CAMH TeleMental Health Integrated Care Model

Referral Protocol

Email: TeleMentalHealth@camh.ca
Phone: 416 535 8501 x 34778 or toll-free at 1(800) 463-2338

1. Overview

CAMH TeleMental Health provides consultation and assessment for general psychiatry consultations. Ongoing treatment or therapy is not currently offered through CAMH TeleMental Health. Please ensure that the client/patient you are referring is aware that the consultation will take place via videoconference and that they consent to participating in this model of care.

***Please note that this is NOT a crisis service. Clients/patients who are experiencing a mental health crisis should be provided appropriate crisis services based on your organization’s protocol for such circumstances, or go to the nearest emergency department.

Inclusion Criteria

- Clients/patients must be 18 years of age or older. Please check with the psychiatrist before referring any client/patient under 18.
- Clients/patients looking for a consultation or assessment in general psychiatry.
- Clients/patients must be referred by a physician or nurse practitioner.
- Clients/patients must be willing to participate via videoconference on CAMH approved platforms.
- Clients/patients in the North East, North West and North Simcoe Muskoka LHIN regions and/or self identifies as a Partner Site in Ontario (regardless of LHIN).

General Exclusion Criteria

- Clients/patients 17 years of age or younger. Please check with the psychiatrist before referring any client/patient under 18.
- Clients/patients in crisis who require immediate care.
- Clients/patients currently being followed by a psychiatrist.
- Clients/patients seeking assessment as requested by a third party (e.g., legal/court purposes, child services, insurance, work disputes).
- Clients/patients who refuse to participate via videoconference on CAMH approved platforms.
- Non-Partner Sites in all other LHIN regions excluding North East, North West and North Simcoe Muskoka LHIN regions.

*IMPORTANT: Clients/patients must have access to either a telemedicine suite or their own video and audio-enabled technology. The CAMH physician may choose not to proceed with the consult if they are unable to establish a video connection with the client/patient.
2. Program Structure

Each 3-hour session includes 2 direct clinical hours and 1 hour of indirect care.

i. **Direct clinical services include:** consultation, assessment, diagnosis, and treatment recommendations.

ii. **Indirect services include:** participation in case conferences, consultation with interdisciplinary care professionals (e.g., physician, nurse practitioner, social worker, etc.), program support and development of program direction, provision of educational services for team, system coordination, and resident and medical student supervision.

***These are tracked using the Indirect Care E-Survey (applicable to all community organizations in the ICM) and Q-codes (applicable only to Family Health Teams with sessional funding).

3. Referral Process

CAMH TeleMental Health will continue to offer blocks of time to organizations with both telemedicine capability and a waitlist of clients/patients awaiting psychiatry assessments. The community organization maintains responsibility for triaging, processing referrals and scheduling.

a. CAMH TeleMental Health staff will send the psychiatrist’s clinic dates to the community organization coordinator on a regular basis, once they become available.

b. The community organization coordinator will then be responsible for scheduling the appointment and collecting the required information from the client/patient to complete the mandated TC LHIN sociodemographic form. This can be done in person or over the phone.

c. The community organization’s referral source (physician or nurse practitioner) will complete the CAMH referral form and give it to the community organization administrative staff for submission to CAMH TeleMental Health. *The referral form must include the OHIP number for the referring primary care physician or nurse practitioner.*

d. The community organization admin/ telemedicine coordinator will schedule clients/patients into pre-provided time slots, schedule the appointments in Ncompass, and click the ‘Notify participants’ button and email the event details to TeleMentalHealth@camh.ca. [Also see 1g.] If clients/patients are being seen from home or another private location, the community organization admin/ telemedicine coordinator will notify TeleMental Health that a virtual visit appointment is required and provide the client/patient’s email.
e. When scheduling appointments with clients/patients, the community organization administrator/coordinator will inform them about the no-show and cancellation policy.

f. The community organization will complete and fax the CAMH referral form and the CAMH sociodemographic form to CAMH, with the selected appointment date and time included on the cover page. *Please note that all parts of the referral form must be filled out and there must be a clear reason for referral.*
   i. Any additional supporting documentation that would be relevant for the consultation should also be included in the referral package sent to CAMH TeleMental Health.
   ii. The following information should be included on the Fax cover page – Title: CAMH TeleMental Health Integrated Care Model, Organization Name, Psychiatrist Name, Client/Patient Name, Scheduled appointment date and time, and NCompass Event Number (see attachment for template) or client/patient email (if the client/patient is accessing the appointment from their home or another private location).
   iii. CAMH TeleMental Health Fax Number: 416-260-4186

*IMPORTANT: Clients/patients must be scheduled and referrals sent to CAMH TeleMental Health at least 5 business days prior to the appointment to ensure enough time for processing at CAMH. If an appointment needs to be scheduled with less than 5 business days-notice, it is important for the community organization administrator/telemedicine coordinator to contact CAMH TeleMental Health to discuss whether or not this will be possible.

g. CAMH TeleMental Health staff will confirm appointments via e-mail when they are booked through NCcompass (this will occur through OTN automatically and will include the NCompass event number). Through the same automatic process, site coordinators who book their own clients/patients are expected to send an email to CAMH TeleMental Health through NCompass. [Also see 1d.]

h. The administrator at the community organization will provide a reminder call to the clients/patients 4-6 days in advance, and 24 hours in advance (if necessary) to remind the client/patient of the appointment. They will also reiterate the cancellation and no-show procedure.

i. After the consultation, the CAMH psychiatrist will dictate a consultation note, with the name of the referring primary care provider (e.g., physician or nurse practitioner) and the community organization, and address which will be sent to the community organization by CAMH medical records.
j. CAMH Medical Records will send a copy of the consultation note to the community organization, care of the referring physician. To contact CAMH’s Medical Records department, please email ROI@camh.ca.

k. The community organization administrator will include a copy of the consultation note in the client/patient file (EMR or paper), and will notify the referring primary care provider.

l. Direct or indirect care follow-up will be coordinated as required.

4. Scheduling / Cancellations/ No-shows

a. Scheduling

i. The community organization administrator will create their own OTN events in Ncompass. CAMH TeleMental Health will provide the camera ID and consultant name, so that community organizations will have the information required to save OTN events in N-Compass. The community organization administrator will input **CAMH TeleMental Health (first name, last name)** as the consultant site coordinator, and use the “Notify Participants” button to send the event details to TeleMentalHealth@camh.ca. If clients/patients are being seen from home, the community organization admin/ telemedicine coordinator will notify TeleMental Health that a virtual visit appointment is required and provide the client/patient’s email.

ii. The community organization administrator will provide a minimum of 5 business days’ notice to CAMH TeleMental Health if a client confirms one of the appointments.

iii. The community organization administrator will provide a minimum of 5 business days’ notice to CAMH TeleMental Health if the community organization is unable to confirm any clients/patients or utilize the indirect care time.

b. Cancellations

i. Clients/Patients must notify the community organization of a cancellation a minimum of 2 business days (i.e., 48 hours) prior to the scheduled appointment. This excludes weekends and holidays. The community organization will do their best to schedule a new consultation, or to fill the slot with necessary indirect care.

ii. The community organization administrator will call the CAMH TeleMental Health staff as soon as possible to notify them of the cancellation, and will indicate if they
plan to schedule a new appointment in the cancelled time slot. If it is possible, the community organization administrator will follow all the steps of the referral process, and schedule a new appointment.

iii. The community organization can use discretion as to whether to consider the client/patient a no-show, if they cancel with less than 2 business days (i.e., 48 hours excluding weekends and holidays) notice.

c. No-shows

**Definition:** A missed appointment will be considered a “no-show” for those clients/patients who do not inform the CAMH TeleMental Health (or their local clinical telemedicine coordinator (CTC) or clinic administrator equivalent), of their inability to attend their appointment and/or who provide no explanation a minimum of 2 business days (i.e., 48 hours) prior to their scheduled appointment. The 48-hour window excludes weekends and holidays. The clinic will recognize extenuating circumstances that lead clients/patients to notify service providers within the 2 business day (48-hour) window before their scheduled appointment, on a case by case basis.

CAMH TeleMental Health follows the CPSO policy for uninsured services: Billing and Block Fees, Section: “Charging for missed or cancelled appointments”.


**Procedure for Organizations:** The community organization is expected to inform clients/patients that CAMH TeleMental Health and the Community Organization enforce a “No-Show” expectation for any missed appointments.

i. Community organization communicates with all clients/patients upon booking the initial appointment of the TeleMental Health no show guidelines. In the event that the client/patient does not show up, the community organization will notify the CAMH TeleMental Health administrators of the missed appointment within the first 15 minutes of appointment start-time.

- Communication can be made via phone 416-535-8501 ext. 34778 or email to TeleMentalHealth@camh.ca. Please include the Ncompass ID, or the scheduled time of the appointment (ensure not to include any client/patient personal identifiers).
- If your community organization is part of the Integrated Care Model, you may utilize the indirect care hour to provide this client/patient indirect care services.

ii. The first time a client/patient misses an appointment, the community organization will reschedule with the client/patient, and ensure the patient is aware of the no-show guidelines for TeleMental Health. Community organizations
will reschedule the client/patient and ask if there is additional support that is required for the client/patient to be able to attend the appointment.

iii. TeleMental Health admins will document in the client/patient’s chart the date, time and reason of the missed appointment, the rescheduled appointment date and other relevant information.

iv. If a client/patient does not show up a second time, the community organization will follow-up with the client/patient, indicating that they will require a new referral.

   * Community organizations: Please use your discretion with these guidelines. Please try to determine if there are reasons that the client/patient has not presented themselves for their appointment, and if additional options can be explored to facilitate attendance to the appointment.
   * TeleMental Health admins will continue to document all relevant information in the client/patient’s chart.

v. If there is a no‐show, a community organization telemedicine coordinator or administrator will notify the CAMH psychiatrist via phone or email and copy TeleMentalHealth@camh.ca (noting the Ncompass ID, or the scheduled time of the appointment, but ensuring not to include any client/patient personal identifiers), and indicate if there are any indirect care services that can be provided for that hour. If not, the psychiatrist will either remain on the videoconference line for the remainder of the hour, or can sign off, and sign back in for the following appointment.

5. Scheduling Indirect Care:

a. Topics for indirect care will be scheduled directly with the psychiatrist. Ideas for education topics, or other indirect care needs should be sent to a point person at the community organization, who can relay the ideas to the psychiatrist (or psychiatry resident, if applicable). The psychiatrist (or resident) will determine what is feasible in one hour of indirect care. Any topics for discussion that were not addressed in the hour of indirect care can be rescheduled for a subsequent indirect care hour.

b. Indirect care may also include consulting with the psychiatrist (or psychiatry resident, if applicable) regarding a complex case or for further guidance regarding a client/patient who has previously been seen by the psychiatrist (or resident). This should also be scheduled the same way as above.
* Indirect care is a key component of the ICM and all indirect care activity should be documented by the CAMH Psychiatrist on the Indirect Care E-Survey within 5 business days of completing the session.
https://edc.camhx.ca/redcap/surveys/?s=DYRNXMP848

Useful Links:
1. Referral Fax Cover Page
2. Referral Form
3. Socio-demographic Form (Client/Patient to complete)
4. Indirect Care E-Survey (Psychiatrist to complete)
5. CPSO Policies: Uninsured Services – Billing and Block Fees