

**HOSPITAL OVERVIEW**

At Sunnybrook Health Sciences Centre, we are one of Canada’s largest and most dynamic hospitals. Our 10,000 staff, physicians and volunteers provide the best care for critical times in the lives of the 1 million patients we see each year.

Today, we specialize in caring for Canada’s war veterans, high risk pregnancies, critically-ill newborns, adults and the elderly, and treating and preventing cancer, cardiovascular disease, neurological disorders, orthopaedic and arthritic conditions and traumatic injuries. We are fully affiliated with the University of Toronto and provide learning opportunities for more than 2,000 students annually.

Sunnybrook is also a research intensive hospital. Each year, our more than 600 scientists conduct $100 million in breakthrough research.

**Medical Education Office**

**Location:** Sunnybrook Hospital- **E350 (E-wing, third floor, room 350)**

2075 Bayview Ave, Toronto, ON, M4N 3M5

**Hours:** Monday- Friday, 7:30am- 3:30pm

**Phone:** 416- 480- 5962

**Email:** [pg.meded@sunnybrook.ca](mailto:pg.meded@sunnybrook.ca)

**Dr. Matthew Boyle, Department of Psychiatry Postgraduate Site Director**

Email: [matthew.boyle@sunnybrook.ca](mailto:matthew.boyle@sunnybrook.ca)

Phone: 416-480- 4089

**Karianne Mintz, Department of Psychiatry Education Coordinator**

Email: [Karianne.mintz@sunnybrook.ca](mailto:Karianne.mintz@sunnybrook.ca)

Phone: 416- 480- 4094

**MANDATORY CORE ROTATIONS**

# PGY1 Half Day Outpatient Experience

# Supervisors:  Dr. Boyle, Dr. LaCroix, Dr. Mansfield, Dr. Sinyor

This rotation pairs PGY-1 residents with an experienced outpatient supervisor they work with for the entire academic year. This close working relationship allows the resident to practice their interviewing skills in psychiatry in a highly supportive learning environment, even when they are on off-service rotations. On this rotation, residents get opportunities to prescribe and monitor medications in clinic with the supervisor, as well as practice fundamental therapy skills with general outpatients. The rotation has been highly valued by learners.

# GENERAL HOSPITAL INPATIENT- OUTPATIENT ROTATIONS

**Inpatient Supervisors:** Dr. S. Castel, Dr. S. Toma, Dr. A. Schaffer, Dr. A. Raghunath and Dr. A. Abdalla

This rotation seeks to introduce residents to the multiple facets of general psychiatry practice in an inpatient hospital setting.  Learning occurs in a hospital setting replete with an extensive array of compelling patients with varying illnesses. Residents will be closely supervised and taught by a variety of excellent supervisors.

**Outpatients Supervisors:** Dr. Ari Zaretsky, Dr. Janet Ellis, Dr. Mara Silver, Dr. Matt Boyle, Dr. Eileen LaCroix, Dr. Rosalie Steinberg, Dr. Joanna Mansfield, Dr. Ayal Schaffer, Dr. Nik Grujich, Dr. Andreia Scalco, Dr. Ralph Lewis, Dr. Saulo Castel, Dr. Selina Zeng

This rotation seeks to introduce residents to the multiple facets of general psychiatry practice in an outpatient hospital setting. During the rotation residents get the opportunity to work with one primary and one secondary supervisor who they meet with regularly for teaching and supervision.

**PSYCH ER CORE ROTATION**

**Supervisors:**Dr. Eileen La Croix, Dr. N. Grujich; Dr. Jay Moss, Dr. M. Fefergrad, Dr. A. Scalco, Dr. Saulo Castel and Dr. Mara Silver

This rotation involves supervision on the Psychiatric Emergency Services (PES) team providing psychiatric assessment and care to patients in the emergency department and within urgent care program at Sunnybrook Health Sciences Centre.

Residents work alongside the psychiatrist on duty in the emergency department for direct supervision of cases including opportunities for observation of their interviews, advanced psychopharmacology and crisis intervention skills, obtain supervision on their teaching and supervision of more junior learners on the team, and opportunity run morning report and coordinate the efforts of the team (similar to a junior attending on service).  The rotation allows for residents to fine-tune their emergency psychiatry assessment skills, safety assessment, and short term crisis stabilization skills.  Residents have the opportunity to become more familiar with the literature in emergency psychiatry through a weekly journal club.

# CHILD PSYCHIATRY CORE ROTATION

**Supervisors:** Drs. A. Cheung, D. Kreindler, R. Lewis, R. Mitchell, S. Reiter, L. Riggin, J. Song, J. Teshima, K. Wang

This rotation introduces residents to the assessment and treatment of children, youth, and their families. The first 3 months of the rotation are based in outpatient clinics with several supervisors, including the Youth Urgent Assessment Clinic. Residents will have the opportunity to do new assessments and to provide follow-up care to a selection of patients. Assessment of younger children will be done through virtual consultations. There are also opportunities for exposure to CBT and family therapy. The last month of the rotation is based on an adolescent inpatient unit, providing experiences with a variety of acute presentations.

**GERIATRIC PSYCHIATRY CORE ROTATION**

**Supervisors:** Dr. M. Rapoport, Dr. C. Cohen, Dr. G. Tennen, Dr. K. Shulman, Dr. D. Gallagher, Dr. H. Lee

This rotation involves supervision in a variety of settings focusing on the assessment and management of mental health issues pertaining to the elderly. Available opportunities for supervision include a specialized Psychogeriatric inpatient unit, a multi-professional community home-visiting service, acute care and long-term care consultation- liaison services, busy out-patient services, and a multi-disciplinary memory clinic.

# SEVERE MENTAL ILLNESS

**Supervisor:** Dr. Cliff Posel

**Secondary Supervisor:** Dr. Jay Moss

The primary assignment will be with SunPACT, an assertive Community Treatment Team. On the average day, 3-4 patients will be seen, mostly in the community. Access to a car is recommended, but mileage expense will be reimbursed by the program. In addition to SunPACT, the resident will assess 2-4 new consults per month on patients with Primary Psychotic disorders. They would follow up to 5 of these patients at once during the rotation.

Supervision for SunPACT work would be provided directly or by cell phone by the primary supervisor on Mondays, Wednesdays, and Fridays, and by the Secondary Supervisor on Tuesdays. Supervision for the general consults and follow-up will be provided by the primary supervisor requirements of Child Psychiatry core rotations.

**CONSULTATION- LIAISON PSYCHIATRY- Bayview Campus**

**Supervisors:** Dr. R. Jaunkalns, Dr. N. Grujich, Dr. A. Scalco and Dr. Elie Isenberg-Grzeda

This rotation involves supervision on the consultation liaison (C-L) team that provides psychiatric assessment and care to the medical and surgical services, as well as a chronic veteran’s facility at Sunnybrook Health Sciences Centre.

Residents receive daily supervision of C-L cases with opportunity for experience in liaison with oncology, cardiology, long-term care and our regional burn unit, regional trauma unit and moms and babies unit. Residents may also receive training in neuropsychiatric assessment and treatment of selected patients. Besides one and a half hours of supervisiona day, the residents also participate in weekly case conferences/seminars with a C-L focus. Residents on this rotation may also arrange supervision in outpatient consultations in medical psychiatry.

**CONSULTATION- LIAISON PSYCHIATRY- St. John’s Rehab Campus**

**Supervisors:**Dr. M. Boyle and Dr. R. Steinberg

We are able to accommodate 1-2 residents for a CL psychiatry rotation for either a Core CL Rotation or an elective/PLEX time (which can range from 1 month in PGY-1 to longer time in more senior years).

Residents will have the opportunity to participate in both inpatient and outpatient psychiatry CL (if interested) as well as engage with allied health team members in collaborative-care/capacity building. The CL rotation at St. John's Rehab offers exposure to diverse patient populations with a wide array of clinical presentations. Core clinical cases will include management of delirium, dementia, agitation, depression and chronic psychiatric illnesses including management of comorbid pain and addictions within a medical-surgical rehab setting. Residents will have the opportunity to work with patients with cardiac, oncology and neurological presentations, patients recovering from physical trauma, burns, musculoskeletal injuries and amputations, as well as geriatric and general medical populations. These patients often present with an acute mental health issue triggered by a new injury, illness or disability. We also manage patients with underlying psychiatric disorders (e.g. mood and bipolar disorders, somatic symptom and functional neurological disorders and primary psychotic disorders) —who also need ongoing medical rehabilitation with attention paid to developing skills in the management complex pharmacology. The CL service at St. John’s has had a positive significant impact on these patients as well as the Rehab teams. Patients at SJR typically have a longer length of stay (typically 3-4 weeks) than those in acute care settings. This creates an ideal learning opportunity for *consultation* *and follow-up* including provision of psychotherapeutic interventions at the bedside. There is also an opportunity to follow patients from inpatient to outpatient settings and co-facilitate groups depending on learner’s clinical interest.

It should be noted that this is not a resident-dependent service and teaching is strongly emphasized. Both supervising staff are regularly involved in patient care with the ability to provide direct supervision in real-time. Volumes will be equally divided between staff and residents, and the resident new consults per day are typically capped at 2 new assessments/day.

The structure of the proposed rotation is as follows:

* 4-5 days/week of inpatient CL providing psychiatric care to the above populations.  We can also accommodate residents for a part-time elective as well.
* Based on residents learning goals, they can become involved with outpatient CL clinics, groups, or inpatient psychotherapy.  There is also opportunity to have a focus on medical education/teaching of allied health team members on presentations and management of common mental health conditions in a rehab medicine setting.
* For interested residents, there are opportunities to participate in clinical research or QI projects given staff expertise at SJR.
* Weekly CL case conference (Tuesdays from 12-1) with all CL staff and residents from both SJR and Bayview Sites.

Perks of Rotation

* Flexibility to develop clinics in area of interest (pain, mood disorders, psychopharmacology) while gaining exposure to core CL presentations
* The goal of this rotation is to be educational and not service-driven as it is not resident dependent. Staff share in the clinical load and provide accessible and timely supervision throughout the day.
* Access to supervision in CBT, IPT or group therapy modalities within the CL rotation if psychotherapy requirements need to be met. (Staff expertise)
* Staff will provide mentorship on transition to practice, teaching on billing and career planning
* Beautiful non-urban location
* Opportunities to work closely with and embed oneself in inter-professional teams (teaching of allied health/participation in rounds)
* Many other physician teachers including: family medicine, Hospitalists, PM&R (Physiatry), Geriatrics, Internists
* Many other learners including: medical students, PM&R residents, family medicine residents nursing students, physician assistants and allied health students.
* Longer length of stays allow for follow-through with recommend treatment plans (good balance between new consults and follow-ups)
* Wide variety of clinical presentations, populations and age ranges.
* Space will be made available for up to 2 residents/rotation
* Provision of CL services in rehabilitation settings is a relatively new but evolving clinical practice, and offers opportunities for developing research, quality improvement and program development opportunities to address patient needs.

**ADDICTIONS MEDICINE CORE ROTATION**

**Supervisors:** Dr. Mark Greenberg & Dr. Stephanie Zhou

This rotation involves supervision within the Rapid Access to Addictions Medicine (RAAM) Team, as well as within the Addictions CL service. The RAAM Clinic provides brief outpatient consultation, pharmacologic and psycho-social interventions for substance use disorders to patients in the community, the ED or referrals from inpatient at discharge. The rotation offers an opportunity to work with a collaborative inter-professional team, and will involve provision of virtual and in person care. The RAAM outpatient clinics take place 3 times per week (Monday 5-7, Wednesday 2-4, Friday 10-12) with a mix of new assessments, medical and counselling follow-ups. The addiction CL service is delivered as an arm of the CL psychiatry service and provides consultation to all services in the hospital for patients who are struggling with substance use disorders. Key activities include withdrawal management and acute stabilization, motivational interviewing for substance use disorders, and occasionally consultation regarding medication interactions between the medications prescribed during the acute stay and replacement therapies, or related to past history of substance use with a prescribed class of drugs.

The structure proposed is the following;

1. 3 RAAM clinics per week (Monday 5-7, Wednesday 2-4, Friday 10-12)
2. 1.5- 2 days per week providing addictions CL inpatient service – Tuesday/Thursday afternoons or flexible depending on schedules, in addition to CL consults during clinic times if not otherwise engaged with patients
3. Supervision in MI,CBT, DBT and other modalities employed in the delivery of addictions counselling with MSW addictions counsellors on clinic days
4. Observing and gaining understanding of the role of peer support groups and individual work through the RAAM peer support groups and services
5. Supervision inSpecialty Community Clinics providing specialized consultations and assessments to communities within the GTA and Northern Ontario through both in person and OTN models (ie Indigenous clinic)
6. Pre-clinic team huddles and weekly team rounds

# IMHC COLLABORATIVE CARE CORE ROTATION

**Supervisor:** Dr. N.Grujich

Dr. Grujich is very excited to work with you on this Collaborative Care rotation. Residents will be working autonomously in the Sunnybrook Family Practice Clinic (hybrid) providing education and support to our family practice colleagues. The patient population is diverse and will encompass the full life span. If you are interested, there are always opportunities to engage in scholarly work and quality improvement projects. This rotation is malleable and can be tailored to support the students’ interests.

**IMHC IN MOOD DISORDERS**

**The Mood Disorders Association of Ontario (MDAO/ Hope and Me)**

**Supervisors:** Drs. Rosalie Steinberg & Mara Silver

Dr. Rosalie Steinberg [Tuesday]—, Dr. Mara Silver, [Thursday’s] (and possibly other days as well) – Virtual.   Residents wishing to participate on other days may be able to flexibly arrange alternative clinic days and supervision with Dr. Steinberg and must be arranged by individual request and approval by Dr. Steinberg. The only fixed time requirement is that learners need to participate in a one-hour weekly case conference meeting on Tuesday afternoons.

In partnership with Sunnybrook Department of Psychiatry, MDAO (Hope and Me) is a community MH agency which offers a wide range of mental health services including peer support, counselling with trained therapists, and group programming for clients and family struggling with a variety of mental health challenges. The MDAO/Hope and Me resident will be a part of the Family Matters Program team, which supports families and individual clients ranging from 15-69. While majority of clients suffer from mood disorders, there is also a first episode program focused on support for clients with early psychosis or bipolar disorders, as well as a transitional aged youth program. Often this will be the first contact with a psychiatrist for the majority of clients.  All clients are registered as Sunnybrook patients as part of this Hospital-Community partnership.  Sunnybrook Mood and Anxiety Program patients are also seen at the MDAO/Hope and Me, based on need and availability and connected to counselling and peer support resources there.

This integrated mental health care opportunity offers a unique blend of direct and indirect service with about 60% of the time focused on direct care/consultation of MDAO clients and 40% focused on indirect support and capacity building for the Family Matters Program counselling team. (Approximately 1 new assessment/week). Residents can also choose to follow clients longitudinally for management of episodes of care based on interest.  The resident will participate in weekly collaborative care case conferences (one hour on TUESDAYS--mandatory) with the counselling and peer support team to review shared clients and offer teaching and support to the team as needed. Additional activities include provision of informal teaching to the MDA)/Hope and Me staff as well as formal presentations to community members (in lieu of grand rounds) on various mental health topics. There may also be an opportunity to co-facilitate groups (e.g. CBT, IPT, Mindfulness or psychoeducation) based on interest. The supervisors, Dr. Rosalie Steinberg (on Tuesdays) and Dr. Mara Silver (on Thursdays), have expertise in management of mood disorders and psychotherapy. They will offer direct and real-time supervision as needed. At present, clinical assessments and all team meetings will continue to be conducted virtually, however, students can elect to see patients in person at their home site if they wish.  The 1-hour virtual weekly case conference with MDAO counselling staff typically takes place on Tuesday afternoons and residents will be expected to attend this 1-hr meeting regardless of their chosen clinical day for the rotation (e.g. they can see MDAO pts on other days). This offers flexibility for residents who want to work this 1 day/week around other rotations.

This rotation is also available as a senior selective opportunity for residents wishing to do a half-day in mood disorders or to develop group programming.

# PSYCHOTHERAPY TRAINING

* Psychodynamic (short term and long term)
* CBT
* IPT
* Group therapy
* Couples/ Family therapy

**Supervisor**s: Dr. A. Abdalla, Dr. C. Brown, Dr. J. Dembo, Dr. J. Ellis, Dr. M. Fefergrad, Dr. L. Gerber, Dr. S. Grigoriadis, Dr. N. Grujich, Dr. S. Hershkop, Dr. D. Leibow, Dr. H. McGeer, Dr. D. Nacson, Dr. A. Raghunath, Dr. P. Richter, Dr. S. Toma, Dr. A. Zaretsky and Dr. S. Gaind

**RESEARCH**

Residents will have an opportunity to participate in both leading-edge research using a myriad of potential methodologies. There is a very active research portfolio in the department. Current areas of study include research in neurostimulation, traumatic brain injury, neuropsychiatric symptoms in neurocognitive disorders, suicide prevention, mood and anxiety disorders including a focus on women, youth, and geriatric populations, OCD and related disorders, psychosocial oncology, post-traumatic stress disorder, CBT and quality improvement.  Any interested residents are encouraged to contact the department’s co-research directors ([krista.lanctot@sunnybrook.ca](mailto:krista.lanctot@sunnybrook.ca) and/or [ayal.schaffer@sunnybrook.ca](mailto:ayal.schaffer@sunnybrook.ca)) or any individual researcher in their area of interest.

**ON SITE SEMINARS**

SHSC provides a rich seminar program experience. While the seminars are designed to meet specific needs of either junior or senior residents, we have found that most residents attend and benefit from the spectrum of teaching activities.

These programs include the following Seminars:

* 1. Resident Interview Seminar
  2. Formulation
  3. Geriatric Psychiatry
  4. Psychopharmacology
  5. Interpersonal Psychotherapy
  6. Family/Couple Therapy
  7. Weekly CL Case Conference
  8. Grand Rounds Preparation
  9. Mood and Anxiety Rounds
  10. Brain Sciences Rounds
  11. Weekly Departmental Grand Rounds

# TEACHING

Resident teachers are a core part of our teaching team at Sunnybrook. Opportunities to teach all levels of medical students in small and large group settings are available.

**SUPERVISORS**

**Geriatric Psychiatry:** Drs. Mark Rapoport, Carole Cohen, Damien Gallagher and Helen Lee

**General Psychiatry:** Drs**.** A. Feinstein, A. Schaffer, S. Castel, M. Boyle, S. Toma, A. Raghunath, M. Silver, N. Grujich, J. Ellis, E. LaCroix, A. Zaretsky, A. Abdalla, P. Kudlow, S. Zeng

**Medical Psychiatry:** Drs. R. Jaunkalns, N. Grujich, J. Ellis, M. Boyle, R. Steinberg, S. Zeng, E. Isenberg- Grzeda and A. Scalco

**Neuropsychiatry:** Drs. A. Feinstein, N. Westreich, M. Burke, S. Nestor, H. Lee

**Adolescent Psychiatry:** Drs. C. Boulos, J. Teshima, S. Reiter, D. Kreindler, R. Lewis, K. Wang, J. Song and R. Riggin

**SUNPACT** *(Assertive Community Treatment Team):* Drs. J. Moss, C. Posel

**Psychiatric Emergency Services** (PES): Drs. E. LaCroix, J. Moss, N. Grujich, M. Fefergrad, S. Castel, M. Silver and A. Abdalla

**Mood Disorders:** Drs. A. Levitt, A. Schaffer, S. Grigoriadis, M. Sinyor, D. Kreindler and R. Steinberg

**Obsessive Compulsive Disorder (OCD) and related disorders:** Drs. P. Richter, N. Grujich and R. Ramos

**Psycho-oncology:** Drs. J. Ellis, E. LaCroix, A. Scalco, E. Isenberg-Grzeda and R. Lewis

**Women’s Mental Health:** Drs. S. Grigoriadis, J. Mansfield, A. Sullovey, G. Robinson and C. Brown

**SENIOR SELECTIVES & ELECTIVES ROTATIONS**

**Psychosocial Oncology**

Supervisor(s): Drs. J. Ellis / A. Scalco / E. Isenberg-Grzeda

Place: Sunnybrook HSC

Time: Negotiable

Inquiries: Dr. J. Ellis (416) 480-4073 or [janet.ellis@sunnybrook.ca](mailto:janet.ellis@sunnybrook.ca)

This selective provides the supervised opportunity to become comfortable and proficient in assessing and managing psychiatric and psychological issues in the context of the diagnosis and treatment of cancer. It also includes developing expertise in grief, existential psychotherapy and individual and family support for those living with chronic medical illness as well as those who are dying. There is opportunity to participate in a biweekly seminar as well as research

# Mood Disorders

Supervisor: Drs. A. Schaffer/ M. Sinyor/ M. Silver/ R. Steinberg

Place:                       Sunnybrook HSC

Time:                        Negotiable

Inquiries:                 Dr. A. Schaffer (416) 480-4070 or [ayal.schaffer@sunnybrook.ca](mailto:ayal.schaffer@sunnybrook.ca)

The Mood and Anxiety Disorders Program offers a clinical and/or research elective in Mood Disorders. The aim of the elective is to enhance clinical experience with patients suffering from major depression and bipolar disorder, with opportunities for a focus on ambulatory care, urgent care, inpatient care, community-based interventions, or a combination of these. The elective can also be designed to allow the resident to participate in a research or QI project (optional). The areas of clinical and academic interest include: diagnosis and management approaches to bipolar disorder and treatment-resistant depression, enhancing care delivery across treatment settings, population health / epidemiology of mood disorders or suicide, and the principals of outpatient pharmacologically-based treatment for mood disorders with comorbid medical or psychiatric conditions.

# Mood and Anxiety Disorders in Women

Supervisor(s): Drs. S.Grigoriadis / J.Mansfield / A.Sullovey / G.Robinson

Place: Sunnybrook HSC

Time: Negotiable

Inquiries: Dr. S. Grigoriadis (416) 480-5677 or [Sophie.Grigoriadis@sunnybrook.ca](mailto:Sophie.Grigoriadis@sunnybrook.ca)

The Women’s Mood and Anxiety Disorders Clinic: Reproductive Transitions is part of the Mood & Anxiety Disorders Program at Sunnybrook and staff work closely with the Women’s and Babies program of the hospital. The aim of this

selective is to enhance clinical experience with women suffering from mood or anxiety disorders across the reproductive life cycle. Assessment and treatment of perinatal mood and anxiety disorders is currently the focus of the clinic but exposure to other stages such as perimenopause is also an option. Both outpatient and inpatient experiences are available, including shared care. Consultation, assessment and short-term follow-up are provided. Our staff have expertise in both psychotropic medication and psychotherapies as potential treatment options. Elective experiences will be catered to resident’s interests and ongoing educational needs / goals and can be designed to allow for the participation in a research project.

# OCD & Related Disorders

Supervisor: Dr. Peggy Richter

Place: Sunnybrook HSC

Time: Negotiable

Inquiries: Dr. Peggy Richter (416) 480-6832 or [peggy.richter@sunnybrook.ca](mailto:peggy.richter@sunnybrook.ca)

This rotation will provide residents with the opportunity to gain expertise with obsessive compulsive disorder, as well as related OCD-spectrum disorders such as hoarding, trichotillomania, and body dysmorphic disorder. The resident will develop skills pertinent to the assessment and treatment of outpatients with these conditions, covering provision of consultations to community physicians, and hands on delivery of treatment to a selected cohort of appropriate outpatients. Expertise will be developed in delivery of both pharmacological and psychological treatments, focusing on specific CBT skills for this population. There may also be opportunities to learn more advanced CBT skills through participation in our intensive treatment program for OCD (running from Bellwood and/or virtually) which offers intensive CBT in a day treatment/ residential environment. The interested resident will also have the opportunity to co-lead group CBT for these conditions. Regular supervised interviews will be provided, as well as close supervision with Dr. Richter. Opportunity to assess the broader range of anxiety disorders may also be arranged.

This selective is most appropriate for residents with a career interest in OCD, anxiety disorders, or CBT, as well as in general psychiatry with a proficiency in these areas of expertise.

There is significant opportunity to participate in research if interested, however this is not a requirement.

**Consultation- Liaison Psychiatry at St. John’s Rehab**

**Supervisors:**Dr. M. Boyle and Dr. R. Steinberg

We are able to accommodate 1-2 residents for a CL psychiatry rotation for either a Core CL Rotation or an elective/PLEX time (which can range from 1 month in PGY-1 to longer time in more senior years).

Residents will have the opportunity to participate in both inpatient and outpatient psychiatry CL (if interested) as well as engage with allied health team members in collaborative-care/capacity building. The CL rotation at St. John's Rehab offers exposure to diverse patient populations with a wide array of clinical presentations. Core clinical cases will include management of delirium, dementia, agitation, depression and chronic psychiatric illnesses including management of comorbid pain and addictions within a medical-surgical rehab setting. Residents will have the opportunity to work with patients with cardiac, oncology and neurological presentations, patients recovering from physical trauma, burns, musculoskeletal injuries and amputations, as well as geriatric and general medical populations. These patients often present with an acute mental health issue triggered by a new injury, illness or disability. We also manage patients with underlying psychiatric disorders (e.g. mood and bipolar disorders, somatic symptom and functional neurological disorders and primary psychotic disorders) —who also need ongoing medical rehabilitation with attention paid to developing skills in the management complex pharmacology. The CL service at St. John’s has had a positive significant impact on these patients as well as the Rehab teams. Patients at SJR typically have a longer length of stay (typically 3-4 weeks) than those in acute care settings. This creates an ideal learning opportunity for *consultation* *and follow-up* including provision of psychotherapeutic interventions at the bedside. There is also an opportunity to follow patients from inpatient to outpatient settings and co-facilitate groups depending on learner’s clinical interest.

It should be noted that this is **not a resident-dependent service** and teaching is strongly emphasized. Both supervising staff are regularly involved in patient care with the ability to provide direct supervision in real-time. Volumes will be equally divided between staff and residents, and the resident new consults per day are typically capped at 2 new assessments/day.

The structure of the proposed rotation is as follows:

        4-5 days/week of inpatient CL providing psychiatric care to the above populations.  We can also accommodate residents for a part-time elective as well.

* Based on residents learning goals, they can become involved with outpatient CL clinics, groups, or inpatient psychotherapy.  There is also opportunity to have a focus on medical education/teaching of allied health team members on presentations and management of common mental health conditions in a rehab medicine setting.
* For interested residents, there are opportunities to participate in clinical research or QI projects given staff expertise at SJR.
* Weekly CL case conference (Tuesdays from 12-1) with all CL staff and residents from both SJR and Bayview Sites.

**Perks of Rotation**

* Flexibility to develop clinics in area of interest (pain, mood disorders, psychopharmacology) while gaining exposure to core CL presentations
* The goal of this rotation is to be educational and not service-driven as it is not resident dependent. Staff share in the clinical load and provide accessible and timely supervision throughout the day.
* Access to supervision in CBT, IPT or group therapy modalities within the CL rotation if psychotherapy requirements need to be met. (Staff expertise)
* Staff will provide mentorship on transition to practice, teaching on billing and career planning
* Beautiful non-urban location
* Opportunities to work closely with and embed oneself in inter-professional teams (teaching of allied health/participation in rounds)
* Many other physician teachers including: family medicine, Hospitalists, PM&R (Physiatry), Geriatrics, Internists
* Many other learners including: medical students, PM&R residents, family medicine residents nursing students, physician assistants and allied health students.
* Longer length of stays allow for follow-through with recommend treatment plans (good balance between new consults and follow-ups)
* Wide variety of clinical presentations, populations and age ranges.
* Space will be made available for up to 2 residents/rotation
* Provision of CL services in rehabilitation settings is a relatively new but evolving clinical practice, and offers opportunities for developing research, quality improvement and program development opportunities to address patient needs.

**Collaborative Care**

Supervisor: Dr. Nik Grujich

Place: Sunnybrook HSC

Time: Negotiable

Inquiries: Dr. Nik Grujich (416) 480-4693 or [Nikola.Grujich@sunnybrook.ca](mailto:Nikola.Grujich@sunnybrook.ca)

Dr. Grujich is very excited to work with you on this Collaborative Care rotation. Residents will be working autonomously in the Sunnybrook Family Practice Clinic (hybrid) providing education and support to our family practice colleagues. The patient population is diverse and will encompass the full life span. If you are interested, there are always opportunities to engage in scholarly work and quality improvement projects. This rotation is malleable and can be tailored to support the students’ interests.

# Cognitive Behaviour Therapy for the Senior Resident

Supervisor: Dr. Ari Zaretsky

Place: Sunnybrook HSC

Time: 1 or 2 day a week

Inquiries: Dr. Ari Zaretsky (416) 480-5836 or [ari.zaretsky@sunnybrook.ca](mailto:ari.zaretsky@sunnybrook.ca)

This rotation will provide residents with the opportunity to acquire mastery of CBT for both common as well as challenging psychiatric conditions such as bipolar disorder, PTSD and eating disorders Opportunities to provide care to health professionals will also be available. Expertise will be developed in delivery of both pharmacological and CBT, focusing on the acquisition of specific CBT skills for the diagnostic group that the resident is interested in. An immersive supervision experience will involve review of audiotapes and experiential learning through role-playing and self-reflection. Opportunity to observe Dr. Zaretsky’s own CBT treatment and weekly assessments will be built into this senior elective experience.

# Transition to Practice – General Psychiatry

Supervisor: Dr. Saulo Castel, [saulo.castel@sunnybrook.ca](mailto:saulo.castel@sunnybrook.ca)

Target audience: PGY5s

Length: To be discussed, 3-6 months (six is preferable), one FTE or 0.8 FTE

The goals and content are framed according to the CANMEDS roles as indicated besides the item, as per the legend below:

* Medical Expert (ME)
* Collaborator (Col)
* Communicator (Com)
* Manager (Ma)
* Health Advocate (HA)
* Scholar (Sc)
* Professional (Pr)

# Goals

Foster autonomy (Pr, ME, Ma)

Brush up skills in general psychiatry including:

* Clinical skills of how to apply knowledge on daily patient care in an interdisciplinary environment. ME, Col, Ma, Pr
* Personal managerial skills including time management, billing and learning needs. Ma, Sc, Pr
* Team managerial skills as the leader of a treatment interdisciplinary team. Col, HA, Pr
* Communication skills by providing a rich environment to communicate with patients, families and other team members, sometimes in stressful situations given the acuity of the patients. Com, Col, Pr
* Collaborative skills as a member of teams involved in providing inpatient care but also in outpatient care to facilitate the transition from inpatient to outpatient. Col, ME, HA, Pr
* Advocate by being exposed and included in the management of an inpatient unit. HA, Ma, Col
* Scholar as the resident will be involved in clinical teaching of junior residents and clinical clerks, and the resident will also be expected to create and implement a learning plan during the rotation. ME, Sc, Col
* Professional as the evaluation will include self-evaluation but also feedback from colleagues and patients. Pr, Col, Sc

# Clinical care:

* The resident will be responsible for three inpatient beds in general psychiatry under the supervision of the Primary Supervisor (Saulo Castel) including the opportunity of working as a supervisor of a Junior Resident and Clinical Clerks, when possible. This will be the core of clinical care and the areas below are optional. ME, Com, Col, Pr, Sc
* Outpatient clinic in general psychiatry (Saulo Castel) and Discharge and Transitional (DAT). ME, Com, Col, Pr, HA
* Psychotherapy clinics in CBT and IPT as time will limit other techniques (Justin Weissglas, Nik Grujich, Steven Selchen). ME, Col,
* Shared care with family practice at Sunnybrook (Nik Grujich). ME, Col, HA, Pr
* C/L with Robert Jaunkalns. ME, Col, HA, Pr
* Emergency and PES (Saulo Castel). ME, Col, HA, Com, Pr

# Content areas:

1. Direct patient care.
   1. Main clinical areas of inpatient psychiatry – diagnosis and management of psychosis, severe depression, mania, complex and comorbid personality dx, behavioral complications of neurocognitive disorders, overlap with substance use disorders (concurrent disorders).
   2. Transition to the community after inpatient stay – developing and implementing strategies to improve transition of care to outpatient services.
   3. General outpatient psychiatry.
   4. Emergency Psychiatry – one half a day covering Emergency Room and Psychiatric Emergency Services.
2. Content areas not involving direct patient care.
   1. Legal areas relevant to general psychiatry, Mental Health Act and Health Care Consent Act including Capacity and Consent Board hearings.
   2. Inclusion in the management of the unit including Involvement in management meetings and roles, when feasible, under the supervision of Saulo Castel, Medical Director of the Inpatient Unit.
   3. Development of at least one Quality Improvement initiative to be designed and at least initially implemented in F2 or outpatient areas. The design of the project should include from data collection to publication strategies.
   4. Art and science of billing – we may ask Ralph Lewis and Stephen Selchen to provide input on that.
   5. Clinical teaching opportunities will be available – we may ask John Teshima to provide some input there.
   6. Participation in the Patient and Family Advisory Council of the Department of Psychiatry, Sunnybrook.
   7. Interview three graduates of recent years that practice in areas of interest of the resident. The supervisor (Saulo Castel) will assist on developing content for the interviews as well as facilitating the connection.

**Ambulatory Care Clinic PGY4 & PGY5 Junior Attending Elective**

Supervisor: Dr. Matthew Boyle, Dr. Eileen LaCroix, Dr. Mark Sinyor, and Dr. Joanna Mansfield

Place: Sunnybrook HSC

Time: ½ day per week supervising two PGY-1 residents in a general outpatient clinic. Time slots available are flexible, and the clinics run either from 9:00 – 13:00 or 13:00 – 17:00. Opportunity exists for this elective to be combined with any other clinical or research electives for the PGY 4-5 academic year. We can potentially accommodate up to eight senior residents for the elective, contingent on office space availabilities.

Inquiries: Dr. Matthew Boyle (416) 480- 4089 or Matthew.Boyle@sunnybrook.ca

As part of the CBE curriculum, the PGY-1 residents attend a ½ day per week of clinic where they see new patients and follow-ups under the supervision of a staff psychiatrist. Sunnybrook HSC is a core rotation for the PGY-1 longitudinal ambulatory care clinic

For the past 6 years, we began to offer an elective for PGY 4-5 residents who have an interest in teaching and education. The residents took on a supervisory role (i.e.: junior attending role) within the clinic. In the first month of the rotation, the senior residents would generally perform the consultation with the PGY-1 residents observing and the senior resident would provide teaching to the residents on the structure of the psychiatric interview. After this period of observation the PGY-1 residents would start to do consultations with direct supervision from the senior resident. Throughout the course of the year the residents can pick up follow-up cases that they would find beneficial for their learning needs.

As part of the clinic, the senior resident would receive “supervision on their supervision” to help improve their skills as a supervisor and teacher. Hence, this is an ideal elective for residents who have a strong interest in teaching and education, as it provides an opportunity to further develop teaching and supervisory skills. There is also an opportunity for residents to meet with supervisors to provide mentorship on transitioning to practice or planning a career in academics. We have specifically scheduled social outings over dinner throughout the year to help residents in preparing for things such as; creating a CV, meeting with chiefs of psychiatry about jobs, how to bill effectively, and making a smooth transition from being a resident to staff physician. For the elective we also created a full day of interactive workshops for residents on how to become an effective supervisor.

This elective can easily be combined with further elective experience at Sunnybrook Hospital in any of the following areas; General Outpatient Psychiatry, General Inpatient Psychiatry, Psychotherapy, Collaborative Care, Psychiatric Emergency Services, Women’s Mental Health, CL Psychiatry, or Research. There are also opportunities to combine this elective with other psychiatry electives at different hospital settings.

**The Family Navigation Project Elective (PGY1-5)**

Supervisor: Drs Anthony Levitt and Monidipa Ravi

Place: Family Navigation Sunnybrook

Time: Negotiable (Wednesdays)

Inquiries: Dr. Anthony Levitt/ [Anthony.Levitt@sunnybrook.ca](mailto:Anthony.Levitt@sunnybrook.ca)

Increasingly Psychiatrists are helping to navigate the health care system for their patients and their families – whether it’s to connect them to therapeutic services, help with medical concerns, liaison with hospital and community based services. Navigation Psychiatry is therefore a new and growing field. The Family Navigation Project (FNP) at Sunnybrook provides mental and addictions care navigation for youth 13-26 and is the largest program in Canada. Multidisciplinary staff work to identify the best match and sequenced care for youth and their families. The team includes master level clinical navigators, and 3 Psychiatrists, with expertise in Child and Youth psychiatry as well as community care. FNP offers an elective in Navigation Psychiatry with these supervisors who have, collectively more than 20 years of experience in the field. The trainee will sit in on intake and needs assessments with the Navigators; attend Team Review with each Psychiatrist, where the cases are discussed with a multidisciplinary team, and will have an opportunity learn from the peer support worker for parents and peer support worker for youth as well as the research team. The FNP is a unique program within Toronto and Ontario and serves over 800 new clients a year with complex mental health and addiction issues. The trainee will learn about the key components of Navigation Psychiatry, and about the rich network of resources that exist in our system.

**Neuropsychiatry/ Functional Neurological Disorders Clinic (PGY1-5)**

Supervisor: Dr. Matthew Burke

Place: Sunnybrook

Time: 1 day per week (min 2 weeks) Thursdays

Inquiries: Dr. Matthew Burke/ [matthew.burke@sunnybrook.ca](mailto:matthew.burke@sunnybrook.ca)

Functional Neurological Disorders Clinic. Residents will see a wide variety of functional symptoms/clinical presentations (functional weakness, psychogenic non-epileptic seizures, unique somatoform disorders etc). Referrals will come from all over the province and will range from acute to chronic. Residents will learn about optimal clinical approaches for this complex patient population, psychoeducation and management strategies.

**The Mood Disorders Association of Ontario (MDAO/ Hope and Me)**

**Supervisor**: Drs. Rosalie Steinberg & Mara Silver

Dr. Rosalie Steinberg [Tuesday]—, Dr. Mara Silver, [Thursday’s] (and possibly other days as well) – Virtual.   Residents wishing to participate on other days may be able to flexibly arrange alternative clinic days and supervision with Dr. Steinberg and must be arranged by individual request and approval by Dr. Steinberg. The only fixed time requirement is that learners need to participate in a one-hour weekly case conference meeting on Tuesday afternoons.

In partnership with Sunnybrook Department of Psychiatry, MDAO (Hope and Me) is a community MH agency which offers a wide range of mental health services including peer support, counselling with trained therapists, and group programming for clients and family struggling with a variety of mental health challenges. The MDAO/Hope and Me resident will be a part of the Family Matters Program team, which supports families and individual clients ranging from 15-69. While majority of clients suffer from mood disorders, there is also a first episode program focused on support for clients with early psychosis or bipolar disorders, as well as a transitional aged youth program. Often this will be the first contact with a psychiatrist for the majority of clients.  All clients are registered as Sunnybrook patients as part of this Hospital-Community partnership.  Sunnybrook Mood and Anxiety Program patients are also seen at the MDAO/Hope and Me, based on need and availability and connected to counselling and peer support resources there.

This integrated mental health care opportunity offers a unique blend of direct and indirect service with about 60% of the time focused on direct care/consultation of MDAO clients and 40% focused on indirect support and capacity building for the Family Matters Program counselling team. (Approximately 1 new assessment/week). Residents can also choose to follow clients longitudinally for management of episodes of care based on interest.  The resident will participate in weekly collaborative care case conferences (one hour on TUESDAYS--mandatory) with the counselling and peer support team to review shared clients and offer teaching and support to the team as needed. Additional activities include provision of informal teaching to the MDA)/Hope and Me staff as well as formal presentations to community members (in lieu of grand rounds) on various mental health topics. There may also be an opportunity to co-facilitate groups (e.g. CBT, IPT, Mindfulness or psychoeducation) based on interest. The supervisors, Dr. Rosalie Steinberg (on Tuesdays) and Dr. Mara Silver (on Thursdays), have expertise in management of mood disorders and psychotherapy. They will offer direct and real-time supervision as needed. At present, clinical assessments and all team meetings will continue to be conducted virtually, however, students can elect to see patients in person at their home site if they wish.  The 1-hour virtual weekly case conference with MDAO counselling staff typically takes place on Tuesday afternoons and residents will be expected to attend this 1-hr meeting regardless of their chosen clinical day for the rotation (e.g. they can see MDAO pts on other days). This offers flexibility for residents who want to work this 1 day/week around other rotations.

**Interventional Psychiatry, Harquail Centre for Neuromodulation**

Supervisor:                            Dr. Peter Giacobbe, Dr. Sean Nestor. Dr. Helen Lee

Place:                                    Sunnybrook HSC

Time:                                     1-5 days a week

Inquiries:                             Dr. Peter Giacobbe (peter.giacobbe@sunnybrook.ca)

The Harquail Centre for neuromodulation at Sunnybrook is one of Canada’s leading interventional training programs for psychiatry residents and fellows, offering a wide range of neurointerventional treatments, including rTMS, ECT, Esketamine, and Focused Ultrasound and Deep Brain Stimulation psychiatric neurosurgery . Under expert guidance from interventional psychiatrists Dr. Giacobbe, Dr. Nestor, Dr. Helen Lee (geriatric psychiatrist) and a multidisciplinary team, you will receive hands on training in the assessment of patients with treatment-resistant psychiatric disorders and the delivery of rTMS, ECT, DBS programming and Esketamine procedures. For resident’s interested in research, we offer diverse research projects, from clinical to neuroimaging-based studies. Benefit from direct teaching and observation of rTMS/ECT/esketamine procedures, advancing your expertise in the field of psychiatry.

**Neuropsychiatry/ TBI clinic**

Supervisor:                            Dr. Matthew Burke & Dr. Neal Westreich

Place:                                    Sunnybrook HSC

Time:                                     2-3 full days per week (min 2 weeks)

Inquiries:                             Dr. Matthew Burke ([matthew.burke@sunnybrook.ca](mailto:matthew.burke@sunnybrook.ca))

The Traumatic Brain Injury Clinic at Sunnybrook Health Sciences Centre is an outpatient service that provides consultation and management for individuals who are 14-65 years of age and who have sustained a mild to moderate traumatic brain injury. Patients are referred directly from the Emergency Department, Trauma Service, and other Sunnybrook ambulatory clinics or from Family Practice at Sunnybrook. The clinic also accepts external referrals from community physicians.

Our interdisciplinary team includes a cognitive neurologist who is the director of the clinic along with a youth and adolescent psychiatrist, a physiatrist and a clinic coordinator with a clinical background in occupational therapy. The clinic also has a well-recognized research component.

Our clinical team provides the following range of services:

• Initial assessment, diagnosis and ongoing support/management of the physical, emotional, behavioural, cognitive, psychological and psychiatric symptoms of TBI and related sequelae

• Early detection and management of factors that may impact recovery

• Evidence-based treatment recommendations and coordination of community supports and treatment/rehab services (OHIP and third party-funded)

• Referrals for consultation with other specialists, medical services and/or imaging

• Reintegration support for patients returning to work/school

• Collaborative care with the primary care physician/team

• Patient and family education

Neuroimaging

In the Youth/Young Adult Clinic, there are approximately 5-8 patient visits per week, on Thursdays. The student will be gain experience with TBI in the both the Adolescent and Adult population. This is a multidiscipline clinic with both Dr Neal Westreich, Psychiatrist and Dr Mathew Burke Neurologist as the primary supervisors. Student will also gain training in PTSD (TBI patients) with Dr Janet Ellis and the opportunity, if the student choices, to be exposed to the other medical clinics that are part of the TBI Program at Sunnybrook

**Mood and anxiety disorders, Women's mental health, Group/Individual psychotherapy**

OUTPATIENT/Virtual care ELECTIVE as per your clinical interest. Areas of focus can include any combination of: Mood and anxiety disorders, Women's mental health, Group/Individual psychotherapy.

SUPERVISOR:     Dr. Joanna Mansfield

PLACE:   Sunnybrook Health Sciences Centre / OTN

TIME:  Flexible

INQUIRIES:  Dr. Joanna Mansfield/  [Joanna.mansfield@sunnybrook.ca](mailto:Joanna.mansfield@sunnybrook.ca" \t "_blank)

This elective can be for someone who would like to learn about running an outpatient care practice with a focus in any combination of the above areas as per your clinical interest. There is also opportunity for teaching/supervision of junior residents/learners if interested.

Learn about assessment, management and follow up of patients, psychopharmacology prescribing and psychotherapy support for patients in an outpatient setting. Particular focus can be on mood and anxiety disorders, women's mental health, or general psychiatry. Can include an introduction to or a more significant psychotherapy component if interested (individual, group). This elective can be modified to fit your interests and availability.

**Neuromodulation in older adults**

Supervisor(s): Dr. Helen Lee

Place: Sunnybrook HSC

Time: Negotiable

Inquiries: Dr. Helen Lee/ [hyewon.lee@sunnybrook.ca](mailto:hyewon.lee@sunnybrook.ca)

This rotation will consist of assessment and management of psychiatric illness in older adults, including mood disorders, psychotic disorders, neurocognitive disorders, and neuropsychiatric sequelae of other medical conditions. In particular, there will be a focus on providing neuromodulation for older adults. Learners will be able to participate in assessments for suitability for ECT or rTMS and develop competency in delivery of these treatments. There will be research opportunities (neurostimulation in older adults, novel therapeutics for behavioural and psychological symptoms of dementia) for those who are interested.

Learning Objectives:

1. Develop skills in assessment of psychiatric disorder in older adults, with additional focus on suitability for neuromodulation.
2. Develop competency in the delivery of rTMS, ECT and DBS and the evaluation of their clinical effects.