

# Psychiatry Department Communication

*June 2020*

## Department Overview

Over the last three months our world, country, province, medical school and hospitals, and department have been involved in a period of remarkable disruption and change. We have had to adapt radically to changes in our home and work lives. We have had to make difficult choices in situations that would normally seem trivial, such as when to go the grocery store and or see a particular patient. We have struggled to assess risk to our patients, families, and selves. We have been inundated with information and had to sort through the implications, veracity, and timeliness. We have stayed home, remained inside, and resorted to meeting for hours without the benefit of that moment of simply being with one another.

And yet...

And yet we have forged stronger connections amongst us. We have reached out to our patients to meet them where they are. We have altered our work habits to ensure the safety of our patients. We have stretched what we normally consider our research lanes and ventured into new project proposals and collaborations. We have assumed new and demanding leadership roles and dedicated ourselves to supporting each other learn new ways of doing things. We have shifted to connecting with learners via computer and thought about different styles of information sharing. Most importantly, we have removed barriers to change and found paths forward together.

We started to see ourselves as one.

For all of this and much more, we are grateful. We are grateful for the self-sacrifice, diligence, long hours, humor, kindness, and care each has shown during this time of challenge.

We are grateful for our strong and beautiful departmental family.

Stay strong, take care, and stay well,

*Chandlee Dickey*





## Innovations and Adaptations during the COVID-19 Pandemic

### *Clinical*


#### **Adult Inpatient Services**

1. At St. Joseph's Health Care, Parkwood Institute Mental Health (PIMH), we enacted our Code Orange plan and adapted our inpatient model to create additional bedded capacity to support a quick decanting of LHSC patients during the initial rapid occupancy reduction in preparation for pandemic surge. The additional capacity has continued to function as isolation beds to support safe admissions.
2. Alongside with our colleagues from respiratory, we segregated COVID-19 (+) patients on a mixed psychiatry & COVID-19 ward at LHSC.
3. We created a new Short-Stay Unit at LHSC to help patients return to their home communities quickly.
4. We piloted telemental health city-wide so we could continue to serve patients while working remotely. We assigned psychiatrist to a particular ward and aligned with team members to support multidisciplinary care planning at LHSC.
5. At both sites, in order to reduce the risk of virus exposure for inpatients, we made a rapid shift by significantly limiting passes outside the hospital. The biggest impact of this shift was an elimination of smoking passes, essentially formalizing a tobacco free environment and required smoking cessation. We were able to use best practices in nicotine withdrawal to support our clients in managing this change and in realizing the benefits of improved health through cessation.

#### **Ambulatory Care**

1. We provided tele-mental health services city and region-wide and served patients where they reside.
2. We created a standalone injection clinic at PIMH.
3. In our ambulatory clinics at LHSC, we prioritized seeing healthcare workers who might be strained from the stresses imposed by COVID-19.
4. Our Assertive Community Treatment Teams continued to support individuals in their community environments and worked hand-in-hand with community mental health, public health, home owners and other partners to enact safety standards in communal living environments. They were partners with public health in swabbing for COVID and supporting our clients to be safe where they lived.

#### **Child & Adolescent Psychiatry**

1. As part of a joint pandemic response between PIMH and LHSC, the code orange protocol was enacted, which resulted in the co-location of both Child and Youth Mental Health inpatient programs at the LHSC site. The PIMH adolescent outreach team is continuing to see and support outpatients. The PIMH unit was converted into, initially, a surge space and then an admission isolation space to ensure that there was an ability to safely continue to admit to specialty mental health beds.
  2. We established an Emergency Diversion Clinic, thus helping families receive psychiatric care more rapidly and conveniently and decreasing the amount of time spent in the Emergency Room.
  3. We established social work support in Children's ER from 2:00-11:00 pm, thus supporting the rapid assessment of children.
  4. We established rapid assessment for admissions, decreasing the amount of time spent in the Emergency Room.
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5. We development the capacity to provide virtual appointments and virtual DBT groups in our ambulatory programs.
6. We increased capacity for virtual programming in order to provide team assessments for new Eating Disorders referrals.
7. The Inpatient Unit continued their work on treatment streams to provide treatment in a time efficient manner and further decreasing the length of stay.

### Service-Specific Advancements

- In collaboration with anesthesia, we successfully maintained ECT for select patients, thus securing potentially life-saving treatments. Dr. Burhan and team published a letter to editor highlighting the practical and ethical challenges involved in providing ECT in the context of COVID-19  
*Burhan AM, Safi A, Blair M, O'Reilly R. Electroconvulsive therapy for geriatric depression in the COVID-19 era: reflection on the ethics. Am J Geriatr Psychiatry. 2020 May 15. doi: 10.1016/j.jagp.2020.05.007. Epub ahead of print. PMID: 32425472; PMCID: PMC7227591.*
- Supported Emergency Department physicians with social work or RN support at first contact with patients to help facilitate mental health assessments and ED diversion when possible.

### Research

1. Researchers and their teams quickly adapted to conducting their work in a virtual manner.
2. Many researchers also swiftly pivoted their research to include a COVID-19 focus. For example:
  - a. Dr. Lanius was funded through CIHR to study Goal Management Training aimed at improving cognitive functioning among public safety personnel with PTSD, which will include a number of front-line workers currently responding to the COVID-19 pandemic.
  - b. Dr. Osuch's team at FEMAP transitioned their data collection to include the impact of COVID-related stressors.
  - c. Dr. Sukhera engaged in two projects, one to explore how structural stigma and moral distress is experienced by resident physicians and a second collaboration with University of Saskatchewan to examine experiences of bias within universities during COVID-19.
  - d. Dr. Burhan collaborated with Dr. Borrie on a phase 3 registered double-blind, placebo controlled clinical trial funded by the St. Joseph's Health Care Foundation on hydroxychloroquin prophylaxis. Study inclusion criteria were confirmed exposure to COVID19 and 40 year or older with two medical comorbidities or 60 years and older at PI.
  - e. Dr. Heisel received Lawson's Internal Research Fund (IRF) COVID-19 Pandemic Response funding to test online meaning-centred men's groups to promote psychological well-being and reduce despair in the face of the COVID-19 pandemic.
  - f. Dr. Wylie received a Western Research Catalyst Grant for her study "Pandemic partnership or colonial calamity? First Nations health systems during COVID-19."
  - g. Dr. Richardson and team at MacDonald Franklin OSI Research Centre planned a longitudinal study on the Moral Distress and Well-Being of Health Care Workers During the COVID-19 Pandemic.



## Education

### PGE

1. Positioned a new Program Director for our General Psychiatry residency. We publicly thanked Dr. Ganjavi for his period of service.
2. Piloted supervision for telemental health care delivery.
3. Established ITERs for many rotations.
4. Improved agenda and minutes methods, thus improving program documentation.

### UGE

1. UGME very quickly adapted to the pandemic response and our success depended largely upon our ability to design and deliver high-quality courses in the virtual environment.
2. FIRST YEAR: *Foundations Course* - Curriculum is being revised with an emphasis on utilizing asynchronous material when the course begins this fall.
3. SECOND YEAR: *PCCIA course* was switched to small group online facilitation.
4. *PCCM course* was cancelled. Instead students were offered online resources on interactive psychiatric interviewing; Will maintain an active, nimble response to student questions about lectures through a shared Google Doc.
5. *MEDS 5207 Course*: Changed the small group learning to unfacilitated group-based learning with submission of responses to cases for week captains to review. Changed the exam to online open-book format; We maintained an active, nimble response to student questions about lectures through a shared Google Doc
6. *Principles 2 Course*: MEDS 5207 lectures were switched to online learning *Hybrid Curriculum* for the Psychiatry Block in the new Principles of Medicine 2 course, which will allow for virtual delivery of the course next year in a planned, intentional way, and in keeping with the new CBME curriculum.
7. THIRD YEAR: *Clerkship* placed on hold from March 23 – July 6. Clerks provided with online learning of a modified version of 'Integration and Transition' course from 4<sup>th</sup> year. All Clerk seminars cancelled.
8. Clerkship to resume for 3 remaining blocks (6/7/8) on July 6 in a compressed format with 4 week rotations; Developed new Clerkship seminar series. Revised Clerkship format, on call requirements, learning content, added new resources and working on instructional design aspects. Reworking on exams including new exam questions.
9. FOURTH YEAR: *Electives* remain cancelled.
10. ACADEMIC COACHING: Changed to online modality of delivery of sessions. Feedback tool has now been designed and will be sent out shortly.




**UGE Continued**

11. FACULTY: *Dr. Leslie Ritchie* is the Faculty Curriculum Lead from Department of Psychiatry. *Dr. Aturan Shanmugalingam* is the new Clerkship Director; *Dr. Bernard Grynspan* is the new Foundations Course Lead. Actively recruiting for content experts in Principles 2 Course and a new position called 'Transition to Clerkship' lead. We have now analyzed data from the VIC suicide project and are drafting a paper (*Dr's Riffin, Subramanian, Varapravan, Rybak*).
12. STUDENTS: Graduation ceremony of students have been postponed. We have maintained communication with students and offered support and resources to cope during this difficult time. Students have expressed interest in attending virtual departmental CPD activities and research activities in the department. They have volunteered to support health care workers. Psychiatry Enrichment Program this Summer and all social events remain cancelled.

**CPD:** We transitioned to fully virtual platforms, thus ensuring continued learning opportunities for all.

**Leadership**

1. To ensure a robust leadership team during this period of significant change, we appointed an interim Forensic Chair, Adult Chair, Child & Adolescent Chair / Chief, and Vice Chair-Clinical.
  2. Given the rapidity of change during the Pandemic, the leadership team created a new group, Psychiatry Leadership Council Plus (PLC +). PLC+ initially met daily to review clinical coverage, messaging, changes in residency program, move to virtual care, research updates, and ended with statements of gratitude. With time the PLC+ decreased meeting frequency.
  3. Tracking of people's location and ability to work became important. An Excel-based tracking system was updated daily and circulated. This had the added benefit of informing leaders who might be out due to COVID and needing a supportive note.
  4. Facilitated by Dr. Burhan, Vice Chair, and the Department of Psychiatry HR, we reviewed the current status of the Career Development Planning (CDP) process and mentorship committees for all faculty members. All faculty and their academic and clinical leaders received detailed report on the status of their last CDP review and mentorship committee. Faculty were asked to go through a review of CDP and mentorship over the next 2 months to make sure that they receive the support they need for successful clinical academic progress.
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## ongratulations to our Professors



### **Dr. Lena Palaniyappan**

for being promoted to the academic rank of Professor, Department of Psychiatry, Schulich School of Medicine and Dentistry, Western University (effective July 1, 2020). Dr. Palaniyappan holds the Tanna Schulich Chair of Neuroscience and Mental Health and is the Medical Director of Neuropsychiatry as well as the Research Director of Programme for Prevention and Early Intervention in Psychosis (PEPP). He similarly has adopted a comprehensive approach to understanding the neurobiology of psychosis via integrating multimodal imaging techniques with rich clinical expertise.


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### **Dr. Beth Osuch**

for being promoted to the academic rank of Professor, Department of Psychiatry, Schulich School of Medicine and Dentistry, Western University (effective July 1, 2020). Dr. Osuch holds the Dr. Joseph Rea Chair in Mood Disorders and is the founding director of First Episode Mood and Anxiety Disorders (FEMAP). Her multipronged approach including artificial intelligence, imaging, and clinical evaluations, has influenced how clinical studies are performed.

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Dr. Palaniyappan and Osuch's impressive achievements are symbolic of the international recognition of the contributions they have both made to understanding the neuropathophysiology and clinical manifestations of mood and psychosis disorders, respectively, during adolescence and early adulthood. These achievements were not attained in isolation but also represent the impressive support of everyone involved in FEMAP, PEPP, and colleagues across the department. We would also like to express gratitude to the membership of the Appointments and Promotions Committee for their support in recognizing these two outstanding faculty members.







## Congratulations to Our Graduates

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### **Dr. Rebecca Barnett**

after graduation is subspecializing in Child & Adolescent Psychiatry

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### **Dr. Cara Collins**

after graduation is subspecializing in Geriatric psychiatry

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### **Dr. Caroline Harvey**

considering General psychiatry with the hope to work with youth/transition age upon graduation

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### **Dr. Alex Hocko**

will be considering General psychiatry with a possible interest in C-L

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### **Dr. Sybille Lindsay**

after graduation is subspecializing in Child & Adolescent psychiatry

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### **Dr. Michelle McLean**

after graduation is subspecializing in Geriatric psychiatry

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### **Dr. Kwaku Poku**

planning to practice general adult psychiatry with a focus on inpatient and ambulatory in London area.

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### **Dr. Lauren Riffin**

after graduation is subspecializing in Child & Adolescent psychiatry and obtaining her MBA.

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### **Dr. Elyse Ross**

after graduation is subspecializing in Geriatric psychiatry

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### **Dr. Thelepa Vaithianathan**

after graduation is considering subspecializing in Geriatric psychiatry

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**We're so proud!**





**Janet Holmes**

For winning a Schulich Continuous Excellence Award

**Tracy Henebry**

For being honored with the Schulich Continuous Excellence Award



**Dr. Patricia Hall**

For being recognized with the Schulich Educator Excellence Award and for serving as the Interim Chair/Chief of Child and Adolescent Psychiatry

**Dr. Sreelatha Varapran**

For being recognized with the Schulich Leader Excellence Award



**Dr. Lisa VanBussel**

For agreeing to take on the position of Geriatric Psychiatry sub-specialty Program Director from August 7th, 2020 for a two-year term. Lisa has led the Geriatric Psychiatry Program at SJHC through several major transitions. She has also been Chair of the annual Geriatric Psychiatry Symposium, which delivers an astounding 17 years of high-quality education. Lisa will also support the PGY3 core rotation in Geriatric Psychiatry.





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**Dr. Naghmeh Mokhber**

For becoming Interim Chair of Forensic Psychiatry

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**Dr. Leslie Ritchie**

For accepting the role of Faculty Curriculum Lead for Undergraduate Medical Education

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**Dr. Lloy Wylie**

For receiving a Western Research Catalyst Grant for studying “Pandemic partnership or colonial calamity? First Nations health systems during COVID-19”



**Dr. Michelle Ngo**

For taking on the role of Interim Program Director for Child and Adolescent Psychiatry from July 1 until December 31, 2020.

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**Dr. Akshya Vasudev & Dr. Cindy Hutnik**

For receiving a 2019-20 AHSC AFP Innovation Fund Research Funding Competition grant (AMOSO)



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**Dr. Sarah Jarmain**

For taking on the position of Interim Vice Chair-Clinical (until December 30, 2020)





### **Dr. Vadim Beletsky**

For taking on the Program Director role for PGE (as of April 1, 2020).

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### **Dr. Shanmugalingam**

For taking the position of UGE Clerkship Director (as of April 1, 2020).



### **Dr. Bernard Grynspar**

For accepting the role of UGE Foundation Course Lead.

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### **Dr. Priya Subramanian**

For becoming Interim Chair of Adult Psychiatry

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### **Dr. Marnin Heisel**


For being awarded a grant to support his research

*"Testing Online Meaning-Centered Men's Groups to Promote Psychological Well-Being and Reduce Despair in the Face of the COVID-19 Pandemic"*

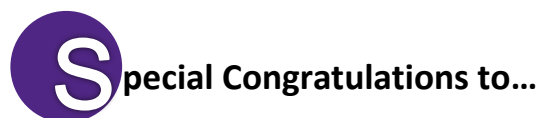
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### **Dr. Lisa Van Bussel**

For accepting the position of PGY3 Geriatric Coordinator (as of May 26, 2020)







## Michelle Quaye

for winning the  
Dr. Rajendra Harricharan  
Memorial Award.

Awarded annually to a graduate of the Doctor of Medicine(MD) program who best exemplified the qualities of integrity, commitment to serving their community, and caring about the welfare of others.

Candidates were nominated by their fellow students for this award.

The Undergraduate Medical Education Awards Committee provided final approval of the recipient as selected by the graduating class. This award was made possible by contributions from colleagues, friends, trainees and patients in memory of Dr. Rajendra Harricharan.



For more on Michelle see her spotlight in Schulich's "Celebrating the MD Class of 2020"  
[https://www.schulich.uwo.ca/class\\_of\\_2020/md/student\\_profile.html](https://www.schulich.uwo.ca/class_of_2020/md/student_profile.html)





### **Student/Trainee Researchers for your labs/projects**

It takes a dedicated team to stay up to date on all the amazing research that is ongoing in mental health. To assist in the process of finding new team members, we have been collecting a list of potential new members for faculty.

If you are looking for a new research team member, please connect with Nicole Snake ([Nicole.Snake@sjhc.london.on.ca](mailto:Nicole.Snake@sjhc.london.on.ca)) who will happily share the updated list of interested individuals and their CV.

### **Department of Psychiatry Research Committee – Welcome newest members!**

We are pleased to welcome new members to the Department Research Committee:

- **Dr. Naghmeh Mokhber**, Associate Professor, Division of Forensic Psychiatry
- **Dr. Sreelatha Varapranan**, Associate Professor, Undergraduate Education Director
- **Dr. Paul Frewen**, Associate Professor, Department of Psychiatry & Psychology
- **Dr. Kelly K. Anderson**, Assistant Professor, Department of Epidemiology & Biostatistics and Psychiatry
- **Dr. Robert Nicolson**, Associate Professor, Developmental Disabilities Program

They will be joining the following faculty who have committed to being ongoing members:

- **Dr. Matt Park**, Department of Psychiatry, Resident Elected Representative
- **Dr. Jeff Carter**, Research Coordinator, Child and Adolescent Psychiatry
- **Dr. Lloyd Wylie**, Assistant Professor, Department of Psychiatry
- **Dr. Giuseppe Guaiana**, Associate Professor, Division of General Psychiatry
- **Dr. Elizabeth Osuch**, Associate Professor, Division of General Psychiatry
- **Dr. Derek Mitchell**, Associate Professor, Departments of Psychiatry and Anatomy & Cell Biology
- **Dr. Arlene MacDougall**, Director of Research, Department of Psychiatry

We are in the process of finalizing our terms of reference and planning the upcoming Department's strategic research retreat on June 17th 2020.

### **Welcome and thank you to our Department's newest Western Research Ethics Board members:**

- **Dr. Don Richardson**, Associate Professor, Division of General Psychiatry
- **Dr. Paul Frewen** (delegated reviewer) , Associate Professor, Department of Psychiatry & Psychology
- **Dr. Derek Mitchell** (delegated reviewer), Associate Professor, Departments of Psychiatry and Anatomy & Cell Biology





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### **Dr. Sonia Wadhwa**

Dr. Wadhwa has completed her Child & Adolescent subspecialty with us in 2019 and has since been working with us in a term capacity serving the Child and Adolescent Psychiatry Division. Dr. Wadhwa has decided to move on and we would like to thank her for her clinical commitment to us at LHSC. Dr. Wadhwa will continue to participate academically.

Please join us in wishing Dr. Sonia Wadhwa the best for all her future endeavors.



### **Dr. Kumar Naidu**

Thank you for your years of dedicated service, we are all grateful.  
Congratulations on your retirement!

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### **Dr. Sami Omer**

Thank you for being a helpful colleague and good friend.  
Congratulations on your retirement!



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**Wishing you both endless days with your friends and family.**

