

Clinical Fellowship in Rural/Urban Geriatric Psychiatry

Department of Psychiatry
McGill University

Pierre Janet Hospital Centre

12 September 2008

Location:

Pierre Janet Hospital Centre
20 Pharand St
Gatineau, QC J9A 1K7

Fellowship Program Director:

Lisa McMurray, MD, FRCPC

Number of Positions:

One (1)

Prerequisites:

Successful completion of residency training in psychiatry.
Eligible for Training Card from the College des medecins du Quebec.
Adequate mastery of the French language

Academic Affiliation:

McGill University

The Pierre Janet Hospital Centre is also affiliated with the University of Ottawa and the University of Quebec in the Outaouais.

Background:

The Pierre Janet Hospital Centre is a regional psychiatric hospital that serves the population of the Outaouais, which is estimated at 300 000 inhabitants. The Department of Psychiatry at Pierre Janet offers core and elective rotations in geriatric psychiatry through its affiliation with McGill University. Medical students from the University of Ottawa also rotate through geriatric psychiatry at Pierre Janet.

Research activity:

The Pierre Janet Hospital Centre accommodates a number of ongoing clinical research projects. There are currently active projects involving the efficacy of psychotherapy delivered via videoconference, as well as a project evaluating the impact on clinicians of an educational intervention around the issue of violence in the psychiatric milieu. The hospital has an active research and ethics committee and supports clinical research.

Mission:

This fellowship program will provide a high-quality foundation in the clinical subspecialty of geriatric psychiatry, in accordance with the proposed guidelines of the Canadian Academy of Geriatric Psychiatry. The fellowship will also promote academic development. Advancement of the state of knowledge in geriatric psychiatry will be encouraged through involvement in research, teaching, and scholarly review. The fellow will benefit from dedicated time and resources to produce an academic project. The program is set in a mid-sized urban centre, which provides service to outlying rural regions; training in this unique setting will prepare the fellow for the demands of

community geriatric psychiatry. There will be particular emphasis placed on the consultative role, liaison with family practitioners, and shared care arrangements in the rural and urban regions. The affiliation with the Family Medicine Unit will provide the fellow with an opportunity for teaching and liaison. The active telepsychiatry service in geriatric psychiatry will allow the fellow to gain experience in providing consultations to outlying areas using this modality.

The provision of fellowship training in geriatric psychiatry in the Outaouais will be consistent with the regional teaching mandate of the McGill Integrated University Health Network (RUIS).

The Pierre Janet Hospital currently provides core and elective rotations in geriatric psychiatry to residents from McGill University. The Pierre Janet Hospital can provide training for two psychiatric residents in geriatric psychiatry at a time. The program has sufficient clinical and administrative resources to accept a fellow in addition to psychiatric residents. *The presence of a fellow will enhance the residency training* by providing an additional mentor and teacher for the residents who rotate through the service. The residents will also benefit from the academic production of the fellow through his/her participation in journal club, grand rounds, academic supervision, clinical research, as well as informal contact during the provision of clinical care.

Hospitals involved in training:

Pierre Janet Hospital Centre

The organization of the geriatric psychiatry program at the Pierre Janet Hospital Centre will offer the fellow a variety of clinical experiences. The geriatric psychiatry inpatient unit has 14 patient beds. There is an active outpatient consultation service. The telepsychiatry service permits the program to offer consultation services to patients in a remote rural centre (Maniwaki).

Centre de Sante et Services Sociaux de Gatineau (CSSSG):

At the two pavilions of the CSSS de Gatineau, the fellow will have the possibility to provide consultation-liaison services both on the wards and in the emergency room. The Hull pavilion offers, among other things, the possibility to do consultations for the geriatric medicine unit, and to work conjointly with the geriatricians who staff that unit. The Gatineau pavilion offers the fellow the opportunity to work with the academic family medicine unit, in particular with the family medicine residents who train there.

Objectives:

The fellow will:

- develop clinical expertise in the subspecialty of geriatric psychiatry
- develop consulting and collaborative skills to support community physicians with respect to the care of their elderly patients
- develop teaching abilities through education of fellow psychiatrists, general practitioners, and medical students
- advance knowledge in the field of geriatric psychiatry through scholarly activity

-develop the ability to present his/her work in published form and /or at conferences

Teaching Faculty:

Lisa McMurray, MD, FRCPC

Clinical practice: Inpatient geriatric psychiatry and director of the Electroconvulsive Therapy (ECT) service. Consultant via telepsychiatry to rural region of Maniwaki.

Strengths: Competence and extra training in ECT. Health administration. Cognitive-behavioural therapy. Evidence-based medicine. Holder of American Board of Psychiatry and Neurology added qualifications in Geriatric Psychiatry. Rural service development. Telepsychiatry. Clinical ethics.

Publications and Peer-reviewed Abstracts:

- McMurray L. Applying Principles of Informed Consent to Clinical Practice in Psychiatry. Canadian Psychiatric Association Bulletin 2002 October; 34(5):16-18.
- McMurray L, Steiner W. Natural Disasters and service delivery to individuals with severe mental illness – ice storm 1998. Can J Psychiatry. 2000 May;45(4):383-5.
- McMurray L. Evidence-based medicine and residency training in psychiatry. Canadian Psychiatric Association Bulletin 30(6): 176, 178, 1998.
- Harris SB, Glazier R, Eng K, McMurray L. Disease patterns among Canadian aboriginal children: study in a remote rural setting. *Can Fam Physician*. 44:1869-77, 1998.
- McMurray L. “Informed Consent and Psychotherapy Training: Do We Know What We’re Getting Ourselves Into?” Canadian Psychiatric Association Bulletin, April 1998.
- Singh S, McMurray L, and Primeau F. “An Elective Clinical Ethics Rotation in Psychiatry.” Canadian Academy of Geriatric Psychiatry Newsletter, April 1998.
2000. McMurray L, Gurland B. Improving the Quality of Life of Elderly Inpatients at Binghamton Psychiatric Center.” Poster presentation at the Twelfth Annual New York State Office of Mental Health Research Conference, Albany, NY.
2000. McMurray L, Desouky A, Erlanger D, Dumaguing N, Toner J, Devanand D. “Do-not-resuscitate Status: Impact on Clinical Care and Longevity in a Nursing Home.” Poster presentation at the Thirteenth Annual New York State Office of Mental Health Research Conference, Albany, NY.
2000. Steiner, W., and McMurray, L. “Natural Disasters and Service Delivery to the Severely Mentally Ill -- The 1998 Montreal Ice Storm.” Poster presentation at the 50th Annual Meeting of the Canadian Psychiatric Association.
1999. McMurray, L. and Steiner, W. Natural Disasters and Service Delivery to the Severely Mentally Ill -- The 1998 Montreal Ice Storm. Poster presentation at the Twelfth Annual New York State Office of Mental Health Research Conference, Albany, NY.

Marcel Boily, MD, FRCPC

Clinical practice: Consultation-liaison for geriatric psychiatry in the general hospitals of the urban region. Collaboration with the Family Medicine Unit (affiliated with McGill University). Clinical director of the Geriatric psychiatry program. Outpatient consultation and follow-up. ECT with extra training.

Strengths: Liaison with family practitioners and shared care. Psychodynamic psychiatry. Community practice in the regional setting.

Alexander MacCordick, MD, FRCPC

Clinical practice: Inpatient geriatric psychiatry; outpatient consultation and follow-up; consultation-liaison psychiatry; nursing home psychiatry; ECT

Strengths: Short-term dynamic psychotherapy; community practice in the regional and rural setting; liaison with family practitioners and shared care; dementia; participation in clinical research; education; legal aspects of psychiatric practice; complaint assessment, processing, and mediation

Publications and peer-reviewed abstracts :

Abstract (accepted by the Canadian Association of Gerontology in 2002) : *Melatonin – An Early Marker for Pathological Brain Aging?* Alexander G. MacCordick, N.P. Vasavan Nair, George Schwartz, N.M.K. Ng Ying Kin, Sophie Biere, Sonia Lupien, Joseph X. Thavundayil
Poster presentation at the Canadian Association of Gerontology Annual Conference, Montreal, Qc, Oct. 24-26, 2002

Academic Facilities:

The fellow will attend psychiatric grand rounds at the Pierre Janet Hospital, Geriatric Psychiatry Journal Club at the Pierre Janet Hospital, and will have academic supervision on important topics in geriatric psychiatry on a weekly basis. The proximity to the University of Ottawa provides the fellow with the opportunities for to attend psychiatric grand rounds and geriatric psychiatry rounds in that network as well. The local presence of the University of Ottawa, the University of Quebec in the Outaouais, and the affiliation with McGill University will provide the fellow with access to a large pool of academic resources.

The Pierre Janet Hospital Centre will provide a computer and Internet access. The fellow will be able use the services of the Pierre Janet librarian to obtain journal articles as required. The geriatric psychiatry program has a library of educational videos, which will also be at the fellow's disposition.

Fellow duties, responsibilities, and clinical curriculum:

The fellow will provide clinical care to patients of the geriatric psychiatry program over the course of the fellowship year, with the following *intended caseload*:

- responsibility for four (4) geriatric inpatients (ongoing)
- two (2) half-days of consultation-liaison services for elderly patients
- outpatient consultation, including telepsychiatry consultation for geriatric patients in the remote site of Maniwaki
- responsibility for at least two psychotherapy patients throughout the clinical year
- electroconvulsive therapy (ECT) once per week (three to four treatments per session)
- pre-ECT consultation for elderly patients
- outpatient follow-up of patients encountered in the above clinical services, one half-day per week

The fellow will attend meetings of the inpatient psychiatry service on Monday mornings and Wednesday afternoons.

One day per week will be an academic day free of clinical responsibilities; during this time the fellow will be expected to organize and pursue an academic project. The fellow will discuss the project on a biweekly basis with his/her academic supervisor. The fellow will be strongly encouraged to present his/her work at a professional meeting and to publish it in an academic journal.

Patients will be selected for the fellow for variety of clinical cases, complexity, and relationship to his/her academic interests. The fellow will evaluate and treat patients over the age of 65 with a variety of clinical problems, including but not limited to mood disorders, anxiety disorders, psychotic disorders, personality disorders, dementia, and delirium. The fellow will be required to keep a log of his/her cases; this will be reviewed every three months to ensure adequate variety and volume.

Academic curriculum

The fellow will meet with faculty members regularly to review essential topics and articles in geriatric psychiatry. Reading material for these weekly sessions will be provided to the fellow.

The fellow will attend the monthly journal club in geriatric psychiatry and will be expected to present an article at these monthly sessions once every three months.

The fellow will attend weekly grand rounds at the Pierre Janet Hospital; these meetings take place Wednesdays over the noon hour. The fellow will be expected to make a scholarly presentation on a geriatric psychiatry topic at one of these grand rounds.

The fellow will have the option of attending weekly geriatric grand rounds and general psychiatry grand rounds at the Royal Ottawa Hospital, which is located twenty minutes away from the Pierre Janet Hospital by car.

The resident will meet biweekly with an academic supervisor regarding the project mentioned above.

Support staff available to fellow:

Secretarial support provided by Pierre Janet Hospital Centre

Librarian support provided by Pierre Janet Hospital Centre

Education regarding psychiatric/legal issues provided by Chantal Lavigne, B.S.S., L.L.B., M.A.P.

Research and ethics committee of Pierre Janet Hospital Centre

Liaison with academic staff of University of Quebec in the Outaouais

Multidisciplinary team in geriatric psychiatry, including psychologist, social worker, occupational therapists, nurses, and educators.

Evaluation:

Evaluation of the fellow will take place on a quarterly basis. The fellow will have the opportunity to provide feedback regarding the fellowship program during these sessions. The supervisors will evaluate the fellow quarterly in accordance with Postgraduate Medical Education guidelines.