

## **Emergency Psychiatry and Crisis Service**

Name of Institution: St. Mary's Hospital Center

Location: 3830 Lacombe Avenue, Montreal, Quebec

Type of Fellowship: Clinical fellowship, with the possibility of a research component

Fellowship Program Director: Dr. Suzanne Lamarre

Number of Positions: 1

Length of Fellowship: 1 year

### **I-STRUCTURE AND ORGANIZATION OF THE PROGRAM**

The fellow is to acquire proficiency in evaluating and managing acute psychiatric problems presenting to the Emergency Department of a general community hospital. There is a systemic focus in working with the patient within their social network, and in collaboration with families. There is also a focus on the administrative aspects of ER Psychiatry work, whereby the fellow learns to prioritize referrals; is sensitized to the service level outcomes that are prioritized in hospital management – eg. efficient and safe medical / nursing processes; monitoring ER lengths of stay; patient safety (management of agitated patients, and tracking of code white events, restraints /seclusion); managing overcrowding / patients boarding in the ER.

Fellows are expected to teach and mentor junior psychiatry and family medicine residents who rotate in the ED Psychiatry area, in addition to being involved in the supervision of undergraduate medical students on rotation.

Fellows are encouraged to pursue an area of scholarly inquiry during their clinical fellowship, and to submit an article for publication during or following the year of their fellowship.

ER fellowship supervision includes:

- 3 half days in the ED under the supervision of the principal fellowship director, trained in a systems approach
- 3 half days in the ED with other ED psychiatrists, one shift minimally with a Geriatric Psychiatrist;
- 4 half days for research / scholarly work, which may be focussed on developing knowledge of the evidence base for Emergency Psychiatry; acquiring knowledge and skill in the administrative aspects of ED Psychiatry; on acquiring a familiarity with information systems used to track ED Psychiatry patients and statistical parameters; or on another subject of inquiry relevant to the domain of Emergency Psychiatry practice
- 1 month ED Psychiatry rotation outside the McGill network, and preferably out-of-province in order for the fellow to acquire new skills in a new learning context (eg. at a major Canadian urban center with Emergency Psychiatry expertise)

- 1 month ED Psychiatry rotation outside Canada (eg. US elective) at a center with demonstrated strength in Emergency Psychiatry – eg. a center of excellence

In training fellows in Emergency Psychiatry, it is hoped that this will positively impact training for postgraduate residents in psychiatry (junior R1s); postgraduate family medicine residents and undergraduate medical students via the strengthening of the scholarly aspect of the Emergency Psychiatry service. Further, it is hoped that residents completing the fellowship may go on to leadership positions in Emergency Psychiatry, whether within the RUIS McGill network, or beyond.

**a. Service/Education balance**

There are approximately 1400 psychiatry consultations performed by the PECS team at the Emergency Department (ED) at St. Mary's Hospital Center on an annual basis; there is a rich diversity of patients presenting to the ED, both from a diagnostic point of view, and from a contextual point of view – St. Mary's Hospital Center is situated in a multicultural neighborhood of Montreal, with a significant number of new immigrants and refugees in the sector; in addition to the hospital being situated next to a major university (University of Montreal) with a sizeable student population.

The fellow is expected to develop proficiency in the evaluation and treatment of patients and families during acute presentations of psychiatric illness; the fellowship schedule includes 6 half-days in the ED proper, and 4 half-days reserved for an academic / research component.

The fellow is expected to become competent in the medical expert role of the ED psychiatrist, regarding diagnostics and therapeutics in the acute emergency setting, with a focus on evidence-informed care; to become proficient in delivering crisis services in the acute setting; to hone their skills as a communicator and collaborator with other ED physicians, allied health professionals, and partners in the community (eg. CLSCs; crisis centers; shelters); to advocate for mental health patients in the ED setting; and to demonstrate consistent professionalism in the ED setting with patients, families, other allied professionals and with their medical colleagues. Fellows are expected to become more autonomous in psychiatric evaluations, the construction of management plans, in coordinating the efforts of the ED Psychiatry team, and in the administration of the ED Psychiatry service over the course of the training period.

There is close clinical supervision provided during ED work, with a designated ED supervisor for each half-day. Academic supervision is coordinated between the fellow and the fellowship supervisor, with a minimum of 1 hour weekly reserved for face-to-face discussions and feedback. As mentioned above, the fellow is expected to

be involved in family medicine postgraduate teaching and in undergraduate supervision.

The PECS team is undergoing a transformation in the ED setting, and fellows will be expected to work collaboratively with ER Psychiatry RN liaison, the ED social worker, and with the medical nurses caring for patients with mental health conditions.

Fellows are expected to attend weekly Academic Grand Rounds, Clinical Grand Rounds, and monthly staff Journal Club; and to themselves present minimally at one Grand Rounds and one Clinical Rounds engagement.

Further, fellows in the Emergency Psychiatry fellowship will be invited to participate at the Comité des Urgences meetings on a monthly basis, in order to actively participate at meetings with other Emergency Psychiatry colleagues in Montreal, familiarizing themselves with the pertinent clinical and administrative challenges being addressed by that administrative body, and networking with other leaders in Emergency Psychiatry.

There is no on-call night duty responsibility during the clinical fellowship.

Fellows are provided with an individual office, with computer intranet / library access, in addition to a phone / voice mail. There is access to the Health Sciences Library at St. Mary's Hospital Center.

## **II-EVALUATION OF THE FELLOW PERFORMANCE & FREQUENCY OF EVALUATIONS**

### **Format for evaluation used in this program:**

Every week, one hour is formally reserved for discussion and feedback between fellow and supervisor(s). There is ongoing verbal feedback for every half-day shift worked with the supervisor (face to face), and mid-term / final evaluations are completed.

	<b>YES</b>
Mid-rotation evaluations	<input type="checkbox"/>
Face-to-face meetings	<input type="checkbox"/>
Evaluations are timely	<input type="checkbox"/>