STRENGTHENING INTEGRATED CARE

REPORT OF THE MEDICAL PSYCHIATRY ALLIANCE (MPA), 2015–2016
2,251 patients treated

~60 MPA health-care providers involved

402 learners trained

$8.6 M+ fundraised for MPA

70+ MPA-related research publications

30 MPA initiatives in progress
Dear Colleagues and Friends,

It is becoming increasingly apparent that we can improve patient outcomes by taking a more systematic approach to mental and physical health. We are laying the groundwork for a shift in Ontario’s health care, thanks to the dedication of our four Medical Psychiatry Alliance (MPA) Partners — the Centre for Addiction and Mental Health (CAMH), The Hospital for Sick Children (SickKids), Trillium Health Partners (THP) and the University of Toronto (U of T) — and our community health-care partners, community agencies and generous supporters, including the Ministry of Health and Long-Term Care.

More than 2,000 patients were seen in MPA-related programs in the past year, with more than 50 health-care professionals working hard to fulfill our mandate of improving the quality of life and increasing the life expectancy of patients affected by both mental and physical illnesses. This builds on the solid framework the MPA laid down in its first year, allowing steady progress, with the introduction of several innovative models of care, education and research that aim to strengthen health-care integration.

MPA achievements in 2015–16 include the launch of the seniors’ medical psychiatry service as a pilot project at THP and the Brain-Heart Initiative at CAMH. In addition, we expanded access to mental health care for children treated in medical programs at SickKids. We are testing innovative tools, providing more support to primary health-care providers who see patients with complex needs. And with the opening of the Simulation Centre and the integration of the MPA curriculum into medical education and training, we are transforming a generation of health-care practitioners and leaders.

I hope that as you read this report of our progress in 2015–16 you will be as excited by the sense of possibility as are those of us engaged in MPA work. We remain committed to transforming the delivery of mental health services to our patients.

Benoit H. Mulsant, MD, MS, FRCPC

Executive Director, Medical Psychiatry Alliance
Professor and Chair, Department of Psychiatry
NEW APPROACHES TO PATIENT CARE

To improve complex health-care treatment and effect system-wide change, the MPA is developing novel approaches to the way we care for our patients. Based on initial conceptualization and early planning of these projects in 2014–15, many of these innovative programs of care were launched at MPA Partner sites in 2015–16 as pilot projects.

HELPING CHILDREN ACCESS TIMELY CARE

In 2015–16, the Consultation-Liaison (CL) Psychiatry Program at SickKids launched a service delivery model providing specialized interdisciplinary assessment and treatment for children, including the expansion of individual, group and family therapy tailored to specific medical/mental health populations.

The new CL Psychiatry Program consists of eight full-time and part-time staff psychiatrists, a psychologist, two clinical nurse specialists, a registered nurse, a case manager, two social workers and two administrative assistants. It is a vehicle for increasing collaboration among health-care professionals.

“Collaborative care, along with education and capacity building is central to the program’s work,” says Dr. Antonio Pignatiello. “To truly make a difference, health-care practitioners of all disciplines need to work together with patients and families to address the needs of those with medical/mental health issues in a holistic way.”

At THP, pediatric health-care professionals are working to improve outcomes for youth with diabetes and depression. Teenagers with diabetes are at least twice as likely to develop depression as other teens and the treatment of one often impacts the effectiveness of the treatment of the other. To address this interaction, teams of health-care professionals in and outside the hospital are collaborating to create innovative models of care.

INTEGRATING CARE FOR ADULTS AND SENIORS

“If you have to tell a young woman that she has depression and bipolar disorder and that the medications are going to cause her to gain weight, the chances are she may not comply,” says Dr. Valerie Taylor, Chief of General and Health Systems Psychiatry at CAMH. “In this situation, the health-care provider needs to address both issues — the physical and the mental — together.”
“If I compare my two illnesses, I would go through the brain tumour journey again and again rather than deal with my mental illness, because mental illness is something that not everyone truly understands.”

Jessica Murphy, 17, SickKids patient
Telepsychiatry at CAMH has evolved from a small northern outreach program into a province-wide service that is increasingly integrated with local and regional provincial health systems. In the past year, Telepsychiatry worked with 225 communities across Ontario, primarily through linkages with local family health-care providers.

HELPING FAMILY PHYSICIANS BETTER SUPPORT PATIENTS WITH COMPLEX NEEDS

In the fall of 2015, CAMH launched the MPA Brain-Heart Initiative to build capacity and increase awareness of holistic care issues at CAMH through collaboration with a community partner specializing in metabolic and weight management. It also aims to build capacity in primary care.

The Brain-Heart Initiative is working with CAMH clinical staff to develop updated and consistent metabolic screening, monitoring and referral tools within I-Care, CAMH’s clinical information system. When it becomes fully operational in 2016–17, the service will help patients manage weight and related issues, which in turn will help them better adhere to their psychiatric medication and care plans.

In the past year, THP has also launched initiatives integrating health care for adults and seniors. THP is focused on the prevention, early detection and management of delirium for adults and seniors who also have one or more physical illnesses. Hospital-acquired delirium is associated with longer hospitalization and increased morbidity, mortality and cognitive dysfunction.

Another THP program is designed to improve access, navigation of services and education for seniors who are dealing with both mental and physical health conditions. Of THP’s 1.6 million patient visits a year, 37 per cent are seniors who may present with a combination of mental and physical illnesses.

Within the MPA, Telepsychiatry is partnering with family health teams to increase access to mental health care across Ontario, using an integrated care model. Through this innovative model, family physicians can connect with a dedicated psychiatrist to meet the combined medical and mental health care needs of patients. This allows for more comprehensive, holistic management of patients, continuity of care and capacity-building for primary care providers. In 2015–16, the MPA Telepsychiatry program at CAMH developed a quality and outcomes framework that will allow the MPA to assess the impact of this integrated Telepsychiatry care model on patients and providers, as well as its impact at a health systems level. This framework will also help determine the impact of embedding psychiatry services within primary care teams.

“This model provides consistency for providers and continuity of care for clients who can now access psychiatric services in the same place they access their medical care, leading to better integrated care and to capacity-building among primary health-care professionals,” says Eva Serhal, manager, Telepsychiatry and Extension for Community Health-care Outcomes (ECHO) at CAMH and U of T.

Similarly, the PARTNERs project based at CAMH integrates mental health care support into family health care through a new role for mental health technicians. The project is designed to determine if the new method improves outcomes for patients who go to their family doctors for support with depression, anxiety and at-risk drinking. Supervised by a psychiatrist, the technicians’ goal is to improve patient outcomes through the use of regular monitoring of symptoms and treatment adherence, providing psycho-education and supporting patients in setting goals to achieve healthy lifestyle changes.

PARTNERs is now analyzing preliminary data from more than 1,000 patient visits and the 172 patients who were enrolled over the past year to assess the impact of this integrated model of care.
“We know that rates of depression are higher in youth diagnosed with diabetes, compared to the general population. We are so pleased that the Brain-Heart Initiative is starting because, as this program expands, we hope to see more support in our community for a population of youth struggling to receive care for both mental and physical issues.”

Dr. Ian Zenlea, MPA Physician Co-Lead, Child and Youth, Trillium Health Partners
“We talk about mental health stigma in the general public, but the truth is there is also stigma among health-care professionals and this stems partly from a lack of comfort associated with caring for patients who have combined physical and mental health issues,” says Dr. Sanjeev Sockalingam, MPA Director for Curriculum Renewal. “The MPA is hoping to drive this paradigm shift.”

In 2015–16, the MPA tested several innovative approaches to the teaching of health-care providers and medical students to ensure that current and future health-care professionals are better equipped to prevent, diagnose and treat mental and physical illness together.

THE ANNUAL MPA CONFERENCE

In October 2015, U of T hosted the second annual MPA conference of stakeholders across the continuum of patient care, focusing on the transformation of current education models to make sure that future doctors are able to provide integrated care as part of coordinated interprofessional teams.

The conference—“Integration and Complexity in Health Professional Education”—attracted close to 200 people, with more than 80 health-care leaders participating in the Expert Think Tank sessions.

EXPANDING THE TEACHING OF MEDICAL PSYCHIATRY

Work at the MPA annual conference helped establish a road map for training leaders in integrated care, with U of T’s Undergraduate Medical Education department taking the lead to implement the medical psychiatry curriculum in medical student training.

Among the initiatives is the Make Every Encounter Therapeutic (MEET) elective, which is part of the newly integrated MPA curriculum that began in 2013–14 with five second-year students. With MPA support the elective has expanded to include 34 students with representation from each teaching academy in the University’s Faculty of Medicine.

The Getting to Know Patients’ System of Care experience started, as a pilot project, in 2015–16 with 20 students. In this experience, students role-play to better understand patients with physical...
2015 MEDICAL PSYCHIATRY ALLIANCE ANNUAL CONFERENCE

INTEGRATION AND COMPLEXITY IN HEALTH PROFESSIONAL EDUCATION

THURSDAY, OCTOBER 29, 2015

Marriott Toronto Bloor Yorkville Hotel

1:00 p.m. - 5:15 p.m.

medpsychalliance.ca

Open to all health professionals, educators, students and residents who would value the opportunity to transform care for patients with co-occurring mental and physical health illnesses.

#MPA2015
and mental health concerns in a complex medical system. The one-day experience will form part of the Foundations Curriculum for all first- and second-year students. U of T’s curriculum renewal encompasses the first two years of the MD program and was launched for first-year students entering the program in the fall of 2016.

**TOOLS FOR HEALTH-CARE PROVIDERS**

The MPA launched its Simulation Centre in November 2015, an education hub at CAMH that will provide a safe learning environment for students, trainees and health-care professionals to explore their clinical practice and test novel approaches to treating combined physical and mental illness.

“There’s not enough opportunity to rehearse aspects of learning before you actually confront it with your patients and clients,” says Dr. Ivan Silver, Vice President, CAMH Education. “It’s a missing ingredient in mental health—we do a lot of learning on the job, but we need better ways to prepare clinicians before they actually need to use a skill in practice.”

The first of its kind in Canada to focus primarily on mental health care, the centre recently launched two courses that followed patient populations across the lifespan, exploring mental and physical health conditions requiring integrated, timely care. These courses are being refined based on feedback from the first participants, and will be offered more widely to clinicians starting this fall.

In collaboration with CAMH and U of T, THP started planning the Medical Psychiatry Collaborative Care Certificate program, a novel training approach that will provide clinicians with integrated mental and physical health-care treatment skills and knowledge. THP hosted the MPA Primary Care Education Sessions in March 2016 to consult with almost 50 health-care professionals over two days to ascertain their needs and help design the certificate program.

“The direct input from health-care providers on the development and content of the MPA collaborative integrated care education and training courses is valuable and will help shape a new generation of health leaders,” says Dr. Alison Freeland, Vice President, Quality, Education and Patient Relations, THP.

“I’m now seeing peers who are starting their residency, and who have chosen to specialize in psychiatry, constantly bombarded with the challenge of integrating physical and mental health care for their patients. This isn’t something they got to spend a lot of time learning about in medical school. That’s why the efforts of the MPA are going to be so important.”

Jennie Pouget, U of T medical student
The MPA Simulation Centre at CAMH will help prepare clinicians with new approaches to treating mental and physical illness together.
With every unique initiative being evaluated and tested, the MPA is seeking the best ways to meet the needs of patients and understand the biological linkages between physical and mental health.

Under the direction of Dr. Paul Kurdyak, the MPA continued to develop baseline metrics for several MPA projects. Through its Health Outcomes work, the MPA brought together project and evaluation staff at U of T, THP, SickKids and CAMH in order to support a standardized evaluation framework for all MPA initiatives.

In addition to the Health Outcomes Unit, all five MPA directors and their teams have been leading research programs that support innovations in patient care and education. A comprehensive listing of their teams’ scholarly publications, workshops and presentations from 2015–16 is available under the ‘Research’ section at www.medpsychalliance.ca.

**NEW WAYS OF STUDYING CHILDRENS’ HEALTH-CARE NEEDS**

To better understand the needs of children and adolescents with co-existing physical and mental health conditions, the MPA has launched 14 demonstration projects in collaboration with medical programs at SickKids and THP and with community partners. One of these projects is the only clinical research program in Canada to study childhood depression and heart disease together.

Over the past decade, epidemiological data has confirmed that adolescents with depression are at increased risk of dying younger, from cardiovascular disease, than their non-depressed peers. However, despite increasing acknowledgement that early-onset depression is an indicator of risk for future cardiovascular disease, clinical programs addressing depression and cardiovascular risk factors continue to operate separately.
SickKids’ registered nurse Annie Coombe assesses a young patient in the new CLIMB program

The Children’s Integrated Mind and Body (CLIMB) program at SickKids, funded by the MPA, is changing this way of thinking. The program provides integrated depression/cardio-metabolic assessments, as well as treatment, for children and adolescents with depression to identify early markers of risk for cardiovascular disease. The ultimate goal is to improve health outcomes for children and adolescents with depression, into adulthood.

CLIMB patients receive a comprehensive physical and mental health assessment and are being followed for six months. The CLIMB team includes a child psychiatrist, nurse, cardiologist, pediatric endocrinologist and pediatric obesity specialist. The research program will also track and study the potential markers of heart disease in relation to depression.

“Children and adolescents with depression are also at risk of suffering from heart disease in the future. With an integrated physical and mental health assessment, we have the opportunity to tackle their depression and check their risk factors for heart disease,” says Dr. Daphne Korczak, Director of CLIMB. Certified in pediatric medicine, Dr. Korczak is a child and adolescent psychiatrist, a Clinician-Researcher at SickKids and an Assistant Professor of Psychiatry at U of T.

“We hope to demonstrate that holistic care is an achievable next step in improving children’s mental health care and in understanding the association between depression and heart disease,” Dr. Korczak adds.

CLIMB helps children, families and clinicians recognize that depression has an impact on both mind and body and points to the critical importance of a system-wide approach to mental health.
Growing numbers of community members have been inspired by the mandate of the Medical Psychiatry Alliance (MPA), and have supported it through their guidance, time and philanthropy. We are happy to report that in fiscal year 2015–16, the MPA Partners received more than $8.6 million in additional investments to support MPA priorities.

- Bell Canada’s significant $10-million gift to CAMH allowed it to develop the PARTNERs project. The goal of the project is to evaluate an integrated care model of telephone-based, computer-aided care management to assist family physicians in caring for adult patients with depression, anxiety and at-risk drinking. The project directly supports the MPA’s mandate to improve access and quality of mental health care in the primary care sector.

- CAMH received a $1-million gift from The Geoffrey H. Wood Foundation, long-time supporters of Aboriginal programs throughout the province. The gift will support the work of the MPA and the expansion of CAMH’s Telemental health programs for First Nations, Inuit and Métis people, including critically needed and culturally adapted telepsychiatry and training programs for care supporters in remote communities.

- SickKids Foundation received a $2-million gift from an anonymous donor in support of the Chair in Child & Youth Medical Psychiatry, which significantly leveraged the SickKids Foundation Matching Chair Program, and, combined with expendable research funding already secured, totalled $4.3 million.

- SickKids Innovators is a program that engages the next generation of philanthropists to support the highest-priority needs of SickKids by pooling their support for selected priorities each year. Last year, SickKids Innovators voted and selected the MPA as their chosen fundraising priority for 2016 and raised $350,000.

- SickKids was the beneficiary of funds raised from two third-party events, including a $20,000 contribution from the Mentor College Fashion Show as well as a $20,000 contribution from the Collaborative Practice Toronto Art Battle event to support the SickKids’ Family Therapy Training Seminar demonstration project led by SickKids’ Consultation Liaison Program.

- Long-time friends of Trillium Health Partners, Gordon and Donna Feeney made a transformational $5-million gift to establish the Gordon and Donna Feeney Centre for Seniors’
Medical Psychiatry at Trillium Health Partners. This new and innovative centre will be the first to design, implement and test an unprecedented model of seniors’ care, with a portion of the funding directly supporting the work of the MPA.

- On February 27, 2016, Trillium Health Partners Foundation held their fourth annual Laugh out Loud gala in support of mental health services at Trillium Health Partners. The spectacular event attracted over 1,000 attendees, and raised nearly $950,000, bringing the cumulative amount raised from this event to just over $2.5 million.

- In 2015, Trillium Health Partners Foundation completed a direct mail campaign in support of the MPA which resulted in an incredible $322,253 raised.

- The University of Toronto is engaged in a joint fundraising initiative with Mount Sinai Hospital to endow the Chair in Health and Human Behaviour (formerly the Chair in Body-Brain Health Integration). To date, nearly $600,000 has been raised towards the goal. At this time, a $2-million gift is being discussed with a prospective donor interested in supporting the Chair, with an additional $1 million earmarked towards the Chair from the Department of Psychiatry, University of Toronto.

OUR THANKS TO THE FOLLOWING SUPPORTERS:

Stephen A. Adler
Bell Canada
Collaborative Practice Toronto Art Battle
Dialogue Projects
Gordon and Donna Feeney
Lawrence H. Fein
Leila E. Feldman
Estate of Louis Frieberg
Douglas P. McPhie
Mentor College Fashion Show
Prime Quadrant Foundation
SickKids Innovators
The Geoffrey H. Wood Foundation
Anonymous (1)