

60 department of Years Psychiatry



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FROM THE HEAD



Dear colleagues and friends,

It gives me a great pleasure to write this message. Yet another year has passed and the Department of Psychiatry continued to grow and develop in a positive direction. There have been so many achievements and successes in the clinical work for our patients; in our educational activities to Queen's and other institutions; and in our research output. In the following pages you can read in more detail about the work of the department throughout the year.

2017 has a special significance for the department – it celebrates 60 years of its official establishment at Queen's University. Although teaching of psychiatry for the medical school at Queen's was provided by psychiatrists from Rockwood Asylum since the 1850s the formal establishment of the department occurred in 1957. Over the 60 years of existence our department has undergone significant development, and this report provides the best evidence for that.

As most of you know, my second term ends at the end of June 2017 and the search for a new department head is well under way. It has been an honor and privilege to be part of the process of constant evolution of the department over the last 10 years. There were a lot of ups and downs, a lot of sleepless nights, there were even times when I questioned the sanity of my decision to apply for this job. In the end though, it was worth it. I would like to take this opportunity to thank all of you, current and past members of the department, all our trainees, patients and clients, our partners in the community, teaching hospitals and Queen's, for all your hard work, help and support, over the years. This is what made our department prosper.

This will be my last message from the Department Head, but I am looking forward to continuing my work within the department in my clinical, educational and research roles.

Enjoy!

ROUMEN

Overview

The Undergraduate Education Program in Psychiatry oversees the delivery of psychiatry teaching across the four years of medical school. In addition, a number of our faculty teach clinical skills, lead facilitated small group learning, and supervise critical enquiry groups, thus increasing the profile of psychiatry in the Undergraduate Medicine Program. The psychiatry curriculum is a competency-based curriculum, introduced in first year and progressing longitudinally across the four years in a relevant integrated manner.

Developments

Reviews of the clerkship and pre-clerkship courses have been very positive. We continue to develop more effective teaching and assessment practices.

The Psychiatry Interest Group continues. This is student-led but well supported by staff and residents. A "Choosing Psychiatry as a Career" lunchtime panel discussion was held in September 2016 attended by practicing psychiatrists and well attended by first and second year medical students.

A number of first and second year medical students at Queen's have indicated an interest in a half day to one-day observership in psychiatry. Many have completed observerships at a variety of clinical settings. We hope to streamline the observership process through the undergraduate program and make them widely available for interested students.

Education

A second FSGL (Facilitated Small Group Learning) case was developed for the Term 4 Psychiatry module focusing on the theme of depression. Standardized patient videos were embedded in the case to improve student engagement. This will be piloted in spring 2017. A new wellness curriculum spanning four years, focusing on resilience. An online self-directed module on psychopharmacology was developed for medical students in pre-clerkship years. This will be piloted in 2017.

Research

Presentation of Wellness Month to CCME (Poster presentation)

Administration/Leadership

Dr. Rick Millson acts in the role of Clerkship Director. Dr. Nishardi Wijeratne has taken over the position of Pre-Clerkship Director. Dr. Neeraj Bajaj stepped down from the role as Co-Director of Pre-Clerkship.

A number of faculty members continue to perform significant roles in the Undergraduate Medical Program. Dr. Cherie Jones is the Director of Clinical Skills for the Queen's Medical School, Dr. Renee Fitzpatrick is the Director of Student Affairs and Dr. Leslie Flynn is the Vice-Dean Education, Faculty of Health Sciences.

Dr. Wijeratne represented Queen's University at the COUPE meeting on September 28, 2016.



One hundred per cent of students satisfactorily completed the MEDS 246 Psychiatry course.

The number of observerships completed by Queen's medical students in psychiatry during 2016 = **58**

Number of visiting electives in psychiatry completed by medical students in clerkship during 2016 = **21**

MEDICAL EDUCATION

Mandate

The Residency Program Committee (RPC) is responsible for the planning and implementation of the postgraduate education in Canada in accordance with the requirements of the Royal College of Physicians and Surgeons of Canada (RCPSC). Reporting directly to the Academic Affairs Committee and the Chair of the Department, the RPC is also responsible for the content of the curriculum and all evaluation procedures. The committee meets monthly and is chaired by the Program Director (PD).

The responsibilities of the RPC are designated to **Portfolio Managers** (PMs). The PMs assume leadership for tasks of the RPC such as curriculum and academic-half-day planning and review and CaRMS selection process. Each PM reports to the monthly RPC meeting.

Since 2014, our program introduced the roles of **Academic Advisors**. Each faculty-psychiatrist RPC member is responsible for overlooking the training of six to seven residents, documenting their progress, assisting with their CanMeds portfolio and identifying areas of strengths and weaknesses.

Developments

The Psychiatry Residency Program welcomed six PGY1s to the residency program in July of 2016: Anthi Stefatos, Amanda Richer, Ainsley Alexander, Stephanie Emmanuel, Matthew Pierce and Liora Berger. Four residents, Archana Patel, Taras Reshetukha, Nazanin Alavi and Gbolahan Odejayi, all passed their RCPSC exams and graduated from our program in 2016.

The program is actively participating in the transition to Competency-Based Medical Education. Several members of the RPC participate in the department of Psychiatry CBME sub-committee. Dr. Eric Prost was appointed as CBME Lead and has supervised development of stage specific Entrustable Professional Activities (EPAs). Dr. Ruzica Jokic has stepped down from Postgraduate Director position after leading the program since 2009. Dr. Nadeem Mazhar was appointed as the Postgraduate Director, January 2017.

Education

Residents are involved in the development and implementation of the curriculum, which includes academic seminars, small group teaching sessions and workshops that promote interactive resident and faculty participation. Residents are encouraged to pursue their interest in teaching junior colleagues and students.

The program has provided protected time every Wednesday from 1–4:30 pm for residents to attend their academic teaching, which include interviewing skills, OSCEs, as well as core seminars.

Residents attend courses in Cognitive Behavior Therapy (Dr. M. David), and Interpersonal Psychotherapy (P. Kasurak). One of the major strengths of the psychotherapy program is the ongoing Supportive Psychotherapy Course for second-year residents organized by Dr. L. Flynn.

Research

Residents were actively involved in research activities in 2016. Residents co-authored peer reviewed publications and book chapters. Research was presented at the APA, CPA, WPA and the Department of Psychiatry Research Day.

Administration/Leadership Roles

The RPC and the program director are responsible for the following:

- **1** To establish or revise general policies and objectives of the residency training program.
- **2** To consistently monitor accreditation standards are being met. This includes ongoing assessment of the educational program, including review of resources, and the individual components of the teaching program.
- **3** Coordinating the selection of applicants for admission to the program through an established process.
- **4** To ensure a sound resident evaluation and promotion process and provide a mechanism of appeal on issues of evaluation and training.

- **5** Regular review and maintenance of the curriculum.
- **6** Promoting communication between faculty and residents on matters relating to the Residency Training Program.
- 7 To ensure that resident evaluation of faculty is conducted in a timely, confidential manner monitored by the program director.
- 8 To ensure residents are provided opportunities to attain all competencies as outlined in the RCPSC Objectives of Training in Psychiatry.
- **9** To establish mechanisms to provide career planning and counselling for residents.



Postgraduate Education Chief Residents Report

Developments

- Welcoming the PGY1s Kingston Penitentiary Tour for residents, summer potlucks and holiday potluck.
- Mentorship program for R1s.
- Orientation for PGY1s prior to their off-service rotations.
- Transition to collaborative call schedule model for junior and senior residents.
- Peter Wang (PGY₃) initiated the effort to update resident bios on the website prior to CaRMs.

Education

- LMCC studying sessions organized for PGY2 residents.
- Emily St. Denis (PGY₃) updated resident feedback survey for academic half-day.
- Organizing upcoming Trauma Workshop for residents.



MEDICAL EDUCATION



Mandate

The Committee of Continuing Medical Education is committed to promoting activities that enhance participants' medical competence and performance, as well as patient outcomes.

Goals

- Improve health and patient care through quality evidence-based educational activities.
- Advance physician competence as clinicians, educators and researchers.
- Facilitate the discovery and application of new knowledge to clinical practice employing needs assessment data and identified professional education gaps.

The CME mandate was accomplished in compliance with the educational standards approved by the Royal College of Physicians and Surgeons of Canada.

Overview

Types of Activities

- Grand rounds and other regularly scheduled activities.
- Case-based programs, including morbidity and mortality (M&M) and quality improvement (QI) activities.
- Interdisciplinary programs within the medical school and with other university units.

The activities were planned and implemented based on previously identified educational needs. They are based on adult learning principles and promote the use of active-learning techniques and participant engagement. CME participants are exposed to a range of information including basic science concepts, current research and latest diagnostic and therapeutic advances in psychiatry.

CME content is designed to address professional practice within the mental health care team which includes physicians, residents, nurses, nurse practitioners, psychologists, social workers, and others as appropriate for the scope of practice addressed in the activity.

Developments

The residents trained in our program have been given increased responsibility in planning and delivering CME activities.

Administration/Leadership Roles

Chair: Dr. A. Marin

Members: Dr. C. Woogh, Dr. E. Prost, Dr. M Hussein, Dr. T. Hassan

• Debates

Developments

The focus of our activities this year was on improving the mentorship support within the Department of Psychiatry. Monika Bhatnagar, Advanced Practice Leader, Allied Health Professional Practice from Providence Care shared her expertise and offered to guide us in our first steps.

A Faculty Mentoring Working Group was established in December 2015. Dr. Tariq Hassan, Dr. Cherie Jones, Dr. Nam Dinh Doan, Dr. Pallavi Nadkarni, Maria Hussain and Mr. Paul Kasurak have kindly agreed to take part of this group. The group met in March 2016. We are seeking a mentoring model that would best suit the department in facilitating the integration of new faculty in the departmental culture. For crafting such a model, we found it important to define what would be the purpose and the expectations related to such a mentoring program. We aimed to put a process in place and clarify the roles and responsibilities of future mentors and to seek an algorithm to pair mentors and mentees in an effective way.

Administration/Leadership

Chair: Dr. Alina Marin stepped down as of July 1, 2016 Dr. N. Khan incoming Acting Chair.

Members: Dr. Casi Cabrera, Dr. Susan Ilkov-Moor, Dr. Jessica Jones, Mr. Paul Kasurak, Dr. Sarosh Khalid-Khan.

The Department of Psychiatry made a decision that Faculty Development leadership and membership be separated from Continuing Medical Education.



research

REPORT

Mandate

- To foster a climate of research participation and collaboration within the department.
- Provide opportunities for research training and support to enable the development of research interests among faculty and residents.
- Further the promotion and development of research activities and research excellence within the department.
- Facilitate research infrastructure for individuals and for the department.
- Serve as a forum for the discussion of ideas, issues and opportunities that concern research within the faculty.

Members of the 2016 Research Committee were:

- Dr. Dianne Groll (Chair, Research Director)
- Dr. Muhammad Ayub
- Dr. Felicia Iftene
- Dr. Xudong Liu
- Dr. Jan Looman
- Ms. Lauren Mak (graduate student representative)
- Dr. Sarah Penfold (Chief Resident)
- Dr. PS Reddy
- Dr. Dallas Seitz

Overview

The Department of Psychiatry has a wide range of research and clinical studies resources. Our research units have well-developed infrastructure to support our studies and well-trained staff that have many years of both clinical and research experience.

Research Conference

Our annual Research Conference was held May 4, 2016 at the Donald Gordon Centre. There were approximately 80 people in attendance. We had two break-out sessions and a total of twelve oral presentations and eighteen poster presentations. Queen's University's own Dr. Douglas Munoz, Director of the Centre for Neuroscience Studies and President of the Canadian Association for Neuroscience gave the keynote address on the future direction of psychiatry and neuroscience research in Canada. This talk was very well received.

Mood and Anxiety Conference 2016

On November 5, 2016 the 16th Annual Mood and Anxiety Disorder Conference was held at Donald Gordon Centre in Kingston. The conference began with a welcome by Dr. Roumen Milev, followed by the first plenary session by a speaker from McMaster University, Dr. Michael Van Ameringen, who spoke about prediction of response in anxiety disorder.

During the second session, Dr. Gustavo Vazquez from Queen's University spoke about the use of antidepressants in bipolar disorder, and in the third session Dr. Rudolf Uher from Dalhousie University spoke about recent advances in major depressive disorder. Following a lunch break, there were three afternoon workshops and a poster session. The day concluded with an update on mood disorders research and treatment service and closing remarks by Dr. Ruzica Jokic, thanking everyone for their presentations and attendance.

Resident and Faculty Awards

Resident Awards

Best Presentation by a Resident Dr. Peter Wang

Resident Annual Teaching Award Dr. Sarah Penfold

Outstanding Contribution to the Residency Training Program Dr. Sarah Penfold and Dr. Megan Yang

Resident Research Award Dr. Selim Asmer

Child Psychiatry Award Dr. Niki Mofidi

Jeanette Holden Poster Award Dr. Davit Khachatryan

Faculty Awards

Faculty Excellence in Research Dr. Xudong Liu

Jim Owen Faculty Teaching Award Dr. Simon O'Brien

Exemplary Service to the Department Dr. Ruzica Jokic

Excellence in Clinical Services Dr. Neeraj Bajaj

Excellence in Undergraduate Teaching Dr. Rob Malone

Excellence in a Mentorship Role Dr. Eric Prost



2016 Department of Psychiatry Research Grants

The Department of Psychiatry sets aside \$20,000 each year for 10 Research Assistance Grants (\$2,000 per grant) to assist with any aspect of a research project. The following individuals received Research Assistance Grants:

CBME Working Group	Jokic/Penfold	\$ 2,000
CBT for IDD	Ayub/Blinkhorn	\$ 1,960
Childbirth PTSD	Prost/Shamblaw	\$ 2,000
SHARE Collaboration	Jones	\$ 1,500
ACE4	Naeem	\$ 905
Costs for Publication	Asmer /Hassan	\$ 1,097
Awareness of Driving Guidelines	Wang/Nadkarni	\$ 550
Aggression Control Measures	Nadkarni	\$ 2,000
Gabapentinoids	Khachatryan	\$ 500
SWEP Student Assistance	Groll	\$ 2,000
Patient Factors and Readmission	Xie	\$ 2,000
Healthy Brain Aging Toolkit	Seitz	\$ 1,000
MSCT into CBT	Khalid-Khan	\$ 1,000

The department also holds an annual competition for larger grants (max \$10,000) to provide funding for projects that are expected to lead to applications to outside granting agencies and/or increased collaborations with other research groups and agencies. The following individuals received funding for their studies:

Grant PI	Title of Project	A	warded
R. Milev	Stress sensitivity and reward sensitivity as correlated endophenotypes in major depression: A 6-month naturalistic follow-up.	\$	10,000
X. Liu	The impact of peer victimization on neural responses to peer exclusion and cognitive reappraisal in children.	\$	10,000
R. Fitzpatrick	The CFMS national wellness challenge: Evaluating a new initiative to promote the development of resilience in medical students.	\$	8,000
M. Ayub	Feasibility study of cognitive behavioural therapy based guided self-help intervention manual for depression and anxiety in individuals with intellectual disabilities.	\$	9,892
M. Hussain	Improving quality of care for older adults with post-stroke depression: Development of screening algorithms.	\$	10,000

Developments

We are pleased to congratulate Dr. Selim Asmer who was awarded the Canadian Academy of Geriatric Psychiatry Resident Award to attend the Canadian Academy of Geriatric Psychiatry Annual Scientific Meeting.

We welcome Susan Beck – she is replacing Krista Robertson for support on this committee and with all research related work such as the website and organizing research day.



The department continues to publish *Synergy* twice yearly. Once again this year, one of our original essays was chosen to be re-published in the important national publication, Queen's Quarterly.

We continue to solicit and publish vigorous prose that reflects the true nature of psychiatry and psychology – areas of study and enjoyment that span the human experience.



ADULT MENTAL HEALTH

Mandate

To provide specialized assessment, treatment and rehabilitation to adults with schizophrenia, mood disorders, personality disorders and dual diagnosis.

Overview

Adult Rehabilitation has services available to clients both as an inpatient at Providence Care and several outpatient programs located in Kingston, Sharbot Lake, Napanee, Belleville and Brockville.

Providence Care Hospital – April 2017

Providence Care Hospital opened in April 2017. On April 23, 2017 inpatients at Providence Care, Mental Health Services and St. Mary's of the Lake Hospital relocated to this state-of-the-art health care facility. Providence Care Hospital brings together rehabilitation, complex continuing care, specialized geriatrics, palliative care and mental health programs under one roof. The 270-bed hospital features on-site clinics for outpatients and improved teaching, learning and research facilities.

Inpatient Services

In the new Providence Care Hospital there will be 270 beds, 120 of which are dedicated to inpatient mental health. Adult Rehabilitation will continue to have 60 dedicated inpatient beds. Clients will be divided between two 30-bed units, each unit housing three 10-bed pods. All clients will be housed in single rooms. Robert van Santen is the Program Manager for the inpatient units on Adult Mental Health. We continue to support our legacy clients to successfully transition to the community. We will continue to work with clients to determine appropriate care plans and resources necessary to allow them to live in the community. From January to November 2016 our occupancy rate was 101% with 20,515 patient days.



Outpatient Services

Mood Disorders Services (MDS)

- Currently there are 844 active outpatients.
- From April to November 2016 there were 3372 outpatient visits reported.
- In November 2016, there were 34 new referrals received for psychiatry with an anticipated wait time of approximately five months.

ECT/TMS

- ECT April to November 2016 there were 383 outpatient visits reported.
- TMS April to November 2016 there were 779 outpatient visits reported.

Community Treatment Orders (CTO)

- 67 CTOs issued, renewed and/or reissued.
- 13 CTOs in the process of being issued, renewed or reissued.

Community High Intensity Treatment Team (CHITT)

- There are 100 clients actively receiving services from CHITT.
- From April to November 2016 there were **5639 outpatient visits reported**.
- In November 2016, there were five new referrals received.
- It is recognized that a step down is needed for CHITT clients.

Collaborative Mental Health Services (CMHS)

- L&A Currently **19 on the wait list** and six new referrals.
- Kingston Currently **three on the wait list** and one new referral.
- HPE Currently **22 on the wait list** and seven new referrals. Dr. Gerald Weaver retired in October 2016 and Cori Fleck has taken on a new position within Providence Care effective December 28, 2016.
- From April to November 2016 there were **992 outpatient visits reported**.

Personality Disorders Service (PDS)

- There are **123** active clients actively receiving services.
- PDS is currently running two Managing Powerful Emotions groups. There are also four community Managing Powerful Emotions groups one with the Sexual Assault Crisis Centre, one at Hotel Dieu Hospital, a group running in Perth and another through Home Base Housing. Currently there are **82 people on the wait list** with new groups start in January 2017.
- 25 clients currently participating in **People Skills** and **Mindfulness. Thirty-eight on the wait list** for January 2017.
- Seeking Safety there are currently 13 clients on the wait list with an approximate wait time of four months.
- There are five clients on the wait list for Psychiatry with an approximate wait time of one month.
- From April to November 2016 there were 2730 outpatient visits reported.

Community Integration Program – ACTT (CIP ACTT)

- There are **78 clients** actively receiving services. There are currently **nine people on the wait list** with an approximate wait time of two to three months.
- From April to November 2016 there were 8,411 outpatient visits reported.

Psychosocial Rehabilitation ACTT (PSR ACTT)

- There are **85** clients actively receiving services with **11** people on the wait list with an approximate wait time of two to three months.
- From April to November 2016 there were 8,411 outpatient visits reported.

CIP and PSR Case Management

- There are 62 clients receiving services from PSR Case Management – from April to November 2016 there were 1,392 outpatient reported visits.
- There are 77 clients receiving services from CIP
 Case Management from April to November
 2016 there were 988 outpatient visits reported.
- There are currently **10 people on the wait list** with an approximate six month wait time.

Homes for Special Care

 Homes for Special Care have 42 beds allocated, but currently there are only 25 beds available in the Kingston area – they are currently at full capacity.

Voices Opportunities & Choices Employment Club (VOCEC)

- VOCEC exists to create jobs for people living with mental illness.
- Currently there are **80 clients** participating in this program.

Community Connections

- Community Connections is a recovery-focused program which works collaboratively with individuals experiencing persistent mental illness to help them regain valued roles in a safe and supportive environment. Community Connections is branching out with new therapies, such as acupuncture for smoking cessation and yoga for depression.
- Currently 48 clients participating.

Addiction and Mental Health Services – KFLA

Coordinated Access

315 individuals served

Case Management

819 individuals served

Average wait times:

- Napanee 31 clients waiting, clients are currently waiting seven months for service.
- *Kingston* 52 clients waiting, clients are currently waiting six months for service.
- *Frontenac County Rural* two clients waiting for service.
- Concurrent Disorder two clients waiting, clients are currently waiting six months.

Counselling and Treatment

207 individuals serviced

Average wait times:

- Napanee 57 clients waiting, clients are currently waiting nine months for service.
- *Amherstview* 17 clients waiting, currently waiting eight months for service.
- Northbrook five client waiting, clients are currently waiting two months for service.

Assertive Community Treatment Team

182 individuals served

- Frontenac ACTT 94 clients/North Shore ACTT 88 clients.
- Five clients currently waiting, clients are currently waiting five months for service.

Vocational/Employment

217 individuals served

Friendship Enterprise

32 individuals served

Diversion and Court Support

283 individuals served

Social Rehab\Recreation

46 individuals served, five clients currently waiting, and clients are currently waiting three months for service.

Addictions Treatment – Substance Abuse

772 individuals served

Average wait times:

- *Napanee* One client waiting, clients are currently waiting two months for service.
- *Kingston* 156 clients waiting, eight clients waiting, clients are currently waiting eight months for service. The majority of the clients on the individual wait list are receiving group services.
- *Amherstview* five clients waiting for service, clients are currently waiting four months for service.

Addictions Treatment – Problem Gambling

90 individuals served

Psychiatrists

Dr. J. Baldock

Dr. C. Cabrera

Dr. M. Feakins

Dr. K. Furst

Dr. V. Goff

Dr. S. Hanna

Dr. F. Iftene

Dr. R. Jokic

- Dr. D. Kolar
- Dr. S. McNevin
- Dr. R. Millson
- Dr. R. Milev

Dr. T. Munshi

Dr. S. O'Brien

Dr. D. Potopsingh

Dr. N. Doan is providing temporary services for Dr. Weaver's clients in Belleville.

Dr. Saeed Asiri is currently completing his clinical fellowship with the Mood Disorders Services.

Administrative/Leadership Roles

Dr. C. Cabrera

Director, TMS/ECT

Dr. M. Feakins

- Clinical Lead for Community High Intensity Treatment Team (CHITT)
- · Lead, Department of Psychiatry website

Dr. F. Iftene

- President, Medical Staff Association, Providence Care
- Member, Board of Directors, Providence Care

Dr. R. Jokic

- Deputy Head (Academic), Department of Psychiatry, Queen's University
- Clinical Director, Mood Disorders Services, Providence Care, Mental Health Services

Dr. S. McNevin

• Director, Division of Psychiatry, Health Counselling and Disability Services, Queen's University

Dr. R. Milev

• Department Head, Department of Psychiatry

Dr. R. Millson

- Clinical Director, Schizophrenia Rehabilitation Services, Adult Mental Health, Providence Care, Mental Health Services
- Psychiatry Clerkship Coordinator

Dr. S. O'Brien

- Co-Chair, Division of Adult Psychiatry, Providence Care, Mental Health Services
- Deputy Head Adult Division (Clinical), Providence Care, Mental Health Services
- Acting Clinical Director, Adult Mental Health, Providence Care, Mental Health Services
- Director of Admissions, Inpatient Adult Mental Health, Providence Care, Mental Health Services

ADULT PSYCHIATRY

Mandate

The Division of Adult Acute Psychiatry provides acute adult psychiatric services for Kingston and the Southeastern Ontario region. The purpose of the division is to provide excellence in acute clinical psychiatric services, medical education, and academic development grounded in a collaborative care model.

Overview

The acute care services of the Adult Division of Psychiatry is perhaps the hub of mental health and addiction services for Kingston and the surrounding region, interacting and liaising closely with all other components of the mental health and addiction services. In 2016, the acute care services of the Adult Division comprised five main programs: emergency and crisis psychiatry, acute inpatient services, consultation/liaison psychiatry, Intensive Transitional Treatment Program, and acute outpatient services.

Emergency and Crisis Psychiatry

Five staff psychiatrists each cover KGH ED and HDH urgent care centre one day a week. After hours and weekend coverage is on a rota for psychiatrists and medical learners. Emergency psychiatrists also work in other parts of the acute mental health and addiction services including community crisis and transitional case management teams, inpatient ward, outpatient program. This helps facilitate transitions for patients and allows for flow and partnership.

Two mental health social workers and two addiction and mental health crisis workers work closely with emergency psychiatry to create an interprofessional team with community partnership. An active teaching rotation in emergency psychiatry is available to junior and senior psychiatry residents, emergency medicine and family medicine residents and clinical clerks. Emergency psychiatry teaching rounds take place on a monthly basis. The RAPAS (Rapid Access to Psychiatric Assessment Services) is run by the SW and crisis worker team to facilitate rapid access to hospital and community based mental health and psychiatric services. RAPAS links very closely with ITTP and the Transitional Case Management Team at AMHS-KFLA.

Case conferences are organized and care plans developed for identified frequent users of hospital inpatient and emergency psychiatric services. A 24-hour call back program for patients seen in psychiatric emergency at KGH then discharged is being implemented.

In 2016, an OTN program to Ininew, WAHA and the Weeneebayko General Hospital was developed in which emergency psychiatric assessments are done 4 days per week for patients in WGH on a Form 1 or in potential need of transfer to a schedule 1 facility for admission to a psychiatry ward.

Inpatient Psychiatry

Burr 4 inpatient ward at KGH comprises a seven-bed intense observation area, two short stay beds, and a 28-bed ward with two over capacity beds for a total of 37 beds, or at over capacity, 39 beds. The ward is staffed by a multi-disciplinary team including six psychiatrists, with access to consultation by geriatric psychiatry and developmental disabilities. Many learners complete rotations on B4. There has been more implementation of groups on the ward, and active development of the PGY 2 core rotation to include teaching rounds and group experience. Senior residents have completed rotations on the ward as junior colleagues. There is active liaison with community mental health services, including participation of AMHS-KFLA workers in multidisciplinary rounds. Many patients are now discharged through the ITTP and onto community services.

We have a family physician on the ward that is invaluable in dealing with medical co-morbidities of Burr 4 patients.

Outpatient Psychiatry

Acute outpatient services is a very active, busy program that receives about 180 intake referrals per month. The outpatient services comprises three programs: general psychiatry, adult eating disorders program, and Head's Up, Early Intervention in Psychosis Program. The latter two are externally funded. General Psychiatry program includes a number of sub-specialty clinics: addiction psychiatry, mental health and the law, anxiety disorders, ADHD/bipolar disorder research clinic, reproductive psychiatry, shared care. Members of the multidisciplinary team run various therapy groups including a number of CBT-based and psychoeducation groups and relaxation training as well as DBT based groups and concurrent disorders groups. A new consultation only clinic has helped flow and supported a shared care approach.

Members of the division provide shared care and local outreach to such agencies as: Street health Centre, AMHS-KFLA, Queen's Family Health Team, Maple Family Health Team, Sharbot Lake, Moose Factory, and the James Bay region. Again, many learners at all levels of education complete rotations in acute outpatient services. There has been further development of the PGY 2 core rotation experience to consistently include participation in group therapies.



Consultation Liaison Psychiatry

Consultation-Liaison Psychiatry is responsible for delivering psychiatric services to adult inpatients of the Kingston General Hospital and St. Mary's of the Lake Hospital who manifest psychiatric symptoms as a result of, or in addition to, their medical issues. Consultation-Liaison Psychiatry also provides outpatient psychiatric services at HDH to those patients that have both medical and psychiatric conditions. In addition to providing clinical consultations within KGH the team promotes active communication between the Department of Psychiatry and various specialty medical services at the Kingston General Hospital, Hotel Dieu Hospital and St. Mary's of the Lake Hospitals. The CL team facilitates monthly teaching rounds and monthly geriatric psychiatry teaching rounds.

The CL psychiatry rotation is a mandatory rotation for the senior psychiatry residents. The CL service also provides teaching rotations to family medicine residents and clerks.

The adult division and the geriatric psychiatry division partnered to create a geriatric psychiatry position at KGH working very closely with the consultation/liaison psychiatrists but also providing support and consultation to other parts of the Mental Health Program at KGH especially inpatient psychiatry.

Intensive Transitional Treatment Program (ITTP)

The ITTP is a new program in our division that started operation in September 2014. It is fully externally funded by the SEO LHIN. The ITTP is an intensive short-term program that helps patients transition from the inpatient ward back into the community, seamlessly bridging patients to outpatient and community mental health services. The ITTP also accepts patients from the emergency department, outpatients, community, and family physicians. The ITTP service can provide an alternative to hospitalization and effectively prevents many hospital admissions and readmissions and facilitates earlier discharge for patients. The ITTP is a daily program run by a multidisciplinary team. The program is group oriented with CBT, psychoeducation, and DBT based groups that provide support and development of skills. The program is very flexible and includes psychiatric care and psychological assessment as needed. There is an elective rotation for senior psychiatry residents available in ITTP. Group experience for PGY 2 residents can be offered in ITTP.

Developments in 2016

- A warm welcome to Dr. Vazquez, Dr. Soares, Dr. Patel, Dr. Reshetukha and Dr. Duffy who joined the division this year.
- Congratulations to Dr. Prost appointed CBME director, Dr. Mazhar appointed PGME director, Dr. Nisha Wijeratne appointed UGME director, Dr. Claudio Soares appointed Fellowship Director and to Dr. Mo Habib appointed inpatient director.
- A consultation only clinic was developed in outpatients that has significantly helped with patient flow and wait times and helped support a shared care approach to patient care.
- A designated male track was added to the Eating Disorders Program this year with resultant increase in male patients assessed and retained in the program.
- A new program in emergency psychiatry has been developed and implemented. In response to a request by the physicians in Ininew, Weeneebayko General Hospital and the James Bay region, an emergency psychiatry OTN assessment service has started to assess patients who may be in need of transfer to a schedule 1 facility.
- Members of the Division are actively working on developing proposals for two new specialty outpatient programs including Women's Health and First Episode Mood Disorder Programs.
- The division is excited to see the development of three research hubs in ITTP, women's health and transitional age youth. The division has

hired a research assistant to help develop the hubs and move forward with proposals for funding and publications.

 The SEO Mental Health and Addiction Redesign continues to move forward with a focus on Part C and the contract between the hospitals and AMHS-KFLA. Divisional members also provide invaluable input to the process.

Education

All members of the Adult Division of Psychiatry (acute) are actively involved in teaching and education at an undergraduate, postgraduate, and professional development level. Members of the division actively supervise learners, provide casebased teaching rounds, provide resident seminars, provide psychotherapy supervision, act as examiners for mock exams, etc. Divisional members are also involved in teaching medical students in seminars, problem-based learning, clinical skills and mentoring. Off service residents, particularly Family Medicine and Emergency Medicine residents also complete rotations in the adult division.

Clinical clerk medical students rotate regularly through many of the rotations of the adult division. There are usually two clerks placed on emergency psychiatry, one on CL Psychiatry, two on inpatients and one to two in outpatients, usually EIP. In total, we are usually supervising six to seven clinical clerks in rotations at any given time. In addition, we participate in "psychiatry boot camp" for clinical clerks and observerships.

Divisional members are actively involved in CPD teaching as well. Members provide CPD for the department, university, community, and region.

The Division of Adult Psychiatry (acute) is responsible for teaching and supervising a number of core resident rotations including the PGY 2 core rotations in inpatient and outpatient psychiatry, Consultation Liaison Psychiatry, Emergency Psychiatry, Addictions Psychiatry and Shared Care. In addition, a number of elective rotations are available within the division including Early Intervention in Psychosis, ITTP, and Eating Disorders.

Research

Members of the division are involved in a number of research projects in a variety of areas of interest including medical education. There are collaborations with other divisions within the department as well as with other departments and with the Centre for Neuroscience and other universities. Dr. Pallavi Nadkarni is the Divisional Director of Research. She is working to coordinate research efforts within the division.

A major initiative for the division has been to develop research hubs or groups within the division supported by a research assistant. The groups will work towards proposal development, attaining funding and publishing. In addition, this will help mentor junior faculty and provide an active research team for new divisional members to join. The hubs are in the areas of ITTP, women's health and transitional age youth.

Administration/Leadership

For the Division of Adult Acute Psychiatry, Dr. Finch is the Chair of the Division and Dr. Habib is the Inpatient Director. Dr. Prost is Outpatient Director, Dr. Bajaj is ITTP Director, and Dr. Nadkarni is Research Director.

Additionally, members of the division are involved in administration and leadership positions at all levels including departmental, School of Medicine, hospital, community, provincial, national and international.

CHILD AND ADOLESCENT

Clinical

- Increasing access and reducing wait times has been the divisional priority
- Centralized triage has been established with Pathways for Children and Youth in Kingston. All Family Health Teams (except one) are directing referrals for mood and anxiety and neurodevelopmental disorders (except ASD and DD) through centralized pathway.
- Plans are underway to expand the centralized triage to Belleville and to have clear pathways of referrals for ASD and DD.
- The Centralized Triage pathway has been presented at numerous regional and national conferences and has full support and funding from SELHIN.
- SELHIN has funded two additional positions (0.5 FTE) for Child and Adolescent Mental Health Urgent Consult Clinic (CAMHUCC) for under 12 year olds in crisis.
- The Dialectal Behavior Therapy Program has been established in collaboration with Providence Care Personality Disorders Services and fully functional with 3-step model. DBT consultation team formed with staff from Division, and local community mental health agencies.
- Work is under way to integrate services for ASD within the Division and the hospital (pediatrics) and with community agencies.

• A Divisional Leadership Council has been developed consisting of multidisciplinary team leads, program managers, and divisional psychiatrists. They meet bimonthly.

Recruitment

- Dr. Johanne Roberge joined the Division in July as Inpatient Director and PGE Director for subspecialty training.
- We interviewed and recruited Drs. Sharma and Nukalapati for 2 of our 3 positions their applications are being processed.
- We are actively recruiting for our 7th position.

Child Psychiatry Subspecialty

- There is one position available for child psychiatry subspecialty-first resident (Dr. Shelly Dhaliwal started in December).
- We accept 1 visa trainee each year and currently have 2. Dr. Haifa Alyahyah will be doing the SEAP (Subspecialty examination affiliate program).
- We have our EPAs for CBME and are now to vet them locally and then nationally through assistance of Rylan Egan's team.

Education

- The Divisional Funds are being utilized for education of staff.
- Staff have attended the Interpersonal Therapy Workshop offered by Paul Kasurak.
- An Aboriginal Cultural Competency workshop was held in December for all divisional staff and both general and subspecialty residents.
- A Divisional Journal Club has been ongoing in collaboration with Department of Psychology and psychiatry core, subspecialty residents and fellows. Seminal articles in child and adolescent psychiatry are discussed every 3 weeks.
- Olivia Calancie is doing her neuroscience master's studying adolescents enrolled in the DBT groups. She is being supervised by Dr. Khalid-Khan, Dr. Doug Munoz and Dr. Linda Booij.

• Mary Coughlin is doing her Master's in Nursing. Her thesis topic is "Exploratory descriptive study of metabolic monitoring of SGAs for children and adolescents in outpatient psychiatry". Her supervisors are Katie Goldie , Deborah Tregunno (School of Nursing) and Dr. Khalid-Khan.

Research

 Clinical research is underway and several projects both funded and unfunded are ongoing with collaborations with Department of Psychology, Centre of Neuroscience Studies and School of Rehabilitation.



DEVELOPMENTAL DISABILITIES

Mandate

The Division of Developmental Disabilities is an inter-professional academic program concerned with clinical service, teaching and research in the field of developmental disabilities and autism spectrum disorders across the southeastern region of Ontario.

Overview

Division members provide comprehensive clinical services across Southeastern Ontario.

Interprofessional and Uniprofessional Outpatient Clinics (Child and Adult)

- Developmental Disabilities Consultation Outreach Team Clinics across the region
- Transitional Aged Youth Dual Diagnosis Clinic
 (SE region)
- Chronic Care Psychiatry Clinic
- Autism Assessment Clinics (SE region)
- Sensory Assessment Clinics (SE region)
- Forensic and ASD Psychology Clinic (Providence Care Dual Diagnosis Consultation Clinic, regional)
- Autism Clinic (Kerry's Place Autism Services, Belleville)
- Adult Psychiatry Dual Diagnosis Clinic (Ongwanada, Kingston)
- Dual Diagnosis Treatment Home Psychiatry Clinic (Ongwanada, Kingston)
- Dual Diagnosis Clinic for children and adults (Developmental Services Leeds and Grenville, Brockville)
- Children's Treatment Home (Rainbow Valley, Sharbot Lake)
- Forensic Dual Diagnosis Clinic (Pathways to Independence, Belleville)

- Challenging Behaviour Clinic
 (Community Living, Kingston)
- CAS Children's DD Clinic (CAS Highland Shores, Belleville)
- Dual Diagnosis Clinic (Pathways to Independence, Belleville)
- Acquired Brain Injury Clinic (Pathways to Independence, Belleville)
- Family Therapy Clinic (DDCP, Kingston)
- Psychiatry Clinic Peterborough Regional Health Centre, Peterborough

Program Achievements

• Recruited Dr. Cherie Jones-Hiscock for psychiatry services.

Teaching Activities

• In addition to departmental appointments, division members have responsibilities in their discipline-specific departments or schools including undergraduate and postgraduate teaching.

Queen's University Placements

Psychiatry (3), psychology (5), occupational therapy (0)



Mandate

This division was formed in July of 2016 as an identified need following the SELHIN redesign. The aim is to help establish community psychiatric services in Kingston and surrounding areas.

Clinical

• Develop successful transition of patient flow between all hospitals. Continue to support and develop outreach services.

Research

- There is ongoing research done by the psychiatrists in the division.
- Research projects on cognitive remediation by Dr. Chris Bowie, who is a member of the departments of psychology and psychiatry.
- Research and Development unit has now been initiated in the organization with the help of the community psychiatrists.

Teaching

• Postgraduate, graduate and undergraduate students do core and elective placements and rotations in various disciplines in the organization

Overview

The AMHS-KFLA provides several community services in its division. It provides services to both acute and chronic clients in the community, with some overlap in the provision of services between the teams.

Chronic Care Services

- 1 Two Assertive Community Treatment Teams
- 2 (NSACTT and FACT) 90 patients each
- 3 Case Management has 240 patients
- 4 Napanee Community Mental Health Team and Community High Intensity Treatment Team (CHITT) provide care to some patients who require ACT services in Napanee.
- 5 Rural Outreach Team
- 6 Vocational Team
- 7 Options for Change (Addictions) has 500 patients

Acute Services

- 1 Crisis Team
- 2 Transitional Case Management Team
- 3 Court Support has 300 clients
- 4 Housing First

The psychiatric services need to be increased, presently we have:

- 1.2 ACT psychiatrists Drs. Munshi and Baldock
- 0.5 crisis psychiatrist Dr. Naeem
- 0.3 TCM psychiatrist Dr. Doan
- 0.1 CM psychiatrist Dr. Hillen
- 0.2 OFC psychiatrist Dr. Reshetukha
- 0.2 Napanee CMHT psychiatrist Dr. Prabhu
- Total 2.5 psychiatrists in the division

The vocational, court support, outreach and case management teams do not have assigned specific psychiatry support.

The CM, TCM and crisis psychiatrists provide support to these teams.

Developments

Annual Crisis Conference 2016 held in Kingston. Drs. Naeem and Munshi presented in the conference.

AMHS KFLA Annual Conference 2016. (Dr. Munshi presented)

Research and Development Unit established at the organization in 2016.

Kingston Course, Dr. Doan was one on the main organisers. Dr. Munshi participated as an examiner on the weekend.

Education

Psychiatrists present in turns on two monthly basis. Residents rotate in their fourth year for a block in ACT as both core and electives. Junior and senior residents do electives in crisis with Dr. Naeem. Dr. Naeem does supervision of residents for CBT Psychosis. Off service residents rotate with Dr. Nam Doan for a block. Clinical Clerks do their core three week blocks with Dr. Munshi in ACT service on a regular basis.



Dr Doan Clinical Skills Role: Tutor

Attendees: Queen's medical students

Tuesday, March 8, 2016 (2:30-4:30 pm), "Psychiatry"

Tuesday, November 8, 2016 (1:30–4:30 pm), "Intellectual Disabilities"

STACER Exam

Role: Examiner

Attendees: Psychiatry residents (PGY-5) Monday, June 13, 2016 (9–11 am; 1:30–3:30 pm)

Queen's Psych Interest Group (QPIG) lunchtime Q&A

Role: Speaker

Attendees: Queen's medical students Thursday, September 20, 2016 (12:30–1:30 pm) (talk for QPIG planned for 2017, on Borderline Personality Disorder)

Administration/Leadership Roles

Chair Quality Committee: Dr. Naeem

Lead Lean Thinking Initiative: Dr. Naeem

Member Executive and Finance Committee: Dr. Munshi

Historical Background

Forensic Mental Health Services includes the assessment, management and treatment of mentally disordered persons in conflict with the law. These services are mandated by the Criminal Code of Canada (CCC) and identify two categories of service to be provided by the Province of Ontario

- Specialized care for people with mental illness who are in conflict with the law.
- It is a **unique field of healthcare**; the relationship it has with the criminal justice system, some specific forms of assessment (risk), working environment (security), and provision of treatment for those who present with a wide range of challenges.

Vision Statement

The Ontario forensic system will provide comprehensive integrated mental health services to forensic clients and specialized psychiatric services for adults in the criminal justice system.

Mission Statement

The Ontario Forensic Mental Health System will provide inpatient and outpatient services as part of a comprehensive integrated forensic mental health system that serves forensic clients and the criminal justice system.

Two Broad Categories

- Services required by the judicial process to conduct the trial which include assessment and treatment services provided to people remanded by the courts.
- **2** A set of tertiary treatment and rehabilitation services required by the Ontario Review Board in cases where the authority over the person passes to the Ontario Review Board (ORB).

Designated Forensic Services will provide

- High quality mental health treatment and services in accordance with best practice and incorporating the recovery model.
- Mental health services to the criminal justice system.
- Forensic environment that respects the liberty interests of the forensic client.
- Coordinate its operations as a provincial system.

Assessment Services

Brief psychiatric assessments of the accused who may be mentally disordered in order to provide opinion evidence or consultation regarding the issues of:

- Fitness to stand trial and need for hospitalization for the court in response to a Form 48 under Section 672.11 of the Criminal Code of Canada (CCC).
- Assessment for criminal responsibility.

Overview

Regional Forensic Mental Health Services

Providence Care, Regional Forensic Mental Health Services Program provides specialized assessment, treatment, rehabilitation, and follow-up to people with severe psychiatric illness who come into conflict with the law.

Vision Statement

Providence Care Forensic Mental Health Services will provide innovative and quality client services based on available best practices and the Recovery Model of Care. Creativity will be used in order to maximize available resources for research to enhance services available to clients in an efficient manner. By networking with our community partners, we will manage risk, reduce recidivism and support our clients with their complex needs on their journey to recovery.

Core Service Directions

The success of rehabilitation depends on several factors that are subsumed under two fundamental processes: developing skills that will help the individual avoid difficulties, and providing opportunities to engage in meaningful and constructive activities as an alternative. All parties must have clear role expectations and input into these processes.

Working with clients and their families to promote full community reintegration within the framework of the Criminal Code of Canada, the Forensic Mental Health Services Program:

- Provides a recovery-oriented environment in which clients may develop vocational and lifestyle options that support self-determined goals, positive relationships with others, and full participation in the social life of the community.
- Provides an environment in which best practices are followed to facilitate the acquisition of the skills necessary to support independent community living.

• Provides an environment of respect in which clients and all staff are empowered to participate in these goals.

Successful reintegration depends on engaging the client with coordinated support services in the community that may span several agencies.

Working with our partners in the health, social service and criminal justice systems, the Forensic Services Program:

- Provides educational opportunities to reduce stigma and both heighten the level of awareness and the skill level, of those responding to clients with legal problems arising in the context of major mental illness.
- Provides consultation in areas of specialized forensic expertise.
- Provides models of shared care service provision for this clientele.
- Advocates for system efficiencies and integration and for continuity of care.

Promoting excellence in the provision of services to forensic clients requires ongoing program evaluation, continuous quality improvement, research and education.

Working within the environment of a teaching hospital, the Forensic Mental Health Service Program:

- Provides training at the community college and university undergraduate and graduate level, across the full spectrum of disciplines involved in our work.
- Fosters information exchange and collaboration with academic programs less directly linked to our work.
- Engages in collaborative and investigator-initiated research.
- Ensures best practices through ongoing program evaluation.

Forensic Mental Health Services Program, Providence Care-Mental Health Services, Program Description

- 30-bed inpatient unit.
- Ambulatory care program that provides after care and clinical case management for NCR clients and other clients such as past NCR clients or at risk clients.
- The program is part of the Division of Forensic Psychiatry, Queen's University.

Program Components

Forensic Rehabilitation

Provides ongoing rehabilitation and treatment for clients who have achieved a level of stability in their mental illness.

- Increase clients' social, functional, and coping skills with the goal of reintegrating the client into the community.
- On ward programs that empower the patients' social skills and gives them the necessary tools to succeed in the community.

Forensic Assessment

Five assessment beds to determine:

- Fitness to stand trial completed on site (and by video conference for the greater catchment area in the South East region).
- Determine criminal responsibility.
- If not criminally responsible on account of mental disorder (NCR) monitor actuarial risk levels to determine probability of reoffending and provide treatment and stabilization for individuals in an acute phase of illness and individuals with extreme behavioural disturbances.

Outpatient Services

- Specialized outpatient nurses provide services to forensic clients who have community access and to those who live in the community as registered outpatients.
- Establish and maintain shared care agreements with community service providers for forensic clients living in the community.
- All clients are under the jurisdiction of the Ontario Review Board.
- At risk client providing care to those at risk for re-hospitalization or incarceration who otherwise wouldn't have psychiatric or specialized forensic follow up.

Transitional Case Management (component of the Outpatient Team)

- two Transitional case managers
- one with Mental Health Services
- one with Addiction and Mental Health Services Kingston Frontenac Lennox & Addington (AMHS-KFLA)

At Risk Clients (component of the Outpatient Team)

Forensic Mental Health programs may be of assistance with the management of high-risk behaviours by offering consultation to programs/physicians attending to these clients

Forensic Mental Health Services in-patient services may be provided to civilly committed individuals with high-risk behaviours

Developments

- Forensic Retreat Follow Up (ongoing)
- At Risk Program, increase in intakes
- Forensic Program Committee
- Dual Diagnosis Program
- Emergency Restraint Task Force
- Long term segregation patient no longer in segregation.
- Development of Grading Risk of Inpatient Threat (GRIT)
- Transitional Rehabilitation Housing Program (TRHP)
- Providence Care/Security/OPSEU meetings
- Métis Nation Clinics
- Dr. Rebecca Douglas returns from leave
- Mental Health Court Working Group
- Accreditation
- · New hospital build and planning ongoing
- Provincial implementation of Safewards
- WRAP-Wellness Recovery Action Plan

Present Issues

- Continued growth of the forensic population of 5% per year and potential implications.
- Continued pressure from the courts for assessment beds and use of "forthwith" orders.
- Process for scheduling ORB hearings places more responsibility on the hospital to comply with section 672.5 (5) Criminal Code of Canada, Notice of hearing.
- Grading Risk of Inpatient Threat (GRIT) Development and training to be expanded to include Adult Mental Health.
- Waiting to see the impacts of bill C-54 on our program.

Education

- CARMS
- ASIST training
- NCVI
- Grading Risk of Inpatient Threat (GRIT)
- CBT Training
- Safewards
- ePR
- Dragon Medical
- EMHware

The major areas of education offered in the past year have been the SBAR communication tool, Metabolic Syndrome and Diabetes, Best Practice for IM injections, Tb and Mantoux training, Med Reconciliation, Dual Diagnosis videoconferences and training, Least Restraint training, reviews of Suicide Assessment Tool, Mental Status examination and tool to prepare for GRIT education, Community Treatment Orders, and the Enhancing Our Relationships course. Training was done with new equipment: the Bladder Scanner, the suction machine, and the BP tower, Pinel Restraints.



Average Telepsychiatry assessments per year: **123** (2016)

Clinical Services

Community and Outpatient Services

The Seniors Mental Health program continues to have growth in our referral volumes to our community outreach and outpatient services. Our program has three outreach teams (located in the Kingston, Napanee and Belleville areas) and outpatient services at Providence Care Mental Health Services. This past year our outpatient services received over 1,600 new consultation requests for clients in residing in a variety of settings including community outreach (home visits), outpatient visits at Providence Care, long-term care, retirement homes and acute care psychiatry and general medicine. We are continuing to look at opportunities to improve the efficiency of our services by increasingly using shared care and collaborative models of care to meet the increasing requests for our services. This past year our program has been fortunate to have Dr. Alisha Abbott, a neuropsychologist completing her year of supervised practice in our program under the supervision of Dr. Lindy Kilik. Our Division is currently in the process of recruiting another geriatric psychiatrist to support our community and inpatient services. Our Division is also looking forward to examining opportunities for additional outpatient services and activities in Providence Care Hospital when services transition there in April, 2017. Our Division has also been working in collaboration with Geriatric Medicine and Neurology to develop a collaborative Cognitive Disorders program at Providence Care Hospital, which is tentatively scheduled to start in 2017.

Inpatient Services

Our inpatient services continue to include the 30-bed inpatient unit for individuals with dementia and significant behavioural changes at Providence Care Mental Health Services. In 2017 there will be changes to our psychiatrist complement for inpatient services as Dr. Teitelbaum will be changing her practice to outpatient psychiatry after providing coverage for the inpatient unit for several years. Dr. Nashed will continue to work on the inpatient service and Dr. Ilkov-Moor will resume providing coverage for the inpatient service beginning in 2017. Dr. Seitz continues to provide consultation support to the Behavioural Support Transition Unit which provides inpatient services for individuals with dementia and behavioural changes at Quinte Health Care in Belleville. With the planned move to Providence Care Hospital, we are exploring opportunities to potentially expand our inpatient services to support individuals with mood disorders, anxiety disorder and primary psychotic disorders with discussions at an early phase at this time.

Education

Our program continues to be active in undergraduate, postgraduate, and fellowship training. We currently have one international fellow in our program (Dr. Sana Kazim) and a PGY6 resident in Geriatric Psychiatry (Dr. Milena Rogan Ducic). We will also be welcoming a PGY₅/6 trainee into our residency program in January 2018 and are interviewing additional international fellowship candidates. We are actively working towards transitioning to CBME-based training for our residency program which is scheduled to start in July, 2017. Our residency had its first internal residency program review completed this year by members from Queen's University faculty of medicine and Dr. Karen Saperson from McMaster University with a positive overall evaluation of our residency program and for our Program Director Dr. Maria Hussain. Our faculty continue to be involved in providing educational support to our undergraduate medical program, teaching of psychiatry residents, education for nursing students, and participation in the undergraduate and graduate supervision of students in the Public Health Sciences epidemiology programs. Dr. Julia Kirkham was working this past year as a research fellow in our division and she successfully convocated from the MSc in Health Care Quality program at Queen's University this past year.

Research

Our division continues to be active in several areas. We continue to participate as a site for the Ontario Neurodegenerative Disease Research Initiative (ONDRI) funded through the Ontario Brain Institute. Dr. Seitz and Dr. Kirkham received funding from the CIHR funded Canadian Consortium in Neurodegeneration in Aging to complete a randomized controlled trial of an educational intervention to reduce inappropriate use of antipsychotics in long-term care which has completed recruitment. Analysis of the results from this study will be completed in early 2017. Dr. Seitz received a research grant from the CIHR to examine gender differences in the initiation and discontinuation of psychotropic medications in long-term care. Dr. Hussain is initiating a research project examining the prevalence and service needs of older adults attending regional stroke prevention clinics which has been funded by the Department of Psychiatry. Divisional members have also led or collaborated on several peer-reviewed manuscripts and grant proposals over the past year.

Administration and Leadership

Our division continues to contribute to leadership and administration activities locally and nationally. Dr. Andrew continues to support Queen's University as the Director of Resident Affairs. Our divisional members contribute to the Departmental Residency Committee, Fellowship Committee, Research Committees, Internal Appointments Committee, Finance Committees and CBME Committee. This past year Dr. Seitz became president of the Canadian Academy of Geriatric Psychiatry at the CAGP annual meeting in October. Dr. Seitz also accepted a role as the Provincial Medical Lead for Dementia Capacity Planning, which is a collaborative initiative sponsored by the Ministry of Health and Long-Term Care, Ontario Brain Institute, the Institute for Clinical Evaluative Sciences, and Cancer Care Ontario.



Mandate

To provide a psychiatry shared care service in offices co-located with family physicians.

Overview

Psychiatrists visit a number of family physician offices to provide consultation and support for psychiatric care of patients. Follow up is provided by the family physician with the opportunity for consultation for further recommendations. Colocation and the use of a common electronic medical record facilitates timely communication with family physicians and other members of the multidisciplinary team and opportunity for questions about issues arising in follow up.

Developments

We are fortunate to have recruited a number of new faculty to Shared Care in the last year. These include Dr. Debra Hamer, Dr. Archana Patel and Dr. Anne Duffy.

We are very excited to have expanded our service to three new sites in the last year. These include Queen's Health service, Kingston Family Health Team and Loyalist Family Health team.

Education

Shared care service provides a great educational opportunity for residents and medical students and we supervise fourth year residents in their two month Shared Care rotation. We provide rotations on a regular basis for family medicine residents and clinical clerks.

Administration/Leadership Roles

Dr. Renee Fitzpatrick, Director, Shared Care Services, Director of Student Affairs

Co-chair Education Committee CACAP

Member of Examination Board RCPSC

Member of MD Program Executive Committee



administration

Dr. Roumen Milev Department Head

Dr. Ruzica Jokic Deputy Head, Academic, Adult Psychiatry

Dr. Susan Finch Deputy Head, Clinical, Adult Psychiatry

Dr. Simon O'Brien Deputy Head, Providence Care, Mental Health Services

Dr. Sarosh Khalid-Khan Deputy Head, Clinical, Child and Youth Psychiatry

Ms. Marianne McGuire Executive Assistant/Departmental Administrator

Ms. Jody Burns Financial Administrator

Ms. Krista Robertson Administrative Assistant

Ms. Allie Singers Secretary, MHS Department of Psychiatry

Ms. Gisele Berube Secretary, MHS Department of Psychiatry

Research

Dr. Dianne Groll Director, Research

Dr. Pallavi Nadkarni Director, Adult Research

Dr. Dallas Seitz Director, Geriatric Research

Ms. Susan Beck Administrative Secretary

Education

Dr. Ruzica Jokic Director of Postgraduate Education (Psychiatry 2009-2016)

Dr. Nadeem Mazhar Director of Postgraduate Education (Psychiatry 2017)

Dr. Nishardi Wijeratne Pre-Clerkship Director

Dr. Richard Millson Clerkship Director

Dr. Alina Marin Director, CME and Faculty Development

Dr. Nasar Khan Acting Director, Faculty Development (2016)

Dr. Eric Prost CBME Lead

Dr. Johanne Roberge Child and Youth Subspecialty Program Director

Dr. Srini Reddy Child and Youth Subspecialty CBME Lead

Dr. Maria Hussain Geriatric Psychiatry Subspecialty Program Director

Dr. Melissa Andrew Geriatric Psychiatry CBME Lead

Ms. Sharon Thompson Educational Program Assistant

Ms. Courtney King Education and Quality Program Assistant

Chief Residents

Dr. Sarah Penfold and Dr. Megan Yang (July 1, 2015 – June 30, 2016)

Dr. Jonathan Fairbairn and **Dr. Niki Mofidi** (July 1, 2016 – Present)

Divisional Chairs and Support Staff

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Cv. Slpsr O(Avlhr (PC-MHS)

Ms. Carol Burtch

Dr. Susan Finch (HDH)

Ms. Mary Turner

Developmental Disabilities

Dr. Muhammad Ayub

Ms. Maureen Perrin

Forensic Psychiatry

Dr. Duncan Scott (Acting Clinical Director)

Dr. Tariq Hassan Clinical Director (2017)

Ms. Chantal Thompson

Child and Adolescent Psychiatry

Dr. Sarosh Khalid-Khan

Ms. Mary Turner

Geriatric Psychiatry

Dr. Dallas Seitz

Ms. Janine Herrington

Community Psychiatry

Dr. Tariq Munshi

Shared Care Dr. Renee Fitzpatrick

Reappointments (effective July 1, 2017)

Dr. Neeraj Bajaj	3 years
Dr. Michele Boyd	5 years
Dr. Dusan Kolar	5 years
Dr. Pallavi Nadkarni	5 years
Dr. Srini Reddy	3 years



GFT Full-Time	36
Adjunct I	132
Adjunct II	3
Adjunct III	4
QUFA	3
Cross Appointments	9
Emeritus	5
Education	
Residents	29
Fellows	6
CME Events	25
Charial Dracontations	•
Special Presentations	8

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Soares CN – Tailoring Strategies for the Management of Depression in Midlife Years (12-2016) (e-pub), North American Menopause Society



Ongoing

Alavi N, Prost E, Reshetukha T – Do Clinicians use the common suicidal attempt predictors, in managing patients with suicidal ideation? (12-2013/12-2018) American Foundation for Suicide Prevention \$100

Al-Blowi M, Wijeratne N, Nadkarni P, Hussain M, Wijeratne T – Effect of Selective Serotonin reuptake Inhibitors On Bone Health: A systemic review and meta-analysis (4-2016/4-2017) Faculty of Health Sciences Queen's University – Women's Giving Circle Grant \$10,000

Anagnostou E, Liu X, Ayub M, Fitzpatrick R, Hiscock-Jones C, Jones J, Kelley B, Sandup A, Smith G – Province of Ontario Neurodevelopmental Disorders Network (9-2015/9-2018) Ontario Brain Institute \$270,000

Ayub M, McQueen M, Jones J, Naeem F – Feasibility study of cognitive behavior therapy (CBT) based guided self-help intervention manual for Depression and Anxiety in individuals with intellectual disabilities (ID) (4-2016/4-2018) Queen's Department of Psychiatry \$9,892

Bajaj N, Finch S, Groll D, Darling M, Tran T – Study of Outcomes of the Short Intensive Mental Health Day Treatment Program (6-2015/N/A) Queen's University \$400

Black S, Freedman M, Seitz D – Ontario Neurodegenerative Disease Research Initiative (1-2016 / N/A) Ontario Brain Institute \$66,000

Bowie C, Jokic R – Remote Cognitive Remediation for Acute Depression (1-2015/N/A) CIHR Grant \$0

Cabrera-Abreu C – The Role of Vitamin D in Patients with Treatment Refractory Depression (9-2015/N/A) Research Initiated Grant \$30000

Cramm H, Khalid-Khan S, Xie Y, Marchand P, Reddy P, Groll D – Targeting the Mental Health of Canadian Children Growing up in Military Families (12-2014/12-2018) Health Research Foundation Interdisciplinary Health Research Team Grant \$150,000

Duffy A, Wong A, Grof P – Identifying Rare Variants for Bipolar Disorder (7-2015/ 12-2016) Alberta Innovates Health Solutions \$50,000

Duffy A, Geddes J, Saunders K, Grof P, Horrocks J – Refined Prospective Clinical Phenotyping Using True Colours Remote Capture Methods in Youth at Familial Risk of Mood Disorders (5-2015 / 5-2017) Hotchkiss Brain Institute \$200,000

Duffy A, Horrocks J, Grof P, Wong A – The Early Course of Bipolar Disorder: From Genetic Risk to Illness Onset (3-2011 / 4-2017) Canadian Institutes of Health Research \$1,000,000

Fitzpatrick R, Lip A, Liu X, Groll D – CFMS Wellness Challenge. Evaluating a new initiative to promote the development of resilience in medical students (6-2016/6-2018) Queen's Department of Psychiatry \$8,000

Fitzpatrick R, Jokic R, Prost E, Jones C – Teaching assessment and dictations skills to psychiatry residents using standardized patients (6-2015/9-2016) Queen's Department of Psychiatry \$0

Holmes L, Hancock P, Jones J, Martin L, Morris S, Pathak M – Provincial Awareness of Developmental Disabilities in the Criminal Justice System: DS Expert Panel Project (2-2015/2-2017) Inter-ministerial Mental Health and Justice Committee (MCSS/MOHLTC/MCSCS) \$170,000

Hollenstein T, Khalid-Khan S, Granic I – Mindlight: A videogame Intervention to Reduce Child Anxiety (8-2014/8-2016) OMHF \$0

Husain N, Naeem F – Multicenter Randomized Control Trial of a group psychological intervention for postnatal depression in British mothers of South Asian origin – ROSHNI (1-2016 / 1-2020) NIHR HTA \$3,264,699

Husain N, Naeem F – Multicenter RCT to evaluate the clinical and cost-effectiveness of a cultural Adapted therapy (C-MAP) in patients with a history of self-harm (6-2015/12-2018) Medical Research Council (MRC)/Wellcome Trust/DFID \$1,203,019

Hussain M, Seitz D, Herrmann N, Ismail Z, Quinn T – Improving Quality of Care for Older Adults with Post-Stroke Depression: Development of Screening Algorithms (10-2016/10-2018) Queen's Department of Psychiatry Internal Grant \$10,000

Iftene F – Mental Disorders in Adults with Childhood Out-of-Home Placements (1-2015 / 12-2017) Queen's Department of Psychiatry \$15,000

Jokic R – Effect of Positive Airway Pressure Treatment on Mood, Anxiety and Cognitive Function in Treatment Resistant Depressed Subjects with Obstructive Sleep Apnea (1-2009/ N/A) RESMED Foundation \$0

Jokic R, du Toit R, Fitzpatrick M, Milev R, Lowe A, David M – Treatment Resistant Depression and Obstructive Sleep Apnea: Effect of Treatment with Continuous Positive Airway Pressure (CPAP) on Mood, Anxiety and Quality of Life (10-2006/12-2018) Queen's University Research Initiation Grant \$30,000

Jokic R, Cabrera-Abreu C, Kolar D – Treatment resistant depression and obstructive sleep apnea: Effect of treatment with continuous positive airway pressure (CPAP) on mood, anxiety and quality of life (7-2009/N/A) External Funding \$12,000

Jokic R, Milev R, Kolar D, Cabrera C – CNS-011-12 Bipolar disorder and sleep apnea-investigating the co-morbidity and impact on neurocognition and quality of life (1-2014/12-2019) Queen's RIG \$30,000

Jones J, McQueen M, Blinkhorn A, Mills MJ, Hewett L, Hall L, Li J, Ayub M – Adapted Dialectical Behaviour Therapy (DBT) group for Individuals with Intellectual Disabilities and Emotional Dysregulation Difficulties (9-2015/9-2017) Queen's Department of Psychiatry \$11,440

Kennedy S, Jokic R – CAN-BIND/OBI Integrated Biological Markers for the Prediction of Treatment Response in Depression (1-2013 / N/A) CAN-BIND \$0

Kennedy S, Soares C – CAN-BIND Canadian Biomarker Integration Network in Depression (5-2012/5-2017) Ontario Brain Institute \$18,000,000

Kirkham J, Seitz D – Canadian Frailty Network Interdisciplinary Fellowship Award (1-2016/12-2016) Canadian Frailty Network \$50,000

Khalid-Khan S, Reddy S – A Multicentre, Double blind, Placebo and Active Controlled Parallel Group Evaluation of the Safety and Efficacy of Vilazodone in Pediatric Patients with Major Depressive Disorder (11-2016/12-2018) Allergan \$126,000

Khalid-Khan S, Reddy S – An Adaptive Phase II-B/III, Double-Blind, Randomized Placebo Controlled, Multi-Centre Study Of The Safety And Efficacy Of Naben[®] (Sodium Benzoate), A D-Amino Acid Oxidase Inhibitor, as an Add-on Treatment Of Schizophrenia in Adolescents (10-2014/12-2018) SyneuRx International (Taiwan) Corporation \$69,696

Khalid-Khan S, Wilson C, McCart A, Jaffer A – Centralized triage for children and adolescents with mood and anxiety disorders (9-2015/9-2016) SELHIN \$175,000

Khalid-Khan S, McCart A, Wilson C – Decreasing Wait Times for Child and Youth Mental Health: Developing a Centralized Triage Process between Primary Care, Youth Mental Health Agency and Child and Adolescent Psychiatry in the Hospital: A Quality Improvement Initiative (4-2014/3-2017) SELHIN

Khalid-Khan S, Calancie O, Nesdole R – Expansion of the Centralized Triage for Children and Adolescent Neurodevelopmental Disorders (11-2015/N/A) RBC for Children's Mental Health \$25,000

Khalid-Khan S, Khachatryan D – Prazosin Treatment of Nightmares and Sleep Disturbances Associated with PTSD in Children and Adolescents (9-2016/12-2018) Department of Psychiatry Grant \$1,000

Khalid-Khan S, Booij L, Davidson J, McCart A – Preventing Aggressive Behaviour in Boys Exposed to Family Violence (11-2016/12-2019) Department of Psychiatry Internal Grant \$29,000

Khalid-Khan S, Reddy S, Roberts N – Sandbox/TELUS: Providing Patients Access to Personalized Health Care Through Accessible Youth and Provider Friendly Technology: Sandbox Project Phase 2 (10-2014/10-2017) Sandbox \$500,000

Khalid-Khan S, Reddy PS – Developing triage services in Kingston (4-2015/12-2018) SEAMO \$125,000

Kolar D, Milev R, Cabrera-Abreau C, Jokic R – The Validation of the Nepean Dysphoria Scale (6-2013/N/A) Research Initiated Grant \$1,500

Kolar D, Milev R, Cabrera C, Jokic R – A study of alertness in patients with treatment resistant depression (1-2015/12-2019) Queen's RIG \$30,000

Liu X, Reddy P, Khalid-Khan S, Fitzpatrick R, Jones J – QPOND Genetic Studies of Autism, Neurodevelopmental and Neuropsychiatric Disorders (10-2015/10/2018) Ontario Brain Institute \$200,000

Liu X, Khalid-Khan S, Booij L – Genetics of Neuropsychiatric Disorders, including schizophrenia, mood disorders and eating disorders (11-2013/N/A) Special Grant \$0

Luctkar-Flude M, Groll D, Beckett L, Giroux J, Tyerman J – Exploring the effect of neurofeedback on post cancer cognitive impairment and fatigue: A pilot feasibility study (1-2016/1-2018) Canadian CAM Research Fund and Queen's University School of Nursing \$7,500

Magaud E, Duffy A, Bentall R, Scott J – Clinical Risk Markers in the Early Stages of Bipolar Disorder (5-2015 / 5-2017) Alberta Innovates Health Solutions \$1,000,000

Milev R, Cabrera-Abreu C, Jokic R, Kolar D – CAN-BIND-1 An Investigation of Biological Markers of Treatment Response in Depression (1-2013 / 12-2018) CAN-BIND and OBI \$80,000

Milev R, Cabrera-Abreu C, Jokic R, Kolar D – Esketamine 3008 – Extension- An open label, long-term, extension safety study of intranasal Esketamine in treatment resistant depression (1-2016/12-2020) Janssen \$6,400

Milev R, Cabrera-Abreu C, Jokic R, Kolar D – Esketamine 3001 – A randomized, double-blind, multi-centre, active-controlled study to evaluate the efficacy, safety and tolerability of fixed doses of intranasal Esketamine plus an oral antidepressant in adult subjects with treatment resistant depression (1-2016/12-2019) Janssen \$35,435

Milev R, Cabrera-Abreu C – A Randomized, Double-blind, Multicentre, Active-controlled Study to Evaluate the Efficacy, Safety, and Tolerability of Fixed Doses of Intranasal Esketamine Plus an Oral Antidepressant in Adult Subjects with Treatment-resistant Depression (9-2015/N/A) Janssen \$156,240

Milev R, Cabrera-Abreu C, Kolar D – An Investigation of Biological Markers of Treatment Response in Depression (4-2013 / N/A) UHN/OBI \$725,494

Milev R, Cabrera-Abreu C, Kolar D, Jokic R – Esketamine 3003-Extension – A randomized, double-blind, multicenter, active-controlled study of intranasal Esketamine plus an oral antidepressant for relapse prevention in treatment-resistant depression (1-2016 / 12-2018) Janssen \$19,660

Milev R, Cabrera-Abreu C, Kolar D – Extension – A Randomized, Double-blind, Multicenter, Active-controlled Study of Intranasal Esketamine Plus an Oral Antidepressant for Relapse Prevention in Treatment-Resistant Depression (12-2016 / N/A) Janssen \$180,000

Milev R, Cabrera-Abreu C, Kolar D – Extension – An Open-label long-term extension Safety Study of Intranasal Esketamine in Treatment-Resistant Depression (12-2016 / N/A) Janssen \$231,391

Milev R, Cabrera-Abreu C, Kolar D – Long-Term Follow Up Study Protocol – An Investigation of Biological Markers of Treatment Response in Depression (6-2016/N/A) UHN/OBI \$725,494

Milev R, Cabrera-Abreu C, Jokic R, Kolar D – Mood Stabilizer Plus Antidepressant versus Mood Stabilizer Plus Placebo in the Maintenance Treatment of Bipolar Disorder (6-2013/12-2018) UBC, \$21,010

Milev R, Cabrera-Abreu C, Jokic R, Kolar D – Sleep architecture in depressed patients treated with Desvenlafaxine (1-2013/12-2017) Pfizer \$0

Milev R, Cabrera-Abreu C – Transcranial Magnetic Stimulation (rTMS) and Deep Brain Stimulation (DBS) across Ontario sites (existing and new) using the same standardized assessment platforms (2-2014 / N/A) External Agency \$0

Milev R, Cabrera-Abreu C, Kolar D – Wellness Monitoring – A Collaborative Investigation of Predictors of Relapse in Major Depressive Disorder – Extension – An Investigation of Biological Markers of Treatment Response in Depression (6-2016/N/A) UHN/OBI \$725,494

Milev R, Harkness K – Stress Sensitivity and Reward Responsivity in Major Depression: A 6-month Follow Up (6-2016/5-2017) FHS, Queen's University and Kingston General Hospital Foundation Funds \$0

Milev R, Iftene F – A Multicentre, 26-Week Extension Study to Evaluate the Safety and Clinical Effects of Prolonged Exposure to 1 and 2mg doses of EVP-6124, an Alpha-7 Nicotinic Acetylcholine Receptor Agonist, as an Adjunctive (1-2013 – N/A) EnVivo Pharmaceuticals Inc. \$0

Milev R, Iftene F – A Phase II Randomized, Double-Blind, Placebo-Controlled, Parallel-Group Trial to Examine the Efficacy and Safety of 4 Oral Doses of BI 425809 Once Daily over 12-week Treatment Period in Patients with Schizophrenia (1-2016 – N/A) Boehringer-Ingelheim \$0

Milev R, Iftene F – Canadian Non-Interventional Prospective Cohort Study on the Real Life (1-2013 / N/A) Abilify Maintenna \$0

Milev R, Iftene F – ENVIVO Study: A Randomized, Double-Blind, Placebo-Controlled, Parallel, 26-Week, Phase 3 Study of 2 Doses of Alpha-7 Nicotinic Acetylcholine Receptor Agonist (EPV-6124) or Placebo as an Adjunctive Pro-Cognitive Treatment in Schizophrenia Subjects on Chronic Stable Atypical Antipsychotic Therapy (1-2013 – N/A) EnVivo Pharmaceuticals Inc. \$0

Milev R, Iftene F, Millson R – Interventional, Randomized, Double-Blind, Active-Controlled, Fixed-Dose Study of LuAF35700 in Patients with Treatment-Resistant Schizophrenia (phase3) (1-2016 / N/A) Lundbeck \$0

Milev R, Iftene F – PANSS Development of a PANSS Subscale for the Clinical Staging of Schizophrenia: Descriptive, Non-Interventional, Multi-Centre Study (1-2016/12-2017) Lundbeck so

Milev R, Iftene F – QUALIFY: A 28-week, Randomized, Open-Label Study Evaluating the Effectiveness of Aripiprazole Oncemonthly Versus Paliperidone Palmitate in Adult Patients with Schizophrenia. Study Phase IIIb (1-2013 / N/A) Lundbeck \$0

Milev R, Jokic R – A Prospective, Randomized, Double-Blind, Placebo-Controlled, Phase 2 Safety and Efficacy Study of Oral ELND005 as an Adjunctive Maintenance Treatment in Patients with Bipolar I Disorder (1-2013/12-2016) Elan Pharma International Inc. \$0

Milev R, Wallace C – The Efficacy, Safety and Tolerability of Probiotics on the Mood and Cognition of Depressed Patients (1-2016/12-2019) Lallemand and CAN-BIND \$40,000

Milev R, Munshi T, Marin A, Cabrera C, Jokic R, Kolar D, Liu Y – CAN-BIND, Biomarkers in Depression (12-2012/N/A) Lundbeck \$655,021

Milev R, Munshi T, Abdelmotaal E, Iftene F – Add on therapy for Cognitive Deficits in Schizophrenia (12-2012/N/A) Shire \$0

Millson R, Iftene F – Serum Vitamin C and D Levels in Clients with Schizophrenia: A Retrospective Analysis (1-2015 – N/A) Department of Psychiatry Internal Grant \$3,500

Morgan D, Kosteniuk J, Connell ME, Kirk A, Stewart N, Acan Osman B, Auer S, Bourassa C, Bracken J, Dal Bello-Haas V, Defontaines B, Farmer J, Holroyd-Leduc J, Innes A, Jacklin K, Malloy-Weir L, Miller W, Mou H, Osgood N, Osman M, Parrott E, Quail J, Rohatinsky N, Seitz D, Walker J – Design and evaluation of integrated primary health care practices for dementia in rural and remote settings (9-2016/8-2021) CIHR \$2,336,491

Munshi T, Parmar V, Dhaliwal S – Nicotine Dependence in mental health patients, is it being identified! (7-2013/N/A) Queen's Department of Psychiatry \$1,500

Nadkarni P, Wang P, Reddy PS, Groll D – Awareness of driving guidelines: a transatlantic comparison (4-2016) Queen's Department of Psychiatry Research Assistance Funds \$550

Nadkarni P, Bajaj N, Hassan T, Groll D, Nadkarni S – Determinants of aggression control measures: data from an acute psychiatry ward (3-2016) Queen's Department of Psychiatry Research \$2,000

Naeem F – A pilot RCT to test the effectiveness of CBTp based guided self-help for schizophrenia (6-2015/11-2016) Department of Psychiatry

Naeem F, Munshi T, Khalid-Khan S – Cognitive Behaviour Therapy (CBT) based guided self-help for patients with psychosis (6-2015/N/A) Queen's Department of Psychiatry \$19,674

Naeem F, Munshi T, Ayub M, Bowie C, Hirji A, McKenna C, Johal R, Groll D – Cognitive Behaviour Therapy (CBT) based Guided Self-Help in combination with Cognitive Remediation for patients with Psychosis (8-2015/N/A) Queen's Department of Psychiatry \$19,674

Naeem F, Munshi T, Johal R, Hirji A, McKenna C – RCT of Resolve (Relaxation exercise, solving problems and cognitive errors): A waiting room intervention for crisis clients (7-2015/N/A) Queen's Department of Psychiatry \$1,000

Prost E, Shamblaw A – Review of Patients Seeking Psychiatric Services at a Women's Reproductive Clinic (1-2015 – 1-2017) Queen's Department of Psychiatry \$0 Prost E, Shamblaw A – Women's Reproductive Clinic – Relationship and Treatment Outcome (5-2016 – 6-2017) Queen's Department of Psychiatry \$2,000

Reddy PS, Nesdole R – Prejudiced attitudes towards Aboriginals in healthcare: the psychometric properties of the old-fashioned and modern prejudiced attitudes towards Aboriginals scale (12-2015/12-2016) Queen's Internal Grant \$2,000

Reddy PS, Khalid-Khan S – Second Generation Antipsychotic Use And Side Effect Profile In Children And Adolescents: A Five Year Retrospective Study (10-2015/10-2018) Queen's Initiation Grant \$20,000

Reddy PS, Edgington A, Binbing – Tool development for assessing the risks associated with psych pharmaceutical agent use in children: a pilot study with Atomoxetine (10-2015/10-2018) Queen's Grant \$20,000

Rochon PA, Bronskill SE, Austin PC, Bell CM, Farrell B, Gill SS, Gruneir A, Herrmann N, Jeffs LP, McCarthy L, Metge C, Seitz DP, Upshur R – Multi-Method Approach to Exploring Prescribing Cascades (9-2016/8-2017) \$100,000

Seitz D, Gill SS, Herrmann N, Lanctot K, Kirkham J, Le Clair K, Maxwell C, Quinn t, Rapoport R, Rochon PA, Takwoingi Y – A Systematic Review and Meta-Analysis of the Accuracy of Depression Rating Scales to Diagnose Depression in Older Adults with Alzheimer's Disease and Other Dementias (3-2015 / 2-2016) CIHR \$100,000

Seitz D, Herrmann N, Lanctot K – Non-Stigmatizing Language in Dementia (10-2016 / 11-2017) CIHR \$20,000

Seitz D, Herrmann N, Lanctot K – Prevention and Treatment of Neuropsychiatric Symptoms of Dementia (4-2014 / 3-2019) CIHR \$40,000

Seitz D, Rochon P, Herrmann N, Lanctot K, Tierney M – Sex and Gender Differences in the Initiation and Discontinuation of Psychotropic Medications among Long-Term Care Residents with Dementia (12-2016 / 11-2018) CIHR \$16,000

Seitz D, Austin P, Hussain M, Gill SS, Eckenhoff R, Berger M, Reimer CR – Surgery, Anesthesia, and Risk of Developing Dementia (1-2015 / 12-2017) SEAMO AFP Innovation Fund \$84,185

Seitz D – Comparative Safety of Antipsychotic Medications in Older Adults with Psychotic Disorders (10-2016) CIHR \$170,000

Seitz D – Mental Health Disorders in Long-Term Care (3-2016) Physician Services Incorporated \$0

Seitz D – Prevalence and Correlates of Multiple Medications with QTc Effects (1-2016) Alzheimer Society of Canada Research Program \$150,000

Soares C – Assessing the Acceptability of a Mobile Application in Depression: A M-Health User-friendliness, Feasibility Pilot Study (12-2016 / 12-2017) Ontario Brain Institute \$56,000

Soares C, Kennedy S – CAN-BIND CARES: Prevention and Self-Management of Depression in the Digital Age (9-2016/9-2019) Ontario Research Fund (ORF) Research Excellence \$1,000,000

Soares C, Frey B, Steiner M, Minuzzi L – Midlife Women with Depression: the effects of rapid tryptophan or phenylalanine/tyrosine depletion on mood and thermoregulation in depressed subjects responsive to estrogen therapy (3-2012/3-2017) CIHR \$367,000

Velkers C, Seitz D – Canadian Frailty Network Interdisciplinary Fellowship Award (1-2016/12-2016) Canadian Frailty Network \$25,000

Vincent J, Kennedy J, Ayub M – Identification of Proteomic Biomarkers for Bipolar Disorder (3-2016.N/A) University of Toronto Neuroscience Catalyst Fund \$510,000

Wang L, Kolar D – Can the Use of a Safety Checklist Lead to Improve Quality of Care in Electroconvulsive Therapy? (1-2016/N/A) Queen's University \$0

Warner J, O'Neil J, Luctkar-Flude M, Groll D – Hotel Dieu Hospital Kingston RNAO Best Practice Spotlight Organization Implementation Project (9-2012/9-2016) RNAO \$120,000

Wijeratne T, Nadkarni P, Wijeratne N, Hussein M, Al-Blowi M – SSRI and Bone Health (7-2015 / 12-2016) Kingston General Hospital \$10.00



Bowie C, Milev R, Harkness K – Predicting Symptom Remission and Functional Improvements in Depression (6-2017/N/A) CIHR

Cramm H, Khalid-Khan S – Targeting the Mental Health of Canadian Children Growing Up in Military Families (11-2014/N/A) Health Research Foundation \$0

Duffy A, Milev R, Grof P, Horrocks J, Keown-Stoneman C, Goodday S, Bentall R, Jones S, Geddes J, Saunders K, Wong A, Petronis A – Predicting the Onset of Bipolar Disorder: A Longitudinal High-Risk Study (7-2017/N?A) Canadian Institutes of Health Research

Gilron I, Tu D, Holden R, Jackson A, Milev R, VanDenKerkhof E, Gilron I – Pain Improvement with Novel Combination Analgesic Regimens – The PAIN-CARE Trial (9-2016/12-2018) CIHR

Hassan T, Nadkarni P.S., Nadkarni S.K. – Aggression Control Measures and Patient Experience: Findings From An Acute Psychiatry Inpatient Unit – (2016) Queen's Department of Psychiatry

Kennedy S, Milev R, Strother S, Soares C, Turecki G, Uher R, Foster J, Mueller D, Frey B, Lowe G, MacQueen G, Lam R – Canadian Biomarker Integration Network in Depression – Integrated Discovery (ID) Program Renewal Application (2018/2024) Ontario Brain Institute

Khalid-Khan S, Gratzer D, Scarborough General Hospital – Co-designing a mobile application with chronic disease patients: A patient driven and culturally sensitive randomized control trial that will connect information, patients and providers through transitions of care (5-2015/N/A) OSSU-IMPACT \$0

Munshi T, Asmer S, Fairbairn J, Hirji A, McKenna C, Naeem F, VanWinssen C – An Open-Label, Non-Randomized Registry of the Natural Use of Paliperidone Palmitate in Canada (7-2015/3-2016) Janssen \$30,000

Munshi T, Naeem F, Habib M, Hirji A, Da Costa S, Gingrich T, Arshoff L – Quality improvement project: Implementing use of a patient decision aid to increase use of long-acting injectable antipsychotic therapy (10-2015/N/A) Applied for the internal grant at Kingston General Hospital \$10,000

Prost E, Egan R, Beesley T, Groll D, Penfold S – Assessing Evaluation Tools in CBME (7-2016 – 7-2019) Queen's Department of Psychiatry

Soares C, Milev R, Frank E, Kupfer D – Queen's /CAN-BIND CARES: Applying Innovative Mobile Health Technologies for Greater Research and Clinical Engagement, Resilience and Wellness Promotion in Vulnerable Populations Suffering From Depression (5-2017/5-2019) Queen's Research Opportunities Fund (QROF) \$60,000

Wijeratne N – Pathways to Care for Youth Entering the Adult Mental Health Services (9-2016 – 12-2020) SEAMO New Faculty Funding \$30,000

Wong A, Duffy A, Grof P, Vincent J, Paterson A – Genetic Mechanisms and Susceptibility Variants for Bipolar Disorder (7-2017 / 7-2022) Canadian Institutes of Health Research \$1,000,000

Unfunded Research

Alavi N, Prost E, Reshetukha T – Outcomes of Involuntary Hospital Admission. Satisfaction with Treatment and the Effect of Involuntary Admissions on Patients (12-2014/12-2017)

Booij L, Khalid-Khan S – The impact of mindfulness-based cognitive therapy on brain function and DNA methylation in depressed adolescents: a pilot study (9-2013/N/A)

Bajaj N, Hassan T, Franz J, Nadkarni P, Mazhar N – A Prospective Study of Gabapentin Abuse (2016)

Bajaj N, Munshi T, Tran T, Mazhar N, Hassan T, Finch S, Groll D, Da Costa S – (KGH) Study of Risk Factors Associated with Violence on an Acute Inpatient Psychiatric Unit (7-2015/N/A)

Fitzpatrick R, Jokic R - the Use of Standardized Patients in Years 2 and 4 of Residency (1-2015 / N/A)

Jokic R – CNS-011-12. Bipolar Disorder and Sleep Apnea – Investigating the Co-morbidity and Impact on Neurocognition and Quality of Life (1-2016/N/A)

Khalid-Khan S, Khalid-Khan F, Gratzer D, Alavi N – Email Based CBT in Adolescents with Mood and Anxiety Disorders (11-2013/N/A)

Kolar D, Jokic R – A Study of Alertness in Patients with Treatment-Resistant Depression (2-2014/2-2015)

MacNeil B, Nadkarni P, Montemarrano V, Leung P – Evaluation of an Innovative Outpatient Group Therapy Program for Adult Eating Disorders: Predicting Patient Engagement, Satisfaction, and Medical and Psychological Symptom Reduction (1-2016 / N/A)

Mazhar M, Khachtryan D – Meta-Analysis on Efficacy of Gabapentin in Treatment of Alcohol Use Disorders (11-2015)

McNevin S – "What Ever Happened to..." A Study of Consult Outcomes (8-2015 – 9-2017)

McNevin S, Haghiri B – Using a Health Profession Trainees Health Program as a Forum for Interprofessional Health Education (1-2011 – 12-2017)

McNevin S, et al. – WHO Internet Field Study for ICD-11 (1-2016 – 12-2016)

McNevin S – Thirty Years and Counting: The Evolution of Psychiatric Services at a University Student Health Service (11-2011 – 12-2017)

Milev R – Transcranial Magnetic Stimulation (rTMS) and Deep Brain Stimulation (DBS) across Ontario sites using the same standardized assessment platform (1-2016/12-2018)

Milev R – iTBS – The Effects of iTBS on Olfaction and Cognition in Depressed Patients (1-2014/12-2018)

Munshi T, Bajaj N – Gap analysis in our inpatient services for standards set by Health Quality Ontario in Managing individuals with Schizophrenia (12-2016/N/A)

Munshi T, Parmar V, Dhaliwal S – Depot Antipsychotics, is its usage making a difference to the outcome (7-2013/N/A)

Munshi T, Farooq S, Ayub M, Naeem F, Asmer S, Wang P, Fairbairn J, Kachatryan D, Lau F – Literature review and Meta-Analysis of Agranulocytosis and related blood dyscrasias secondary to Clozapine (2-2015/N/A)

Munshi T, Patel A, Kigamba – Prevalence of Metabolic Syndrome in an Acute Inpatient Unit, comparison between Kingston (Canada) and Nairobi (Kenya) (6-2014/N/A)

Munshi T, Feakins M, Baldock J, Mazhar N, Hassan T – Prevalence of Metabolic Syndrome in the Assertive Community Team Patients (7-2013/N/A)

Munshi T, Parmar V, Dhaliwal S, Mazhar N, Hassan T – Re-Audit of monitoring practices for ACT patients on atypical antipsychotics (7-2013 / N/A)

Munshi T, Penfold S, Asmer S, Lau F – Physical Exam in Mental Health: Implementation of a Form to Guide Medical Assessment (7-2015 / N/A)

Nadkarni P, Munshi T, Varley K, Mufti A, Wijeratne R, Groll D, Cowperthwaite B – Medical and non-medical factors affecting the length of stay after designation of ALC in a University based hospital (4-2014/N/A)

Naeem F, Ayub M, Godfrey D, Munshi T, Bowie C, Johal R, Kingdon D, Groll D – Cognitive Behaviour Therapy (CBT) based guided self-help for patients with psychosis (7-2014/N/A)

Naeem F, Munshi T, Ayub M, Hohal R, Groll D – A Pilot randomized controlled trial to test effectiveness of the ACE4 (Activity Challenge – 4 areas) for depression and anxiety: A behavioural activation based game (7-2015 N/A)

Penfold S, Groll D, Mauer-Vakil D, Pikard J, Yang M, Mazhar M – Personality Disorders Presentations to Emergency Departments in a University Hospital (6-2016)

Scott D, Forensic Directors Group Members – Safewards (10-2015/N/A)

Tomek E, Wijeratne N, Patel A, Duffy A – Transitional Age Youth Research Hub (9-2016 – N/A)

Wijeratne N, Nadkarni P – Gastrointestinal Disorders in Eating Disordered Adults (3-2015 – 12-2016)

Wijeratne N, Fairburn J – Venlafaxine Overdose Leading to Rhabdomyolysis (2-2016 – 2-2018)

poster presentations

Published

Bahji A, Mazhar M, Treatment of Cannabis Dependence with Synthetic Cannabinoids: A Systematic Review, 11-2016, World Psychiatric Association International Congress, Cape Town, South Africa

Bajaj N, Fairbairn J, Predictors of Inpatient Admissions Among Psychiatric Presentations to the Emergency Department, 5-2106, Department of Psychiatry, Annual Research Conference, Queen's University

Bastas C, Nadkarni P, Nadkarni S, Reddy PS – Cannabis use in adolescents and depression, 9-2016, Canadian Psychiatric Association (CPA) 66th Annual Conference, Toronto, ON

Bastas C, Reddy P, Nadkarni P, Cannabis abuse and depression, A systematic review, Canadian Psychiatric Association Conference 2016, Toronto, ON

Cardy R, Iftene F – Short Burst Versus Sustained Training: Assessing Neural Oscillatory Cognitive Training Delivery for Schizophrenia, 5-2016, Department of Psychiatry Research Conference

Dama M, Mahoney JL, Macdougall M, Minuzzi M, Hall G, Fedorkow D, Costescu-Green D, Frey BN, Soares CN, Steiner M – Validation of the Menopause Visual Analogue Scale in Determining Mood and Physical Symptoms of Perimenopausal Women, 10-2016, North American Menopause Society 27th Annual Meeting

Dhaliwal S, Martins J, Groll D, Jokic R, Electroconvulsive Therapy Training in Canadian Residency: Looking Back and Looking Forward, 9-2016, Canadian Psychiatric Association Meeting

Hassan T, Nam D, Mazhar N, Munshi T, Galbraith N, Groll D – Canadian Psychiatry Residents' Attitudes to Becoming Mentally III, 5-2016, American Psychiatric Association

Iftene F, Cardy R, Groll D – Mental Disorders in Adults with Childhood Out-of-Home Placements, 9-2016, 66th Annual Canadian Psychiatric Association Conference

Iftene F – What's the Difference? A Comparison of Mental Disorders in Adults with and Without History of Childhood Out-of-Home Placement, 11-2016, Mood and Anxiety Disorders Conference

Mahoney JL, Minuzzi L, Fedorkow D, Costescu-Green D, Hall G, Frey BN, Soares CN, Steiner M – Impact of Tryptophan Depletion on Sleep Efficiency During the Menopausal Transition While on Estrogen Therapy, 8-2016, North American Menopause Society 27th Annual Meeting.

Martins J, Nesdole R, Roberts N, Reddy PS, A study of clinical symptoms of ADHD in CAMHUCC clinic: 2016, Department of Psychiatry Conference

Mazhar N, Lau F, Van Winssen C, Bajaj N, Hassan T, Munshi T, Groll D – Psychiatric and Non-Psychiatric

Consultations for Substance-Related Emergency Department Visits in a Canadian University-Affiliated Hospital Setting, 5-2016, American Psychiatric Association 169th Annual Meeting, Atlanta

Mazhar N, Lau F, Van Winssen C, Bajaj N, Hassan T, Munshi T, Groll D – Retrospective Hospital Database Analysis of Substance-Use Related Emergency Department Visits in an Ontario University-Affiliated Hospital Setting, 9-2016, Canadian Psychiatric Association Annual Conference, Toronto, ON

Mofidi N, Saleh A, Reddy PS, A retrospective study of OCD, 2016 Department of Psychiatry Conference, 8-2016, Calgary ACAMH

Mofidi N, Mofidi D, Xie Y, Groll D, Impact of Parent Training on Parent-Child Relationship Characteristics in Children with ADHD, 11-2016, World Psychiatric Association

Munshi T, Fairbairn J, Dhaliwal S, Prevalence of Metabolic Syndrome in a population being served by the Assertive Community Team, 5-2016, American Psychiatric Association Annual Conference May 2016

Nadkarni P, Wang P, Reddy PS, Groll D, Fitness to drive: awareness and reporting patterns in psychiatrists, 5-2016, Annual Research Day, Queen's University

Nadkarni P, Dhaliwal S, Mazhar N, MacNeil B, Carmona N, Groll D, Eating disorders: Journey from DSM-IV to DSM-5, 9-2016, Canadian Psychiatric Association Meeting

Nadkarni P, Wang P, Reddy P, Groll D., Awareness of Driving Guidelines for Psychiatric Conditions: a transatlantic comparison., 9-2016, Canadian Psychiatric Association Meeting

Nadkarni P, Wang P, Reddy P, Groll D., Awareness of Driving Guidelines for Psychiatric Conditions: a transatlantic comparison., 4-2016, Ontario Psychiatric Association

Naeem F, Xiang S, Shokraneh F, Munshi T, Syed Y, Adams C, Farooq S – A survey of randomized controlled trials of eMedia delivered interventions for people with Schizophrenia, 9-2016, Canadian Psychiatric Association, Annual conference, Toronto, ON

Penfold S, Pikard J, Patel A, Odejayi G, Hassan T, Munshi T, McKenna C, Groll D, Mazhar M, Study of Psychiatric Emergency Assessment Documentation in Canadian University Hospitals, 11-2016, World Psychiatric Association International Congress, Cape Town, South Africa

Reddy PS, Abhilasha S, Nadkarni P, Theory of Mind interventions in Autistic Spectrum Disorders, Canadian Psychiatric Association Conference 2016, Toronto, ON

Reddy PS, Alhabbad, Retrospective Study Of Tourettes Syndrome And Tics In Children And Adolescents Outpatient Services, 5-2016, Department of Psychiatry Conference Kingston, ON

Reddy PS, Sheli D, A 10-year retrospective study of referrals to child psychiatry, Canadian Psychiatric Association Conference 2016, Toronto ON

Roberts N, Axas N, Repetti L – Clinical Characteristics and Outcome of Emergency Department Referrals for Suicidal First Nation Children and Adolescents from Northern Ontario: Preliminary Report, 11-2016, Children Mental Health Ontario Annual Conference

Sjaarda CP, McNaughton AJM, Henry C, Santavy L, Hudson ML, Ayub M, Guerin A, Liu X, Exome sequencing of a pure sporadic cases of autism identifies rare potentially causative mutations., 10-2016, American Society of Human Genetics 66th Annual Meeting October 18, 2016, Vancouver, BC

Seitz DP – Using Administrative Health Care Databases to Evaluate Medication Safety, 3-2016, American Association for Geriatric Psychiatry Annual Meeting

Seitz DP – Adapting Evidence in Dementia Care to Practice: Primary Care Dementia Toolkit and Dementia Capacity Planning in Ontario, 7-2016, Alzheimer's Association International Conference.

Seitz DP – Using Administrative Health Care Databases to Evaluate Medication Safety, 9-2016, Canadian Academy of Geriatric Psychiatry Annual Scientific Meeting

Seitz DP – Older Adults with Late-Life Psychosis: Using Population-Based Data to Understand Outcomes, 9-2016, Canadian Academy of Geriatric Psychiatry Annual Scientific Meeting

Sheehan K, Hamer D, Tan A – Supervision of Supervision (SoS), a Psychotherapy Senior Elective, 2-1016, Don Wasylenki Education Day, University of Toronto

Sinha A, Nadkarni P, Reddy PS – Theory of Mind training in autism spectrum disorders: appraisal of evidence, 9-2016, Canadian Psychiatric Association (CPA) 66th Annual Conference, Toronto

Syan SK, Steiner M, Mahoney JL, Hall G, Fedorkow D, Costescu-Green D, Frey BN, Soares CN, Minuzzi L – Resting-state fMRI after Acute Tryptophan Depletion in Perimenopause Women on Estrogen Therapy: Preliminary Results, 10-2016, North American Menopause Society 27th Annual Meeting

Vincent JB, Ayub M, et al, Mapping autosomal recessive intellectual disability: Combined microarray and exome sequencing identifies 69 different genes in 192 consanguineous families, 10-2016, American Society of Human Genetics 66th Annual Meeting

Vincent J, Harripaul R, Santavy L, NcNaughton A, Mittal K, Vasli N, Mikhailov A, Henry C, Hudson M, Windpassinger C, Stavropoulos J, Carter M, Porn, Screening for mutations in non-syndromic autosomal recessive intellectual disability genes in non-consanguineous intellectual disability and autism population, 11-2016, XXIV World Congress of Psychiatric Genetics

Wang P, Reddy PS, Groll D, Nadkarni P – Fitness to drive: awareness of driving guidelines for psychiatric conditions: a transatlantic comparison, 4-2016, Ontario Psychiatric Association Conference, Toronto

Wijeratne N, Chandrasena R – LAI in Early Psychosis-Caregiver Perspective, 2-2016, SIRS Conference 2016

Submitted

Bajaj N, Fairbairn J, Do day hospitals work? A study of intensive transitional treatment program on psychiatric emergency admissions and length of stay on the inpatient unit, 5-2016, Department of Psychiatry, Annual Research Conference, Queen's University

Bajaj N, Fairbairn J, Intensive Transitional Treatment Program: What do the patients think? 5-2016, Department of Psychiatry, Annual Research Conference, Queen's University

Jones J – Brief for MCSS regarding support planning for individuals with developmental disabilities and the need for clinical assessment and continuity to inform optimal residential placements and service provision, 1-2016, MCSS Brief for Residential Supports

Mofidi N, Roberts N, Reddy PS, Prevalence of anxiety disorders among patients referred for urgent psychiatric consultation, 12-2015, CAP 2016, Calgary, AB

Penfold S, Groll D, Pikard J, Mauer-Vakil D, Yang M, Mazhar, A Retrospective Hospital Database Analysis on Personality Disorders Presentations in a Canadian University, 9-2017, Canadian Psychiatric Association Meeting

Reddy PS, Retrospective Study Of Tourettes Syndrome And Tics In Children And Adolescents Outpatient Services, 7-2016, CAP 2016 Calgary, AB

Sheli D, Reddy PS, A 10-year review of child and adolescent psychiatric services in tertiary centre, 9-2016, CPA 2016

CONFERENCE DOPES

Accepted

Groll D, A Retrospective Hospital Database Analysis on Personality Disorders Presentations in a Canadian University – APA, San Diego, California, 2016

Groll D, Eating disorders: Journey from DSM-IV to DSM-5 – International Academy of Law and Mental Health, Prague, 2016

Jones J, Dual Diagnosis and the Law – MOHLTC Human Services and Justice LEAD Police Training

Jones J, Prisons and Offenders with Intellectual Disabilities and Autism Spectrum Disorders – Correctional Service Canada – Institution of Mental Health

Scott, D, 2016 Update to Mental Health and the Law – Ontario Hospital Association

Scott D, Buprenorphine Half and Half Training – American Academy of Addiction Psychiatry

Scott D, Canadian Latuda Forensic Advisory Board - Sunovion

Scott D, Canadian Life Care Planning: Addressing Damages in 2016 – Canadian Society of Medical Evaluators

Scott D, Cannabinoids in Clinical Practice – University of Toronto Faculty of Medicine

Scott D, Is good good enough: a case presentation in psychosis. Effectively switching medications to improve patient outcomes – Sunovion

Scott D, Management of Patients Living With Schizophrenia – Lundbeck

Scott D, Managing the Bipolar Spectrum in Forensic and Correctional Practice – Sunovion

Scott D, Marijuana in the Workplace – Canadian Society of Medical Evaluators

Scott D, Medical Marijuana and Methadone Prescriber's Summit – Tilray

Scott D, Ontario Motor Vehicle Accident Catastrophic Impairment Training Course – Ontario Society of Medical Evaluators

Scott D, Treatment Considerations for the Early and Acute Phases of Schizophrenia – Lundbeck

Presented

Bajaj N, Fairbairn J, Mazhar N, Hassan T, Munshi T, Finch S, Nadkarni P, Darling M, Groll D, Do day hospitals work? A before-after study of the impact of ITTP on psychiatric emergency admissions and length of stay on inpatient unit – Annual Research Day, Queen's University Kingston, ON

Bajaj N, Realising Aspiration – MLN College, Yamunanagar, Haryana Cabrera-Abreu C, Debate: This House Believes that Psychodynamic Therapy is Dead, Let Us Move On, Queen's University Department of Psychiatry Grand Rounds

Duffy A, A developmental approach to understanding the evolution of psychopathology: Improving early identification and developing novel treatment of high-risk youth – International Association of child and Adolescent Psychiatrists and Allied Professionals (IACAPAP)

Duffy A, Emerging course of major mood disorders: Differences associated with treatment responsive subtypes – American Academy of Child and Adolescent Psychiatry (AACAP)

Duffy A, Improving early diagnosis and advancing research in mood disorders: A longitudinal high-risk approach – Department of Psychiatry, Queens' University

Duffy A, Longitudinal high-risk studies of the offspring of bipolar parents – International Society for Bipolar Disorders (ISBD) meeting

Fitzpatrick R, Cabrera C, Jokic R, Kolar D, Jones C, Symposium on Narrative Therapy at CPA – CPA Toronto, ON

Groll D, Exploring the effect of neurofeedback on postcancer cognitive impairment and fatigue: A pilot feasibility study – Canadian Integrative Healthcare Research Symposium, Toronto, ON, 2016

Groll D, Operational Stress Injuries in the OMP and OPP – Ontario Senior Officers Police Association Annual Meeting, Jacksons Point, ON, 2016

Groll D, Operational Stress Injuries in the OPP – CIMVHR/CAF Mental Health Research Symposium, Ottawa, ON, 2016

Hussain M, Post Stroke Depression – Southeastern Ontario Stroke Network

Jones J, Canadian Policy and Practice in Autism Spectrum Disorders – Swansea University, College of Medicine, Wales, UK

Jones J, Preliminary development and evaluation of an adapted dialectical behavior therapy group for persons with intellectual disabilities – 2016 World Congress International Association of Scientific Study in Intellectual Developmental Disabilities

Jones J, Psychiatry Grand Rounds Speaker Series: Offenders with ID and ASD – Western University, Department of Psychiatry

Kolar D, Symposium entitled "Sorrows, Science and Stories: Narrative Psychiatry in the 21st Century", Canadian Psychiatric Association Annual Conference, Toronto, ON

Kolar D, The development from the single psychotherapeutic methods to common factors in psychotherapy: Narrative psychotherapy and psychiatry, Canadian Psychiatric Association Annual Conference, Toronto, ON MacNeil B, Nadkarni P – Addressing body dissatisfaction in eating disorders. The role of exposure with response prevention (ERP) Canadian Psychiatric Association (CPA) 66th Annual Conference, Toronto, ON

MacNeil B, Nadkarni P – Tackling the ego syntonic nature of eating disorders: Engagement and recovery outcomes – Canadian Psychiatric Association (CPA) 66th Annual, Toronto, ON

Mazhar M – Eating Disorders: Journey from the DSM-IV to the DSM-V, Canadian Psychiatric Association 66th Annual Conference, Toronto, ON

Mazhar M – Psychostimulants: The Good, The Bad and The Ugly, Canadian Psychiatric Association 66th Annual Conference, Toronto, ON

Mazhar M – The Association Between Borderline Personality Disorder, Fibromyalgia, and Chronic Fatigue Syndrome: A Systematic Review, Canadian Psychiatric Association 66th Annual Conference, Toronto, ON

Mazhar M – Weaving Today's Psychopharmacologic Solutions: Tomorrow's Promises, NADD 33rd Annual Conference, Niagara Falls, ON

McNevin S – Office Management of Personality Disorders (Borderline) 15th Annual Mood and Anxiety Disorders Conference – Queen's Department of Psychiatry

McNevin S – Personality Disorders in Long Term Care – Rideaucrest Long Term Care Home

McNevin S – Students with Psychiatric Diagnoses-Academic Impact of Psychiatric Medication and Appropriate Accommodation – Inter-University Disability Issues Association (IDIA) Professional Development Day

McNevin S, Suicide Assessment in Clients with Borderline Personality Disorder – Queen's University Joint Peer Supervision Student Wellness Services

McNevin S, The Difficult Resident in Long Term Care – Mobile Response Learning Exchange – BSS for Education

McNevin S, The Evolution of Borderline Personality Disorders – Methods in Psychotherapy Small Group Learning Activity

McNevin S, Wayward Youth and August Aichhorn – Methods in Psychotherapy Small Group Learning Activity

Munshi T, A survey of randomized controlled trials of eMedia delivered interventions for people with Schizophrenia – Canadian Psychiatric Association, Toronto, ON

Munshi T, Cultural Adaptation of CBT in South Asians – American Psychiatric Association, Atlanta, Georgia Munshi T, Cultural Adaptation of Cognitive Behavioural Therapy – Ontario Psychiatric Association, Toronto, ON

Munshi T, Effectiveness of Cognitive Behavioural Therapy Across Cultures – World Psychiatric Association, Capetown

Munshi T, International Residency Training – World Psychiatric Association, Capetown

Munshi T, Medical Assistance in Dying – Institute of Behavioural Sciences, Dow University of Health Sciences, Karachi

Munshi T, Metabolic Syndrome, a Psychiatric Perspective – Ontario Assertive Community Team Annual Conference, Niagara Falls, ON

Munshi T, Psychosis Care Pathways – Schizophrenia Society of Canada, Halifax, NS

Nadkarni P, Wang P, Reddy PS, Groll D – Fitness to Drive: Awareness and Reporting Patterns in Psychiatrists, Canadian Psychiatric Association 66th Annual Conference, Toronto, ON

Nadkarni P, Dhaliwal S, Mazhar N, MacNeil B, Carmona N, Groll D – Eating disorders: Journey from DSM-IV to DSM-5 – Canadian Psychiatric Association (CPA) 66th Annual Conference

Nadkarni P, Mofidi N, Alhabbad A, Reddy PS – Life is a twitch: insight into childhood tics – 17th Canadian Collaborative Mental Health Care Conference, Kelowna, BC

Naeem F, CBT using digital media, Pakistan Association of CBT International Conference, Lahore

Naeem, F, CBT: The new frontiers, Queen's Family Medicine, Kingston, ON

Soares CN – Is it Depression or Menopause? 15th World Congress on Menopause, International Menopause Society, Prague, Czech Republic

Soares CN, M-Health and Depression, CAN-BIND Family and Friends Workshop, Toronto, ON

Soares CN, M-Health in Psychiatry. Fast Lane or Bumpy Road? Ontario Brain Institute/CAN-BIND Workshop, Toronto, ON

Soares CN, Neurobiology of Mood Change during the Menopause Transition, North American Menopause Society Annual Meeting, Orlando, FL

Vazquez G, "Unipolar vs Bipolar Depression: Why should I care?" Queen's University Department of Psychiatry

Vazquez G, "Use of Antidepressants in Bipolar Disorder" Queen's University Department of Psychiatry

QUEEN'S UNIVERSITY DEPARTMENT OF

Kingston General Hospital	Hotel Dieu Hospital	Providen	ce Care
Adult (Acute)		Adult (Rehab)	Geriatric Psychiatry
Inpatients 39 beds Consultations /	General Psychiatry including expertise in:*	Schizophrenia/ Rehabilitation	Inpatients — 30 beds Regional Outpatients
Liaision Services	Anxiety	Units 1, 2 and 3 – 40 beds*	Outreach
Emergency Psychiatry Services	ADHD Concurrent Disorders Consultation Liaison	Psychosocial Rehab Assertive Community Treatment Team*	Kingston Napanee
Treatment Program	General Psychiatry Geriatric Psychiatry	Community Integration Program – Assertive Community Treatment Team*	Hastings and Prince Edward Countie Consultation/Liaison
	Mental Health and Law Reproductive Psychiatry	Intensive Case Management*	Mobile Response Team
	Collaborative MH Services* Early Intervention	VOCEC Community High Intensity Treatment Team	Forensic Psychiatry
	Psychosis Eating Disorder	Adult MH Outreach	Inpatients FAU – 5 beds
Child and Adole	scent Psychiatry	Mood Disorders Research and Treatment Service	Inpatients FTU – 25 beds
8 Inpatient beds	Mood and Anxiety Clinic	Unit 2 and 3 – 12 beds Outpatients*	Outpatients At Risk
	Community Outreach Urgent Consultation and	Outreach	Telepsychiatry Corrections
	Brief Intervention Clinic	ECT/TMS Service Group Therapies	Métis
	Neuro-development Clinic (includes PDD)	Personality Disorder Service*	
	Telepsychiatry	Chrysalis Program Outpatients	
		Managing Powerful Emotions	
		People Skills	

and Mindfulness Community Treatment Order

Ongwanada

Developmental Disabilities

Child and Youth Outpatients

Adult and Child Outreach Clinics

South Eastern Regional Transitional Treatment Homes

DSLG

Kerry's Place, Autism Services

Ongwanada Community Psychiatry

> Pathways to Independence Forensic Clinic

CAS Highland Shores Belleville

Dual Diagnosis Community Outreach Team*

Shared Care Psychiatry Services

Family Health Teams

Addiction Psychiatry Services Addictions Street Health Clinic

North Kingston Clinic

Detox

Addiction Mental Health Services – KFL&A

Community Psychiatry

North Shore Assertive Community Treatment Team*

Frontenac Assertive Community Treatment Team*

Case Management Services*

Transitional Case Management

Options for Change*

Court Diversion

Crisis Service

Housing

Vocational

Proposed Student Mental

Health Psychiatry

Queen's Student Health Services

St. Lawrence Student Health Services

Correctional Psychiatry

Correctional Service of Canada

*Intake Coordinators

Faculty

Ahmed, Adekunle Alavi, Nazanin Altrows, Irwin Andrew, Melissa Arboleda-Flórez, Julio Argue, Donald Ayub, Muhammad Bajaj, Neeraj Baldock, Jane Barsoum, Amir Beckett, Linda Beninger, Richard J. Berber, Mark Blaney, Beverly Booij, Linda Bowie, Christopher Boyd, Michele Brien, James **Buell**, Katherine Burge Philip G. Burley, H. Joseph Cabrera, Casimiro Cappuccio, Paul Carmichael, Karin L. Chagigiorgis, Helen Chan, Michael Cramm, Heidi David, Michela De Grace, Elizabeth J. Delva, Nicholas Doan, Nam Douglas, Rebecca Druick, Dwight Duffy, Anne Dumont, Eric Eid, Moustafa El Saidi, Mohammed Elliott, Deborah Fahy, Maeve Feakins, Martin

Finch, Susan Fitzpatrick, Renee Flynn, Leslie Furst, Katherine Goff, Valerie Goldstein, Stanley Groll, Dianne Habib, Mohammed Habib, Rami Haghiri, Behnia Hamer, Debra Hanna, Samia Harkness, Kate L. Hassan, Tariq Hawken, Emily Hillen, James Hopkins, Robert W. Horgan, Salinda Iftene, Felicia Ilkov-Moor, Susan Ismail, Ghena Jackson, R. Jeffrey Jindal, Ripu Johnston, Mary Jokic, Ruzica Jones, Cherie Jones, Jessica Kasurak, Paul Kenny, William Kennedy, Louis J. Khalid-Khan, Sarosh Khan, Nasar Kilik, Lindy A. Kirkham, Julia Kolar, Dusan Lawson, J. Stuart Le Clair, Ken Leverette, John Lewis, Suzanne Logan, Martin

Looman, Jan Liu, Xudong Loza, Wagdy M. MacNeil, Brad MacPherson, Colin Mai, Francois Majeed, Arshad Malone, Robert D. Marchand, Patricia Marin, Alina Mauer, Terry Mazhar, Nadeem McAndrews, Mary McCreary, Bruce McNevin, Stephen McQueen, Meg Michalska, Bethmarie Milev, Roumen Minnes, Patricia Millson, Richard Mistry, Dalpatbhai Muirhead, James Munshi, Tariq Nadkarni, Pallavi Naeem, Farooq Nashed, Yousery H. Nesdole, Robert Ng, David O'Brien, Simon Ojiegbe, Chinyere Oliver, Dijana Oliver, R. Neil Ouellette-Kuntz, Helene Oyewumi, L. Kola Parmar, Varinderjit Patel, Archana Pearson, Heather J. Persad, Emmanuel Potopsingh, Desmond Prabhu, Vijaya

Prost, Eric Qian Lee, Ivy HP Racicovschi, Daria Reddy, Srini Reshetukha, Taras Rivera, Margo Roberge, Johanne Roberts, Nasreen Robinson, Michael Rosenzweig, Eleanor Rowe, Robert Sagi, Eiyhoo Sai, Obodai Scott, Duncan Seitz, Dallas Sethna, Rustom Sims, Peter J. Singh, Amarendra Smith, Robert Soares, Claudio Sorial Ihab Southmayd, Steve E. Stakheiko, Antonina Stevenson, Cameron Stuart, Heather Teitelbaum, Louise Tessier, Pierre Ticoll, Brian van Zyl, Louis T. Varley, Kevin Vazquez, Gustavo Wallani, Zulfikarali Waller, Katherine Wenglesky, Rose Wijeratne, Nishardi Woogh, Carolyn Yankova, Sylvia

awards/honours

Bajaj N	Clinical Excellence Award – Queen's Department of Psychiatry.
Cabrera C	Distinguished Preceptor – The Queen's Department of Family Medicine Residency Program.
Duffy A	2012-2016 Campus Alberta Innovates Program Research Chair Award.
Jokic R	Exemplary Service to the Department of Psychiatry Award.
Jokic R	Fellow of the Canadian Psychiatric Association Award.
Khan M	President Pakistan Psychiatric Society.
Mazhar M	Awarded Fellowship of American Society of Addiction Medicine (FASAM).
Milev R	The Journal of ECT, Best Paper Award, 2016. Delivery of ECT in Canada: A First National Survey Report on Usage, Treatment Practice and Facilities, Vol 31(2).
Roberts N	Rexall Foundation award of \$27,000 for dedicated Telepsychiatry suite.
Soares C	Ontario Research Fund – Research Excellence (ORF-RE round 8) Co-Principal Investigator \$1,000,000.00 Mobile Health Technologies in Depression Co-Principal Investigator.
Vazquez G	Most Frequent Reviewers Award. The International Journal of Neuropsychopharmacology. Oxford University Press.











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