

The Canadian Psychiatric Association



# **MAKING AN IMPACT**

**2015**  
**Report to Members**

January 2016

# Who We Are

Incorporated in 1952, the Canadian Psychiatric Association (CPA) is the national voluntary professional association for Canada's 4,700 psychiatrists and 900 residents. The CPA serves a membership of 2,200 Canadian psychiatrists, 400 residents and trainees and 140 affiliates which of 40 are international psychiatrists.

## Vision

A strong profession for a healthy population.

## Mission

As the national voice of Canadian psychiatrists, the Canadian Psychiatric Association advocates for the professional needs of its members and promotes excellence in education, research and clinical practice.

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# Your Past President

It is truly my honour to introduce the Canadian Psychiatric Association 2015 Report to Members with our current president, Dr. Sonu Gaiind.

As I reflect back on the past year, I am pleased to say that the public profile and work done by the association have markedly expanded. As the report demonstrates, many of our members have taken on increased advocacy roles. They have met with MPs, been active contributors to a variety of committees and organizations, and voiced important issues in the media and elsewhere.

Our partnerships with other national and international medical associations have also been enhanced. Numerous CPA members from across the country were delegates to the 2015 General Council of the Canadian Medical Association in Halifax and their contributions were significant. Our relationship with the Royal College of Physicians and Surgeons of Canada is becoming closer as well. The American Psychiatric Association had its annual meeting in Toronto in 2015 and I am pleased to say the presence and profile of the CPA were greater than ever. I see strong collaborations on various issues in the future.

Our connections with our members are also on the right track. We have met with provincial associations and psychiatric academies, and continue to work together to the mutual benefit of all. The PsychEXPRESS has become a communication tool which members rely upon for up-date information. We have conducted a member survey to help determine how we can best serve the needs of our members



and have undertaken a governance review to help transition those needs into actions. The 2015 CPA Annual Conference in Vancouver was again a success and remains a key benefit to members. It is an event which members look forward to; both for the excellent education and for the chance to meet and connect. I am certain you will be impressed by all the CPA does for its members as you read through the report.

On a personal note, I have thoroughly enjoyed working with our CPA Board and staff over the past year. I would also like to thank all of our members who have contributed to the association. It is your efforts which keep our profession strong. I feel blessed that I have been

able to represent the psychiatrists of Canada as President of the Canadian Psychiatric Association in 2015 and am proud of our accomplishments. It has been an honour to serve.

I am optimistic for the next year and wish Dr. Gaiind and Dr. Prasad every success in 2016. I know the work has started already, and that we are in very capable hands. I look forward to all that we can accomplish together in the future.

Yours truly,

Dr. Padraic Carr  
Immediate Past President

# Your President

**A**s President of the CPA, I am pleased to present our 2015 Report to Members. Released in January, the report is synchronized with our annual membership renewal and recruitment process.

I first want to thank our past-president, Dr. Padraic Carr, who played a key role in advancing the views of the profession in 2015 regarding physician-assisted death and our concerns related to cross-border sharing of mental health information. Dr. Carr was also instrumental in strengthening the CPA's relationship with the American Psychiatric Association, the psychiatric academies and the provincial associations. We owe Padraic a debt of gratitude for his boundless energy in putting in the time and effort he did during his presidential year! We wish Padraic well as the President-Elect of the Alberta Medical Association, and I look forward to his continued guidance as CPA Past-President.

2015 was marked by significant Association activity. We met with ministers and senior decision-makers from the federal government. We worked collaboratively with the Canadian Alliance for Mental Illness and Mental Health and the Canadian Medical Association. We provided leading-edge continuing professional development through the CPA Institute, the Annual Conference and *The Canadian Journal of Psychiatry*. As you can see, the CPA carries a significant responsibility as *the* national voice for psychiatry.

This latter point should not be underestimated. In an increasingly complex medico-political environment, the CPA is the *only* national organization that speaks on your behalf with the collective voice of our colleagues. In the absence of a strong and vibrant CPA, it would be difficult to develop or advance the profession's views on legislation (physician-assisted death, not criminally responsible), policy (Choosing Wisely Canada, implementation of the Ashley Smith inquiry recommendations), federal investments in mental health (advocating for a \$100 million Mental Health Innovation Fund, developing national mental health system performance indicators, increased funding for mental health research), or other public health issues (access to care).



The new government and its promised action on mental health means that now more than ever the CPA's voice and presence matters. After reading the Report to Members and seeing the breadth and depth of our activities, it is my sincere hope that members will be inspired to renew their membership, lapsed members will come back into the fold and our colleagues who have never joined the CPA will do so.

To be successful, the CPA must be *member-focused*, *member-driven* and *member-responsive*. With this in mind, the Board of Directors and Executive Committee have worked tirelessly to position the Association for ongoing and future success. As part of this plan,

you receive the PsychEXPRESS, our weekly e-blast to keep you informed of CPA activities. In January you will receive the reinvigorated *CJP* which now includes an e-platform hosted by SAGE, and later this year the new CPA website will be unveiled. The CPA also recently released its Governance Working Group report which focuses on the structure and processes of the Association, and highlights the importance of member engagement.

The CPA is about you. It is about staying focused on offering you the right combination of clinical content, public policy, and programs and services you value. Over the coming year we are committed to continue to build on the key areas of *engagement*, *excellence* and *impact* to ensure the CPA hears and effectively reflects your voice.

Thank you for your continued support of the Association. It is truly appreciated. Please feel free to share the report with colleagues. I welcome your thoughts about our strategic focus and what you value about the CPA. I can be reached at [president@cpa-apc.org](mailto:president@cpa-apc.org).

Yours sincerely,

K. Sonu Gaind, MD, FRCPC, FCPA  
President

# Your Board Chair

**A**s incoming Board Chair, I am honoured to have the confidence of the Board of Directors and the Executive Committee and I look forward to working closely with all members to advance the strategic priorities of the Association.

In preparation for this role, I have met with my predecessor, Dr. Don Addington, on several occasions to discuss the CPA's ongoing work. I sincerely thank Don for his leadership as Board Chair over the past six years. He has guided the Association through a number of challenges with a sense of calm and resolve, never losing sight of member needs and expectations.

This past year the Association has dealt with a number of internal and external opportunities and challenges—there is no shortage of either. Strategically, the Board and the Executive Committee are focused on what makes the CPA *relevant* to the member experience and the public policy conversation about the future of mental health.

From governance, by-laws and operating policies, to finances, membership recruitment and retention, the Board and the Executive Committee are working diligently to ensure the CPA makes decisions that will lead to success over the short-, medium- and long-term. At the same time, we are engaged on mental health policy files where the voice of psychiatry must be heard.



As you read through this report, you will gain a greater understanding of the complex array of issues facing the CPA, including challenges to be overcome and opportunities to be embraced.

Through it all, I see a tremendous amount of passion and commitment by the Board and the Executive Committee, as well as the CPA's committees, councils and working groups to address issues head-on and improve the CPA's relevance and impact. Also, thank you to CPA staff whose sage advice and dedication to the profession is beyond reproach.

While there is more to accomplish, much of the heavy lifting has been

done to transform the CPA into a premiere national specialty society worthy of your support.

If you have any questions or comments regarding the directions set by the Board of Directors and the Executive Committee, please contact me at [chair@cpa-apc.org](mailto:chair@cpa-apc.org).

Yours truly,

A handwritten signature in blue ink, appearing to read 'Pamela Forsythe'.

Pamela Forsythe, MD, FRCP, DFCPA  
Board Chair



# Your CEO

**T**he Report to Members is an opportunity for members to reflect on the work of the CPA. As a voluntary national professional association, it is essential that you appreciate the range of activities the CPA undertakes as the voice of psychiatry. Members are the lifeblood of the Association. You are the reason we exist, and we can't do it without you!

By the very nature of our mandate, a significant portion of the CPA's work is about providing psychiatrists with leading-edge, evidence-based clinical information that assists you in treating patients. Complementing this, we ensure the collective voice of psychiatry is heard in matters of public policy that focus on mental illness and the future of mental health care in Canada. Combined, it is about focusing on the issues that are important to you and providing valuable resources for all stages of your professional life.

This report is also an opportunity for psychiatrists to take a look at what we have accomplished and to make the decision to support the Association. If you agree that we are moving in the right direction, or at a minimum believe in supporting the only national professional association that speaks on behalf of psychiatry, I ask you to encourage your colleagues to join. There is strength in numbers and the voice of psychiatry is needed now, more than ever.

That said, I realize as a voluntary association we need to earn your loyalty every year—particularly in an increasingly crowded field of health organizations vying for your support. So thank you for your continued engagement in CPA.



In closing, it has been an honour to work closely with Dr. Padraic Carr in 2014-15 as President, and now Dr. Sonu Gaind. I have also been privileged to work with Dr. Don Addington as Board Chair, and now Dr. Pamela Forsythe. Their collective devotion to the profession is as substantial as their commitment to the future of the CPA. Also, thank you to the members of the Executive Committee and the Board of Directors for their leadership, due diligence and wise counsel. They are the engines that propels the Association forward. I also recognize the essential work of the councils, committees, working groups and sections led by their capable chairs.

Finally, I owe a huge debt of gratitude to CPA staff whose talent, work ethic and commitment to the profession are an advantage to the Association.

I look forward to working with all members to advance the interests of the profession. If you would like to learn more about the work of the Association, do not hesitate to contact me at [gbrimacombe@cpa-apc.org](mailto:gbrimacombe@cpa-apc.org).

Sincerely,



Glenn G. Brimacombe  
Chief Executive Officer

# Our Touchstone

To effectively position the CPA to make a difference in the lives of members and their patients, the Board of Directors approved the Strategic Action Plan **When Preparation Meets Opportunity** in 2014. The plan identifies five strategic objectives:

- The CPA is a leading voice and trusted source of reliable clinical information to members, the public, decision-makers, media, healthcare providers, the private sector and others.
- The CPA is a leader on public policy issues related to the role of psychiatry and the future of mental health in Canada.
- The CPA is a strategic partner of choice.
- The CPA has a compelling value proposition that inspires psychiatrists to join and actively participate in the organization.
- The CPA is a high performing organization with exceptional talent and a strong financial base.

**To meet these objectives, the CPA organized its activities under three pillars:**

## **A Unified Voice**

The CPA is *the* unified national voice that speaks for psychiatry on issues of professional concern and in matters of public policy.

## **Dedicated to Quality of Care and Lifelong Learning**

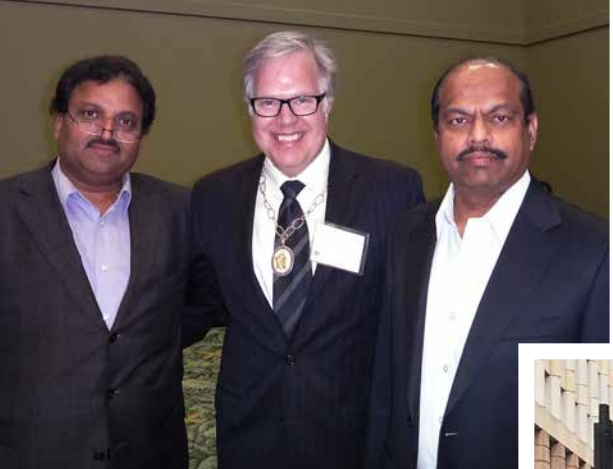
The CPA provides members with *leading-edge* knowledge to support clinical decision-making throughout their career.

## **Member-Driven. Member-Focused. Member-Responsive.**

The CPA is a *dynamic and responsive* organization that engages members to meet their needs and expectations throughout their professional life cycle.

These three pillars provide the Association with a roadmap for the future and position the CPA to provide expert advice to governments and other agencies, to educate members throughout their careers, and to influence society on matters related to mental health and illness.







# A Unified Voice

The CPA is *your* national voice on matters related to psychiatry and mental health. Whether it is meeting with the Minister of Health, Members of Parliament, Senators, the Official Leader of the Opposition, or a House of Commons or Senate standing committee, CPA brings an essential perspective to decision makers.

Over the past year, Dr. Padraic Carr (president 2014-2015) met with Members of Parliament to advance the views of psychiatry, including: Conservative MP James Rajotte, then chair of the finance committee; Conservative MPs Eve Adams, then parliamentary secretary to the minister of health; and David Wilks, then member of the House of Commons health committee (HESA); as well as NDP MP Dany Morin, member of HESA, and NDP Health Critic and HESA Vice-Chair, Libby Davies. Barely a week in office, Dr. Sonu Gaiind, CPA's current president, met with the following senior officials as part of a Mental Illness Awareness Week delegation: Monique St. Amour, Gilles Moreau and Sylvie Chateauvert of the Royal Canadian Mounted Police; Paul Glover and Mary-Luisa Kapelus of Health Canada; Natalie Gabora and Dr. Donna McDonagh of Correctional Services Canada; Dr. David Ross of Veterans Affairs Canada and Paul Thoppil of Aboriginal Affairs and Northern Development Canada.

The CPA contributed to numerous public policy discussions about the future of mental health and the role of psychiatry, including:

## Physician-Assisted Death

Dr. Sonu Gaiind appeared before the federal External Panel on Options for a Legislative Response to *Carter v. Canada*, which was chaired by CPA member, Dr. Harvey Chochinov, as well as the Provincial-Territorial Expert Advisory Group on Physician-Assisted Dying. The CPA offered its preliminary remarks on the issue to both groups in advance of releasing its official position. The CPA's position is in development and will include consultation with members.



Dr. Gaiind with External Panel members.

## Federal Pre-Budget Consultation

The CPA submitted a brief to the House of Commons finance committee as part of the federal government's 2015 pre-budget consultation process. In the brief, the CPA outlined four specific requests of the federal government:

- Create a strategically-targeted, five-year, \$100 million *Mental Health Innovation Fund* to accelerate the spread of evidence-based innovations to improve the cost-effective delivery of mental health programs and services at the community level.
- Fund the development and implementation of a mental health research agenda for Canada, which encompasses population, health services, clinical and neurosciences research including research that incorporates knowledge from those with lived experience.
- Invest in the development of a common and comprehensive set of national mental health indicators and mental health expenditure data to improve overall mental health system performance.
- Implement the Mental Health Commission of Canada's *National Standard for Psychological Health and Safety in the Workplace* throughout the public service.

## Appearing Before the House of Commons Standing Committee on Health

Dr. Padraic Carr appeared before the Commons health committee to discuss the implementation of a national mental health strategy and any barriers to doing so, results of the Housing First projects, evidence on the link between mental health issues and higher levels of stigma, and the coordinating role the CPA can play in the dissemination of research findings and best practices on suicide prevention.



Dr. Carr and CPA CEO, Glenn Brimacombe, testify before the Commons health committee.

## Testifying on Mental Health and Justice

Dr. Alexander (Sandy) Simpson appeared before the Senate social affairs, science and technology committee on behalf of the Canadian Academy on Psychiatry and the Law and CPA to speak to Bill S-208, *An Act to Establish the Canadian Commission on Mental Health and Justice*. While we welcomed the bill's focus on the interface of mental health and justice, several amendments were proposed. Ultimately, the bill was withdrawn.

## Cross Border Sharing of Mental Health Information

Dr. Padraic Carr met with the Privacy Commissioner of Canada, Mr. Daniel Therrien, to discuss the concerns the CPA has with the sharing of sensitive mental health information with U.S. Customs and Border Protection via the Canadian Police Information Centre (CPIC). The CPA also released a joint statement on the sharing of cross border information with the American Psychiatric Association. This December Ontario enacted legislation to prevent non-conviction records, including mental health calls, from being disclosed in police record checks in Ontario. It is these records, shared with U.S. border agencies through CPIC that led to people being stopped at the border.



Dr. Carr with the Privacy Commissioner of Canada.

## Advisory Panel on Healthcare Innovation

Chaired by Dr. David Naylor, the CPA was actively involved in the consultation process and submitted a written brief highlighting select innovations in the delivery of psychiatric care. The Association also met with senior officials at Health Canada to discuss the report.

## Workplace Mental Health Session on Parliament Hill

In partnership with parliamentary staff from the NDP, the CPA offered a session on mental health in the workplace led by Dr. Mamta Gautam, a pioneer, specialist and champion of well-being for over 25 years. The session was well-received and we hope that it will lead to a broader conversation with all MPs about the importance of mental health.

## Roundtable Discussion on Family Violence and Child Abuse Prevention

Dr. Padraic Carr attended a roundtable on family violence prevention and child abuse in Winnipeg. Hosted by the Health Promotion and Chronic Disease Prevention Branch of the Public Health Agency of Canada, the roundtable dialogue focused on ways to connect information and expertise to strengthen the health response to family violence and child abuse. This was the third such event CPA has attended.



Roundtable delegates with Health Minister, Rona Ambrose.

## CPA Talks to Parliamentarians about Dementia and Palliative Care

Dr. Kiran Rabheru, on behalf of the Canadian Academy of Geriatric Psychiatry and the CPA, spoke to MP Claude Gravelle about his private member's bill C356 – *An Act for a National Dementia Strategy* and to MP Charlie Angus about his private member's motion to establish a pan-Canadian palliative and end-of-life care strategy.



CPA staff, Kelly Masotti, with MP Claude Gravelle and Dr. Kiran Rabheru.

## CPA Convenes Political Roundtable on Federal Role in Mental Health

In advance of the federal election, the CPA partnered with the Canadian Psychological Association and the Economic Club of Canada to bring together representatives of federal political parties (Liberal, Conservative and NDP) to discuss their views on the federal role in mental health.

## THE FEDERAL ELECTION — A BRAND NEW DAY?

With a Liberal majority government in place for the next four years, there is a renewed sense of optimism about the federal role in health and mental-health care. Given the Prime Minister's commitment to negotiate a First Ministers' Health Accord, and the specific mental health commitments contained in the mandate letters issued to ministers (see table on page 10), there is an opportunity for CPA to advocate for significant advances in mental health care.

The commitments outlined are substantial and demonstrate that mental health is a priority in the eyes of the new government. Letters from Dr. Sonu Gaiand have been sent to each minister, requesting a meeting to discuss how psychiatry can work with the government to improve the mental health of Canadians.



*Liberal leader, Justin Trudeau, with  
CPA CEO, Glenn Brimacombe.*

## WORKING IN COLLABORATION AND PARTNERSHIP

In an inter-connected world, a single voice can only accomplish so much. The CPA understands the power of working in partnership with those who share common ground with psychiatry. Some opportunities are about strengthening the house of psychiatry along with the subspecialty academies and provincial psychiatric associations. Others are about developing and nurturing external partnerships with organizations that share the same strategic destination.

### Aligning Strategic Interests with the Academies

The Academies represent a growing proportion of subspecialist members within the profession. Currently, the Canadian Academy of Child and Adolescent Psychiatry, the Canadian Academy of Geriatric Psychiatry and the Canadian Academy of

Psychiatry and the Law each have a seat on the CPA Board. Over the past year, the CPA has strengthened its relationship with the academies by looking for opportunities for a shared voice on public policy issues and by better communicating the benefits of membership to each other's members. The academies and the CPA intend to hold a joint strategic planning session focused on providing greater value to our members.



cagp acgp  
CANADIAN ACADEMY OF  
GERIATRIC PSYCHIATRY  
ACADÉMIE CANADIENNE  
DE GERIATRIE PSYCHIATRIQUE

CAPL  
Canadian Academy of  
Psychiatry and the Law



ACPD  
Académie canadienne  
de psychiatrie et de droit

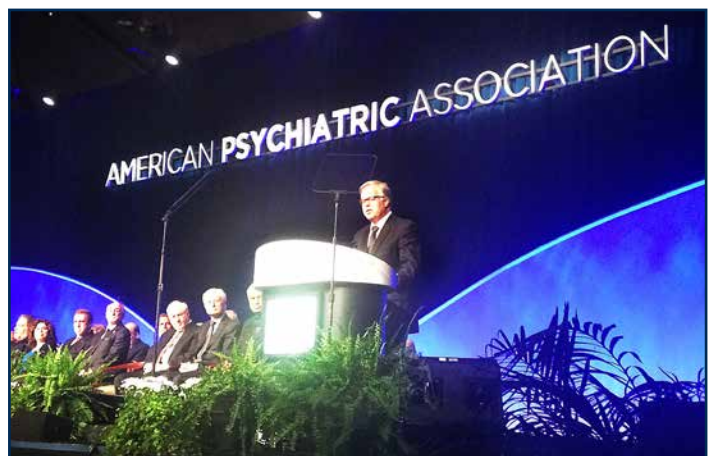


### Provincial Psychiatric Associations

While the CPA is a leader at the national level, much of the action related to the role of psychiatry and the future of mental health plays out at the provincial and regional levels. The CPA President attends the annual general meetings of the provincial psychiatric associations and discussions are underway about how the CPA might support the work of the provinces. Currently, the CPA's Economics Committee is in the early stages of developing a national economic database to support provincial tariff discussions and the CPA's Governance Working Group is recommending the creation of a forum for the provincial psychiatric associations.

### International Psychiatric Organizations

Meetings with our counterparts from the United States, the United Kingdom, and Australia and New Zealand, illustrate that the profession is facing similar policy issues and challenges. With this in mind, efforts are being taken to strengthen our international relationships through our respective elected representatives and CEOs. At this year's American Psychiatric Association (APA) meeting in Toronto, Dr. Padraic Carr created a precedent by addressing their Assembly and welcoming delegates at the opening session. With the leadership of Dr. Carr, the CPA and APA issued a joint statement on *Cross-Border Sharing of Mental Health Information* at the CPA's Annual Conference.





## The Federal Government's Mental Health Agenda A Generational Opportunity for Change

In November 2015, each minister received a mandate letter in which the Prime Minister set out their respective priorities. The following are the excerpts relevant to mental health:

### Minister of Health

*"Engage provinces and territories in the development of a new multi-year Health Accord. It should...make high quality mental health services more available to Canadians who need them."*

*"Support the Ministers of Justice and Public Safety and Emergency Preparedness on efforts that will lead to the legalization and regulation of marijuana."*

### Minister of Justice and Attorney General of Canada

*"Lead a process, supported by the Minister of Health, to work with the provinces and territories to respond to the Supreme Court of Canada decision regarding physician-assisted death."*

*"You should conduct a review of the changes in our criminal justice system and sentencing reforms...implementation of recommendations from the inquest into the death of Ashley Smith regarding the restriction of use of the solitary confinement and the treatment of those with mental illness."*

*"Work with the Minister of Public Safety and Emergency Preparedness and the Minister of Indigenous and Northern Affairs to address gaps in services to Aboriginal people and those with mental illness throughout the criminal justice system."*

*"Working with Ministers of Public Safety and Emergency Preparedness and Health, create a federal-provincial-territorial process that will lead to the legalization and regulation of marijuana."*

*"Implement our platform commitments to toughen criminal laws and bail conditions in case of domestic assault, in consultation with stakeholders and the goal of keeping survivors and children safe."*

### Minister of Indigenous and Northern Affairs

*"...make real progress on the issues most important to First Nations, the Métis Nation, and Inuit communities – like housing, employment, health and mental health care, community and safety and policing, child welfare, and education."*

*"Work in collaboration with the Minister of Infrastructure and Communities, and in consultation with First Nations, Inuit, and other stakeholders, to improve essential physical infrastructure for Indigenous communities including improving housing outcomes for Indigenous Peoples."*

*"Work with the Minister of Status of Women to support the Minister of Infrastructure and Communities in ensuring that no one fleeing domestic violence is left without a place to turn by growing and maintaining Canada's network of shelters and transition houses."*

### Minister of National Defence

*"Work with senior leaders of the Canadian Armed Forces to establish and maintain a workplace free from harassment and discrimination."*

*"Work with the Minister of Veterans Affairs and Associate Minister of National Defence to develop a suicide prevention strategy for Canadian Armed Forces personnel and veterans."*

### Minister of Veterans Affairs and Associate Minister of National Defence

*"...and fully implement all of the Auditor-General's recommendations on enhancing mental health service delivery to veterans."*

*"Create two new centres of excellence in veterans' care, including one with a specialization in mental health, post-traumatic stress disorder and related issues for both veterans and first responders."*

*"Provide greater education, counselling, and training for families who are providing care and support to veterans living with physical and/or mental health issues as a result of their service."*

*"Work with the Minister of National Defence to develop a suicide prevention strategy for Canadian Armed Forces personnel and veterans."*

### Minister of Families, Children and Social Development

*"Provide communities the money they need for Housing First initiatives that help homeless Canadians find stable housing."*

### Minister of Infrastructure and Communities

*"Work with the Minister of Families, Children and Social Development to create a housing strategy to reestablish the federal government's role in supporting affordable housing."*

### Minister of Science

*"Examine options to strengthen the recognition of, and support for, fundamental research to support new discoveries."*

## Canadian Medical Association

As an affiliate member of the Canadian Medical Association (CMA), the CPA is working diligently with the CMA as it develops a position on physician-assisted death and pushes the federal government to develop a seniors strategy. The associations are also developing a joint position statement on access to mental health care, which will be released shortly for member consultation.

## Health Action Lobby

CPA is a member of the Health Action Lobby (HEAL), a coalition of 40 national health organizations. HEAL released a consensus statement on the role of the federal government called *The Canadian Way*, which speaks to the federal role in health and health care. The report specifically recognizes the need to invest in mental health.

## Canadian Alliance on Mental Illness and Mental Health

As a founding member of the Canadian Alliance on Mental Illness and Mental Health (CAMIMH), CPA is a strong supporter of the *Champions of Mental Health Gala* and *The Faces of Mental Illness* campaign. These are unique opportunities to raise the profile of mental illness with MPs, media and the public. While CAMIMH submitted a brief as part of the 2015 pre-budget consultation process, this is an opportune moment for the mental health community to find its collective voice and work with the federal government to advance the mental health of Canadians.

## Wait Time Alliance

The Wait Time Alliance (WTA) released its 2015 report on wait times in December. The CPA noted that for the seventh consecutive year the provinces have made no progress in measuring wait times for psychiatric care, and more concerted action is needed. CPA Past-President, Dr. Suzane Renaud, has been the official French spokesperson for the WTA.

## Mental Health Commission of Canada

CPA was pleased that the federal government renewed the Mental Health Commission of Canada's (MHCC) mandate for 10 years. The CPA looks forward to reviewing the MHCC action plan and identifying ways to collaborate. Dr. Manon Charbonneau (CPA past-president) and Dr. Francois Borgeat (CPA Life Member) sit on the MHCC Board.

## Royal College of Physicians and Surgeons of Canada

Over the past year, the CPA completed its reaccreditation as a CPD provider, and is currently offering its feedback on the proposed national standard for commercial support, which the CPA feels needs further amendment. The Royal

College released a pilot video that aims to give Canadians a better understanding of what psychiatrists do and why they matter to Canadians. The video features CPA members Dr. Padraic Carr, Dr. Paul Dagg, Dr. Karine Igartua and Dr. Derek Puddester.

## CPA MEMBERS IN THE NEWS

Media often contact the Association to connect with experts and find out where the CPA stands on important mental health issues. Thank you to the following members for answering the call on the following topics:

- Building a therapeutic relationship with your psychiatrist, BP Magazine, *Dr. Sonu Gaiind*
- Refugee mental health care, Regina Leader-Post, *Dr. Cécile Rousseau*
- Physician-assisted death, Medical Post, *Dr. Sonu Gaiind*
- Physician-assisted death, National Post, John Gormley Show, Andrew Lawton Show, News Talk 770 and Canadian Press, *Dr. Padraic Carr*
- Telepsychiatry, CBC, *Dr. Doug Urness*
- Confidentiality and Duty to Protect, Radio-Canada, *Dr. Gilles Chamberland*
- Mental health and the federal election, CMAJ, *Dr. Padraic Carr*
- Seniors and sleep aides, Globe and Mail, *Dr. Mark Rapoport*
- Unreported suicide, National Post, *Dr. Alain Lesage*
- Use of ADHD medication as a study aide, Humber College newspaper, *Dr. Chris Wilkes*
- Antidepressant medication and patents, Globe and Mail, *Dr. Sid Kennedy*
- Stigma and the Germanwings crash, Radio-Canada, *Dr. Manon Charbonneau*
- How increased freedoms for NCR patients are determined, Global News, *Dr. Sandy Simpson*
- 3D SPECT (Single Photon Emission Computed Tomography) and psychiatric practice, The Medical Post, *Dr. Padraic Carr*
- PTSD and the Ottawa shooting, Globe and Mail, *Dr. Jitender Sareen*
- Distinguishing depression from sadness, Vim and Vigour Magazine, *Dr. Padraic Carr*
- The not-criminally-responsible legislation explained, Ottawa Citizen, *Dr. Johann Brink*
- Practice patterns of psychiatrists, Medical Post, *Dr. Padraic Carr* and *Dr. Doug Weir*
- Seroquel and prescribing practices, Canadian Press, *Dr. Jitender Sareen*







# Quality Care and Learning

Quality of care and continuing professional development (CPD) is a priority for CPA. This is particularly important in a policy environment that is increasingly focused on accountability, value-for-money and appropriateness of care.

The CPA is well positioned to provide timely access to leading-edge clinical information that supports decision-making and improved patient outcomes. To better serve our members, we are reviewing the products and services we offer. These currently include:

## The Canadian Journal of Psychiatry

*The Canadian Journal of Psychiatry (The CJP)*, is the CPA's flagship journal when it comes to leading-edge knowledge translation.

After 60 years of in-house publication, *The CJP* is now published by SAGE. We hope you will embrace the changes made to the journal and its new state-of-the-art e-platform.

This past year saw *The CJP* tackle important issues such as depression, borderline personality disorder and suicidal behaviour in adolescents; the profile of persons deemed to be not-criminally-responsible; consent to treatment; and the explicit and implicit attitudes of Canadian psychiatrists toward persons with mental illness.

A supplement on posttraumatic stress disorder, sponsored by the Canadian Armed Forces, is anticipated in early 2016.



## International CPD Conference

ICPD 2015 was held on board a cruise from Rome to Barcelona, and included sessions on neurophysiological mechanisms of pain development and treatment, insomnia and the effect of aging on sleep, eating disorders including anorexia in adolescents, pain across the lifespan, violence risk assessment for general psychiatrists, depression in the medically ill, somatizing, post traumatic stress disorder, neuromodulation, parasomnias and fibromyalgia.

## Position Papers

The CPA develops position papers on clinical practice, training, legal, ethical and public policy issues. In 2015, the CPA published:

- *Training in Substance-Related and Addictive Disorders, Part 1: Overview of Clinical Practice and General Recommendations and Training in Substance-Related and Addictive Disorders, Part 2: Updated Curriculum Guidelines*, by Drs Gilles Fleury, Robert Milin, David Crockford, Leslie Buckley, Dara Charney, Tony P George and Nady el-Guebaly
- *Emergency Psychiatry: Clinical and Training Approaches*, by Drs Jodi Lofchy, Peter Boyles and Justin Delwo
- *Indirect Services in Psychiatry*, by Dr. Sonu Gaind
- *Informed Consent to Treatment in Psychiatry*, by Drs Grainne Neilson and Gary Chaimowitz
- *Medical Training in Psychiatric Residency: The PGY1 Experience, 2014 Update*, by Drs M Natalie Husarewycz, William Fleisher and Kurt Skakum

Positions on international medical graduates in psychiatry, physician-assisted death, medical marijuana, psychotherapy in psychiatry and treating the mentally-ill physician are anticipated in 2016.



CPA CPD  
INSTITUTE®



## CPD Institute Programs

Complementing the annual conference, the CPD Institute brought educational offerings to psychiatrists and family doctors throughout Canada. These included the Perspectives in Mental Health Care program, aimed at community psychiatrists and family physicians, and sessions held in conjunction with the annual meetings of the Alberta, Saskatchewan and Manitoba psychiatric associations.



## Choosing Wisely

The CPA Professional Standards and Practice Committee collaborated with the child and geriatric academies to develop and release a Choosing Wisely Canada (CWC) list for psychiatry, "Thirteen Things Physicians and Patients Should Question." CWC is a campaign to help physicians and patients engage in conversations about unnecessary tests, treatments and procedures, and to help physicians and patients make smart and effective choices to ensure high-quality care.



## Clinical Practice Guidelines

The CPA has not released a clinical practice guideline (CPG) in some time. Given their value to members, as expressed in our recent member survey, development of new CPGs is a priority for the Association. The Board has tasked the Professional Standards and Practice Committee to determine a process for developing CPGs.

## Foundation of the CPA

The Board of Trustees has revised the Foundation's strategic priorities to invest in projects focused on quality of care, public education, lifelong learning and innovative practices in psychiatry. The next step is to raise the Foundation's profile with members and others to increase contributions and expand its capacity to support projects.

## Annual Conference

The CPA's Annual Conference is the largest CPD event for psychiatry in Canada. This year, close to 1,000 delegates attended the meeting in Vancouver where we launched all-delegate plenaries. Conference evaluations indicate that delegates found the conference format encouraged audience participation, challenged their thinking and gave them a new perspective on approaches to clinical practice, teaching, patient interaction and advocacy. Others found engaging with psychiatric leaders in research and networking with like-minded colleagues was the highlight whereas others cited the quality of the speakers and the many sessions that gave insight into the challenges facing psychiatrists in contemporary practice. See Table 3 for conference highlights.

## Annual Conference Highlights

- New, all-delegate plenaries including, *What Will Improve the Mental Health of Canadians?* with Dr. Elliot Goldner; *Physician Assisted Death: Professional, Practical and Public Health Perspectives* with panelists Denise Marshall, James Downar and Derryck Smith; *Freedom in Forgiveness* with Amanda Lindhout, and *CPD Under Siege: Implications for Your RCPSC MOC*
- 30 symposia including, *Treatment-Resistant Depression and Treatment-Resistant Anxiety Disorders: What's Next?*
- 46 workshops including, *Supporting Family Physicians to Deliver Complex Psychiatric Care Through the Use of Mentorship Networks*
- 16 courses such as, *Bedside Assessment of Neurocognitive Abilities*
- 58 papers including, *Skill-Based Approaches, Effective in Reducing Stigma in Health Professionals*
- 56 posters including, *Beyond The Body: Using Social Media Platforms as an Educational Resource on Mental Health and Psychiatry for Medical*
- Expert Psychiatry Series, *The End of The Road: Enhancing Autonomy While Managing Driving Risks in Older Adulthood*
- Networking and social events including the President's Gala and the Resident's Social
- A Public Forum with musician and youth mental health activist, Robb Nash
- A full-day CPA Junior Investigator Research Colloquium held in parallel with the Annual Conference



## CPA Awards and Recognitions

Each year the CPA recognizes members who have done exceptional work. The 2015 recipients are:

*C.A. Roberts Award for Clinical Leadership*, Dr. Ron Fraser

*J.M. Cleghorn Award for Excellence in Clinical Research*, Dr. Raymond Lam

*Paul Patterson Innovation in Education Leadership Award*, Dr. Anthony Levinson

*Alex Leighton Joint CPA-CAPE Award in Psychiatric Epidemiology*, Dr. Stephen Kisely

*Distinguished Fellows of the CPA*: Dr. Stephen Kisely and Dr. Bruce Pollock

*Fellows of the CPA*: Dr. Patrick Conlon, Dr. Nicholas Delva, Dr. Raed Hawa, Dr. Diana Kljenak, Dr. Paul Mulzer, Dr. Sanjeev Sockalingam and Dr. Michael Teehan

*R.O. Jones Awards for Best Papers*:

1<sup>st</sup> Place—Dr. KaWai Leong, 2<sup>nd</sup> Place—Dr. Ron Remick, 3<sup>rd</sup> Place—Dr. Bianca Lauria-Horner

*Best Posters*: 1<sup>st</sup> Place—Dr. Pedro Zuzarte, 2<sup>nd</sup> Place—Dr. Tara Riddell, 3<sup>rd</sup> Place—Christine Leong

# Member-Focused

As noted in the President, Board Chair and CEO messages, keeping CPA member-focused, member-driven and member-responsive is foremost on our minds. To this end the CPA has undertaken initiatives to improve the alignment of the Association's activities with member needs.

From 2014 to 2015, the CPA experienced a six per cent increase in the number of psychiatrists who joined the CPA. While this is encouraging news, and means that 51 per cent of licensed psychiatrists are members...clearly, we have room to grow.

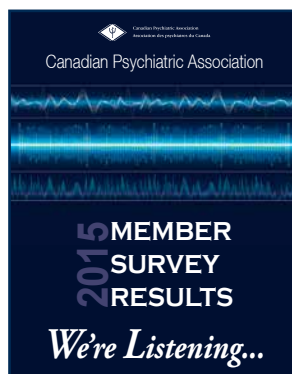
This past year, the CPA took a number of steps to listen to and respond to member needs. Hopefully these initiatives not only excite members about the CPA's future but also attract new members.

## Report of the Governance Working Group

The Governance Working Group released its draft report, *Built for the Future...A Blueprint for Governance* for member consultation. The draft report contained 41 recommendations aimed at improving the Association's governance structure to make it more nimble and responsive. A final report, modified based on member feedback, will be tabled with the Board and an implementation plan considered at the April 2016 Board meeting.

## Members' Survey Report

The CPA released a report of the findings of its 2015 members survey entitled, *We're Listening*. The survey gives insight into what members value and what they want from the CPA. Equally important, the report provides a profile of members who responded to the survey with some interesting results about the profession.



## Launch of New Website

To provide a better member experience and to improve our image with the public and the media, the CPA will launch a new website in mid-2016. The completely redesigned website will offer members a more user-friendly interface with the Association.

## Member Communications

Good member communications are essential. How can you support us if you don't know what we do?

To keep you up-to-date on the CPA, the Association introduced *PsychEXPRESS*, a weekly email snapshot of CPA activities. We have also redesigned *Psych-e*, our quarterly e-newsletter to offer more in-depth information on mental health and psychiatry. These publications complement the annual *Report to Members* and the *Canadian Psychiatry Aujourd'hui*.

## Affinity Benefits

CPA has developed attractive member benefits in the area of finance, banking and investment (Scotiabank), group insurance (Sun Life) and home and auto insurance (The Personal). More information is available on our website.



## We Want to Hear From You!

We hope that this year's report has given you an understanding of what the CPA does and why. In the spirit of transparency and accountability, we want you to be familiar with the range of activities we undertake on behalf of the profession.

Let us know if we're on the right track or if we need to stop and reconsider our priorities. You can reach us at:

Dr. Sonu Gaiind, President,  
[president@cpa-apc.org](mailto:president@cpa-apc.org)

Dr. Pamela Forsythe, Board Chair,  
[chair@cpa-apc.org](mailto:chair@cpa-apc.org)

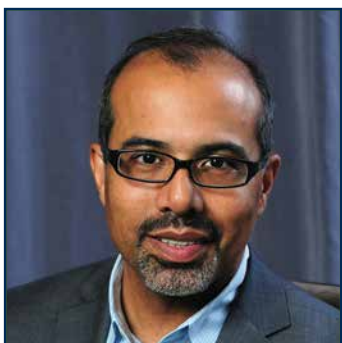
Mr. Glenn Brimacombe, CEO,  
[gbrimacombe@cpa-apc.org](mailto:gbrimacombe@cpa-apc.org)



# 2015-2016 Board of Directors

The Executive Committee and Board of Directors are dedicated to the profession and their collective wisdom allowed the Association to navigate some challenging issues this past year while also seizing opportunity.

## THE 2015-2016 BOARD MEMBERS ARE:



Dr. Sonu Gaind –  
President, Director,  
Ontario\*



Dr. Renuka Prasad –  
President-Elect, Director,  
Saskatchewan\*



Dr. Padraic Carr –  
Past-President, Director,  
Alberta\*



Dr. Pamela Forsythe –  
Board Chair\*



Dr. Fiona McGregor –  
Secretary-Treasurer, Director,  
British Columbia\*



Dr. Nachiketa Sinha –  
Director, New Brunswick\*



Dr. Georgina Zahirney –  
Director, Québec\*



Dr. Cynthia Slade –  
Director, Newfoundland



Dr. Rob Jay –  
Director, Prince Edward Island



Dr. Risk Kronfli –  
Director, Nova Scotia



Dr. Jitender Sareen –  
Director, Manitoba



Dr. Michael Butterfield –  
Director-in-Training



Dr. Kara Dempster –  
Director-in-Training



Dr. Barinder Singh –  
Director-in-Training



Dr. Johann Brink –  
Director, Canadian Academy of  
Psychiatry and the Law



Dr. Mark Rapoport –  
Director, Canadian Academy of  
Geriatric Psychiatry



Dr. Chris Wilkes –  
Director, Canadian Academy of  
Child and Adolescent Psychiatry



Dr. Mark Kaluziński –  
Director, Council of the Provinces

Thank you to those  
Board members whose terms  
ended at the 2015  
Annual General Meeting:

Dr. Donald Addington –  
Board Chair  
Dr. Rachel Morehouse –  
Director, New Brunswick  
Dr. Michael Teehan –  
Director, Nova Scotia  
Dr. Suzane Renaud –  
Director, Québec

*\*Executive Committee members*

## THE CPA STAFF

Glenn Brimacombe – [gbrimacombe@cpa-apc.org](mailto:gbrimacombe@cpa-apc.org)  
Chief Executive Officer

Brenda Fudge – [bfudge@cpa-apc.org](mailto:bfudge@cpa-apc.org)  
Director, Finance and Administration

Katie Hardy – [khardy@cpa-apc.org](mailto:khardy@cpa-apc.org)  
Director, Professional and Member Affairs

Heather Cleat – [hcleat@cpa-apc.org](mailto:hcleat@cpa-apc.org)  
Director, Annual Conference and Meetings

Hélène Côté – [hcote@cpa-apc.org](mailto:hcote@cpa-apc.org)  
Associate Director, Communications and Media Relations

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Coordinator, Administrative Services

General inquiries  
Toll free: 1-800-267-1555  
[cpa@cpa-apc.org](mailto:cpa@cpa-apc.org)

# Volunteer Leaders

The CPA's committees, councils, working groups and sections, provide sage advice, identify upcoming issues and are essential to the work of the Association and deliberations of the Board. They do much of the heavy lifting to develop content for the profession and the leadership provided by their respective chairs is appreciated. Thank you to the volunteers who filled these roles in 2014-2015.

## COMMITTEES

### Advocacy

– Dr. Padraic Carr

### CJP Editorial Board

– Dr. Scott Patten

### Continuing Professional Development

– Dr. Nancy Brager

### Annual Conference Program Subcommittee

– Dr. Glendon Tait and  
Dr. Sanjeev Sockalingam

### CPD Institute

– Dr. Susan Abbey

### International CPD Conference Subcommittee

– Dr. Gary Chaimowitz

### Economics

– Dr. Linda Hoyt

### Education

– Dr. Jodi Lofchy

### Membership Affairs

– Dr. Sanjeev Sockalingam

### Nominating

– Dr. Padraic Carr

### Professional Standards and Practice

– Dr. Doug Urness

### Clinical Practice Guidelines Subcommittee

– Dr. Doug Urness

### Research

– Dr. Jitender Sareen

### Practice Research Network

– Dr. Roger Bland

## COUNCILS

### Academies

– Dr. Johann Brink

### Provinces

– Dr. Mark Kaluzienski

## WORKING GROUPS

### CFPC-CPA Collaborative on Shared Mental Health Care

– Dr. Nick Kates

### College of Psychiatry

– Dr. Suzane Renaud

### Governance – Dr. Don Addington

### Stigma-Discrimination

– Dr. Manon Charbonneau

## CPA REPRESENTATIVES

### World Psychiatric Association

– Dr. Donna Stewart

### CMA Canadian Physician Health Institute Advisory Board

– Dr. Samantha Kelleher

## SECTIONS

CPA's sections focus on a variety of professional issues of interest to members. Through the Governance Working Group, the CPA is looking at how best to leverage the expertise within the sections. Thank you to the chairs for their leadership.

### Addiction Psychiatry

– Dr. David Crockford

### Child and Adolescent Psychiatry

– Dr. Clare Gray

### Community Psychiatry

– Dr. Sharon S. Levine and  
Dr. Warren Steiner

### Developmental Disabilities

– Dr. Robin Brooks-Hill and  
Dr. Donna Lougheed

### ECT and Neurostimulation

– Dr. Simon Patry

### Global Mental Health

– Dr. Raymond Tempier

### History and Philosophy of Psychiatry

– Dr. Denis Morrison

### Indo-Canadian Psychiatry

– Dr. Shabbir Amanullah

### Members-in-Training and Fellows

– Dr. Michael Butterfield

### Military and Veterans

– Col. Rakesh Jetly and  
Dr. J. Donald Richardson

### Native Mental Health

– Dr. Suzane Renaud

### Neuropsychiatry

– Dr. Edward Gerard Gordon

### Psychopharmacology

– Dr. Irvin Epstein

### Psychosomatic Medicine

– Dr. Peter Chan

### Psychotherapy

– Dr. Jacqueline Lee Kinley

### Telepsychiatry, Media and Informatics

– Dr. John Copen

### Transcultural Psychiatry

– Dr. Laurence Kirmayer