HOSPITAL OVERVIEW

The Department of Psychiatry at St Michael’s Hospital has a strong clinical and academic focus on meeting the needs of the inner city population. Areas of special concentration include General Adult Psychiatry and Health Systems, Suicide Studies, HIV Psychiatry, Health and Homelessness, and Geriatric Psychiatry. Clinical experiences are gained on: i) a 33 bed inpatient unit which includes a ten bed Acute Care Unit; ii) a busy Psychiatric Emergency Service, including a 3 bed Crisis Stabilization Unit and an Urgent Care Program; iii) a large community mental health service, including an urgent care program and a general assessment clinic and a well developed collaborative care program with the Family Health Teams; iv) a community outreach program including assertive community teams and specialized case management outreach services; v) a Consultation Liaison service that enjoys excellent working relationships with its medical and surgical colleagues with specialized geriatric psychiatry and HIV psychiatry services; and vi) a strong addictions program.

Excellence in educational experience is a high priority for both the department and the hospital and there is a strong emphasis on collaboration with community partners and outreach activities. Our staff has a strong record as excellent teachers, known for their accessibility and collegiality. There is a strong emphasis on evidence based practices aimed at improving the quality of our mental health care services with an important focus on issues of access and equity.

The hospital has a strong mandate to meet the needs of the inner city population. This means implementing systems that work for groups who tend to fall through the cracks in the health care system, including people with HIV and AIDS, people who are homeless or vulnerably housed, people with serious mental illness, women and children at risk, people with addictions, seniors in isolation, immigrants, and the Aboriginal community.

ACADEMIC ACTIVITIES:

Grand Rounds:

Weekly academic gathering of the mental health service are held on Fridays at noon. Residents have the opportunity to present grand rounds and receive training in developing scholarship and presentation skills from their grand rounds supervisor and the departmental lead for grand rounds.

Research Scholarship:

Health services research as it applies to the delivery of mental health care to vulnerable populations including; collaborative care, case management and assertive community treatment and the effectiveness and cost effectiveness of Housing First approaches for people who are homeless and have either serious or moderate mental health needs.
Suicide Studies: Etiology of suicide and suicidal behaviour; Interventions for individuals at risk for suicide; Service delivery and Access to care

HIV Psychiatry: Neurocognitive disorders in HIV; HIV and women; International outreach in HIV Psychiatry; Addictions and HIV

Geriatric Psychiatry: Determinants of cognitive reserve such as socioeconomic status & education; Delusions in dementia; Neuroimaging; driving in minor cognitive impairment.

Quality: Using quality measurement and improvement science to advance the delivery of care throughout our service

Seminars:

PGY2 inpatient rotation journal club

Psychotherapy seminar for junior residents focusing on clinical issues, countertransference and formulation

Interview course (in the planning stages)

Multidisciplinary rounds in HIV care

Psychopharmacology seminar delivered by our award winning pharmacist, Todd Koch

Chronic Care & Addictions Journal Club

Supervision of core rotations:

Balderson, Ken General Psychiatry (Inpatients), Emergency Psychiatry
Beder, Michaela Chronic Care (FOCUS), Inner City Mental Health
Bhalerao, Shree C-L Psychiatry
Brook, Shelley General Psychiatry (Inpatients)
Carvalhal, Adriana C-L Psychiatry, HIV Psychiatry, Research
Charlton, Katharine General Psychiatry (Inpatients)
Dang, Kien C-L Psychiatry
Fischer, Corinne Geriatric Psychiatry, Research (Geriatric Psychiatry)
Goldstein, Mara General Psychiatry (Outpatients)
Guimond, Tim Addictions
Hall, Elise C-L Psychiatry
Lamba, Wiplove Addictions
Langley, John Adolescent Psychiatry
Law, Samuel Community Psychiatry, Chronic Care, Cross-Cultural Psychiatry
Levy, Matt Community Psychiatry (Community Connections)
Maggi, Julie C-L Psychiatry (OBS-GYN & HIV Psychiatry), Research
McInerney, Shane General Psychiatry (Outpatients)
Nakhost, Arash Chronic Care (FOCUS), Research
Quastel, Adam Addictions
Robertson, David General Psychiatry (Inpatients)
Salama, Arielle Emergency Psychiatry, General Psychiatry (Outpatients)
Shawn, Ilana General Psychiatry (Outpatients), Emergency Psychiatry
Spivak, Harold General Psychiatry (Inpatients)
Stergiopoulos, Vicky Clinical & Research (homelessness & mental health, health systems)
Sunderji, Nadiya General Psychiatry (Outpatients), QI research
Willer, Chris Emergency Psychiatry, Child and Adolescent Psychiatry
**Psychotherapy Supervision:**

Psychodynamic Supervisors:

Tom Crocker  
Leo Murphy  
Jon Novick  
Doug Ramsay  
David Robertson  
Arielle Salama  
Karen Shin  
Harold Spivak

CBT Supervisors:

Katharine Charlton  
Matthew Levy  
Jon Novick  
Karen Shin  
Arielle Salama  
Chris Willer

IPT supervisors:

Elise Hall  
Arielle Salama  
Chris Willer

Group Supervisors

Yvonne Bergmans- group psychotherapy for patients with multiple attempts  
David Robertson- interpersonal group psychotherapy  
Chris Willer - group psychotherapy for patients with multiple attempts

**Opportunities for Teaching:**

SMH residents have the opportunity to teach medical students in a six week introductory course on Personality Disorders

SMH residents also have the opportunity to also teach medical students in the Arts and Science of Clinical Medicine (ASCM I and II) courses and the Portfolio course.
MANDATORY CORE ROTATIONS

General Hospital Psychiatry Rotations: PGY-II

**Supervisors:**
- **Inpatient:** Drs. K. Balderson, S. Brook, K. Charlton, D. Robertson and H. Spivak
- **Outpatient:** Drs. M. Goldstein, S. McInerney, A. Salama, I. Shawn and N. Sunderji

**Positions:** Eight one-year positions, **sequential** (ie. six months Inpatient and six months Outpatient)

**Description:** The rotation provides an experience in the diagnosis and treatment of a wide range of psychiatric disorders, with specific focus on the mental health care needs of the Inner-City population.

The **Inpatient** unit contains a ten bed Acute Care Unit, a four bed Intermediate Care Unit, and a nineteen bed general ward. Residents will develop skills in the rapid evaluation and initiation of treatment for patients with acute disorders, exacerbations of chronic illnesses, and co-morbid psychiatric and substance-related and/or complex medical conditions. The rotation offers an excellent opportunity to develop familiarity and expertise in aspects of the Mental Health Act and in psychopharmacology with our ward pharmacist who has been recognized for teaching excellence. The rotation is divided into 3 two-month blocks, providing opportunity to work with different supervisors. Residents work with a multidisciplinary team and will also learn about community resources. There is also an Inpatient Journal Club for residents and staff that meet once a month.

During **Outpatient** training residents see patients in the Ambulatory Care program, which encompasses: a) the Urgent Care Program that provides timely follow up of patients being discharged from inpatient or emergency department settings, b) the General Assessment Clinic that assesses and manages patients referred from the community (typically from their family physicians), and the Collaborative Care program that provides liaison/outreach into a variety of primary care and community settings. PGY-2 residents largely work in the Assessment Clinic, and additionally gain exposure to providing Urgent Care. Residents assess and manage patients with a diversity of psychopathology and varying socio-economic/cultural backgrounds, and develop skills in managing patient care transitions across levels of care/intensity. Direct participation in collaborative mental health care with family medicine residents is a unique feature of this rotation. Residents may also choose a selective experience in group psychotherapy, or collaborative care in primary care or community settings. Residents work with one primary supervisor over the six month rotation and have exposure to all four supervisors on a regular basis through the weekly assessment clinic. Assessment skills, diagnosis and case formulation are extensively reviewed in this clinic. Residents have a minimum of two directly observed interviews each week. On-going supervision focuses on the on-going management of patients as residents develop their integrative outpatient psychiatry skills.

Geriatric Psychiatry: PGY-III

**Supervisor:** Dr. C. Fischer

**Positions:** One six-month Core rotation in Geriatric Psychiatry

**Description:** The rotation will focus on assessment and management of complex psycho-geriatric cases. Residents will have an opportunity to assess patients at a weekly psycho-geriatric outpatient ambulatory clinic. These patients will have a broad range of psychiatric diagnoses and this experience will give the resident an opportunity to become comfortable with diagnostic and assessment issues in Geriatric Psychiatry. Residents will also have an opportunity to assess, follow and manage elderly patients with complex medical problems through the Medical Psychiatry service. This will provide the resident with experience in dealing with complex psychiatrically and medically ill elderly patients. There will be an opportunity for residents to assess elderly patients at the St. Michael’s Hospital Memory Disorders Clinic. This will help the resident develop skills in cognitive assessment. Finally, residents will be able to participate in
the Geriatric Mental Health Outreach program. This will help the resident develop skills in dealing with patients who have complex behavioural issues in Long Term Care.

**Academic Content:** In addition to ongoing supervision of clinical responsibilities, residents will have an opportunity to attend the divisional seminar series hosted by Mount Sinai Hospital. The focus of the seminar series will be to familiarize the resident with critical information relevant to Geriatric psychiatry. In addition, the resident will be invited to attend weekly Memory Clinic Rounds. Psychiatry Grand Rounds will be held on a weekly basis. Finally, there will be an opportunity for the resident to become involved in existing research projects.

**Consultation-Liaison Psychiatry: PGY- IV**

**Supervisors:** Drs. S. Bhalerao, K. Dang, J. Maggi and A. Carvalhal

**Positions:** Two six-month Core rotations in Consultation-Liaison Psychiatry

**Description:** The service sees about 70 new consultations a month in the inpatient units and 400 outpatients. The resident will work closely with a full-time nurse practitioner and increased emphasis has been placed on specialized consultation to individual medical and surgical ward; and integrated multidisciplinary clinics at St. Michael’s Hospital. Areas of specialty include HIV/AIDS, respirology, traumatic brain injury, cardiology, nephrology, ICU, endocrinology, obstetrics and gynecology, and oncology.

**Academic Content:** Residents are exposed to a broad range of patients for both consultation and follow-up in both inpatient and outpatient settings. Supervision is provided on all cases and titrated to the resident-supervisor contract to best meet the residents’ educational needs. One-on-one teaching on liaison services will include close supervision on medically complex cases and afford learning opportunities relevant to work within a specialized multidisciplinary team. There are research opportunities, and residents are also encouraged to develop their own personalized reading projects to further enhance their academic experience.

**Chronic Care Psychiatry—FOCUS Team: PGY-IV**

**Supervisors:** Drs. M. Beder, S. Law, M. Levy, and A. Nakhost

**Positions:** Two six-month mandatory core rotations in chronic care

**Description:** This rotation will provide an experience in community-based treatment of individuals with severe mental illness. The resident will work with the FOCUS team which is part of the overall community psychiatry program in the St. Michael’s Mental Health and Addictions Service. The FOCUS team provides multidisciplinary support to people living with severe mental illness and complex needs within the St. Michael’s Hospital catchment area. The team strives to provide client-centered, recovery-oriented care using evidence-based practices and the Assertive Community Treatment and Multidisciplinary ICM models. Each client has a psychiatrist as well as a primary case worker. This rotation will provide residents with the necessary skills and experience to be able to work effectively in these teams.

**Academic Content:** In addition to regular supervision from the primary supervisors the resident will have the option of supervision from other faculty members of the community psychiatry program, in particular areas of sub-specialty expertise including suicide and crisis management, co-morbid substance abuse, service delivery issues and homelessness. Each resident will have the opportunity to develop their clinical skills in working with patients with severe and persistent mental illnesses referred from the community. In addition there will be weekly addictions/chronic care journal club, looking at key articles from the literature.
Chronic Care Psychiatry—STEPS for Youth Program: PGY-IV

Supervisor: Dr. J. Langley

Position: One six-month mandatory core rotations in chronic care

The STEPS for Youth Program provides intensive community case management for individuals with first episode psychosis. The team consists of 5 FTE case managers (nursing, occupational therapy, social work) and a staff psychiatrist. Most clients are between the ages of 16 and 35 and they are in the early stages of a severe mental illness such as schizophrenia or bipolar disorder, often with concurrent substance misuse. STEPS works with many at-risk and vulnerable clients experiencing homelessness, poverty, recent immigration and refugee status issues.

The resident will carry a caseload with supervision and will be involved in all aspects of care for clients of the program. The resident will participate in the weekly journal club.

Chronic Care Psychiatry—Community Connections: PGY-IV

Supervisors: Drs. M. Levy and A. Nakhost

Position: One six-month mandatory core rotations in chronic care

Description: This rotation will provide an experience in community-based treatment of individuals with severe and persistent mental illnesses.

The resident will work with social workers and case managers to assist in facilitating client recovery. The resident will offer direct assessment in clinic or community outreach, as well as participating in case conferencing and collaborative management planning with the team.

The Community Connections model is unique as an enhanced intensive case management experience, given the integration of psychiatry and close collaboration with St. Elizabeth community outreach nursing.

Because it is not an Assertive Community Treatment team, intake criteria are less rigidly defined, so while clients have a history of psychotic illness, there is a wider spectrum of severity and hospital contact than in a traditional ACT model. Referrals are primarily from the inpatient unit or community family practice. Clients are largely dependent on ODSP; may be (stably or marginally) housed or homeless; well engaged with treatment and supports or requiring considerable engagement and alliance building in non-traditional settings; many are recent immigrants to Canada.

Experience on this team would be relevant for future work in chronic care, ACT teams, Inner City Health Associates/homeless shelter based clinics, shared care with inner city community health centres or family practice, and could inform areas of inquiry in inner city health systems research. Residents will become acquainted with real-life adaptation of clinical guidelines in a challenging population and acquire knowledge of many community resources for psychosocial rehabilitation as part of their global management toolkit.

Academic Content: Regular weekly in-person will be provided for clinic patients and directly observed intake assessments. Residents will be encouraged to seek supplemental supervision or consultation from a variety of other healthcare professionals with specialized expertise, and to liaise as needed with community supports and family. Consultation skills will be developed by doing regular new assessments for patients with severe and persistent mental illnesses referred from the community. Residents will attend weekly journal club sessions.