



SOUTH AFRICAN SOCIETY OF PSYCHIATRISTS

SA MRC UNIT ON RISK AND RESILIENCE IN MENTAL DISORDERS,

DEPARTMENT OF PSYCHIATRY STELLENBOSCH UNIVERSITY



Dear Colleague,

We here at the MRC unit on Risk and Resilience in Mental Disorders (SU and UCT) would like to strengthen our ties with mental health professionals in the public and private sectors in South Africa. The reasons are manifold.

First, we would like to cast a wide net when recruiting participants for our research projects to generate results generalizable to the South African patient. We are currently investigating the brain / neuropsychological correlates of OCD in an internationally collaborative NIH funded study (see: <https://global-ocd.org/>).

NOTE THAT THIS PROJECT INCLUDES AN OPTIONAL TREATMENT LEG (I.E. SERTRALINE, FOR 12 WEEKS, UP TO THE MAXIMUM RECOMMENDED OR TOLERATED DOSE), WITH MRI AT BASELINE AND A SECOND MRI SCAN AT WEEK 12. AFTER THAT, TREATMENT WILL PROCEED UNDER NATURALISTIC CONDITIONS, FOR WEEKS 12 – 52.

Other projects focus on the genetic / MRI profiles of people with anxiety disorders in OCD related disorders (including trichotillomania and

skin picking disorder). Please see a part of the information sheet for referral criteria regarding current ongoing studies later in this article.

PARTICIPATION IN THESE PROJECTS WOULD NOT INTERFERE WITH THEIR TREATMENT REGIME EXCEPT IF EXPLICITLY REQUIRED.

Second, we are always keen to maintain good referral channels as our participants (with and without medical aids) often require clinical intervention.

WE PROVIDE A COMPREHENSIVE DIAGNOSTIC ASSESSMENT AS PART OF OUR DATA COLLECTION PROCEDURES AND SHARE OUR FINDINGS WITH PARTICIPANTS AND (CURRENT/FUTURE TREATING) CLINICIANS. THIS IS HELPFUL ESPECIALLY IN CASES WHERE DIAGNOSTICS AND/OR TREATMENT-RESISTANCE ARE CHALLENGING.

Third, we are commencing an exciting new ICD-11 related study requiring the participation of mental health professionals who make diagnoses in their daily practice; we are testing the first draft



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of a comprehensive diagnostic questionnaire, the SCII-11 ("Structured Clinical Interview for ICD-11"). Members of our Unit have been part of the development of this instrument as part of an international group of researchers lead by Prof Michael First, an internationally established expert in diagnostic interviewing based at Columbia University.

IN SUMMARY, WE WOULD LIKE TO ENCOURAGE RELEVANT BIDIRECTIONAL REFERRALS AND ENSURE OPEN CHANNELS OF COMMUNICATION SO THAT LOCAL CLINICAL EXPERIENCE CAN BE TAKEN

INTO CONSIDERATION WHEN DEVISING NEW STUDY PROTOCOLS.

Thanks for your consideration – we look forward to hearing from you.

Yours sincerely

Prof Christine Lochner

SA MRC Unit on Risk and Resilience in Mental Disorders, Department of Psychiatry Stellenbosch University
CL2@SUN.AC.ZA / OCDRSA@SUN.AC.ZA
Facebook: @OCDRSA

Protocol Version 6, August 2020

IDENTIFYING REPRODUCIBLE BRAIN SIGNATURES OF OBSESSIVE-COMPULSIVE PROFILES

Principal Investigators: Christine Lochner¹, Dan J. Stein²

Co-Investigators: Jonathan Ipser³, Karen Mare⁴, Heidi Sinclair⁴

¹MRC Unit on Risk and Resilience in Mental Disorders, Department of Psychiatry, Faculty of Medicine and Health Sciences, Stellenbosch University

²MRC Unit on Risk and Resilience in Mental Disorders, Department of Psychiatry and Mental Health, Faculty of Health Sciences, University of Cape Town

³Department of Psychiatry and Mental Health, Faculty of Health Sciences, University of Cape Town

⁴Independent psychiatrist, Bellville

BRIEF OVERVIEW

Obsessive-compulsive disorder (OCD) is a prevalent and disabling disorder, and fewer than half of patients with OCD become well with current treatments (Eisen et al 2013). This is a transnational research project involving one U.S.A. site and four sites in four other countries — Brazil, India, Netherlands, and South Africa **. The goal of the project is to identify brain-based "biosignatures" associated with cognitive and clinical profiles common in individuals with OCD that are reproducible across countries and cultures.

MRI-based brain imaging measures will be collected using standardized protocols across research sites to identify dysfunctional circuits and associate them with clinical and cognitive measures. Identifying brain signatures of measurable behaviors and clinical symptoms will likely provide robust new treatment targets and help pave the way to precision psychiatry

where individual brain signatures can help guide treatment choices. Given variations in culture across the sites, cultural influences on OCD psychopathology may also be identified.

** The 5 study sites and their respective PIs are:
In the U.S.A.: New York State Psychiatric Institute, Columbia University (Dr Blair Simpson)

In Brazil: Department & Institute of Psychiatry, University of Sao Paulo, School of Medicine (Roseli Gedanke Shavitt)

In India: National Institute of Mental Health & Neurosciences (NIMHANS), Bangalore (Dr Janardhan Reddy)

In the Netherlands: VU University Medical Center (VUmc)/Amsterdam (Dr Odile van den Heuvel)

In South Africa: MRC Unit on Risk and Resilience in Mental Disorders (SU and UCT) (Lochner (SU); Dan J. Stein (UCT))



BACKGROUND, SIGNIFICANCE AND RATIONALE

Anxiety and related disorders, including OCD, are leading causes of global disability (Kessler et al 2009). Brain circuit abnormalities have been identified, but important knowledge gaps remain (e.g. (Burguiere et al 2015)). As of yet, it is unclear which abnormalities underlie what symptom profiles, how dysfunction develops and thus which brain abnormalities to target with new interventions (Via et al 2014, Harrison et al 2013, Alvarenga et al 2012, van den Heuvel et al 2009, Gilbert et al 2008). Moreover, circuit abnormalities likely cut across traditional diagnostic categories and, within a diagnostic category, there is individual variability (van den Heuvel et al 2016). Our approach is to identify reproducible brain signatures of measurable behaviors and clinical symptoms; these brain signatures can then be used to reveal trans-diagnostic disease dimensions, to chart their development, and to develop treatments that target these circuit abnormalities directly. The goal of this proposal is to identify reproducible brain signatures associated with cognitive and clinical profiles that are common in individuals with OCD.

To accomplish this, we will study 250 unmedicated OCD, 250 unaffected siblings of patients with OCD and 250 healthy control participants (HCs) at five expert research sites spanning five countries (U.S.A., Brazil, India, Netherlands, and South Africa [SA]). In SA, the research will be done at the MRC Unit on Risk and Resilience in Mental Disorders, a cross-university unit between Stellenbosch University and the University of Cape Town (UCT). Using imaging methods that could ultimately be adapted for clinical use, we will examine multiple brain circuits thought to underlie OCD behaviors, focusing on morphometry (using T1-weighted MRI), structural connectivity (using Diffusion Tensor Imaging [DTI]), and functional connectivity (using resting-state fMRI [rs-fMRI]). We will identify neuroimaging signatures that distinguish individuals with OCD from HCs by analyzing each modality with standardized protocols and by using multi-modal fusion with modern machine learning statistical methods. We will then examine how these imaging signatures are linked to behavioral performance on cognitive tasks that probe these same circuits and to a range of clinical profiles that are common to OCD. Finally, we will explore how specific environmental features (childhood trauma, socioeconomic status, and religiosity) may moderate this brain-behavior relationship. In addition to patients with OCD and HCs, unaffected siblings of OCD participants (50 per site, over 5 years) will also be recruited. The rationale for the addition is that unaffected siblings can be seen as an intermediate group between patients with OCD and HCs, and addition of data

from this additional cohort to analysis will likely assist in identifying endophenotypes or brain signatures of OCD. Recent MRI work in adult and adolescent patients with OCD and their unaffected siblings have, for example, shown that there are similar morphological abnormalities in cortical and subcortical regions of the caudate nucleus, thalamus and the right orbitofrontal cortex in these groups. In addition, both patients with OCD and unaffected siblings, as compared with healthy controls, have shown increased thickness of the right precuneus (Fan et al 2015).

OUR SHORT-TERM GOAL IS TO IDENTIFY BRAIN SIGNATURES OF OCD COGNITIVE AND CLINICAL PROFILES, LEVERAGING OUR GLOBAL COLLABORATION BOTH TO RECRUIT A VERY LARGE UNMEDICATED SAMPLE AND TO PROVE THESE SIGNATURES' REPRODUCIBILITY.

Our long-term goal is to identify brain signatures for measurable behaviors and clinical symptoms that cut across traditional diagnostic categories and to use these signatures to transform how we conceptualize, diagnose and ultimately treat mental illnesses like OCD.

A study embedded in the large project will also be conducted. Through our work with patients with OCD we aim to assess the clinical utility of proposed ICD-11 guidelines for OCD as reported by study clinicians who are doing the assessments. Clinicians will provide information regarding the application of the diagnostic guidelines to their patients and make ratings of their clinical utility with regard to each specific case. This data, collected by the clinicians only, will form part of the WHO Global Clinical Practice Network (GCPN) initiative.

In addition to the first, there will be a second embedded study. Anyone with OCD who completes the parent study, will be eligible for a taking part in a treatment study. Treatment will entail a 12 weeks open-label trial of sertraline (FDA approved for treatment of OCD) up to the maximum recommended or tolerated dose (i.e. titration: 50 mg per week up to 200 mg), with treatment under naturalistic conditions, tailored according to the individual's needs, for weeks 12 – 52. A 2nd MRI scan following the same scan sequences as at baseline, will take place in the week of the week 12 visit, to enable identification of clinical and neurocognitive correlates, as well as neuroimaging variables associated with response to sertraline.

The full version of these protocols is available from the author ■



SOUTH AFRICAN SOCIETY OF
PSYCHIATRISTS

MENTAL HEALTH OF HEALTH WORKERS DURING THE COVID-19 PANDEMIC SURVEY

UNIVERSITY OF THE
WITWATERSRAND
JOHANNESBURG 

Dear Colleague,

We are a team of researchers from the University of the Witwatersrand conducting a survey on mental health experiences of healthworkers during the time of the COVID-19 pandemic in South Africa. This study was approved by the Human Ethics Committee (Medical) at the University of the Witwatersrand (M200461). We would like to invite you to participate in this study.

You may have participated in July, 2020. We are doing a second data collection which will help us better understand your mental health needs.

IF YOU DID NOT COMPLETE THE QUESTIONNAIRE THE FIRST TIME, YOU ARE STILL ELIGIBLE TO PARTICIPATE AND COMPLETE THIS QUESTIONNAIRE.

If you agree to participate, the study will involve completion of a brief demographic questionnaire as well as some questions regarding your mental health experience during this time through an online survey. The survey should take approximately 15 to 30 minutes to complete.

Participation in this study is voluntary and you have the right to decline participation. You will not receive any direct benefits from participating in this study, and there are no disadvantages or penalties for not participating. You may choose not to answer any question. The questionnaire will be completely confidential and your anonymity is ensured.

As there is no identifying information, the researchers will not be able to provide any direct feedback. A summary of the study and its results can be requested using the contact details below. The research may be presented at local/international conferences and published in a journal and/or book chapter.

We aim to conduct a follow up to this study and have therefore asked you to insert the first five digits of a telephone or cellphone number that you will remember. This is the information that we will use to match up responses only for analysis purposes if you choose to participate in the follow up study.

SUBMISSION OF THE SURVEY WILL BE TAKEN AS CONSENT TO USE YOUR RESPONSES IN THIS STUDY.

If you feel vulnerable on completing the questionnaire, please contact the South African Depression and Anxiety Group (SADAG)-0800 567 567 (toll free) (SADAG provides 24-hour telephonic counselling) or contact the Healthcare Workers Care Network Helpline 0800 212 121 or SMS 43001 (toll free). You may also visit www.healthcareworkerscarenetwork.org.za.

If you have any questions about this research, feel free to contact us on the details listed below.

If you have any concerns about the study, you may contact us or the ethics committee secretariat on 011 717 2700/1234 or Zanele.Ndlovu@wits.ac.za and Rhulani.Mukansi@wits.ac.za.

Yours sincerely,

Shona Fraser
shona.fraser@wits.ac.za
082 746 8865 / 011 535 3212

Prof Sumaya Laher
sumaya.laher@wits.ac.za

Prof Jennifer Watermeyer
jennifer.watermeyer@wits.ac.za

Take the survey at:
<http://healthman.evlink9.net/servlet/link/1774/609630/1886150/2264675> ■



OVERVIEW OF THE CMS ANNUAL REPORT FOR 2019/2020

PREPARED FOR THE BENEFIT OF HEALTHMAN CLIENTS



In its annual report (2019/20) which was only released in December 2020 the Council for Medical Schemes reveals that a total number of 2 829 (2018: 3 808) new complaints were lodged.

1 902 complaints were carried forward from 2018.

Of the 4 731 complaints, 3 006 were resolved. Forty seven percent of all the rulings were in favour of the complainants and 6% of all complaints were invalid. Open and restricted schemes had 42% and 33% rulings in their favour respectively.

THE REPORT CONTAINS THE FOLLOWING:

- The Registrar's review and a synopsis of the council's strategic objectives and their financial affairs;
- **A REVIEW OF MEDICAL SCHEME OPERATIONS WHICH INCLUDES STATISTICS ON MEMBERSHIP, HEALTHCARE AND NON-HEALTHCARE EXPENDITURE INCURRED AND THE FINANCIAL AFFAIRS OF MEDICAL SCHEMES IN GENERAL;**
- An overview of the administrator market and other related issues.

Salient features of the overview can be summarized as follows:

- The number of schemes decreased from 80 to 79 and beneficiaries increased by 0.5% to 8.916 million.
- Approximately 52% of all healthcare benefits was paid in respect of hospitals (37%) and medicines (15%).

- **OVERALL, THE NET HEALTHCARE RESULT IMPROVED FROM R5.01 BILLION TO R7.06 BILLION, AN INCREASE OF 40.9%.**

- The proportion of **beneficiaries** covered by medical schemes as a proportion of the population declined from 16.5% in 2000 to 15.08% in 2019.
- Approximately 40% of beneficiaries were in Gauteng, followed by Western Cape and KwaZulu-Natal with 15% and 14%, respectively
- Schemes reached a solvency level of 29.35% at the end of 2019.
- For every R100 received in 2019, R90.58 was spent on claims, R8.87 was spent on non-healthcare expenditure and R0.55 was allocated towards reserves.
- The average contribution rates increased by 8.2% in 2019 and 7.6% in 2020.
- Expenditure for in-hospital services provided by the "allied" group dropped by 14% from 2018 to 2019, and medical specialists by 11% for out of hospital care.
- The average cost per beneficiary was R19 999, and peaked for the age band 80 to 84 years at R68 944 per average beneficiary.

Medicines continue to make up the largest part of out-of-pocket expenditure (33%), with 14% being to the "allied" disciplines.

Read the Overview at:
<http://healthman.evlink9.net/servlet/link/850/607793/1886150/2250037>



MEDICAL SPECIALIST GRADE 1-3 (X2)

TARA HOSPITAL

- **Reference Number:** refs/007668
- **Directorate:** Medical
- **Number of Posts:** 2

Package : R 1,106,040 per annum – R 1 164 651 per annum (All-inclusive package)

- **Enquiries :** Dr. R Price-Hughes
Tel no: (011) 535 3001

REQUIREMENTS

Appropriate qualification in psychiatry (FC Psych (SA) MMed (Psych) or equivalent qualification recognised by the HPCSA), which allows registration as a specialist psychiatrist with the Health Professions Council of South Africa (HPCSA). Current registration with the HPCSA as a specialist psychiatrist. Sound clinical knowledge and skills in psychiatry. Ability to work in a multi-disciplinary team. Knowledge of legislation, policies and procedures pertaining to mental health care users. Computer literacy. A valid driver's license.

DUTIES:

Provide a direct clinical service and manage a psychiatric inpatient or outpatient unit. The provision of care, treatment and rehabilitation to mental health care users within the framework of the Mental Health Care Act (No 17 of 2002); involvement in other general psychiatry work as needed. Provide outreach services to District Health services and District/ Regional hospitals. Teaching and training of medical students, medical officers and psychiatric registrars, as well as other personnel (e.g. nurses, etc.). To stimulate, assist with and conduct research relevant to the Gauteng Department of Health and Department of Psychiatry. To supervise and manage junior staff, which would include disciplinary responsibilities, if and when necessary. Administrative duties. Active participation in hospital management committees. To assist with the development of policies and protocols of the hospital. Active participation in quality improvement programs including clinical audits, morbidity and mortality meetings and continuous professional development activities. To liaise with external stakeholders when appropriate. To always maintain professional and ethical conduct. This post is a joint appointment with the Division of Psychiatry,

University of the Witwatersrand. The incumbent will be expected to participate in the teaching program of the department and to provide training to a range of students and healthcare workers.

NOTES :

Tara Hospital is committed to the pursuit of diversity, redress and will promote representation in terms of race, disability and gender. Applications must consist of a fully completed and signed Z83 form with a comprehensive CV containing contactable references as well as certified copies of qualifications (including a matric certificate), registration with HPCSA, proof of current registration with HPCSA, driver's license and identity document. The relevant reference number must be quoted in the application form. In terms of the National Qualification Framework Amendment Act 2019 it is an offence for any person to falsely or fraudulently claim to hold a qualification. Any person found to be misrepresenting their qualifications, work experience or facts in their CV will be disqualified and reported to the appropriate authority.

Applications must be delivered to:

Tara the H. Moross Centre, c/o HR Section, 50 Saxon Road Hurlingham 2196,
or be posted to:
Tara the H. Moross Centre, Private Bag x7, Randburg 2125.

Due to technical problems with GPG vacancy website that the institution is consistently facing, applicants are encouraged to apply using hand delivery or postal address.

Employer: Department of Health
Location: Tara, The H. Moross Hospital (Sandton)
Closing Date: 15-01-2021

CRITERIA QUESTIONS:

Do you have current registration with the Health Professions Council of South Africa (HPCSA)?
Do you have a valid Driver's license?
Do you have an appropriate qualification that allows registration with the HPCSA as Specialist Psychiatrist?
Are you computer literate? ■



ADULT PSYCHIATRY CONSULTANT POST TYGERBERG HOSPITAL

A specialist post in Adult Psychiatry will be available at Tygerberg Hospital as from approximately 1 February 2021.

The post is a joint appointment of the Department of Psychiatry, Stellenbosch University, and the Provincial Government of the Western Cape (see attached).

DUTIES INCLUDE:

1. The clinical assessment, management and supervision of adult patients referred to a general adult psychiatry multidisciplinary team including the neuropsychiatry unit at Tygerberg Hospital.
2. In-service training and supervision of pre- and post-graduate students in psychiatry and neuropsychiatry.
3. Clinical governance and administrative organization of a general psychiatry team.
4. Teaching of under- and postgraduate students in relevant degrees and diplomas in psychiatry.
5. Relevant research and publications and supervision of the research of junior colleagues.
6. Support to the Head of the Adult Psychiatry Unit with respect to clinical, management, teaching and administrative matters.

REQUIREMENTS:

1. Specialist registration with the HPCSA to practise as a Specialist Psychiatrist
2. FC(Psych)SA, MMed(Psych) or equivalent recognised by HPCSA
3. Clinical, teaching, research, management and communication skills
4. Ability to serve patients in at least two of three official languages of the Western Cape

EXPERIENCE:

1. At least one year's post-registration experience in clinical psychiatry and management of a mental health care team
2. Experience in the teaching and management of neuropsychiatry would be a recommendation
3. At least one year's post-registration experience in teaching, training, and research of psychiatry at university level.
4. The post comes with 16 hours of overtime per week in psychiatry.

Application submissions closed 15 January 2021. They were to be directed to Veruschka Meyer at veruschka.meyer@westerncape.gov.za or by post/courier to The Chief Executive Officer: Tygerberg Hospital, Private Bag X3, Tygerberg 7505 (For attention: Ms V Meyer).

REQUIRED DOCUMENTS:

1. CV
2. Certified copy of ID and driver's license
3. Z83 completed - use '*as per block advert*' for specific post
4. Certified copy of matric certificate and degrees
5. HPCSA registration

ENQUIRIES:

Dr Granville Marinus
Granville.Marinus@westerncape.gov.za

Dr Kerry Louw
kerrylouw@sun.ac.za

Ms Veruschka Meyer
Veruschka.Meyer@westerncape.gov.za
021 938 5194

Prof Soraya Seedat
sseedat@sun.ac.za ■



VACANCIES IN EKUHLINGENI PSYCHIATRIC HOSPITAL

Telephone: (031) 905 4775
Date: 2021/01/22
Enquiries: Miss E.N. Khwela
Reference: EPH/HRM/4/2/1

CIRCULAR OF VACANT POST

The contents of this Circular Minute must be brought to the notice of all eligible officers and employees on your establishment without delay even if they are absent from their normal places of work.

DIRECTIONS TO CANDIDATES:

1. The following documents must be submitted:
 - o Application for Employment Form (Z83), which is obtainable at any Government Department OR from the website – www.kznhealth.gov.za
 - o Certified copy of Identity Document. Driver's license, highest educational qualifications and professional registration certificate not copies of certified copies.
 - o Updated Curriculum Vitae with full record of service.

NB: CERTIFIED COPIED SHOULD NOT BE THREE MONTHS OLDER

1. The Reference Number must be indicated in the column provided on the Z83, e.g. HRM 2/2013.

NB: Failure to comply with the above instructions will disqualify applicants. Faxed and e-mailed applications will not be accepted.

1. The appointment is subject to positive outcome obtained from NIA to the following checks (security clearance, credit records, qualification,

citizenship and previous experience employment verifications).

2. Please note that applications will not be acknowledged. Correspondence will be limited to short listed candidates only. If you have not been contacted within two months after the closing date of advertisement, please accept that your application was unsuccessful.
3. Ekuhlangeni Psychiatric Hospital is an equal opportunity, affirmative action employer, whose aim is to promote representivity in all occupational categories in the institution.
4. **PERSONS WITH DISABILITY ARE ENCOURAGED TO APPLY.**
5. **Please note that due to financial constraints no S&T payments will be considered for payment to candidates that are invited for interview.**

ALL APPLICATIONS SHOULD BE FORWARDED TO:

The Human Resource Department
Ekuhlangeni Psychiatric Hospital
P.O. Box 3, Umbogintwini 4126

OR

Hand delivery to Ekuhlangeni Hospital
Off old South Coast road, UMBONGINTWINI

Original signed by CEO

MS. N.S. PADAYACHEE
CHIEF EXECUTIVE OFFICER
EKUHLINGENI PSYCHIATRIC HOSPITAL



VACANCIES IN EKUHLENGENI PSYCHIATRIC HOSPITAL

POST: Medical Specialist - Psychiatry

CENTRE: Ekuhlengeni Psychiatric Hospital

REFERENCE NUMBER: EPH 02 / 2021

OTHER BENEFITS: 12% inhospitable Rural Allowance of Basic Salary, commuted overtime, the all-inclusive package consists of 70% basic salary and 30% flexible portion that may be structured in terms of the applicable rules.

REMUNERATION AND MINIMUM REQUIREMENTS:

Grade 1 R 1 106 040.00 – R1 173 900.00 per Annum (all package inclusive)

Grade 12 / National Senior Certificate

Appropriate qualification in Psychiatry that allows registration as a specialist with HPCSA plus current registration with HPCSA (2019)

Grade 2 R1 264 623.00 – R1 342 230.00 per annum (All package inclusive)

Grade 12 / National Senior Certificate

Appropriate qualification in Psychiatry that allows registration as a specialist with HPCSA plus current registration with HPCSA (2019) and 5 years appropriate experience as Medical Specialist after registration with HPCSA in Psychiatry.

Grade 3 R1 467 651.00 – R1 834 890.00 per annum (All package inclusive)

Grade 12 / National Senior Certificate

Appropriate qualification in Psychiatry that allows registration as a specialist with HPCSA plus current registration with HPCSA (2019) and 10 years appropriate experience as Medical Specialist after registration with HPCSA in Psychiatry.

NB: Certificate of service from previous employer is compulsory; please include verification of employment from current employer, which must be endorsed by Human Resource Management

KNOWLEDGE, SKILLS TRAINING AND COMPETENCIES REQUIRED

- Sound Knowledge of clinical concept within the Psychiatry discipline.
- Good Operative skills to carry out advanced clinical services.
- Research and organizational ability
 - o Ability to supervise and teach junior staff
 - o Conflict management

- Management skills

KEY PERFORMANCE AREAS

- Provision of care' treatment and rehabilitation to mental health care users within the framework of the Mental Health Care Act (No 17 of 2002); involvement in other general psychiatry work as needed.
- Conduct mental observations in terms of the Criminal procedure Act (No. 51 of 1977); care, treatment and rehabilitation of State patients in terms of the Mental Health Care Act (No 17 of 2002); involvement in other forensic Psychiatry work as needed.
- Teaching and training of interns and Medical officers as well as other personnel and (e.g. nurse, etc.).
- To stimulate, assist with and conduct research in field of Psychiatry.
- To supervise and manage junior staff, which would include disciplinary responsibilities if and when necessary.
- Administration duties.
- Active participation in hospital committees.
- To assist with the development of policies and protocols of the Hospital.
- Active participation in quality improvement programs including clinical audits, morbidity mortality meetings and continuous professional development activities.
- To liaise with external stakeholders when appropriate.
- To always maintain professional and ethical conduct.
- Participate in formal teaching as required by the department.
- Provide outreach to surrounding PHC clinics and the District Hospitals which refer to Ekuhlengeni Psychiatric Hospital.

FIRST PREFERENCE WILL BE GIVEN TO AFRICAN FEMALE

Enquiries: Ms. NS PADAYACHEE
Nalini.Padayachee@kznhealth.gov.za



SOUTH AFRICAN SOCIETY OF
PSYCHIATRISTS

RWS CHEETHAM AWARD IN PSYCHIATRY

Dear Colleagues,

The award is offered annually (in respect of a calendar year) by the Senate of The Colleges of Medicine of South Africa for a published essay of sufficient merit on trans - or cross - cultural psychiatry, which may include a research or review article.

Medical Practitioners registered and practising in South Africa qualify for the award which consists of

a medal and certificate.

The closing date was 15 January 2021.

The guidelines pertaining to the award can be requested from:

Mrs Evelyn Chetty

Tel: +27 261 8213

+27 261 8518

E-mail: evelyn.chetty@cmsa.co.za ■

WFSBP YOUNG INVESTIGATOR AWARDS

WFSBP is offering Awards to young investigators to attend the WFSBP biennial congress and the special educational sessions. The Award includes free registration to the WFSBP Congress in Vienna, Austria. In addition, the award winner will receive a travel grant of EUR 400 to cover travel expense for attending the meeting in Vienna if WFSBP is able to hold the in-person meeting. Payments will be made in Euros after providing the receipt for travel expenses.

Psychiatrists or basic researchers under the age of 40 are eligible to apply.

The selection is competitive.

The application should include the following:

1. A letter from the candidate applying for the Award with a summary of career goals and interest in biological psychiatry
2. A letter from a mentor or the president of the national WFSBP affiliate Society outlining the candidates' achievements and how the award will support candidate's career in biological psychiatry
3. A Curriculum Vitae

Priority will be given to candidates:

- a) with demonstrated interest in biological psychiatry
- b) with history of interest in research and some track record of publications
- c) that have submitted an abstract for a poster or an oral presentation
- d) from developing countries

The Awardees are expected to attend all five WFSBP educational sessions.

Deadline for submission of application was: 31 January 2021

The submission including all required documents must be sent to the congress office via email: wfsbp2021@cpo-hanser.de

With kind regards,

Prof. Florence Thibaut

Prof. Lakshmi N. Yatham

Co-Chairs WFSBP Committee on Education ■





SOUTH AFRICAN SOCIETY OF
PSYCHIATRISTS

SASOP, PSYCHMG ROADSHOW 2021

- PROUDLY SPONSORED BY PHARMADYNAMICS



**ROADSHOW
2021**

pharma *dynamics*
EFFECTIVE AFFORDABLE HEALTHCARE

Although the current situation with the COVID-19 pandemic makes planning for meetings a challenge, we are hopeful that we will be able to proceed with the intended Roadshows for 2021 as planned later in the year. It remains important for us to connect with our membership, and we hope to be able to build on the first round of workshops that were held nationally in 2019.

THIS YEAR THE FOCUS OF THE WORKSHOPS WILL BE ON THE NEW PROCEDURAL CODING SYSTEM THAT HAS BEEN APPROVED AND IS DUE TO BE IMPLEMENTED, AS WELL AS VALUE BASED CARE.

This is a mammoth task and we hope to be able to address issues that arise in real time to ensure a smooth transition for all who work in private practice. The meetings will also be an opportunity to connect with the broader SASOP membership.

We have therefore planned for one more **Webinar (#3)** to introduce the new **Procedural Coding System** to be held on 10 February 2021 which will be facilitated by Dr's Ian Westmore and Eugene Allers. We encourage members to forward questions that they may have in this regard prior to the webinar

already, but there will also be an opportunity to ask questions during the event.

If all goes well and the situation allows, we will be hosting regional meetings in the main centres. The meetings will commence at 16h00 and the workshop will end by 19h00 after which dinner will be served, and an academic talk by a SASOP member will be presented. You are welcome to ask your admin staff to join the workshop.

A DECISION REGARDING THE PHYSICAL MEETINGS WILL BE MADE CLOSER TO THE TIME.

If it seems appropriate, they will be converted to Zoom webinar formats should a physical meeting not be able to proceed. The following dates have been allocated:

SAVE THE DATES:

12.05.2021	Gauteng - Johannesburg
26.05.2021	Gauteng - Pretoria
09.06.2021	Western Cape - Cape Town
23.06.2021	Free State - Bloemfontein
04.08.2021	KwaZulu Natal - Durban
18.08.2021	Eastern Cape - Port Elizabeth
01.09.2021	Limpopo - Polokwane - TBC

Looking forward to see you on the road!

Kind Regards

SASOP, PsychMg & PharmaDynamics ■



SOUTH AFRICAN SOCIETY OF
PSYCHIATRISTS

UCT DEPARTMENT OF PSYCHIATRY & MENTAL HEALTH FIELD TRIAL



Groote Schuur Hospital



Dear Colleagues at SASOP

Structured Clinical Interview for ICD-11 (SCII-11) Field Trial – South African division UCT HREC Ref: 770/2020

I would like to invite you to participate in an international collaborative field trial evaluating the experience of mental health professionals and patients when using the SCII-11, a diagnostic interview based on the clinical descriptions and diagnostic guidelines of the ICD-11. Other participating centres are located in the USA, Canada, the UK and India.

THE SCII-11 WAS DEVELOPED BY AN INTERNATIONAL GROUP OF EXPERTS UNDER THE HELM OF PROF MICHAEL FIRST, WHO IS ALSO THE FIRST AUTHOR OF THE SCID-5.

The group also benefits from the experience of Prof Geoffrey Reed from the WHO, who was responsible

for overseeing the ICD revision from the 10th to 11th edition.

Participants will be asked to interview 5 patients in English over the course of 2021 using the SCII-11. Following the interview both the professional and patient will complete an online questionnaire regarding the acceptability, feasibility and clinical utility of the SCII-11.

BEFORE USING THE INTERVIEW, PARTICIPANTS WILL HAVE TO COMPLETE FREE AND EASY ONLINE ICD-11 AND SCII-11 TRAINING.

This study is unfortunately unfunded, but we are hoping that clinicians see the value of the work, and will be willing to volunteer. Please contact me (details below) if you are interested in participating or have any questions.

Yours sincerely

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UCT Department of Psychiatry and Mental Health

MRC Unit on Risk and Resilience in Mental Disorders (UCT/SU) ■



SASOP

20th National Congress
of the
South African Society of Psychiatrists

20 - 24 October 2021

Champagne Sports Resort
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SAVE THE DATE



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