DIVISION OF ADULT PSYCHIATRY AND HEALTH SYSTEMS

General Psychiatry

<table>
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<tr>
<th>Code</th>
<th>Title</th>
<th>Contact Info</th>
<th>Description</th>
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| GENP-CE-01 | Acute Inpatient Care and Psychiatric Emergency Service                | Inquiries: (416)864-6060 ext. 3082 Supervisor(s): Drs. K. Balderson Place: St. Michael’s Hospital Time: Flexible No. of Residents: 3 | **Acute Care:** St. Michael’s Mental Health Service has a 33 bed psychiatric inpatient unit and includes a 6 bed Acute Care Unit. The ward is divided into three teams, each with a staff psychiatrist, nurses, social workers, O.T.’s and medical students. Residents have the opportunity to participate in the assessment and treatment of patients with acute psychiatric disorders, psychiatric emergencies, and neuropsychiatric, addiction and alcohol related problems. Close links are maintained with the Crisis Intervention Team service at St. Michael’s Hospital. The position offers the opportunity to assume a leadership role in undertaking inpatient management, coordinating multidisciplinary teaching and learning team management skills.  
**General Psychiatry / Ambulatory Care:** The Ambulatory Care Service at St. Michael’s Hospital provides a broad range of services aimed at meeting the complex needs of the South East Toronto inner-city population. There is a particular focus on: a) providing urgent ambulatory care for patients being discharged from acute care (e.g. the ED or inpatient unit), working in a team based model with nursing, social work/suicide specialist, and case managers, and; b) developing innovative models of collaborative care with the primary care providers and agencies/hostels in our community. These experiences offer thorough preparation for the future role of a general psychiatrist in our rapidly evolving health care system. There will be two main areas of focus for residents to choose in this elective:  
   a) Urgent Care Program: (supervisors: Dr. Mara Goldstein, Dr. Arielle Salama, Dr. Ilana Shawn, Dr. Nadiya Sunderji) This elective will provide residents an experience of an inter-professional team-based approach to assessing and managing high risk outpatients, providing sophisticated and flexible therapeutic interventions to individuals in crisis, and strengthening transitions from acute to community settings. Residents will participate in a weekly peer supervision meeting with experienced psychiatrists and clinicians. Interested residents will also have opportunities in quality improvement, program evaluation, or health services research.  
   b) Homelessness: (supervisors: Dr. Vicky Stergiopoulos, Dr. John Longley) This elective will provide a community psychiatry experience with an emphasis on homelessness and hospital-community integration. Traditional health care systems are not designed to serve the homeless mentally ill, and emphasis throughout this rotation will be placed in addressing resident education gaps in health policy, mental health delivery systems, and principles of quality improvement in health care, as they apply to this population. The population served will be homeless or marginally housed adults with severe and persistent mental illness, often complicated by co-morbid substance use disorders. They will be seen in inner city shelters/drop-ins. Residents will work with the supervising psychiatrist and other mental health professionals in the community to develop comprehensive treatment plans, addressing the determinants of health through partnerships/links with community agencies. They will have an opportunity to refine their interviewing, diagnostic and treatment skills, and, if desired, participate in program planning and evaluation. There will be an opportunity to participate in research activities.  
   c) Psychiatric Emergency Service: Emergency Psychiatry is a particular strength at St. Michael’s Hospital (supervisors: Dr. Ilana Shawn, Dr. Chris Willer, Dr. Arielle Salama, and Dr. Ken Balderson). A psychiatric emergency is any disturbance in thoughts, feelings, or actions, for which immediate therapeutic intervention is necessary. For a variety of reasons – such as the increased appreciation of the role of medical disease to altered mental status, the epidemic of alcohol |
 dependence and other substance-related disorders, and the increasing reliance of the serious and persistently mentally ill on psychiatric emergency services for primary levels of care and treatment – the number of psychiatric emergency patients is on the rise. Along with the increased numbers of patients being seen, the complexity and service requirements of these patients have increased considerably. The deinstitutionalization movements of the recent past, along with growing concerns over inappropriate, costly hospitalizations, have accentuated the role of emergency psychiatrists and ensured the continued importance of the psychiatric emergency service.

This position will offer training in the following:

a) emergency and crisis management of adult psychiatric disorders, including individuals with suicidal thoughts and behaviours;
b) management of selected outpatients with complex acute mental health care needs, using up-to-date treatment approaches;
c) working as a consultant to a joint police/mental health service mobile crisis intervention team;
d) participation and leadership on a multidisciplinary team;
e) working as a consultant to community agencies;
f) supervision of medical students and junior residents assessing patients presenting to the crisis team; and
g) participation in the educational/research experiences as part of the Arthur Sommer Rotenberg Chair in Suicide Studies.

GENP-CE-03 Assertive Community Treatment (Mental Health Systems and Schizophrenia Programs) Inquiries: Dr. S. Law, (416) 864-3095 Supervisor(s): Dr. A. Nakhost, Dr. A. Nakhost, M. Beder Place: St. Michael's Hospital Time: Negotiable No. of Residents: Negotiable

This elective will emphasize the development of leadership skills relevant to working in the assertive community treatment model. It will provide a unique opportunity to be part of a comprehensive program, which provides continuity of care to individuals with serious and persistent mental illnesses, many of whom also have concurrent substance use disorders.

The Ontario Ministry of Health has designated ACT treatment as a priority model of care for this patient population. Royal College also prioritizes ACT training. There are currently more than 50 new ACT teams in the province. This elective will emphasize the development of well-rounded CanMEDs skills relevant to working in community psychiatry, serving seriously mentally patients.

The elective is based at an Assertive Community Treatment (ACT) team - the FOCUS team, an innovative ACT team that combines case management and ACT intensity services in a seamless way. The resident will work with the FOCUS team, an innovative flexible assertive community treatment team affiliated with the St. Michael’s Mental Health Service, specializing in complex clients with mental illness, substance use, legal issues, homelessness, and medical comorbidity. The resident will develop expertise in multiple areas salient to community psychiatry, including chronic care, schizophrenia, mood, addictions, and comorbid personality disorders. In addition, knowledge in evidence-based psychosocial work will be developed, including psychiatric recovery, rehabilitation, club house model and supported work models. Developing advocacy skills are central to this selective, in serving a vulnerable and underprivileged, socially disadvantaged, ethnically diverse population. Communicator, collaborator, manager, and professional skills are also exceptionally focused in this selective as residents function as a leader, team member, and community agent in a 15+ member multi-disciplinary team that includes nurses, social workers, peer support workers, occupational therapists, and other allied professional. Community collaborators include health clinics, GPs, police, shelters, and group homes, etc. As a scholar, FOCUS will be able to provide a unique opportunity to develop an individualized research project or to join one of the already established projects in the community psychiatry program.

GENP-CE- CME Course Planning Inquiries: email sagar.parikh@uhn.on.ca

The Department of Psychiatry is the largest academic provider of CME courses and events in Canada,
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<tr>
<th>GENP-CE-04</th>
<th>and Educational Research Elective</th>
<th>Supervisor(s): Dr. Sagar V. Parikh</th>
<th>Place: Toronto Western Hospital / CAMH</th>
<th>Time: ½ day per week</th>
<th>No. of Residents: 1 per six month block</th>
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<tbody>
<tr>
<td>GENP-CE-05</td>
<td>Collaborative Psychiatric Care of Medically Complex Patients: The East Toronto Hepatitis C Program</td>
<td>Inquiries: Dr. Sanjeev Sockalingam (416-340-3762)</td>
<td><a href="mailto:Sanjeev.sockalingam@uhn.ca">Sanjeev.sockalingam@uhn.ca</a></td>
<td>Supervisor: Dr. Sanjeev Sockalingam</td>
<td>Place: East Toronto Hepatitis C Program Sherbourne Health Centre, Regent Park Community Health Centre, South Riverdale Community Health Centre</td>
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<tr>
<td>GENP-CE-06</td>
<td>Crisis Intervention</td>
<td>Inquiries: Dr. Slonim, (416) 586-4800 ext. 5353</td>
<td>Supervisor(s): Drs. R. Slonim/ C. Ulic/ Virginia Wesson</td>
<td>Place: Mount Sinai Hospital, Suite 931</td>
<td>Time: Monday or Wednesday afternoon or T.B.A.</td>
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<tr>
<td>GENP-CE-07</td>
<td>Emergency Psychiatry</td>
<td>Inquiries: Dr. B. Poynter, (416)535-8501 (ext. 30403)</td>
<td><a href="mailto:Brittanypoynter@camh.ca">Brittanypoynter@camh.ca</a></td>
<td>Supervisor(s): Dr. B. Poynter/ Dr. D. Bhide/Dr. P. Kurydyak/Dr. A. Lustig/Dr. D. Rodie/Dr. J. Zaheer/ Dr. R. Ptashny/Dr. I. Vukin /Dr. S. Sokolov</td>
<td>Place: Emergency Crisis Service, CAMH: College Street</td>
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<tr>
<td>GENP-CE-08</td>
<td>Emergency Psychiatry</td>
<td>Inquiries: Dr. J. Lofch y (416) 603-5500</td>
<td><a href="mailto:jodi.lofchy@uhn.ca">jodi.lofchy@uhn.ca</a></td>
<td>Supervisor(s): Dr. J. Lofchy</td>
<td>Place: Psychiatric Emergency Services Unit,</td>
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<td>Course Code</td>
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<td>GENP-CE-9</td>
<td>General and Adolescent Psychiatry at a Community Hospital</td>
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<td>Dr. Hoffman, (416) 756-6968</td>
<td>North York General Hospital</td>
<td>½ to 1 day - flexible</td>
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<tr>
<td>GENP-CE-10</td>
<td>General and Community Psychiatry</td>
<td>Dr. L. Reznik, (416) 480-6133</td>
<td>Drs. L. Reznek, L. Gerber</td>
<td>Sunnybrook Health Science Centre</td>
<td>½ day per week/negotiable</td>
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<tr>
<td>GENP-CE-11</td>
<td>HIV Psychiatry</td>
<td>Dr. A. Carvalhal, (416) 864-6060 ext. 6337</td>
<td>Dr. A. Carvalhal and Dr. J. Maggi</td>
<td>St. Michael's Hospital</td>
<td>Negotiable</td>
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<tr>
<td>GENP-CE-12</td>
<td>HIV Psychiatry Research</td>
<td>Dr. A. Carvalhal, (416)864-6060 ext. 6337</td>
<td>Dr. A. Carvalhal</td>
<td>St. Michael's Hospital</td>
<td>one year</td>
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<tr>
<td>GENP-CE-13</td>
<td>Home Treatment of First Episode Psychosis</td>
<td>Ofer Agid, (416) 535-8501 ext. 6412</td>
<td>Ofer Agid, MD</td>
<td>CAMH – Clarke Site</td>
<td>Two to three months</td>
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<tr>
<td>GENP-CE-14</td>
<td>Introduction to Clinical Trials</td>
<td>email <a href="mailto:sagar.parikh@uhn.on.ca">sagar.parikh@uhn.on.ca</a></td>
<td>Dr. Sagar V. Parikh</td>
<td>Toronto Western Hospital</td>
<td>½ day per week</td>
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The resident will learn more about psychiatric diagnoses and the management of the acutely ill patient. The resident will be able to refine his/her interviewing and presentation skills in emergency psychiatry with supervision not normally available during the usual on-call situations.

The resident will be able to tailor an individual educational program to meet his/her specific needs. The department of psychiatry is situated in a medium size community hospital and has a 35 bed inpatient unit, a Psychiatric Day Hospital, a Psychiatric Day Treatment Program, an Out-patient Program, an alcohol and drug abuse program, a geriatric program and a child and adolescent service. Residents will work on one or more multi-disciplinary services and be assigned the best clinical teachers to meet the educational needs of the resident.

This elective promotes experience in the management of severely mentally ill patients. The elective resident will encounter patients in outpatient, inpatient and emergency settings. Community outreach includes liaison and field visits with our multidisciplinary Mobile Crisis Team.

Develops skills in the assessment and management of persons with HIV/AIDS, including management of the major neuropsychiatric and mood disorders associated with HIV disease, and development of psychiatric management skills with a diverse range of patients including gay men, persons from inner city communities, persons with concurrent disorders, new immigrants and refugees and women from endemic countries. Experience may be gained in any or all of these sites: 1) Ambulatory HIV Psychiatry Clinic 2) consultation to the Positive Care Centre (ambulatory HIV medical clinic) 3) Casey House Residential Hospice: 4) Community HIV Psychiatry: community liaison psychiatry with the Casey House Community Outreach Program.

The resident will be encouraged to develop a project in one of the priority areas of the program. These include international outreach, women and HIV and community based care. The resident will be encouraged to participate in ongoing currently funded projects. A strong expertise in research methodology exists in the program and will be available to residents interested in developing their own projects. Internal peer review is available for grant development and article submission. Examples of current projects include: emotional and social support needs of women with HIV, psychotropic use in HIV+ patients in a palliative care setting, assessment of learning needs of psychiatrists working in Sub Saharan Africa in HIV Psychiatry and assessment of integrated treatment of concurrent disorders in HIV+ and at risk patients.

Residents will serve as an intrinsic part of the Home Intervention Program for Psychosis (HIP) team. This team provides rapid home-based assessment and treatment of young patients experiencing their first episode of psychosis. Residents will gain experience working on a mobile multidisciplinary treatment team. Residents will gain expertise in the assessment, engagement and treatment of patients and their families who are experiencing their first episode of psychosis.

This elective is to introduce residents to all aspects of clinical trials in psychiatry. The resident will be expected to review an introductory book on clinical trials, become familiar with several existing clinical trials (both psychosocial and pharmacologic studies), potentially assist in assessing patients in a clinical trial, and participate in whatever ways are appropriate in existing clinical trials (looking at design, data monitoring, ethical, or analysis issues). Linkages with other investigators conducting clinical trials at UHN is also possible.
<table>
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<tr>
<th>GENP-CE-22</th>
<th>Community Hospital General Psychiatry – Inpatient and/or Outpatient selective</th>
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<tbody>
<tr>
<td><strong>Inquiries:</strong></td>
<td>Dr. Karen Shin, 416-495-2400 x6874; 6874; <a href="mailto:kshin@tsh.to">kshin@tsh.to</a> or Dr. Stephen Barsky, 416-495-2400 x2563; <a href="mailto:sbarsky@tsh.to">sbarsky@tsh.to</a></td>
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<tr>
<td><strong>Place:</strong></td>
<td>The Scarborough Hospital</td>
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<tr>
<td><strong>Supervisors:</strong></td>
<td>Dr. Karen Shin (other clinical supervisors are available in outpatient clinics – contact for information)</td>
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<tr>
<td><strong>Time:</strong></td>
<td>Part-Time and Full-Time selective times are negotiable based on same clinical opportunities</td>
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<td><strong>No. of Residents:</strong></td>
<td>Flexible</td>
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**ELECTIVE DESCRIPTION (must be in CanMEDS format)**

- **Medical Expert / Clinical Decision Maker**
  
  Practise medicine within their defined clinical scope of practice and expertise

**Knowledge:**

1. Understand etiology and multi-factorial contributors of psychiatric illness
2. Continue to develop knowledge of psychiatric symptoms and diagnoses
3. Focus is on general adult psychiatry, in particular unipolar and bipolar mood disorders, psychosis, dementia and substance use disorders
4. Utilize up-to-date medication treatment according to current guidelines and literature
5. Learn evidence-based psychological interventions for psychiatric illness
6. Practice appropriate medical care of psychiatric patients with appropriate investigations and bloodwork
7. Develop greater familiarity with Mental Health Act, Substitute Decisions Act and Health Care Consent Act through patient care and opportunities for Consent and Capacity Board participation
8. Develop an understanding of practicing psychiatry in a community setting
9. Become familiar with community resources and supports

**Clinical Skills:**

1. Continue to develop skills in consultative assessment, diagnosis and treatment
2. Develop time management skills in a hospital-based setting
3. Opportunities to develop and lead patient groups and education sessions
4. Manage family meetings as part of patient care in either an inpatient or outpatient setting
5. Ongoing development of skills of empathic communication with patients and their families
6. Perform risk assessment of patients in an acute hospital setting
7. Assess patient emergencies in various clinical settings (inpatients, outpatients, emergency room)
8. Maintain professional and appropriate charting and management of patient records
9. Gain experience in preparing and presenting at Consent and Capacity Board hearings

- **Communicator**
  
  Establish professional therapeutic relationships with patients and their families

1. Develop skills in psychoeducation for patients and families
2. Continue to improve management of therapeutic alliance with patients, including therapeutic ruptures and managing patient and family anger and disappointment in the doctor-patient relationship
3. Learn skills in de-escalation in an acute hospital setting – inpatient and emergency departments
4. Opportunities to participate in group-based programs for patients and families

- **Collaborator**
  
  Work effectively with other physicians and other health care professionals

1. Work amongst psychiatric colleagues and medical colleagues in a hospital setting, utilizing collaboration for second opinion consultation and medical consultations
2) Opportunities to perform consult liaison consultation for medical ward patients and medical clinic patients in oncology and chronic, complex disease (nephrology, cardiac and diabetes)
3) Develop collaborative and leadership skills in a hospital team-based environment for discussions regarding patient care – interdisciplinary colleagues include nursing staff, social workers, occupational therapist and mental health therapists
4) Collaborate with the mental health crisis team in managing patients in an emergency hospital setting

- **Manager (Leader)**
  - Contribute to the improvement of health care delivery in health care teams, organizations, and systems
  1) Opportunities to develop programs such as psychoeducational or psychotherapy groups in an inpatient or outpatient setting
  2) Opportunities to provide interdisciplinary education to staff
  3) Become better able to navigate resource delivery in a community hospital setting with connections to community mental health clinics and shared care resources
  4) Perform tasks in team leadership for organizing patient care in inpatient and outpatient settings

- **Professional**
  - Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards
  1) Continue to develop into professional role of psychiatrist with responsibilities in patient care, interdisciplinary team participation and leadership roles
  2) As a senior selective, aim to transition more to independent practice while recognizing limitations to abilities and utilizing supervision

### TENTATIVE SCHEDULE

Please provide a **TENTATIVE SCHEDULE** for your proposed elective rotation (note: this schedule does not need to be finalized and does not need to include details of all psychotherapy supervision, apart from with your primary +/- secondary supervisors).

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<tr>
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<tr>
<td>MORNING</td>
<td>Inpatient Patient Care</td>
<td>Inpatient Patient Care AND/OR Emergency Room Consultation</td>
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<td>9-1pm</td>
<td>Consultation and Ongoing Patient Care AND/OR Consult Liaison Group Programming Emergency Room Consultation</td>
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<td>9-1pm</td>
<td>Outpatient Consultation and Ongoing Patient Care AND/OR Consult Liaison Group Programming Emergency Room Consultation</td>
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<td>9-1pm</td>
<td>Outpatient Consultation and Ongoing Patient Care AND/OR Consult Liaison Group Programming Emergency Room Consultation</td>
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Emergency Room Consultation

9-1pm

Monthly Grand Rounds (11am)

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<td>9-1pm</td>
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Emergency Room Consultation

9-1pm

Monthly Grand Rounds (11am)
| GENP-CE-23 | FYPP: Focus on Youth Psychosis Prevention Clinic | Inquiries: Dr. Romina Mizrahi, fyppclinic@camh.ca ; 416 535-8501 x32517  
Place: 252 College St, Toronto, ON M5T 1R8 | - The FYPP Clinic is dedicated to the early identification and treatment of people who are at risk of developing psychosis.  
- Accept people who are 16-35 years old  
- Tries to identify and treat early signs of psychosis as early as possible  
- The people we help are young people who started to become distressed by changes in their thoughts, perceptions, and feelings. |
| GENP-CE-24 | Mental Health Assessment of Adult Transgender Individuals | Inquiries: Dr. Christopher McIntosh  
416-535-8501 x6537, chris_mcintosh@camh.net  
Place: Centre for Addiction and Mental Health  
Time: Tuesdays or Fridays  
No. of Residents: 2 | In this elective, residents will participate in mental health assessments of transgender individuals seeking assistance from the Gender Identity Clinic at the Centre for Addiction and Mental Health. The Clinic is currently mandated by the Ontario Ministry of Health to assess all transgender individuals seeking sex reassignment surgery under the Ontario Health Insurance Plan. Assessments are done in-person and through telepsychiatry. This elective will be an opportunity for residents to:  
1) Increase their cultural competency related to transgender individuals.  
2) Learn about international standards of care for medical, surgical and mental health interventions for transgender individuals.  
3) Learn about gender-related psychiatric diagnoses, and associated controversies.  
4) Gain experience in either diagnosing or ruling out a wide range of mental health concerns.  
5) Collaborate with colleagues from the clinical psychology field.  
6) Follow a transgender individual in short-term psychotherapy.  
This elective may be of particular interest for senior residents wishing to consolidate their experience doing general psychiatric assessments, while also learning something new.  
Keywords: transgender, gender identity, LGBT, mental health assessment, cultural competency, telepsychiatry, diagnosis, general psychiatry, psychotherapy |
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<tr>
<th>GENP-CE-25</th>
<th>STACER Elective</th>
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| **Contact:** Dr George Voineskos  
**Tel:** 416-979-6804  
**Email contact:** george.voineskos@camh.ca  
**Site:** General Psychiatry, CAMH  
250 College Street, 11th Floor  
**Time:** One afternoon a week, July-December or January to June |
| I have been a primary supervisor of Senior Residents in the CAMH general psychiatry outpatient program, CATS, for more than 15 years. My clinical work and teaching are characterized by a thorough assessment through a skilled interview and the use of rapport and empathy. A principal interest and skill I have as a supervisor of Residents in general psychiatric assessment is to help Residents with time management and with finding several alternative ways of interviewing so that they can make a complete psychiatric assessment of the person maximizing the time available, the 50 minute interview, and excel in the STACER exam. In the past five years, I have been teaching, with Dr. Voore, a STACER course for senior residents, and a PDM course, which have given me the opportunity to learn how to assist Residents beyond the STACER at this stage of their career. At the Department of Psychiatry, I am a regular STACER examiner and a coach. I have been elected Distinguished Life Fellow of the American Psychiatric Association, and Distinguished Fellow of the Canadian Psychiatric Association which are honours conferred for services offered to the profession including teaching. At CAMH, I was voted “The Best Postgraduate Teacher” by the Residents in 2008. I was trained in Psychotherapy in the Royal Edinburgh Psychotherapy Training Scheme, which has provided me the knowledge and skills to teach Residents the importance of the therapeutic alliance and ways to utilize it in the psychiatric interview and assessment. I have also a keen interest in psychopharmacotherapy, and published in this area with Dr. B. Pollock and Dr. G. Remington. |

### ELECTIVE DESCRIPTION (must be in CanMEDS format)

- **Medical Expert / Clinical Decision Maker**  
*Practise medicine within their defined clinical scope of practice and expertise*  
The Resident will learn interviewing techniques for the DSM-5 assessment and diagnoses of patients referred by their family physician. The Resident will interview one patient a week under the supervision of a senior staff psychiatrist and will discuss with him the phenomenology, psychodynamic aspects, and the DSM-5 diagnosis and management of the patient.

- **Communicator**  
*Establish professional therapeutic relationships with patients and their families*  
The elective will emphasize the development of clinical skills and communication with the patients and their families. Elements of family dynamics and therapy.

- **Collaborator**  
*Work effectively with other physicians and other health care professionals*  
The resident will liaise with the family physician of referral, the other members of the multidisciplinary team, and with community agencies.

- **Manager (Leader)**  
*Contribute to the improvement of health care delivery in health care teams, organizations, and systems*  
The Resident will partake in the health care of the patient with health care teams and organizations and will become Knowledgeable and skilled in overall psychosocial and health.
- **Health Advocate**
  Respond to the individual patient’s complex health needs by advocating with the patient within and beyond the clinical environment
  Respond to the needs of a community or population they serve by advocating with them for system-level change
  The Resident will respond effectively to the patient’s overall health care needs in the clinic and in his ecological group, and will advocate with the ecological group the system-level modifications required.

- **Scholar**
  Engage in the continuous enhancement of their professional activities through ongoing learning
  The Resident will be provided with up-to-date psychosocial and pharmacological literature pertinent to the patients seen, assessed and managed, and which will be discussed with the supervisor. The resident will also attend psychiatric seminars held in the service regularly.

- **Professional**
  Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards
  The Resident will discuss best practices and ethics as developed by the CPSO, the Royal College, and the CMPA.

### TENTATIVE SCHEDULE

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<td>Outpatient follow-up</td>
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<td>GENP-CE-26</td>
<td>PDM Elective</td>
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<tr>
<td>Contacts: Dr George Voineskos and Dr George Foussias</td>
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<tr>
<td>Place: Room number 845, 250 College Street.</td>
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<td>No of Residents: All PGY5 Residents</td>
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<td>Frequency: Two sessions of two hours each, one on April 22, 2015 and the second on May 6 2015.</td>
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<tr>
<td>hours</td>
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<td>Patient interviewing, Assessment, and Discussion with the Supervisor.</td>
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<td>15:00-16:30 hours</td>
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<td>Psychotherapy, at least three modalities, in discussion and supervision with the Supervising psychiatrist.</td>
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The learning objectives are: To enhance the participants knowledge and skills on PDMs

The Objective is: To assist the participants in their performance in PDMs at the Royal College Exam.

| GENP-CE-27 | Integrative Episodes of Care Elective | Offered to PGY3, 4 and 5 residents | A. Educational goals:  
• Learn advanced interviewing techniques  
• Conduct episodes of care for various psychiatric conditions  
• Develop integrative knowledge and skill-set  
• Learn psychiatric practice management for a varied general psychiatric outpatient practice incorporating acute care  
B. Consists of:  
• Weekly, half-day elective for 6-12 months  
• Wednesday afternoons, 1:00-5:30 pm at CAMH College site  
• One observed consultation per week  
• Supervised episodes of care of up to 12 sessions, addressing a salient presenting clinical problem, aiming to provide acute outpatient treatment experiences across a range of diagnoses  
• Assessments and treatments informed by an integrative perspective, incorporating psychopharmacologic and diverse psychotherapeutic techniques as indicated  
• Select, relevant literature readings  
• Discussions on general psychiatric practice management and career development  
• Open to residents in their PGY-3 to PGY-5 years  
• All clinical work supervised by Dr. Greben  

| GENP-CE-28 | Emergency Psychiatry at Brampton Civic Hospital | An elective in Emergency Psychiatry at Brampton Civic Hospital will provide interested residents with exposure to large volumes of ED psychiatric consultations in adults and children in one of the busiest hospitals in the province. Following standardized protocols determining medical stability, patients are assessed in an 8 bed Mental Health Emergency Services Unit (MHESU) and reviewed in morning inter-professional rounds attended by nursing and crisis workers, outpatient therapists, an ED child and youth worker, CMHA community partners and two emergency psychiatrists. Residents will gain knowledge in large community hospitals’ Mental Health and Addictions systems of care across all age groups in a diverse multi-cultural community. TelePsychiatry consultation support to a non-schedule 1 hospital ED is also available. This rotation will be of particular interest to residents interested in acute care general hospital psychiatric services.  

| GENP-CE-29 | Transitional Youth Campus Mental Health | This elective is an outpatient elective focussed on transitional youth, ages 17 to 30, with a campus mental health focus. Residents will have the opportunity to participate in new assessments, including urgent assessments if interested. Residents will also be able to follow a select number of patients of the course of their electives. Opportunities for learning include shared care within the family health team, trauma-focussed assessments and care and interdisciplinary team work around transitional youth. Specific issues related to the campus environment and the intersection of mental health challenges and university life will be covered.  

**Health Systems**
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<th>Description</th>
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| HLTHS-CE-02 | Dual Diagnosis: Psychiatry of the Developmental Disabilities       | **Inquiries**: Dr. T. Gofine, (905)-430-4055, ext 6641; **gofinet@ontarioshores.ca**  
**Supervisor(s)**: Dr. T. Gofine  
**Place**: Ontario Shores  
**Time**: Negotiable  
**No. of Residents**: Negotiable | The Dual Diagnosis Service (DDS) at Ontario Shores Centre for Mental Health Sciences is one of the largest dual diagnosis services in Canada. The interested resident through an elective experience can gain expertise in this fascinating subspecialty, expertise that is in demand locally, nationally and internationally. Few psychiatrists realize that the incidence of schizophrenia in the intellectually disabled, for instance, is estimated to be three times that of the general population, or that anxiety disorders are estimated to be found in 75% of the mildly intellectually disabled. The challenge of discerning psychiatric symptoms within the severely disabled, or distinguishing autistic spectrum disorder from schizophrenia can be one of the most exciting clinical situations in contemporary psychiatry. The treatment philosophy of the service is based on the primary importance of crafting a diagnostic formulation that considers biologic, psychodynamic and social factors with detailed accuracy so that treatment plans can be rational and effective. Less common syndromes that have disordered behaviour, such as Smith-Magenis syndrome fall within the dual diagnosis population and are seen in both the outpatient and inpatient components of the service. The psychiatric assessment of the dually diagnosed includes clarifying at times complex medical issues; investigating the root cause of the disability from a clinical genetic point of view; and exploring developmental factors first seen in childhood and adolescence. The resident will have the opportunity to be directly involved in the assessment of patients via outpatient consultation and in the treatment of inpatients on the dedicated inpatient unit. Opportunities to be with patients in the community can be enlisted. The treatment team is multidisciplinary and a model of inter professional practice is followed; as a result, opportunities to learn the how the allied professions integrate into psychiatric care will be first hand. This elective will enhance the training of a resident following a variety of care interests, from child and adolescent psychiatry (what is the natural course of autism in the adult?) to general psychiatry how does bipolar disorder present in the deaf intellectually disabled individual?) to geriatrics (what are the needs of the ageing person with mild intellectual disability and chronic health issues?). The elective can be tailored for any duration. Academic interest through readings and participation in rounds and interest in a research project, would be supported. As well, blending an elective with a related clinical area within Ontario Shores such as adolescence or forensic would certainly be open for discussion.  
**ELECTIVE DESCRIPTION (must be in CanMEDS format)**  
- **Medical Expert / Clinical Decision Maker**  
  Practise medicine within their defined clinical scope of practice and expertise  
  Provide psychiatric consultation and treatment in a regional hospital setting at the junior or senior resident level. Practice setting will depend upon residents identified learning needs, including but not limited to: Emergency psychiatric crisis unit; outpatient crisis clinic; adult or child & adolescent inpatient psychiatry; general adult outpatient psychiatry; outpatient and/or community-based geriatric psychiatry; first episode psychosis; schizophrenia clinic; |
- **Communicator**  
  *Establish professional therapeutic relationships with patients and their families*  
  Provide psychoeducation to psychiatric patients and their families. Opportunity to participate in bi-weekly Family Education and Support groups, psychoeducational and therapeutic groups. These include: Anxiety Management; Changeways Depression; Life Goals Program (Bipolar Group); Emotional Regulation and Skills groups (DBT-informed); Mindfulness-Based Stress Reduction; daily Crisis Group.

- **Collaborator**  
  *Work effectively with other physicians and other health care professionals*  
  Liaison with physicians and allied health professionals towards the provision of inter- and multidisciplinary patient-centered care. Opportunity to participate in shared care model via direct and telephone consultation and education. Liaison and education with family medicine residents.

- **Manager (Leader)**  
  *Contribute to the improvement of health care delivery in health care teams, organizations, and systems*  
  Opportunity to evaluate and guide quality systems improvement in the delivery of psychiatric care across settings. Participate in Quality Improvement rounds.

- **Health Advocate**  
  *Respond to the individual patient’s complex health needs by advocating with the patient within and beyond the clinical environment. Respond to the needs of a community or population they serve by advocating with them for system-level change*  
  Engagement and liaison with community health providers. Examples would include the CMHA mobile crisis team and case managers; addictions services; Children’s Aid. Participate in complex clinical case conferences involving community partners.

- **Scholar**  
  *Engage in the continuous enhancement of their professional activities through ongoing learning*  
  Develop learning goals at start of rotation for regular review. Critical appraisal of literature guiding clinical management. Participate in weekly education rounds.

- **Professional**  
  *Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards*  
  In a general hospital setting, demonstrate strong professional and ethical standards. Opportunity to educate health care professionals and allied staff, serving as role models (and combatting stigma) in the care of individuals with mental illness. Opportunity to explore countertransference feelings in clinical management.
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<th>HLTHS-CE-04</th>
<th>Day Treatment Program</th>
<th>Contact: Andrea Sadler, 416 323-6047, <a href="mailto:andrea.sadler@wchospital.ca">andrea.sadler@wchospital.ca</a>, Women’s College Hospital Supervisors: Dr. Vivian Sapirman</th>
<th>Time: 1-3 half days on Tuesdays, Wednesdays, Thursdays</th>
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**ELECTIVE DESCRIPTION (must be in CanMEDS format)**

- **Medical Expert / Clinical Decision Maker**
  Practise medicine within their defined clinical scope of practice and expertise
  - Resident will have the opportunity to learn and practice the framework of Acceptance Commitment Therapy used in a group setting of clients struggling to manage their persistent symptoms of depression and/or anxiety.
  - Resident will develop expertise to engage clients in setting therapeutic goals that reflect their individual values and abilities.
  - Resident will learn and teach strategies related to managing stress and anxiety more effectively e.g. Progressive Muscle Relaxation, Breathing techniques, Mindfulness Strategies etc.

- **Communicator**
  Establish professional therapeutic relationships with patients and their families
  - Resident will build appropriate therapeutic relationships in a group setting of 10-12 clients.
  - Resident will communicate with clients in providing accurate information in psycho educational groups.
  - Resident will effectively providing support and reflection for clients in helping them apply learned information to their own situation.
  - Resident will communicate effectively with co facilitators to collaborate, ensuring optimal care.

- **Collaborator**
  Work effectively with other physicians and other health care professionals
  - Resident will collaborate on an interprofessional team (Occupational Therapist, Registered Nurse, Psychiatrists) to plan and execute effective group therapy experiences and optimize client’s progress, during daily debriefs and team meetings.
  - Resident will collaborate with referral sources to identify and assess suitability for potential Day Treatment Program candidates.

- **Manager (Leader)**
  Contribute to the improvement of health care delivery in health care teams, organizations, and systems
  - Resident will demonstrate initiative and independence in managing a learning environment that includes developing group content, learning new therapy frameworks and seeking supervision from health care providers.
  - Resident will be able to identify potential suitable clients for DTP and how the program fits into our existing Mental Health Program.

- **Health Advocate**
  Respond to the individual patient’s complex health needs by advocating with the patient within and beyond the clinical environment
  Respond to the needs of a community or population they serve by advocating with them for system-level change
- Resident will learn and provide clients with appropriate community resources and/or follow-up plans as part of discharging clients from the program.

**Scholar**  
Engage in the continuous enhancement of their professional activities through ongoing learning  
- Resident will have an opportunity to attend weekly in Grand Rounds and Resident Seminars.
- Resident will have the opportunity to present at Mental Health Grand Rounds during their rotation.
- Residents will have the opportunity to read/discuss articles and other pertinent literature related to treatment modalities offered within the program.

**Professional**  
Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards  
- Resident will learn to engage in appropriate, suitable relationships with clients that reflect an ability to provide medical support in an ongoing daily treatment program.

**TENTATIVE SCHEDULE**

Please provide a TENTATIVE SCHEDULE for your proposed elective rotation (note: this schedule does not need to be finalized and does not need to include details of all psychotherapy supervision, apart from with your primary +/- secondary supervisors).

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<th>WEDNESDAY</th>
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<td><strong>MORNING</strong></td>
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** Resident may choose to attend one, two or all of the program days**