OTN telehealth support, and other community linkages.

**First Episode Mood and Anxiety Program (FEMAP)**
FEMAP provides ambulatory psychiatric services for youth aged 16-26 experiencing the recent onset of mood and/or anxiety symptoms with or without a substance use problem; FEMAP also conducts clinical research on the same population. Due to resource limitations, there are exclusion criteria for youth with prolonged histories of psychiatric problems, primary substance abuse/dependence, and significant cognitive deficits.

FEMAP had a turnover of our receptionist and intake worker during early 2012. Since both these positions are temporary we were fortunate to have replaced them with two highly qualified individuals. We have been able to retain our previous intake social worker as a family therapist 1 day per week.
During the specified time frame, FEMAP clinicians conducted 2815 patient visits and FEMAP psychiatrists conducted 138 new intakes. This included the last 5 months when one of three psychiatrists was not taking new patients due to imminent departure. We completed the scanning of a study involving brain imaging in depression with and without marijuana use (74 participants) and a pilot study of functional network differences between unipolar and bipolar disorders (45 participants). The health service delivery implementation and evaluation study has continued to recruit, at over 450 participants by June. Several publications and/or abstracts were prepared, submitted and accepted during this time frame.

Physician Leader, Dr. Beth Osuch states that goals for July 2012 to June 2013 are to secure the essential roles of full-time reception and intake, 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 will be submitted and research in brain imaging and service evaluation will continue.

**General Adult Ambulatory Mental Health Services (GAAMHS)**

The largest ambulatory service in the Division, GAAMHS provides a variety of outpatient based services for patients and their families in the London-Middlesex Country area. GAAMHS will continue its primary focus on access to treatment and flow of patients from the three primary areas of referral: inpatients, community, and the emergency department. Physician Leader, Dr. Richard Owen asserts that 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. Additionally, we have an EMDR ready stream when this short term therapy is indicated. Our Depot Medication Clinic is now established with no readmissions of the patients in our clinic. ECT assessment and treatment are also provided. Ever dynamic, the service has now expanded to its full complement of psychiatrists welcoming Dr. Rebecca King in Consultation/Liaison and Dr. Valerie Kaye to the Eating Disorders team. We have also added an ongoing fellowship to our Program.

**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.

During the year 2011 the process of implementing more therapeutic options was started. We have started skills training groups with support by OT and a motivational group for addictions with support from nursing management. During the academic year 2011/12 Dr.
Hooman Ganjavi, Dr. Karin Kerfoot and Dr. James Ross joined our inpatient consultant team.

The plan for the next year, according to Service Leader, Dr. Volker Hocke, will focus on extending therapeutic options, enhancing the team building, revisiting the documentation process and implement a structured approach to improve the physical health of the patients.

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

PEPP is a clinical academic program for individuals with first episode non-affective psychosis. The clinical framework of the program is structured around a modified assertive case management service in which the intensity of the treatment is guided by the patient’s needs, stage of the illness and needs of the family. In this program, service, education, and research are integrated so that individuals seeking treatment would also benefit from the new knowledge that is being generated.

The much-anticipated move to Commissioners Road occurred in April 2011, but it took considerable time for staff and patients to adjust to the new surroundings. Dr. Julie Richard joined as a PEPP psychiatrist with an additional interest in adults with Pervasive Developmental Disorders. She also initiated a collaborative program with the inpatient child and adolescent psychiatry to provide consultation to Under 16 with a first episode psychosis. There was a new position and appointment of clozapine and injection nurse in PEPP.

PEPP remains actively involved with the Ontario Working Group for first episode psychosis. The program has also been building capacity for concurrent disorders. Cognitive remedial training programs for patients returning to school or going back to work have also been implemented. The first episode psychosis assessment and treatment program continues with the 2-year grant from AMOSO. Family workshops on psycho-education were held quarterly on weekends. Several presentations were made in schools/colleges on recognition and early intervention in first episode psychosis. PEPP won the Champion of Mental Health Award given by St. Joseph’s Healthcare.

The Big Night was a successful event and raised approximately $30,000 towards research at PEPP. Researchers within PEPP continue to contribute to the international literature on early intervention. During the 2011 to 2012 year they have published 5 papers and have another four in press. These papers include several articles reporting on five-year outcomes for clients of our program and their determinants; papers addressing the issue of the meaning of recovery from psychosis and predictors of such recovery and research on the stigma of mental illness. National granting agencies as well as a local foundation have provided funding for this work.

PEPP Physician Leader, Dr. Rahul Manchanda reports, “Over the course of the next year we anticipate publishing several further reports on our five year outcomes project and developing a protocol for a our next prospective study examining in more detail determinants of recovery from psychosis. In addition, in collaboration with colleagues in
the Psychology Department at Western we continue a program of research to better understand the stigma of mental illness and evaluate methods of reducing that stigma. We also continue to collaborate with other members of the Department of Psychiatry in research. For instance, during the past year we have collaborated with Dr. Kamini Vasudev on a study of genetic influences on the metabolic side effects of treatment with Clozapine.”

**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.

**Urgent Consultative 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 further integrate Urgent assessments with the evolving General Adult Outpatient programs to improve efficiency and decrease wait times.”

**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 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. Don Richardson and Dr. David Haslam working predominantly with younger veterans, and Dr. Harris provides psychiatric consultation services to the older Korean and World War II veterans.
Over the past year, the clinic has implemented its outreach initiative to the GTA where psychologists provide direct services. More recently, the clinic has also implemented its outreach initiative to the Hamilton Niagara region through its collaboration with the Hamilton Anxiety Treatment & Research Centre located at the St. Joseph Hospital Hamilton. In Hamilton, direct psychiatric services are now available to veterans living in the Hamilton-Niagara region.

Medical Director, Dr. Don Richardson states, “Current goals include continuing research in the area of posttraumatic stress disorder and other operational stress injury, continue to enhance services to the community through the Ontario Telemedicine Network (OTN), supporting the outreach initiative to the GTA and further developing training opportunity for residents and psychiatrist interested in veterans’ mental health.”

**New Appointments**

**Dr. Hooman Ganjavi** joined us after graduating from the McGill University Psychiatry residency program. His undergraduate degree, in Biochemistry Science, was received in 1997 from Laurentian University in Sudbury. He obtained his Ph.D. at the University of Toronto in 2004 and completed his medical degree also from the University of Toronto in 2006. He has won a number of awards and scholarships, and has been actively developing a research career. His clinical work is in the area of General Inpatient and Outpatient Psychiatry, with a special focus including research-wise in Schizophrenia. He has recently also taken on the PGME Portfolio Lead position for PGY1 & CaRMS.

**Dr. Karin Kerfoot** arrived from Yale University and also joined us in General Inpatient and Outpatient Psychiatry, with a special interest in older age psychiatry and concurrent disorders. Dr. Kerfoot obtained her B.Sc. Psychology and B.Sc. Biological Sciences degrees in 1997 and her M.D. in 2001, all from the University of Calgary. She finished her residency in Psychiatry, also from the University of Calgary, in 2006. From 2006 to 2007, she did a fellowship in Geriatric Psychiatry, at the Yale University School of Medicine. She began her practice in psychiatry in the fall of 2007 in the area of Concurrent Disorders and from that time to June 2010, she had also worked in the ECT Center and Geriatric Psychiatry at the Yale-New Haven Psychiatry Hospital, subsequently becoming a Mental Illness Research Education Clinical Center (MIRECC) Fellow at the West Haven Veterans Administration Medical Centre. Dr. Kerfoot has held previous leadership roles in Medical Education, and has been the recipient of a number of awards and distinctions. She has also recently taken on a PGME Portfolio Lead position, in charge of Evaluation.

The Division was excited to welcome to its membership, **Dr. Paul Links**, who comes to us from the University of Toronto, and has been our new Departmental Chair-Chief since January 2012. Dr. Links’ career path has been that of a clinical scholar in General Adult Psychiatry, with special expertise in the areas of suicide prevention, the study of personality disorders, as well as in clinical and academic leadership. He completed his BSc and MD at the University of Alberta, followed by an MSc in Clinical Epidemiology and Biostatistics from McMaster University in Hamilton. Dr. Links’ psychiatric training included a residency at the University of Ottawa followed by a fellowship at Boston University. Prior
to coming to Western University, Dr. Links was a Professor of Psychiatry and holder of the Arthur Sommer Rotenberg Chair in Suicide Studies, University of Toronto for three terms, as well as being the Acting Psychiatrist-in-Chief of the St. Michael's Hospital’s Mental Health Service. In his distinguished career, he has been the President of the Canadian Association for Suicide Prevention (CASP) as well as for the Association for Research on Personality Disorders. He has been active as a scientific editor, author of over 125 papers and three books, and recipient of many prestigious grants and awards including the CASP Research Award for outstanding contributions to the field of suicide research in Canada.

One of our own graduating residents, Dr. Julie Richard has joined the PEPP Program (early psychosis), as well as maintaining her clinical interest in adult pervasive developmental disorders. Dr. Richard received her undergraduate degree in Science at Carleton University in 1999 and a Masters in Community Health and Epidemiology at Dalhousie University in 2002. She completed her medical degree in 2005 at the University of Ottawa and then joined the psychiatry residency program at UWO, which she completed in June 2011. Throughout her residency, Dr. Richard was an active educator, being recognized as such with several awards.

We have recruited Dr. James Ross from faculty of McGill University in Montreal. He completed an Honours BA at Halifax's University of King’s College and subsequently a BSc in Biology at Dalhousie. He moved to Montreal for his Psychiatry residency at McGill. On completion of residency, Dr. Ross accepted a staff position at the MUHC where he worked in the Anxiety Disorders Clinic and pursued his interest in resident education. Dr. Ross has a strong interest in psychotherapy and obtained accreditation in CBT from the Academy of Cognitive Therapy shortly after finishing residency. While working on our general inpatient and outpatients services, he brings special expertise in CBT, as well as assuming the PGME Psychotherapy Training Portfolio Leaders role. He also is pursuing a Master’s of Health Professions Education degree through the University of Maastricht over the next 2-3 years, while being affiliated locally with Shulich’s CERI (Centre of Excellence in Research Innovation).

I’d like to also briefly mention some of the stellar new appointments that have occurred within the DGAP, effective after July 1, 2012. More extensive descriptions can be found in the Quarterly Newsletters and next year’s annual report.

Dr. Michele Ngo - First Episode Mood and Anxiety Program (FEMAP), and one day/week with our Child and Adolescent Ambulatory services at Victoria Hospital.

Dr. Valerie Kaye - The Physician Leader of our new Adult Eating Disorders Program.

Dr. Rebecca King – After completing a fellowship in Psychosomatic Medicine at the Sloan Kettering Institute in New York City, she is doing both Inpatient and Ambulatory work, with a particular focus on patients with complex comorbid medical and psychiatric illnesses.
**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. Jennifer Barr**

Respectfully submitted,

*Jeff Reiss, MD, MSc, FRCPC, DABPN, DFCPA, DFAPA*
Growth and development of clinical services based on best practices and practice-based evidence continues to drive innovation and collaboration for the Division of Geriatric Psychiatry members. Nationally and provincially it has been recognized that there is a need for subspecialty expertise in Geriatric Psychiatry and the Division maintains its focus on contributing to this important educational need. The Division has contributed to the local and national footprint of applied research expertise, in particular in areas of suicide prevention in late life, health services research and applied psychopharmacology.

**Awards and Acknowledgements**

On July 1, 2011 Dr. Marnin Heisel was promoted to the academic rank of Associate Professor with tenure. Dr. Heisel continues to be actively involved in research with the Division, focusing his efforts on dissemination of knowledge and best practices with regards to suicide prevention in older adults. He continues as a member of the Department of Psychiatry Research Committee among other service responsibilities, and is currently the Geriatric Psychiatry representative on the Western University Research Ethics Board. Tony O’Regan received an appointment as Adjunct Clinical Professor, Arthur Labatt Family School of Nursing, Western University, from July 2011, for a five year term. Tony also participated as the allied health care representative on the Geriatric Psychiatry Subspecialty Committee and the Division of Geriatric Psychiatry representative on the Division of Developmental Disabilities Advisory Board.

The following representatives of the Division hold leadership roles in the following areas: CME / CPD – Dr. Vasudev, Undergraduate Education – Dr. Park, Postgraduate Education Coordinator – Dr. Oates, Research Ethics Board – Dr. Heisel, and Clinical Service (RMHC-L – Dr. Van Bussel; LHSC – Dr. Oates). Division member Jennifer Doherty received her Gerontological Nursing Certification from the Canadian Nurses Association. Dr. Maggie Gibson was one of a small number of professionals invited to participate in the "Round Table on Health Promotion Framework" hosted by the Public Health Agency of Canada in Ottawa on March 2, 2012. In July 2011, Dr. Amer Burhan accepted a position at CAMH, Queen Street Site - Geriatric Psychiatry Program. He reduced his time from 1.0 at SJHC to 0.2 at RMHC-L, SJHC. We would like to acknowledge his contributions to the RMHC-L Geriatric Program and Division of Geriatric Psychiatry.
Finally, we thank Dr. Noel Laporte for his years of commitment and interest in Geriatric Psychiatry, in particular his involvement in education and training, and wish him all the best as he moves to Adult Psychiatry, located at RMHCL.

Research
Dr. Heisel was an invited keynote speaker at the 2011 National Initiative for the Care of the Elderly Knowledge Exchange and at the annual conference of the Crisis Workers Society of Ontario, both in Toronto. He and his colleagues presented two papers on their research on late-life suicide ideation at the annual convention of the American Psychological Association, in Washington, D.C. Dr. Heisel and his colleagues hold Lawson funding to investigate potential associations among suicide ideation and the desire to hasten death among older adults. He developed the Geriatric Suicide Ideation Scale which is in clinical validation, and his group is also evaluating abbreviated versions of the Geriatric Suicide Ideation Scale. His graduate students are actively involved in research projects investigating correlates of older adult suicide ideation and knowledge translation with healthcare and social service providers. Simon Tavasoli, one of Dr. Heisel’s graduate students in the Department of Epidemiology & Biostatistics, recently successfully defended his Master’s Thesis entitled “Religion, Spirituality, and Suicide Ideation among Older Adults.” Andrew McClure, also one of Dr. Heisel’s Master’s students in Epidemiology & Biostatistics, was recently awarded an Ontario Graduate Scholarship.

Dr. Akshya Vasudev reported on the results of a very interesting and possibly practice changing study which has been accepted now for publication in the LANCET. He comments that he was fortunate to be involved in this study and wanted to share the results. The HTA-SADD study was a multi-centric study conducted in England which compared sertraline, mirtazapine or placebo in patients with depression in those suffering from Alzheimer’s Dementia. There was no difference between these agents in reducing depression. As expected, the placebo group had significantly fewer adverse events. These results should make us think twice before prescribing antidepressants in Alzheimer’s dementia. He would be pleased to hear from you with your thoughts, and encourages everyone to distribute this information to colleagues.

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 Pre Frontal 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, entitled "Music therapy in the treatment of agitation in patients with dementia on an inpatient unit". This project is currently awaiting Research Ethics Board approval. Joanna Thornley, a previous social work intern, is a research assistant on this project. Dr. Vasudev’s medical student, Kara Dempster, was a SROP awardee in 2011. She has now completed her project and was awarded the best student presentation at the Annual Department of Psychiatry Research Day on 21st June 2012. She was co-supervised by Marnin Heisel.
An application for an inter-department collaboration involving Psychiatry, Medicine and Family Medicine has been submitted to the Dean for Chronic Disease Management of COPD and Depression. Lead PI is Dr. Paul Links. Co-investigators include Dr. Vasudev and Dr. Van Bussel from Geriatric Psychiatry.

Investigators from St. Joseph’s Health Care London, London Health Sciences Centre, and Western University were selected for poster awards of excellence at the 15th Annual International Psychogeriatric Association Congress in The Hague, The Netherlands in September 2011. Dr. Lisa Van Bussel, physician leader for the Geriatric Psychiatry Program at Regional Mental Health Care London, attended the September conference as a representative of a research group that includes Iris Gutmanis, PhD and Ryan DeForge, MA with Specialized Geriatric Services, Ann Jarvie, Clinical Nurse Specialist at Regional Mental Health Care London, and Mark Speechley, PhD, Associate Professor, Department of Epidemiology and Biostatistics. The poster entitled “Using Theatre to Explore Long-Term Care Home Healthcare Provider Needs” showcases the use of theatre as both a knowledge exchange strategy and as a venue for LTCH interdisciplinary team development and discussion. Only six such awards were received from more than 400 poster presentations. Dr. Akshya Vasudev’s winning poster was entitled “White matter changes in late-life depression: A diffusion tensor imaging study” and authors were S Colloby, M Firbank, A Thomas, J O’Brien, A Vasudev, S Parry.

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. Also, she collaborates with Division members Dr. Marnin Heisel, Dr. Lisa Van Bussel, Jennifer Doherty and Tony O’Regan on shared knowledge translation research. David McCabe is a doctoral student at The Graduate Center and Queens College of the City University of New York. As a pre-doctoral resident within the London Clinical Psychology Internship Consortium, he is working with Dr. Maggie Gibson on an update of the Canadian Coalition for the Seniors' Mental Health (CCSMH) National Guideline Project. Their contribution to the update focuses on mental health care for older adults living in long-term care settings. Dr. Amer Burhan has co-led, along with Jennifer Speziale, Director of Geriatric Psychiatry at RMHC, the further enhancement of TMS services and Technology at RMHCL, St. Joseph’s Health Care, with the goal of providing state of the art treatment services for individuals with treatment refractory depression. This project is a collaborative research treatment and has engagement with the SJHC Foundation.

Education

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, but the committee will start meeting again,
to prepare the next submission. The Geriatric Psychiatry Application Planning Group was
exceptionally helpful in assembling the necessary reams of paperwork for this application.
In particular, the efforts of Dr. Akshya Vasudev, Jennifer Oates, Vadim Beletsky, Tony
O'Regan and Debra Martin are acknowledged for their immense support in the application
process. As well, we thank Dr. Patty Hall, from Child and Adolescent Psychiatry, for very
generously sharing her considerable experience in preparing their successful application,
and Dr. Marnin Heisel for his input regarding research and psychotherapy. The
Departments of Family Medicine, Neurology and Geriatric Medicine not only provided
letters of support, but also assisted in designing goals and objectives for these placements,
matching the requirements of the new curriculum.

Continuing Professional Development

On November 2, 2011 the Division of Geriatric Psychiatry hosted our Ninth Annual
Symposium, "Beyond the Building Blocks of Geriatric Psychiatry – The Changing Face of
Seniors’ Mental Health Care". This full day event was held at the Best Western Lamplighter
Inn, London, Ontario and included a research poster display. The day was another great
success, with 150 in attendance representing geriatric psychiatrists and nurses, Family
Medicine physicians and nurses, psychologists, occupational therapists, physiotherapists,
social workers, pharmacists, dietitians, and healthcare administrators. We had attendees
from across Ontario, a good indicator of the wide-reaching appeal of the program and
speakers. The keynote speaker was Dr. Joel Sadavoy, Professor of Psychiatry at the
University of Toronto, who spoke on “Caring for Informal Caregivers of Individuals Living
with Dementia”. Plenary Speaker Dr. Marnin Heisel, Associate Professor with the
Department of Psychiatry, Schulich School of Medicine and Dentistry, Western University,
spoke on “The Role of Meaning in Life in Enhancing Psychological Resiliency and Well-
Being and Contributing to Health Aging”. There were a number of very well attended
workshops on topics pertaining to geriatric patient care, presented by health care
professionals from St. Joseph’s Heath Care London, London Health Sciences Centre and
Western University, London, Ontario. Topics included Ethnocultural Seniors and Mental
Health, Personality Disorders in the Elderly, Neuropsychiatry of Movement Disorders,
Sleep Disorders in the Elderly, Driving and Dementia, and The Link between Cardiovascular
Conditions and Late Life Depression. In addition, twelve posters were displayed,
showcasing research being done locally in a variety of areas related to senior health and
eldercare. A welcome surprise was media attention from CTV News London, Fanshawe
radio, and London Community News. This media exposure definitely helps to promote
senior health and eldercare. Conference Chair Dr. Lisa Van Bussel commented that
“Participation by others from the greater health care system, and not just mental health
care providers at events such as this, is important. Seniors mental health, addictions, and
dementia will continue to impact us as the population ages. We need to really prepare all
health care providers. This (symposium) is a way of helping to learn together and exchange
new ideas.”

2012 marks our Tenth Anniversary of the Symposium! Planning has already started for the
Tenth Annual Geriatric Psychiatry Symposium “Leading and Learning Together:
Celebrating a Decade of Success”, which will be held on Wednesday, November 7, 2012. This full day event will feature Dr. Kiran Rabheru and Dr. Maggie Gibson as keynote speakers, as well as twelve concurrent workshops, of interest to geriatric psychiatrists and nurses, Family Medicine physicians, psychologists, occupational therapists, physiotherapists, social workers, pharmacists, dieticians, healthcare administrators - anyone involved in elder care. Workshop topics include Dementia, Stigma Challenges at Residential End of Continuum of Care, Polypharmacy in the Elderly, Mindfulness-Based CBT, Communication Strategies, Geriatric Mental Health in the Emergency Department, Hoarding, and Smoking Cessation. More information will be available on the Western University website at https://www.schulich.uwo.ca/continuingprofessionaldevelopment/cmeprograms/#NOV-12

On April 12, 2012, the Department of Psychiatry Continuing Professional Development forum spotlighted Geriatric Psychiatry. Dr. Akshya Vasudev moderated the session. Psychiatry resident Dr. Mohamad Elfakhani (PGY-2) presented the case study "Non-pharmacological treatment of behaviours in dementia: a case report and review of literature". Dr. Lisa Van Bussel then provided an update "The provincial BSO strategy: Exciting times for the region". The final talk was "Responding to the need: Enhancing services in London and Middlesex. Where we are and where we are going" with guest speakers Lori Hassall, Coordinator with the Geriatric Mental Health Program and PEPP Programs, and Lynn Mellows, Executive Director, McGarrell Place and Co-Chair of the Geriatric Cooperative.

The LHSC Geriatric Mental Health Program Continuing Professional Development group was set up in November 2011. The decision to initiate this group was based on feedback received from team members that there was a lack of regular CPD opportunities for our clinicians working with the elderly who suffer from mental health issues in London, Ontario. We also acknowledged that there are a number of experts within our team and we could learn immensely from each other. Florence Dean, RN and Dr. Akshya Vasudev have helped organize and chair this CPD group since then. The program currently enjoys Royal College self-accredited certification and is attended by three psychiatrists, residents, medical students, one psychologist, five nurses, four social workers, one occupational therapist and one recreational therapist working in the Programme. The CPD group meets at noon on the last Wednesday of every month, except for July, August and December. Topics included thus far have been Mindfulness Meditation, Elder Abuse, Lewy-Body Disease: A Case Study, Care Giver Burden, Montessori Methods for the Geriatric population, and ECT.

Undergraduate

In Undergraduate education, the 2011-2012 third year clinical clerks have done a new trial of a 2-week selective during the 6-week block psychiatry rotation. A total of twenty-nine clinical clerks have gone through a 2-week geriatric psychiatry program. These students were divided between LHSC and RMHC sites. Overall, the 2-week selective in Geriatric Psychiatry went well.
Postgraduate Education

The Geriatric Postgraduate Education coordination has been going very well. We continue to run our multi-disciplinary Geriatric Psychiatry lecture series which is well received by the residents. This year we also succeeded in having our lecture series moved up to earlier in the PGY-3 year so that the most residents have some or all of their didactic teaching during or before the start of their rotations. There is also some potential for us to expand our Geriatric lecture series for coming years as we develop the postgraduate training in our specialty here.

We have been able to meet the increased need for Geriatric Psychiatry rotations and most of our PGY-3 residents receive training at both RMHC and LHSC sites, to obtain the full range of experiences our department has to offer. We are also able to work with our counterpart in 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.

PGY-3 residents in Geriatric Psychiatry this past year were Vadim Beletsky, Rachana Bodani, Jen Lai, Mark Reddington, Arany Shanmugalingam, Hollam Sutandar, Jonathan Tan, and Cheryl Willsie. We welcome Dr. Arany Shanmugalingam as the Resident Representative with Geriatric Psychiatry this year. The Division of Geriatric Psychiatry developed the David Harris Award to recognize the resident trainee who best fulfills and encompasses the pillars of excellence in the care of older adults with mental health illnesses. The 2012 recipient, presented at the Awards Ceremony on June 12, 2012 is Dr. Rachana Bodani (PGY-4).

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

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speaker</th>
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<tbody>
<tr>
<td>Psychotherapy in the Elderly</td>
<td>Dr. Jennifer Oates</td>
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<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>
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Clinical Service Development

Behavioral Supports Ontario (BSO)
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, Jennifer Doherty, Dr. Lisa Van Bussel, 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.

In the fall of 2011 Dr. Van Bussel was appointed to the Provincial Resource Team, which provides advice and best practices to the Behavioural Supports Ontario Project. In this role she presented along with Bernie Blais, at Queens Park, to the ADMs and CEOs of other provincial LHINs. In May 2012 she presented to the South West LHIN Quality Forum. Division member Dr. Iris Gutmanis has been appointed Co-Chair of the Provincial Evaluation Committee for Behavioural Supports Ontario.

**Division Membership**

**Associate Professor & Chair**
Lisa Van Bussel

**Professor Emeritus**
David Harris

**Associate Professors**
Michele Doering
Marnin Heisel

**Assistant Professors**
Amer Burhan
Jennifer Oates
Hae-Ryun Park
Akshya Vasudev

**Adjunct Faculty**
Jennifer Doherty
John Feightner
Michael Fisman
Jennifer Fogarty
Iris Gutmanis
Tony O'Regan
Affiliate Members
Ed Black
Michael Borrie
Laura Diachun
Maggie Gibson
Ann Jarvie
Tom Ross

Lisa Van Bussel, MD, FRCPC
The Division of Neuropsychiatry was created in 2001 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 with clinical research groups. It enhances collaboration between imaging researchers at the Robarts Research Institute, the Lawson Health Research Institute and clinical research groups. Finally, it 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 also 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 as a result of support: 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 holds an *Endowed Chair* at the *Autism Centre of Excellence* at 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 representation. Brain structures such as the frontal pole, temporal pole, and fronto-insular cortex are highly developed in humans and may be associated with this function. 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 recently awarded a five year $739,755 grant from the Canadian Institutes of Health Research to examine the structural, functional, and metabolic correlates of these changes in first episode schizophrenic and
depressed patients in collaboration with Dr. Osuch. 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 12 first episode, medicated schizophrenic patients (SZ), 12 first episode, mostly medicated major depression disorder patients (MD) and 22 healthy volunteers. A Family-wise Error (FWE) corrected increase SZ>controls is shown in the dorsal anterior cingulate (ACC), a key part of the directed effort network.

**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.

Following up on her description of the dissociative subtype, Dr. Lanius has published 16 articles on posttraumatic stress disorders this year in journals such as *Human Brain Mapping, Psychological Medicine, Journal of Clinical Psychiatry* and given invited lectures in Los Angeles, Boston, Justus-Liebig University in Germany and Baltimore, Maryland. Much
of this work has been funded by the Canadian Institutes of Health Research. However, Dr. Lanius is one of 4 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, 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 Journal of Clinical Psychiatry, Dr. Frewen and Dr. Lanius demonstrated the functional brain imaging correlates of emotional numbing in posttraumatic stress disorder patients (Figure 2).

![Figure 2: Decreasing BOLD response within the dorsomedial prefrontal cortex during positive and negative emotional imagery in 14 posttraumatic stress disorder patients as a function of increasing emotional numbing symptoms.](image)

**Figure 2:** Decreasing BOLD response within the dorsomedial prefrontal cortex during positive and negative emotional imagery in 14 posttraumatic stress disorder patients as a function of increasing emotional numbing symptoms.

**Mood and Anxiety Disorders:** The First Episode Mood and Anxiety Program (FEMAP) provides an excellent base for both clinical and brain imaging research. Dr. Osuch has been studying neurofunctioning and cognitive interactions in major depression and marijuana
use in youth with functional and structural brain imaging in a project funded by the Ontario Mental Health Foundation. In another project, funded by the Pfizer Psychiatry Research Program, Dr. Osuch is examining the potential of functional brain imaging techniques to diagnose first episode bipolar versus unipolar depression. The ability to do so would have important clinical implications as antidepressants given to bipolar depressed patients can exacerbate the illness.

Dr. 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 published an invited review on the brain mechanisms of conscious perception of emotional stimuli for The Neuroscientist and important 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.

**Autism:** Dr. Nicolson, the Endowed Chair in Autism Studies, has brought together the Autism Centre of Excellence with a substantial grant from the Government of Ontario 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 6 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.

**Basic Science:** Basic science investigations include innovative signalling studies led by Dr. Rushlow and Dr. Raj Rajakumar. Of particular note this year are important papers on regulation of Akt and Wnt signalling by group II metabotropic glutamate receptor antagonists and agonists published in the Journal of Neurochemistry by Dr. Rushlow and the role of calcineurin in inhibiting disadvantageous associations in Neuroscience by Dr. Rajakumar. Dr. Rajakumar also plays an important role as a neuroanatomy consultant to the brain imaging studies and Dr. Rushlow collaborated on the basic science aspects of Dr. Lanius’ Canadian Institute of Military and Veterans Health Research study.

**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. Graduates 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. Dr. Nicolson won a Schulich Educator Award in 2012 in recognition of his teaching expertise.

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.

Awards

1. **Dr. Ruth Lanius**- Department of Psychiatry, University of Western Ontario Research Award (2010-2011).

2. **Dr. Ruth Lanius**- Written Media Award, Lanius, R; Vermetten, E. and Pain, C. for “The Impact of Early Life Trauma on Health and Disease: The Hidden Epidemic.” Lanius, R; Vermetten, E. and Pain, C. for “The Impact of Early Life Trauma on Health and Disease: The Hidden Epidemic.” Presented at the 28th Annual Conference of the International Society for the Study of Trauma and Dissociation, November 2011.

3. **Dr. Paul Frewen**- Department of Psychiatry, University of Western Ontario Research Award (2011-2012).
Grants


8. Lanius, R.A. (Co Principal Investigator); McKinnon, M. (Co Principal Investigator); and Jetly, L.Col. Rakesh. “Default connectivity as a predictor of posttraumatic stress


19. 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.


26. Théberge, J. “Examining abnormal brain activity oscillations in schizophrenia using high field Lorentz effect fMRI.” National Alliance for Research on Schizophrenia and Depression (NARSAD) Young Investigator Award Program. Ontario Mental Health Foundation – New Investigator Fellowship. $60,000. 2008-2012.


Publications

Book Chapters and Invited Publications:


Peer Reviewed Publications:


Abstracts:


20. Osuch E; Ford K; DePace J; Ross B; Chow M; Wrath A; Bluhm R. “Non-suicidal self-injury in youth and the neurocircuitry of reward-processing and pain: an fMRI study using a painful stimulus.” 67th Annual Scientific Convention of the Society of Biological Psychiatry, 2012.


Selected Invited Presentations


12. Lanius, R.A. “Psychosis, Post Traumatic Stress Disorder (PTSD) and Dissociation.” (3 lectures). 5th Workshop on CBT Series, Royal Ottawa Health Care Group, Ottawa, Ontario, October 14, 2011.


15. Williamson, P.C. "Imaging the Mind and its Disorders: Some Thoughts on Building a Research Centre." Aarhus University, Aalborg, Denmark, 2011.

*Peter Williamson, MD, DPsy, FRCP(C)*
Chair, Division of Neuropsychiatry
Department of Psychiatry
Tanna Schulich Chair in Neuroscience and Mental Health
Schulich School of Medicine and Dentistry
Western University
1. The Division of Social and Rural Psychiatry (SRP) in the Department of Psychiatry at Western University (Western) was established in May 2008. Since then, an advisory board for the Division has been meeting, with representation from the Department of Psychiatry, other Departments at the Schulich School of Medicine and Dentistry, and other Faculties at Western, specifically the Faculty of Health Sciences, the Faculty of Social Sciences, and the Faculty of Arts and Humanities. The education coordinator for the Division is Dr. Iouri Rybak. The annual visiting scholarship of the Division continued, with Professor Phyllis Solomon from the School of Social Work at the University of Pennsylvania visiting and presenting in November 2011. The honorary professorship of the Division continued, with Dr. Julian Leff from the UK as the inaugural honorary professor (2009-2012). The webpage for the Division is updated continuously. Academic, clinical and administrative success of Division members continued and grew, such as in peer reviewed papers and grants, chapters and books, as well as in education development and implementation and in creative professional initiatives and service such as board memberships. The Division is the primary academic hub for the psychiatric program of ECP (including NOSP), which provides mental health education and some psychiatric service delivery to rural and remote communities in Northern Ontario. The Division is also the primary academic hub for many faculty members who work clinically at RMHC. Hence find below a report on ECP and RMHC. The affiliation of the Division with the Southwestern Ontario Medical Education Network (SWOMEN) was removed in 2012, hence SWOMEN will not be reported on here.

2. The Extended Campus Program (ECP) facilitates Northern Ontario psychiatric education and research and has been directed by the undersigned with administrative support from Ms. Hana Siemiarczuk. It supports quality psychiatric care in under-serviced Northern Ontario communities through continued recruitment and retention efforts, and is a member of the Ontario Psychiatric Outreach Program (OPOP). The ECP conducted its annual retreat on research and evaluation methodology.

The ECP continued to provide administrative and academic support to a group of Western faculty members providing full time clinical and academic services in Thunder Bay, North Bay, and Sudbury.
Support for psychiatrists providing consultations to the North of Superior Programs (NOSP) sites in Nipigon, Schreiber, Marathon, Manitouwadge, Geraldton and Longlac continued and a total of 24 consulting visit days plus 1 full day and 4 educational half days were provided to these NOSP sites, with residents attending some of them with a consultant and very positive feedback on their learning experience. Additionally, 88 consultation hours via videoconferencing to the NOSP continued, and monthly teleconference indirect consultations to the NOSP clinical staff were initiated and conducted by the Clinical Director of NOSP. Additional funds from the Northwest LIHN’s sessional fees were added for the NOSP project in the 2011-2012 fiscal year. NOSP continued to participate in OPOP research related to mental health services in remote communities in Northern Ontario, with the undersigned serving as a co-investigator. The undersigned was replaced by Dr. Giuseppe Guaiana as the Clinical Director of NOSP in 2012.

Other consultants delivered 135 video-consultation hours to Thunder Bay, totaling 223 hours to 7 Northern Ontario sites (Thunderbay and NOSP) via videoconferencing from the Regional Mental Health Care, London.

Opportunities for active participation in Western’s Department of Psychiatry CPD events were available for psychiatrists, health care professionals and medical clerks from Health Sciences North – Sudbury, North Bay Regional Health Centre, Lakehead Psychiatric Hospital in Thunder Bay, St. Joseph’s Health Centre – Thunder Bay, Thunder Bay Regional Health Sciences Centre and the Sault Area Hospitals in Sault Ste. Marie.

3. Regional Mental Health Care (RMHC) completed divestment to Windsor in 2011 and proceeded with plans for divestment to St Thomas and to Hamilton. Planning continued for the new building. The quality and recovery council proceeded to focus on RMHC-wide initiative with some pilot projects.

I am leaving Western in August 2012 and hence bid you all farewell. I enjoyed my time as this Division’s Chair, and I hope I contributed to advancing its mandate. I wish all the best to the new Chair of the Division and to its members, as well as to the rest of the Department.

Respectfully submitted by,

Dr. Abraham Rudnick, MD, PhD, FRCPC
Exiting Chair, Division of Social and Rural Psychiatry
Date: August 15, 2012
Bioethics in the Department of Psychiatry

The Bioethics Program of the Department of Psychiatry at the University of Western Ontario (Western) continues to be a leading academic bioethics program in North American psychiatry. The Bioethics Program promotes teaching, research and development in various ways. In 2011/12, these academic initiatives included:

- The Canadian Unit of the International Network of the UNESCO Chair in Bioethics has focused particularly on postgraduate and continuous professional education, and its head has been Dr. Abraham Rudnick. An advisory board with bioethics and education expertise from across Western and its teaching hospitals as well as from other universities in Canada and from the Canadian Medical Association has supported the unit. The unit’s research on postgraduate (residents’) psychiatric ethics education was presented at the International Conference on Bioethics Education in Singapore in 2011 and is currently in press. The unit’s head is leaving Western in August 2012. The unit’s future is to be determined.
- The annual summer bioethics course for the new Western psychiatry residents.
- Quarterly clinical ethics seminars, where junior and senior residents present and discuss ethically challenging cases.
- An annual Departmental Ethics CME/CPD event (addressing bioethics education in January 2012).
- Promotion of quarterly integrated bioethics rounds across the academic mental health care programs at RMHC and LHSC.
- Bioethics research, such as a CIHR-funded study on bioethics consultations, led by Dr. Abraham Rudnick.
- Representation of psychiatry in many relevant bioethics committees and groups in London, such as Western’s Health Sciences Research Ethics Board (HSREB), Western’s University Council on Research Ethics (Chaired by Dr. Abraham Rudnick in 2009-2011), and more.
- Leadership and presentation in bioethics-related conferences and similar venues, such as panel membership on a regional conference on capacity of patients to make decisions in June 2012.
- Publication of bioethics writings, such as an open access book on bioethics in the 21st century (edited by Dr. Abraham Rudnick and published by InTech - http://www.intechweb.org/books/show/title/bioethics-in-the-21st-century).
- Posting of bioethics resources on the Department of Psychiatry’s webpage.

Dr. Abraham (Rami) Rudnick, MD, PhD, FRCPC
Exiting Bioethics Director
Department of Psychiatry, Western
The past year has been exciting! In May 2012, the Schulich School of Medicine & Dentistry (Windsor Program) graduated its inaugural class of 24 students. The Windsor Program now offers all four years of undergraduate medical education. Congratulations to the medical students, faculty and support staff who worked so hard to make this happen.

The delivery of psychiatry undergraduate education in Windsor would not have been a success without the efforts of Dr John Villela, who organizes Meds 5207 and Dr. Akinlosotu, the undergraduate program director and clerkship coordinator in Windsor.

Dr. Mark Watling continues as the course manager for Medicine 5207, Psychiatry and the Behavioural Sciences, which is delivered in the second year of medical school in both London and Windsor. I would like to acknowledge the hard work of the week captains for this course which include Drs. Sreelatha Varapravan, Heidi Haensel, Leslie Ritchie and Julie Richard. I would also like to convey 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.

Dr. Carla Garcia has worked with Dr. Sreelatha Varapravan to coordinate PCCM (Patient Centred Clinical Methods). 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 interventions 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. For example, Psychiatry and Geriatrics are working together to develop cases regarding care of the elderly. Future directions include extensive review of the existing objectives to emphasize clarity and concordance with overall course objectives.

In September 2011, Dr. Carla Garcia assumed the role of Clerkship Coordinator. In July of that year the clerkship rotation was rearranged into 3-two week blocks. This evolved as students requested the opportunity to complete a two week selective during their six week
rotation. Child and adolescent interviewing is no longer offered on Wednesday afternoons but Child Psychiatry lectures remain during the Wednesday morning seminar series. All clinical clerks have the opportunity to assess children and adolescents while on call in the ER but students who wish to enhance their clinical exposure can choose to complete a two week selective. Dr Ben Loveday has organized the clinical electives and has provided learning objectives consistent throughout the various sites.

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 has been updated to reflect changes in identified educational needs, objectives, and to take advantage of the addition of new faculty to our undergraduate education program. The seminar series continues to be teleconferenced to our various SWOMEN sites with Windsor offering an equivalent series. Additionally, the Resident Teaching Series remains one of the most highly rated educational experiences within the clerkship. Thank you to Dr. Michelle Ngo for her significant contribution to the resident seminar series during the past academic year. In the upcoming academic year the resident teaching series will be available to clinical clerks at SWOMEN sites by teleconference.

One objective 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 March 26, 2012 we held our first “Taste of Psychiatry Dinner” at Windermere Manor. Thirty-five first and second year medical students were invited to join our faculty and residents to learn about the various clinical and research opportunities within our department. It was an informative and entertaining evening. After taking a brief hiatus, we had a meeting of the Psychiatry Interest Group on April 30, 2012. The group watched the movie Precious. Stephanie Rabenstein and Rita Van Meyel discussed the clinical aspects of childhood sexual trauma.

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 sixteen Schulich students and fifteen visiting elective students.

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.

*Sandra Northcott, MD, FRCPC*
A great thank you to all who have supported our Residency Program over the last academic year. Your support has made the program grow by numbers of residents and academic diversity.

The academic year 2011/2012 has had many changes and challenges which were mastered in collaboration by residents, faculty and the Residency Training Committee (RTC). In April, 2011, all Psychiatry services moved from South Street Hospital to our new facility at Victoria Hospital. The move was well prepared and very smooth. Still, after being at the new campus, many new routines had to be established. Getting keys, access codes, finding office space and new ways of scheduling rooms continue to be a challenging task.

The teaching resources have improved remarkably. We have more teaching rooms available, high-end electronic equipment and improved connections between residents and faculty by now being on one campus for all the major rotations. Having inpatient and outpatient Psychiatry services and our centralized Emergency Psychiatry services in close proximity has eased the organizational difficulties. We are looking forward to having Regional Mental Health move across the street in the next 1-2 years. We anticipate a much higher level of collegial collaboration working closer together.

During the academic year of 2011/2012, many new faculty members joined the Department of Psychiatry. Teaching opportunities for formal teaching, but also for rotational supervision, have grown in diversity.

The biggest challenge we had to master with the move to Victoria Hospital was adapting the call schedule. Through dialogue between faculty and residents, we developed a suitable plan that continued forward during the whole year.

We would all like to thank Dr. Doering who ended her term as the Residency Training Director on June 30, 2011. She had mastered many substantial changes to the program which were necessary after the Royal College specific standards of training changed in 2009. The first class under the new requirements were in PGY 3 year during that academic year.

The development of a new curriculum for the senior residency training was an important task to master in the academic year.
In October, 2011, Dr. Volker Hocke, took on the Residency Training Director position. The Residency Training Committee (RTC) was completely restructured.

In the following months after October, the RTC and the Program Director refined the roles of each Committee member and streamlined work flow and responsibilities. The RTC also included a new position for a Research Coordinator as a new member of the team. The newly composed Residency Training Committee and the new Program Director focused their work for the remainder of the academic year on preparing for the university-wide accreditation of the Residency Program by the Royal College. With the new assigned responsibilities and newly structured portfolios, nearly every aspect of the Program was revisited, evaluated and in many aspects, revamped. It shall be mentioned, as an example, that the whole academic curriculum for the five years was evaluated to assess whether the contents were still appropriate and many new aspects have been added and others taken out of the curriculum. The Training Committee invested great effort in realigning the major topics of lectures with the current rotations. The Training Committee evaluated all policies, made changes and updates where necessary and eliminated those which were outdated and not reflective of the current strategies of the program. The very extensive pre-survey questionnaire was prepared, not only by the members of the RTC, but also by many faculty members who could contribute in their area of expertise to describe our specific training concepts. With an extraordinary effort by all faculty and especially the members of the RTC, the program was well prepared to go into the Accreditation Assessment in the first week of October, 2012.

During the academic year 2011/2012, many of the new faculty members committed to take on portfolios leads and coordinator roles for the RTC. Dr. Kamini Vasudev took on the newly developed Research Coordination and developed a very thorough plan to support the mandated research requirements for our residents. Dr. James Ross took over the Psychotherapy portfolio and has started to structure psychotherapy training in a clear and transparent way. Dr. Karin Kerfoot took over the Evaluation portfolio and developed with her team, new routines of regular evaluations in the Training Programme. The CaRMS portfolio was initially managed by Dr. Leanna Isserlin who prepared the CaRMS match very well during the last year. We were privileged to have all our seven slots filled on the first iteration. Dr. Isserlin left the Department temporarily for a maternity leave. Dr. Hooman Ganjavi took over the PGY 1 Portfolio Lead and mastered the preparation for the orientation phase of the new PGY1 class in a short period of time.

Dr. Jennifer Barr had taken on initially the coordination of the PGY4/5 years. She transformed the PG4/5 years into a very valuable senior resident education. Dr. McCarthy headed the working group on realigning the academic curriculum. Dr. Reiss supported the RTC with the coordination of the PGY2 year and later on took over the curriculum part for that year. As the Site Chief, he also supports the program by organizing the office schedule for the residents. Dr. Patricia Hall and Dr. Jennifer Oates are responsible for the rotational organization of the PGY3 year now including the appropriate set of lectures. Dr. Yuri Rybek joined us in the fall of 2011 as the Coordinator for Rural and Rehabilitation Psychiatry.
With his support, a new lecture series about the severe and persistent mentally ill could be put in place.

The residents are represented at the Residency Training Committee with the Chief Resident and the President of the Resident Association. Also, the COPE representative is a member of the RTC. The residents have provided valuable feedback and are supporting the development of the training with participation in many sub-committees related to training but also to hospital administration.

Eva Adams has continued to be the core administrative personnel for the program. Mostly not noticed from the outside, she is managing a tremendous amount of information on all levels of the Training Program and in each aspect of it. In May, 2012, we finally could expand our administrative support by a half position. This change has made it possible to sort out many flaws in our One45 evaluation system, start compiling teacher evaluations and to develop a data system to track attendance and vacation planning.

In the next academic year, the focus will be on consolidating all the changes that had been made to the program. We also will continue to develop our psychotherapy teaching, our evaluation processes and the senior resident training. The Training Committee will also support all efforts to make the mandatory research requirements a successful part of education for each resident.

The Postgraduate Psychiatry training program has developed very high standards of offering education to our next generations of psychiatrists. The program will continue to be one of highest level psychiatry education programs in the country.

_Volker Hocke, MD, FRCPC_
Continuing Professional Development

This report highlights the educational activities that have been pursued in the Department of Psychiatry between July 2011 and June 2012. 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. The programs offered through the Department meet the guidelines of the Royal College of Physicians and Surgeons of Canada (RCPSC) and as such, are self-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 MOCProgram credits offered by the RCPSC to its Fellows so that they can enrich their learning portfolio and provide evidence-based care to their patients. The participants are also encouraged to use the content of the CPD for triggering Personal Learning Projects and to utilize this knowledge in managing their patients. They are also encouraged to use the CPD credits earned from this activity toward their Section MOCOMP Credits.

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.

The monthly CPD programs are being televideo-conferenced to 14 sites and the weekly CPD activities are televideo-conferenced to 7 sites. 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 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’d like to thank Suzy Mendes for providing interim support for the CPD program. And, finally, we’d like to welcome our latest addition, Carissa Peterson who joined us in June as the new Administrative Assistant for the CPD Program in the Department of Psychiatry.

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

**Continuing Professional Development (CPD)**  
**September 2011 - June 2012**

**Monthly Departmental Rounds**

The CONTINUING PROFESSIONAL DEVELOPMENT ROUNDS are a self-approved group learning activity (Section 1) as defined by the MAINTENANCE OF CERTIFICATION Program of The Royal College of Physicians and Surgeons of Canada. (2.0 credits)

The Department monthly CPD continued to take place on the 2nd 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 were held live at Victoria Hospital, Zone B, 2nd Floor, Auditorium Room 119 (B2-119), 800 Commissioners Road East, London, and Ontario.

The Department’s Monthly CPD event held 10 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 8, 2011</td>
<td>Dr. Marshaly Yeargin-Allsopp</td>
<td>The Epidemiology of Developmental and Intellectual Disabilities: A Review and Update</td>
</tr>
<tr>
<td>Oct 13, 2011</td>
<td>Mr. Joel Lamoure, Ms. Jessica Stovel</td>
<td>Beyond the Admission: Multi-Axial Case Reporting and Presentation of Multiple Sclerosis</td>
</tr>
<tr>
<td>Nov 10, 2011</td>
<td>Dr. Gary Chaimowitz</td>
<td>The Criminalization of the Mentally Ill</td>
</tr>
<tr>
<td>Dec 8, 2011</td>
<td>Dr. Walter Friesen, Dr. Noel Laporte, Ms. Marianne Larocque, Dr. Abraham Rudnick, Ms. Nancy Wardrop, Dr. Naomi Wiesenthal</td>
<td>Psychotherapy Training and Supervision: Reflections, Challenges, and Opportunities</td>
</tr>
<tr>
<td>Jan 12, 2012</td>
<td>Mr. Robert Sibbald</td>
<td>Bioethics Education</td>
</tr>
<tr>
<td>Feb 9, 2012</td>
<td>Dr. Paul Links</td>
<td>Future Directions for the Department of Psychiatry</td>
</tr>
<tr>
<td>Mar 8, 2012</td>
<td>Dr. Kamini Vasudev</td>
<td>Valproate in Acute Mania: Is Our Practice Evidence-Based</td>
</tr>
<tr>
<td>Apr 12, 2012</td>
<td>Dr. Lisa VanBussel, Ms. Lori Hassal, Ms. Lynn Mellow</td>
<td>The Provincial BSO Strategy: Exciting Times for the Region</td>
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<td>Responding to the Need: Enhancing Services in London and Middlesex</td>
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<tr>
<td>May 10, 2012</td>
<td>Dr. Sarah Jarmain, Dr. Ann Snowdon</td>
<td>The Future of Psychiatrists in Canada</td>
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<td>Innovations in Health Systems in Canada</td>
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<tr>
<td>June 14, 2012</td>
<td>Dr. Rob Nicolson</td>
<td>Children Presenting with Suspiciousness, Odd Beliefs, Irrational Behaviour and Social Withdrawal: Assessment, Differential Diagnosis and Management</td>
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</table>

**Learning After Five**

The LEARNING AFTER FIVE ROUNDS is a self-approved group learning activity (Section 1) as defined by the MAINTENANCE OF CERTIFICATION Program of The Royal College of Physicians and Surgeons of Canada. (2.0 credits)

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>
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</thead>
<tbody>
<tr>
<td>Sep 20, 2011</td>
<td>Dr. Loys Ligate</td>
<td>Motivational Interviewing Skills</td>
</tr>
<tr>
<td>Oct 25, 2011</td>
<td>Dr. Robert Teasell</td>
<td>Management of Chronic Pain: Giving In Is Not Giving Up</td>
</tr>
<tr>
<td>Nov 28, 2012</td>
<td>Dr. Varinder Dua Mr. Joel Lamoure Ms. Jessica Stovel</td>
<td>Making the Case for Close Scrutiny: ECNP, Psychotropics &amp; Blood Dyscrasias</td>
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<tr>
<td>Dec 13, 2011</td>
<td>Dr. Amresh Srivastava</td>
<td>Newer Targets and Future Antipsychotic Drugs: Neuropeptides and Cannabinoids</td>
</tr>
<tr>
<td>Feb 21, 2012</td>
<td>Dr. Varinder Dua Mr. Joel Lamoure</td>
<td>Lithium the 3rd Element: a Panacea or a Curse</td>
</tr>
<tr>
<td>Mar 22, 2012</td>
<td>Dr. Robin Emsley</td>
<td>How Can We Meaningfully Improve the Outcome in Schizophrenia</td>
</tr>
<tr>
<td>Apr 26, 2012</td>
<td>Dr. Steven Laviolette</td>
<td>The Neurobiology of Addiction: From Nicotine to Heroin</td>
</tr>
<tr>
<td>May 15, 2012</td>
<td>Dr. Verinder Sharma</td>
<td>Childbirth and Bipolar: Challenges and Opportunities</td>
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<tr>
<td>June 19, 2012</td>
<td>Dr. Heather Getty</td>
<td>Cognitive Behavioural Treatment of Individuals with Persisting Pain</td>
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**Weekly Co-Ordinated CPD Monday Rounds**

The COORDINATED CPD PROGRAM is an educational opportunity for healthcare professionals at Regional Mental Health Care London, Regional Mental Health Care St. Thomas, and the Mental Health Care Program at London Health Sciences Centre.

The CPD Committee includes representatives of this target audience and is responsible for the planning of the program. The program is self-approved through the Royal College of Physicians and Surgeons of Canada for MAINCERT and approved by Continuing Professional Development, Schulich School of Medicine & Dentistry, Western University for MAINPRO-M1. This is also 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. (1.0 credit) and 1.0 MAINPRO-M1 credits.

The Coordinated CPD Program held 25 presentations from September 1, 2011 to June 30, 2012. These events were held weekly on Mondays from 12:00 – 1:00 pm hosted from the Wickware Amphitheatre at RMHC London. During this year, we continued to use televideo-conferencing to deliver the weekly program to participating sites of RMHC, and by mid-January with a televideo location secured at VH, telecasts resumed to the medical staff at the LHSC Mental Health Care Program.
<table>
<thead>
<tr>
<th>Dates</th>
<th>Speakers</th>
<th>Presentations</th>
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<tbody>
<tr>
<td>Sep 12, 2011</td>
<td>Dr. Patricia Rosebush</td>
<td>Understanding the Clinical Nature and Pathophysiology of Neuroleptic Malignant Syndrome (NMS)</td>
</tr>
<tr>
<td>Sep 19, 2011</td>
<td>Dr. David LeMarquand</td>
<td>Suicide and the Law</td>
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<tr>
<td>Sep 26, 2011</td>
<td>Dr. Isabelle Martin</td>
<td>'Is It All In My Head, Doctor?' - Preoccupation With Bodily Sensations And Symptoms</td>
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<tr>
<td>Oct 03, 2011</td>
<td>Mr. Chris Baron</td>
<td>Enabling Patient Recovery Through RMHC’s Patient Bill of Rights</td>
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<td></td>
<td>Mr. Christian Daboud</td>
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<td></td>
<td>Ms. Jodie Gregory</td>
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<tr>
<td>Oct 17, 2011</td>
<td>Mr. Chris Baron</td>
<td>Fostering Health by Hearing and Bridging Diverse Voices: Personal, Professional, and Spiritual</td>
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<td>Mr. John Boc</td>
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<td>Mr. Bill Hill</td>
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<td></td>
<td>Rev. Marvin Shank</td>
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<td></td>
<td>Rev. Stephen Yeo</td>
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<tr>
<td>Oct 24,2011</td>
<td>Dr. John Craven</td>
<td>An Overview of the SupportNet Health Recovery Program with clinical applications and experience from Clinic 528 in London, Clinic 461 in Woodstock and Clinic 217 in St. Thomas, Ontario</td>
</tr>
<tr>
<td>Oct 31, 2011</td>
<td>Dr. Andrew Jones</td>
<td>Medical Clearance of the Psychiatric Patient</td>
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<td>Dr. Allison Meiwald</td>
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<tr>
<td>Nov 07, 2011</td>
<td>Dr. Joel Shapiro</td>
<td>Attack of the Clones! An Overview of Delusional Misidentification Syndromes</td>
</tr>
<tr>
<td>Nov 14, 2011</td>
<td>Dr. Richard Kim</td>
<td>Personalized Medicine and Psychiatry</td>
</tr>
<tr>
<td>Nov 21, 2011</td>
<td>Dr. Richard O'Reilly</td>
<td>What Can We Learn from the Clinical History of the Man Who Killed Brian Smith?</td>
</tr>
<tr>
<td>Jan 16, 2012</td>
<td>Dr. Christopher Ryan</td>
<td>Psychiatric Issues in Pregnancy: A (Brief) Review</td>
</tr>
<tr>
<td>Jan 23, 2012</td>
<td>Dr. Lakshmi Yatham</td>
<td>Mixed States: Advances in Diagnosis and Treatment</td>
</tr>
<tr>
<td>Jan 30, 2012</td>
<td>Dr. Amresh Srivastava</td>
<td>Management and Prevention of Suicide During Hospitalization</td>
</tr>
<tr>
<td>Feb 06, 2012</td>
<td>Ms. Amanda Porter</td>
<td>How Does Contraband Affect You? (Bioethics Rounds)</td>
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<td>Ms. Marlene VanLaethem</td>
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<td>Ms. Kathy White</td>
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<tr>
<td>Feb 13, 2012</td>
<td>Ms. Elizabeth Russell</td>
<td>Bibliotherapy: Therapeutic Use of Literature</td>
</tr>
<tr>
<td>Feb 27, 2012</td>
<td>Dr. Maryna Mammoliti</td>
<td>Eating Disorders in the 21st Century: What is the world coming to?</td>
</tr>
<tr>
<td>Mar 05, 2012</td>
<td>Ms. Sandy Morton</td>
<td>Partnering with Families: A Model for Better</td>
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</table>
## Needs Assessment

In January, 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.

## CPD Evaluation Tool

The final version of the CPD Evaluation Tool was implemented in 2012.

### 2011-2012 CPD Awards

<table>
<thead>
<tr>
<th>Best CPD Presentation by a Junior Resident</th>
<th>Best CPD Presentation by a Senior Resident</th>
<th>Best CPD Presentation by Junior Faculty</th>
<th>Best CPD Presentation by Senior Faculty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Rebecca Tudhope</td>
<td>Dr. Juliana Li</td>
<td>Dr. Kamini Vasudev</td>
<td>Dr. Sarah Jarmain</td>
</tr>
</tbody>
</table>

### Criteria for Awards

Highest overall average peer and audience evaluations from live site. This is based on the evaluation tools that cover the Guidelines and principles of adult and postgraduate education and in 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**

- **Symposium – November 25th, 2011, Lamplighter Inn**

ADDICTIONS: A Global Perspective

In partnership with the Department of Psychiatry and the Coordinated CPD Program, the second annual mental health symposium featuring experts in the field of addictions was a success!

The day featured the keynote address, “Addictions: A Global Perspective” by Dr. David Marsh. As well, presentations highlighting translational research with Dr. Steven Laviolette talking about “The Neurobiology of the Reward System”; and Ms. Linda Sibley presenting, “Linkages with Community Addiction Services”.

Participants had the opportunity to attend their top two choices of the four concurrent workshops offered:
- “Overeating and Addiction” (Dr. Marcia Sirota)
- “An Approach to the Management of Concurrent Disorders” (Dr. Greg McCarthy & team members)
- “Practical Aspects of Smoking Cessation” (Ms. Anne Finigan)
- “Spectrum of Problem Gambling” (Ms. Donna Sousa)

Planning committee members were:
- Dr. Varinder Dua, Chair
- Ms. Sandra Dunbar
- Dr. Sandra Fisman
- Dr. Aziz Haque
- Ms. Therese Jacob Goldman
- Mr. Joel Lamoure
- Dr. Greg McCarthy
- Dr. Mary McDonagh
- Dr. Jeff Reiss
- Ms. Glenda Shilleto
- Ms. Leslien Walters

The target audience included mental health professionals (psychiatrists, family physicians, nurses, psychologists, social workers, occupational therapists, pharmacists, residents) across Ontario.

We were at full capacity with 183 registered attendees with approximately 34% providing feedback by completing evaluation forms. Overall, the feedback was quite positive and useful in planning the fall 2012 mental health symposium: “HIV and Mental Health”.
• **Council of Psychiatric Continuing Education (COPCE), CPA**
Our collaboration with the CE Directors from other psychiatry programs across Canada continues. We engage in teleconference meetings and also attend the COPCE meetings twice a year. On October 14, 2011 at the Annual CPA meeting in Vancouver, Dr. Dua presented in a joint workshop presentation with three other CE Directors on “Maximizing Your Use of the New Royal College Maintenance of Certification Program.”

• **9th Annual Medicine Update for Psychiatry**
This annual event is held in collaboration with the CPD office at Western. This year’s event was held at the Convergence Centre on March 31, 2012 and the theme for the day was the interface between Mental Health in the Realm of Uro-gynaeacology and Reproduction. The day was a huge success with very robust feedback.

The participants in this activity earned 6.0 credits for the MOC Program and the MAINPRO-M1 program.

Finally we work collaboratively with the Western CPD office and are actively involved in some of the current CPD initiatives and also engage in planning future CPD initiatives/programs.

The essence of lifelong learning and educational scholarship is the basis for this 2011-2012 annual report, and we will continue to foster this spirit and quest in the future.

Varinder Dua, MD, FRCPC
CPD Director

Joel Lamoure, RPh., DD, FASCP, OSM
Assistant CPD Director
Research in the Department of Psychiatry
Dr. Ross Norman
Professor & Director of Research

The listing of research publications, conference presentations and funding received by members of our Department is appended to this report. It demonstrates the continued research productivity of faculty members and students.

Two Department of Psychiatry seed funding competitions were held during the past 2011-2012 academic year. The following application was successful:

A. Vasudev, K. Shoemaker & D. Mitchell. “Quantifying the ventro medial prefrontal cortex (vMPFC) responsiveness to parasympathetic nervous system (PNS) modifiers in late life depression (LLD).”

The Annual Academic Research Day for the Department of Psychiatry was held on June 21st at the Best Western Lamplighter Inn. The agenda included 15 oral presentations and 26 posters by faculty and students affiliated with the Department. It was fascinating and rewarding to see the range and calibre of research being carried out in our Department. Topics included neuropsychiatry, suicide ideation, mental health issues in homeless youth, physical health in those with severe mental illness, health service delivery, early intervention for psychosis, cognitive aspects of psycho-pathology, stigma of mental illness, psycho-pharmacology and other areas.

Awards for “Best Presentations by Students” were won by Kara Dempster for her talk on “Cerebrovascular risk factors and suicide ideation among older primary care patients” and Yang Ye for his presentation entitled “The effects of negation versus affirmation training on implicit stereotypes and behaviours related to schizophrenia.” Kara is a medical student at Western and Yang is a PhD student in the Department of Psychology at Western. I wish to acknowledge the generous support of Astra-Zeneca and its representative, Mr. Ramu Seshan, for providing the student awards.

The award for “Best Poster” went to Andrew McClure for his presentation entitled “Investigating the association between personality characteristics and suicide ideation in community resident older adults.” Andrew is a Master’s student in the Department of Epidemiology and Biostatistics.

This year’s “Tom Hepburn Award” for best presentation by a junior faculty member was awarded to Dr. Jason Carr for his presentation, “Broad and strong improvements in cognitive functioning over the first five years of specialized treatment for first episode psychosis.”
The Academic Lecture was given by Dr. Ashok Malla, Professor of Psychiatry at McGill University. Dr. Malla holds a Tier 1 Canada Research Chair in Early Psychosis and is the Director of the Prevention and Early Intervention Program for Psychoses in Montreal. He spoke on the benefits and challenges of integrating research and clinical service. Dr. Malla’s presentation was most interesting and particularly timely given our Department’s commitment to better integrating our research and clinical endeavours.

The quality of all of the work described was truly impressive, and the Department is indebted to all participants for making it a memorable day. Many thanks to Drs. Paul Links and Richard O’Reilly for their commitment to judging all presentations and posters, and selecting the award winners.

I wish to thank the members of the Department of Psychiatry Research Committee for their efforts during the past year. The members are Drs. Jeff Carter, Deb Corring, Marnin Heisel, Rahul Manchanda, Derek Mitchell, Richard O’Reilly, Abraham Rudnick, Walter Rushlow, Peter Williamson and Arany Shanmugalingam (resident representative).

This really is my last report as Director of Research. I know I’ve said that before, but this time it’s true! The past eleven years that I have filled this role have been interesting, challenging and rewarding. I want to pay particular tribute to Jacqueline DiMattia for the truly outstanding job she has done in providing administrative support to research.

The new Director of Research will be Dr. Marnin Heisel. I know that he will bring great enthusiasm, energy and skill to the role, and will do an excellent job of encouraging and supporting research within the Department.

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PEER-REVIEWED JOURNAL PUBLICATIONS:


**Corring D, Lundberg E, Campbell R** and **Rudnick A.** 2012. Using SMART technology in a simulated apartment with tertiary care inpatients: A feasibility and exploratory study. *Psychiatric Services* 63(5)

**Corring D, Lundberg E** and **Rudnick A.** In press. Therapeutic horseback riding for ACT patients with schizophrenia. *Community Mental Health Journal*


Gale C and Guaiana G. In press. Benzodiazepines in generalized anxiety disorder [protocol]. *Cochrane Database of Systematic Reviews*.


Han T, Alders G, Greening SG, Neufeld RW and Mitchell DGV. In press. Do fearful eyes activate empathy-related brain regions in individuals with callous traits? *Social Cognitive and Affective Neuroscience*.


McDonald P, Castellani C, O'Reilly R and Singh S. In press. CNV analysis of monozygotic twins discordant for schizophrenia.


Windell D, Malla A and Norman RMG. In press. The personal meaning of recovery among individuals treated for a first episode of psychosis. *Psychiatric Services.*


**BOOKS AND BOOK CHAPTERS:**


OTHER PUBLICATIONS (Letters to Editor; Editorials, Book Reviews; Newsletters; etc.):


Dozois DJA. In press. Stimulating science and Haligonian hospitality at Convention 2012. Psynopsis


EXTERNAL CONFERENCE PRESENTATIONS, WORKSHOPS, INVITED LECTURES & ABSTRACTS:


Corring D, Campbell R and Rudnick A. Cognitive remediation for inpatients with schizophrenia or schizoaffective disorder using "smart" technology in a simulated apartment: A feasibility and exploratory study. 9th International Conference on Smart Homes and Health Telematics. Montreal, QC. June 20-22, 2011.


Forchuk C and Rudnick, A. Service preferences of homeless youth with mental illness: Housing first, treatment first, or both together. Symposium on Substance Abuse Prevention and Treatment for Vulnerable Youth. Toronto, ON. March 8-9, 2012.


Forchuk C. Mental health engagement network: Connecting clients with their health team. LARIA-Smart 2012. Stuttgart, Germany. May 27-June 1, 2012.


Forchuk C. Service preferences of homeless youth with mental illness: Housing first, treatment first, or both together. 5th National Mental Health Nurses Conference. Toronto, ON. October 26-28, 2011.


Heisel MJ, Bowman J, Moore SL and Wilson K. Utilizing knowledge translation to reduce risk for suicide among older adults: Evaluating the Canadian Coalition for Seniors' Mental Health Late-Life Suicide Prevention Knowledge Translation Project. *Suicide Prevention Think-tank hosted by the Canadian Institutes of Health Research, the Mental Health Commission of Canada and the Canadian Association for Suicide Prevention*. Ottawa, ON. May 1, 2012.


Heisel MJ and Flett GL. The role of meaning in life in promoting resilience to late-life suicide ideation. Annual Scientific Meeting of The International Society for Affective Disorders, Royal College of Physicians London, UK. April 19, 2012.


O’Regan T. Envisioning the model of care for a Geriatric Psychiatry Day Treatment Program. Canadian Federation of Mental Health Nursing and RNAO Mental Health Nurses Interest Group. Toronto, ON. October 27, 2011.


Richardson JD. Issues, evidence and innovation in treating military-related PTSD. *61st Canadian Psychiatric Association Annual Conference*. Vancouver, BC. 2011.


Rudnick A. Service preference of homeless youth with mental illness: Housing first, treatment first, or both together. *World Psychiatric Association Congress*. Prague, Czech Republic. 2012.


Rudnick A. Mental Health Engagement Network: Connecting clients with their health team. *International Academy, Research and Industry Association (IARIA)-Smart 2012*. Stuttgart, Germany. 2012.


Shrivastava A. Emerging role of peptides in mechanism and treatments of schizophrenia. *Collaborative Symposia with WPA Section of Psychoneuroendocrinology, World Congress of Biological Psychiatry*. Prague, Czech Republic. October, 2011.


**EXTERNAL GRANT FUNDING:**


Bennett K, (PI) and Links PS, (Co-Inv). "Suicide prevention in youth: Options and evidence". *Canadian Institutes of Health Research*. Total Funding: $100,000. Grant Term: 2012-2013.


Chiu S, (PI). "Study of curcumin, a putative neuronal nitric oxide synthetase inhibitor (nNOS) with neuroprotective, antioxidant, anti-inflammatory properties, isolated from Turmaric Curcuma Longa as added-on strategy to antipsychotics in treating negative symptoms and neurocognitive impairment in schizophrenia. Pilot open-label study". Stanley Medical Research Institute. Total Funding: $96,020 US. Grant Term: 2007-2012.


Corring D, (PI) and Rudnick A, (Co-Inv). "Exploring the use of Smart technology with persons with mental illness living in the community". Nicholaas & Regina Veenboer Foundation. Total Funding: $25,000. Grant Term: 2011-2012.


Forchuk C, (PI). "Laboratory for research to study community integration of people with mental illness". Canada Foundation for Innovation and co-sponsors(conditional acceptance). Total Funding: $380,566. Grant Term: 2012


Forchuk C, (PI) and Rudnick A, (Co-Inv). "CURA Award: Poverty and Social Exclusion". Social Sciences and Humanities Research Council of Canada. Total Funding: $1,000,000. Grant Term: 2011-2016.


Singh S, **O’Reilly R** and Scherer S, (Co-PIs). "Gene discovery in schizophrenia using copy number variations (CNVs) in high-risk monozygotic (MZ) and dizygotic (DZ) twins". *Canadian Institutes of Health Research*. Total Funding: $579,408. Grant Term: 2008-2011.


Vasudev A, (PI), Shoemaker K and Mitchell D, (Co-Invs). "Quantify the ventro medial pre frontal cortex (vMPFC) responsiveness to parasympathetic nervous system (PNS) modifiers in late life depression (LLD)". AMOSO Opportunities Fund. Total Funding: $65,000. Grant Term: 2012-2014.


INTERNAL PEER-REVIEWED GRANT FUNDING:


Finger E, (PI) and Bartha R, (Co-Inv). "Ultra high field structural and metabolic imaging in frontotemporal dementias". Western University Internal Research Grant. Total Funding: $14,760. Grant Term: 2011-2013.


Vasudev A, (PI), Shoemaker K and Mitchell D, (Co-Inv). "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, Western University. Total Funding: $7500. Grant Term: 2012-2013.

Vasudev A, (PI), Shoemaker K and Mitchell D, (Co-Inv). "Quantify the ventro medial pre-frontal cortex (vMPFC) responsiveness to parasympathetic nervous system (PNS) modifiers in late life depression (LLD)". Academic Development Fund Small Grant, Western University. Total Funding: $8,500. Grant Term: 2012-2014.
OTHER RESEARCH FUNDING:


Chiu S, (PI). "Translational research program on botanical ingredient of the extract Sceletium tortuosum (Zembrin®) targeting PDE-4 (phosphodiesterase-4) in cognition and mood and anxiety". PJ Thomas Inc. Total Funding: $50,500 US. Grant Term: 2011-2012.


