

Centre for Seniors' Medical Psychiatry: Collaborative Care with Primary Care Providers for Seniors with Chronic Physical Conditions and Depression / Anxiety

Joanne Chen PT, MHSc, Christine Dias RN, MN, Judith Versloot, PhD, Dr. Richard Shulman, MDCM, FRCPC, Geriatric Psychiatry
Trillium Health Partners, Mississauga, Ontario, Canada

BACKGROUND

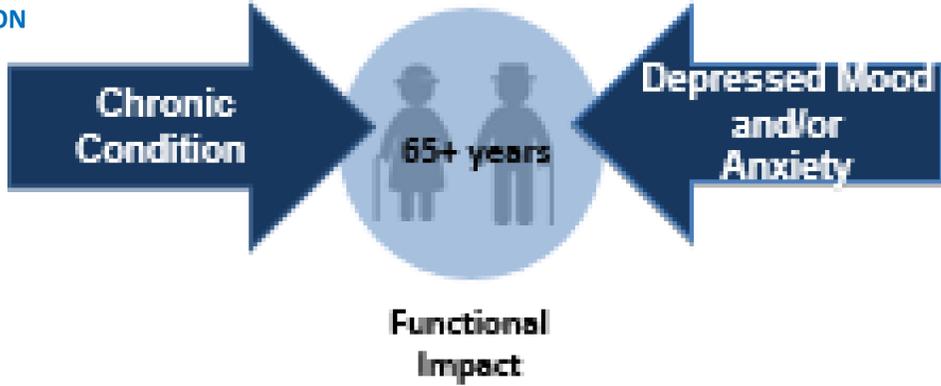
Through extensive stakeholder engagement in the region, results identified that seniors with co-existing mental and physical health concerns encounter challenges with accessing care, including:

- Siloes of unintegrated specialized geriatric mental health and medical care services
- Limited availability of specialized geriatric mental health and medical care
- Lack of support for patients/caregivers to navigate health care system
- Disjointed communication across patient journey
- Stigmatization within all levels of mental health care
- Limited provider knowledge/ capacity to manage patients with co-occurring physical and mental health conditions

GOAL

The Centre for Seniors' Medical Psychiatry (MPA) will develop a transformative and sustainable collaborative care service that will improve the quality of life for seniors with co-occurring physical and mental health conditions

POPULATION



PROGRAM COMPONENTS AND ACTIVITIES

1) Collaborative Care Clinical Intervention

- Therapeutic care management by care manager (CM) using novel "ENGAGE" psychotherapy intervention¹
- Integrated clinical support of CM by a geriatrician and geriatric psychiatrist
- Systematic Case Reviews (SCR) by specialized geriatric team using treat-to-target outcomes
- Integrated care plan
- Patient care embedded in primary care without requiring geriatric specialty care hospital clinic consultation

2) Primary Care Practitioner (PCP) Engagement and Building Capacity

- PCP involvement in program design
- PCP virtual participation in SCR to review their patients
- CM and PCP care conferences and other communication
- PCP communication with specialists
- PCP education tools
- Awareness campaign regarding the MPA program

REFERRAL CRITERIA

Inclusion Criteria:

- Lives in Mississauga Halton Local Health Integration Network
- At least one chronic health condition affecting their function and depressed mood and/or anxiety
- Over 65 years of age (with exceptions to be under 65 based on diagnosis)

Exclusion Criteria:

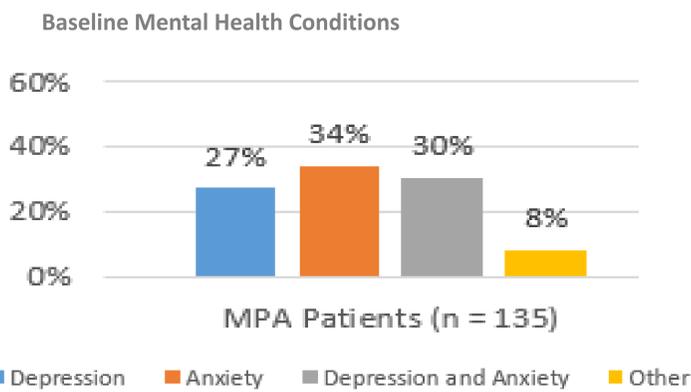
- Falls or incontinence as primary diagnosis*
- Behavioural & psychological symptoms of dementia (BPSD), aggression, positive psychotic symptoms, active suicidal ideation/attempt in the last year or psychiatric admission in the last year*
- MOCA score less than 18

*Trillium Health Partners has other existing services that primarily serve the patient population with these conditions.

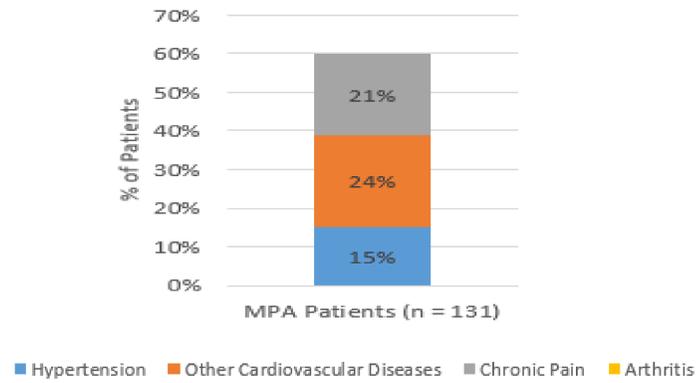
PATIENT DEMOGRAPHICS

Demographics*	Patients
Age, mean ± SD, (n)	77.6 ± 7.2 (152)
Sex	
% Female, (n)	66% (100)
% Male, (n)	44% (52)
Language	
English (%)	93% (123)
Other (%)	7% (9)
Lives With	
Spouse/Partner, % (n)	40% (43)
Alone, % (n)	28% (30)
Family, % (n)	18% (19)
Other, % (n)	10% (15)

RESULTS



Top three Physical Health Conditions Impacting function



Depression Scores (PHQ9)

- 60.5% of patients entered the program with moderate to severe anxiety
- 57.1% of these patients improved more than 30% from their initial score
- 46.9% of these patients improved more than 50% from their initial score
- 26.5% of these patients went into remission

Anxiety Scores (GAD7)

- 59.3% of patients entered the program with moderate to severe anxiety
- 62.5% of these patients improved more than 30% from their initial score
- 52.1% of these patients improved more than 50% from their initial score
- 29.2% of these patients went into remission

Function (WHODAS)

- 29.6% of patients improved more than 30% from their initial score

CONTACTS

Christine Dias, RN, MN
E-mail: Christine.dias@thp.ca

Joanne Chen, PT, MHSc
E-mail: Joanne.Chen@thp.ca

Dr. Richard Shulman, MDCM, FRCPC
E-mail: Richard.Shulman@thp.ca

REFERENCES

1. Alexopoulos GS et al. Comparing Engage with PST in Late-Life Depression: A preliminary Report. [Am J Geriatr Psychiatry](https://doi.org/10.1177/0891913315235061). 2015 May;23(5):506-13.

ACKNOWLEDGEMENTS

This work is supported in part by the Medical Psychiatry Alliance, a collaborative health partnership of the University of Toronto, the Centre for Addiction and Mental Health, the Hospital for Sick Children, Trillium Health Partners, the Ontario Ministry of Health and Long-Term Care and an anonymous donor.