

The Centre for Seniors' Medical Psychiatry

Background:

The Centre for Seniors' Medical Psychiatry program is a collaborative care model integrating Geriatric Medicine and Geriatric Psychiatry anchored in primary care where the primary care provider remains the most responsible provider. It is designed to facilitate collaboration, communication, and navigate health system resources. Under the supervision of geriatric specialists, Care Managers/allied health will work with the patient and the primary care provider to manage both the mental and physical health needs with a collaborative care intervention for up to 16 weeks.

The Centre for Seniors' Medical Psychiatry Team:

- RN Care Managers/ Occupational Therapist
- Geriatrician*
- Geriatric Psychiatrist*
- Primary Care Representative

*Provide clinical support to team and participate in patient Systematic Case Reviews.

Who to Refer:

Seniors (65+ years) who live in the Mississauga Halton LHIN with:

**Any chronic medical condition impacting function
AND
Depressed mood and/or anxiety**

Exclusion Criteria:

1. Behavioural and Psychological Symptoms of Dementia (BPSD) such as agitation, aggression (refer to Seniors Mental Health Services)
2. Moderate to severe dementia (refer to either Seniors' Services or Seniors Mental Health Services)
3. Positive psychotic symptoms (refer to Seniors Mental Health Services)
4. Active suicidal ideation or attempt within last year (refer to Seniors Mental Health Services)
5. Psychiatric admission within the last year (refer to Seniors Mental Health Services)
6. Falls and / or Continence as primary issues (refer to Seniors' Services)

How to Refer: Complete and sign the Medical Psychiatry Alliance (MPA) referral form. Fax to 416-521-4177

Referral Intake Process:

Referrals will receive clinical triage and patients will be assigned a Care Manager/ allied health provider. The Care Manager/ allied health provider will contact the patient and schedule the initial assessment. A letter will be sent to the referring practitioner/primary care provider indicating the date and time of the initial assessment.

If the patient would be better cared for by another clinical service, efforts will be made to direct the patient to that service by one of the below options. You will be informed in either situation.

- A. Direct transfer of referral (i.e. Seniors' Services or Seniors Mental Health Services, geriatric services in another geographical area)
- B. Recommendation of another available clinical service. We will indicate if a separate referral may need to be completed.

Intervention Information:

Patients will be supported in an integrated collaborative care model which includes:

1. Integrated Therapeutic Care Management

Care Managers/ allied health providers with dual training in mental and physical care will work with primary care providers and provide intervention for up to 16 weeks including:

- Comprehensive assessment
- System navigation
- Modified problem solving and behavioural psychotherapy (ENGAGE)
- Use of symptom rating scales (Anxiety, depression, and function scales)
- Monitoring through Treat-to-target outcomes

Care Managers/ allied health providers will be supported with clinical supervision from the MPA Geriatrician and Geriatric Psychiatrist.

2. Systematic Case Review (SCR)

Weekly structured patient case presentations with a geriatrician, geriatric psychiatrist, primary care representative, and other allied health providers to review goals and treat to target outcomes. Care Managers/ allied health providers will work with the patient, caregivers, and primary care to implement recommendations. Primary care providers will remain as MRP and consultations with geriatrician and / or geriatric psychiatrist are available as determined by team. Primary care providers are encouraged to participate in the SCR of their patient.

3. Integrated Care Plan

Co-development of a single plan of care incorporating patient goals to be developed and shared with the patient, primary care team, and other involved health care providers.

4. Education / Capacity Building

Education and support for patients with co-occurring mental and physical health conditions and health care providers in the management of geriatric medical psychiatry conditions. This will be achieved through various modes of communication and educational opportunities.

Contact Information:

If you have any questions or potential patients, please contact us:

Seniors' Medical Psychiatry Office:

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RN Care Managers/ Occupational Therapist:

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