

# **Geriatric Program Assessment Teams (GPAT), Geriatric Mental Health Teams (GMHT) & R&G Clinicians**

Presented by Terri Bowser, Regional Educator, Rehab & Geriatrics Winnipeg Regional Health Authority (WRHA)



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# Faculty/Presenter Disclosure

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- **Presenter:** Theresa (Terri) Bowser
- **Relationships with commercial interests:**
  - Not applicable

# Mitigating Potential Bias

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- Not applicable

# Objectives

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- Introduce GPAT and GMHT services
- Identify target patients
- Describe referral process
- Explain process
- Define some situations where GPAT GMHT are not the appropriate



# Tooting our horn...

- GPAT and PRIME both highlighted as one of the CMA's Promising Practices across Canada
- [http://www.demandaplan.ca/promising\\_practices](http://www.demandaplan.ca/promising_practices)



# Geriatric Outreach Services

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GPAT –  
Geriatric  
Program  
Assessment  
Team

GMHT –  
Geriatric  
Mental  
Health  
Team



**GMHT**

Community

PCH

**GPAT**

Community

Emergency  
Room





# Who are we?

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- Transdisciplinary clinicians
- Servicing at risk elderly to provide supports to keep them independent
- Advocates for geriatric needs and perspective
- Eyes and ears of the geriatricians and geriatric psychiatrist

# GMHT GPAT Eligibility Criteria

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- Age 65 years+
- Live within WRHA borders
- 6 catchment areas across Winnipeg



# Cases NOT Appropriate for Services

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## Both GMHT and GPAT

- Someone currently involved with day hospital
- Someone not yet 65
- Someone living outside WRHA
- Have to agree to the visit



# GMHT Eligibility

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- 65 or older with BPSD (behavioural and psychological symptoms of dementia)
- New, first onset of Mental Illness
- Lifelong history of Mental Illness

## Ineligible

- Someone being followed by a psychiatrist already
- Assess for competency – refer to day hospital



# GPAT Eligibility Criteria

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## GPAT

- Experiencing a number of complex health concerns affecting their ability to function.
  - Mobility/falls
  - Functional/ADL problems
  - Continence issues
  - Medication problems

## **Ineligible:**

- Diagnosis of ALS, dialysis and palliative care patients – have specialized services



# Referrals GPAT and GMHT

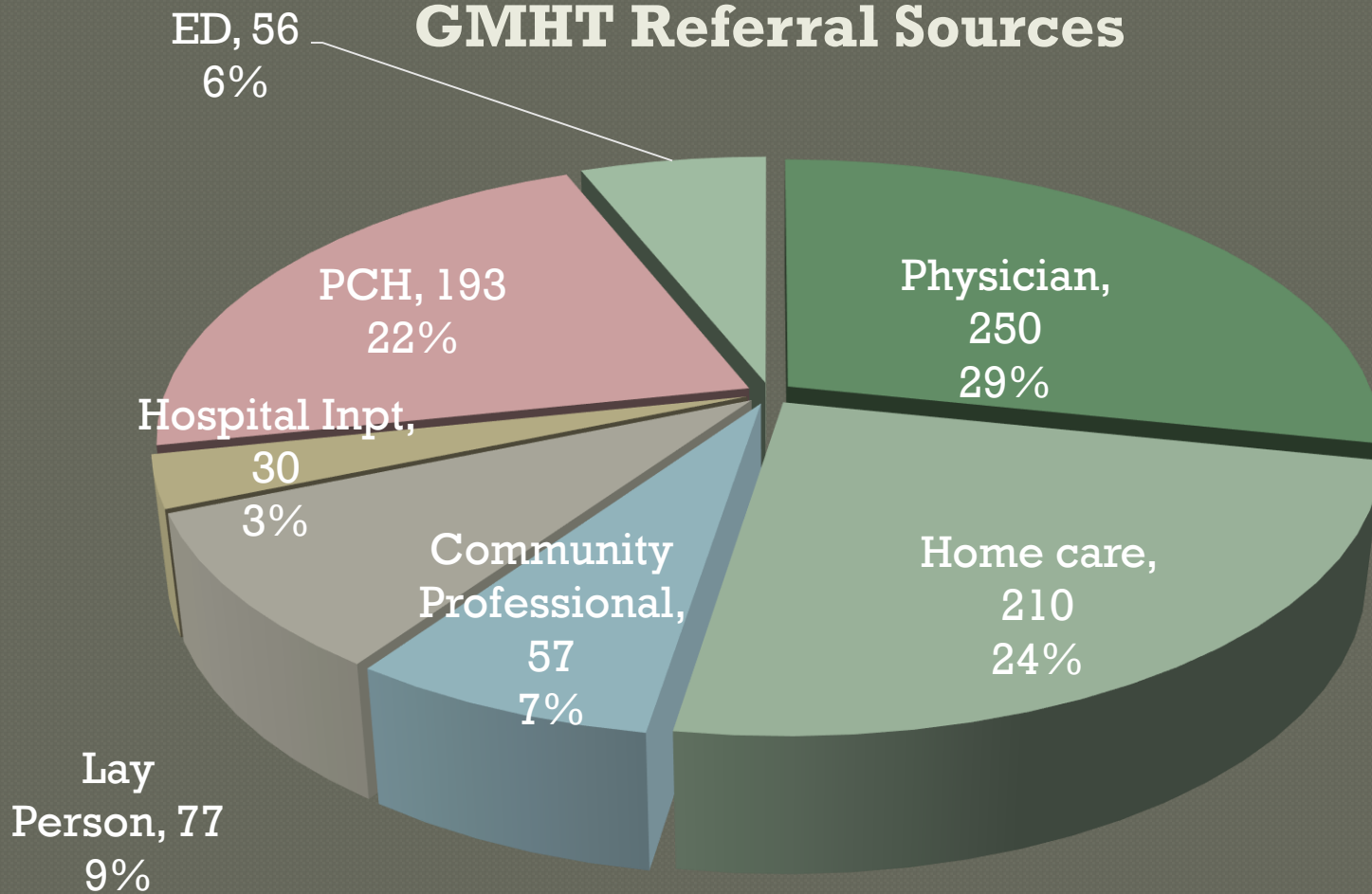
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- Open Referral Process
- **Central Intake Line** at 204 982-0140 or fax Central Intake Form to 204 982-0144
- <http://wrha.mb.ca/prog/rehab/>
- Mon-Fri from 8:00 a.m. to 4:00 p.m

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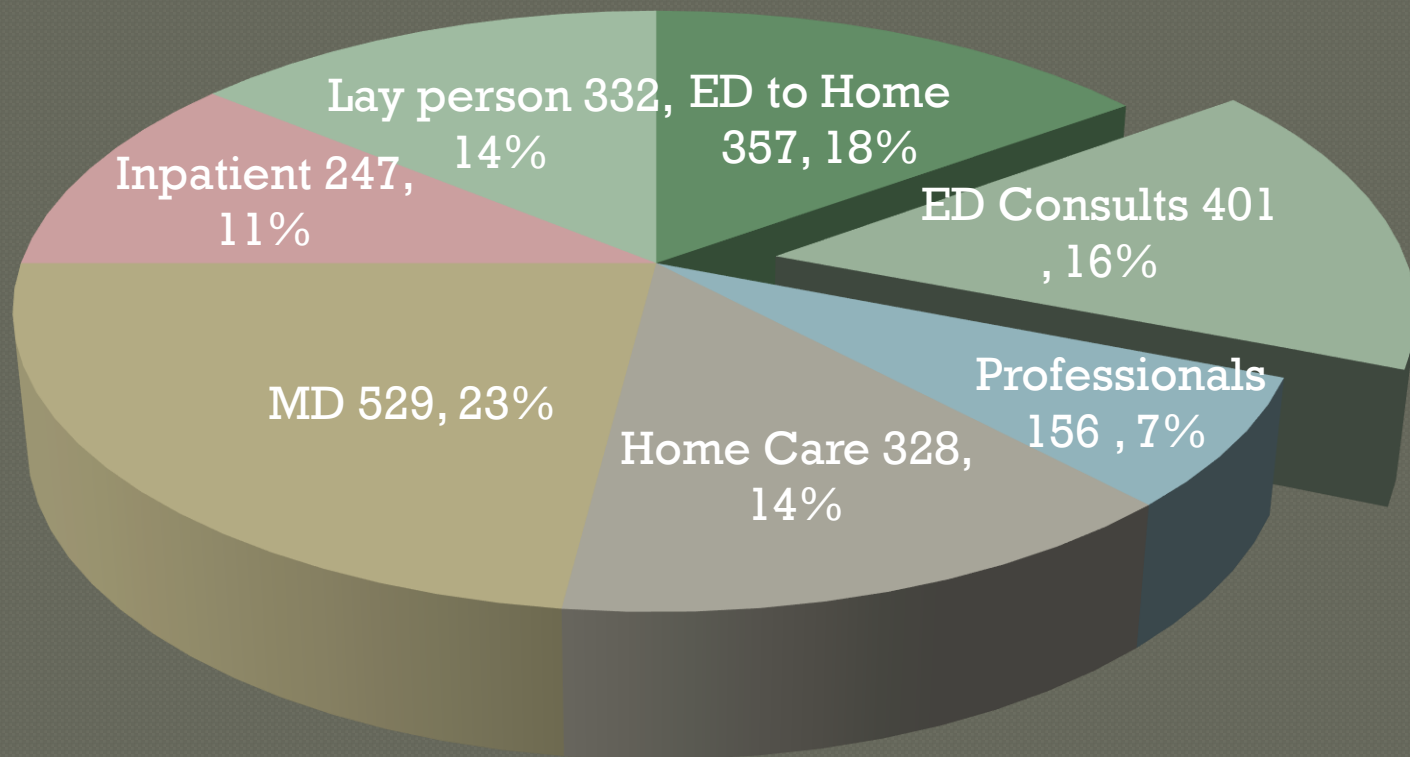
# GMHT Referral Sources



# GPAT Referrals April 1 2015- March 31 2016

2350 referrals

- 1949 community visits
- 401 emergency room consults for rehab





# Response Time (Community)

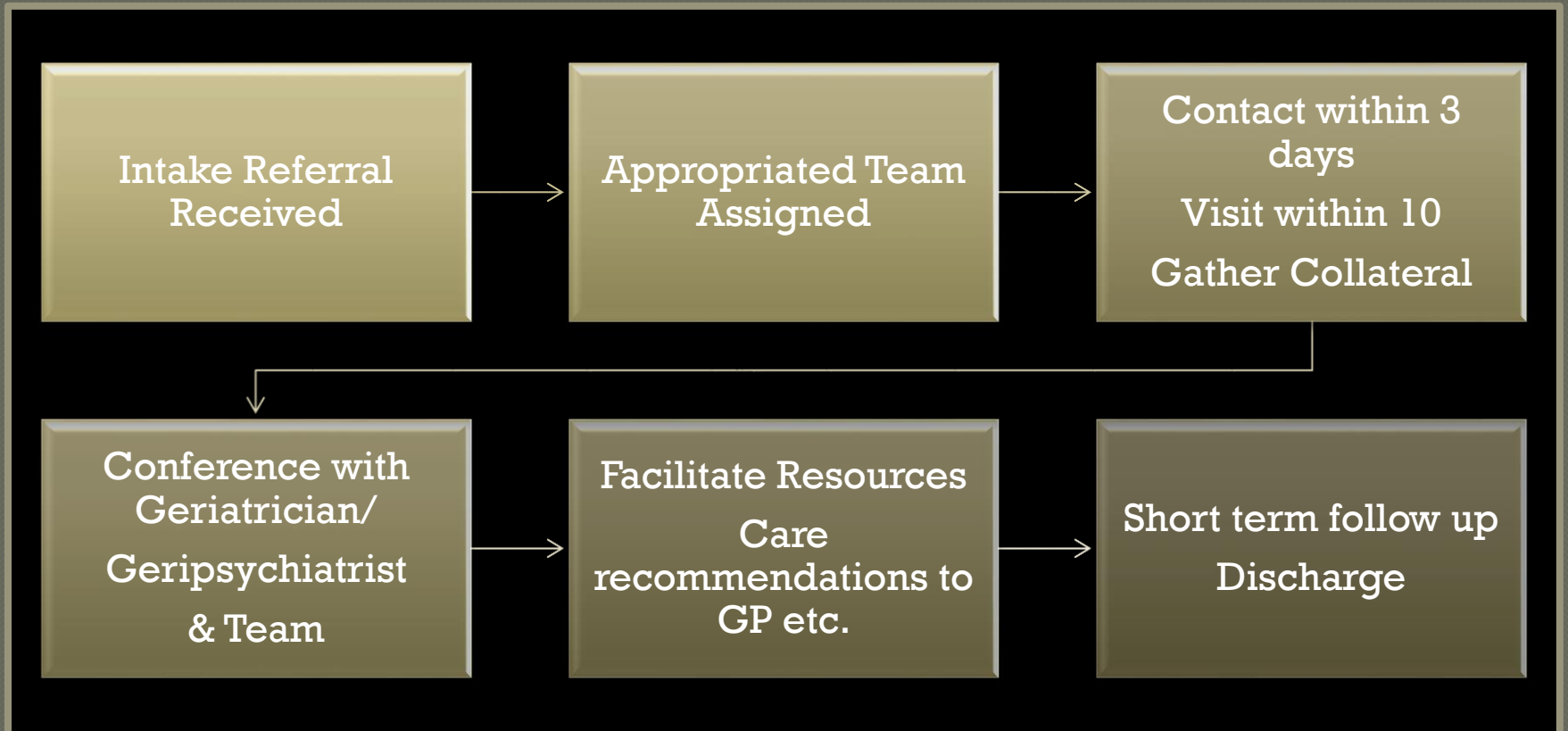
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## GOAL:

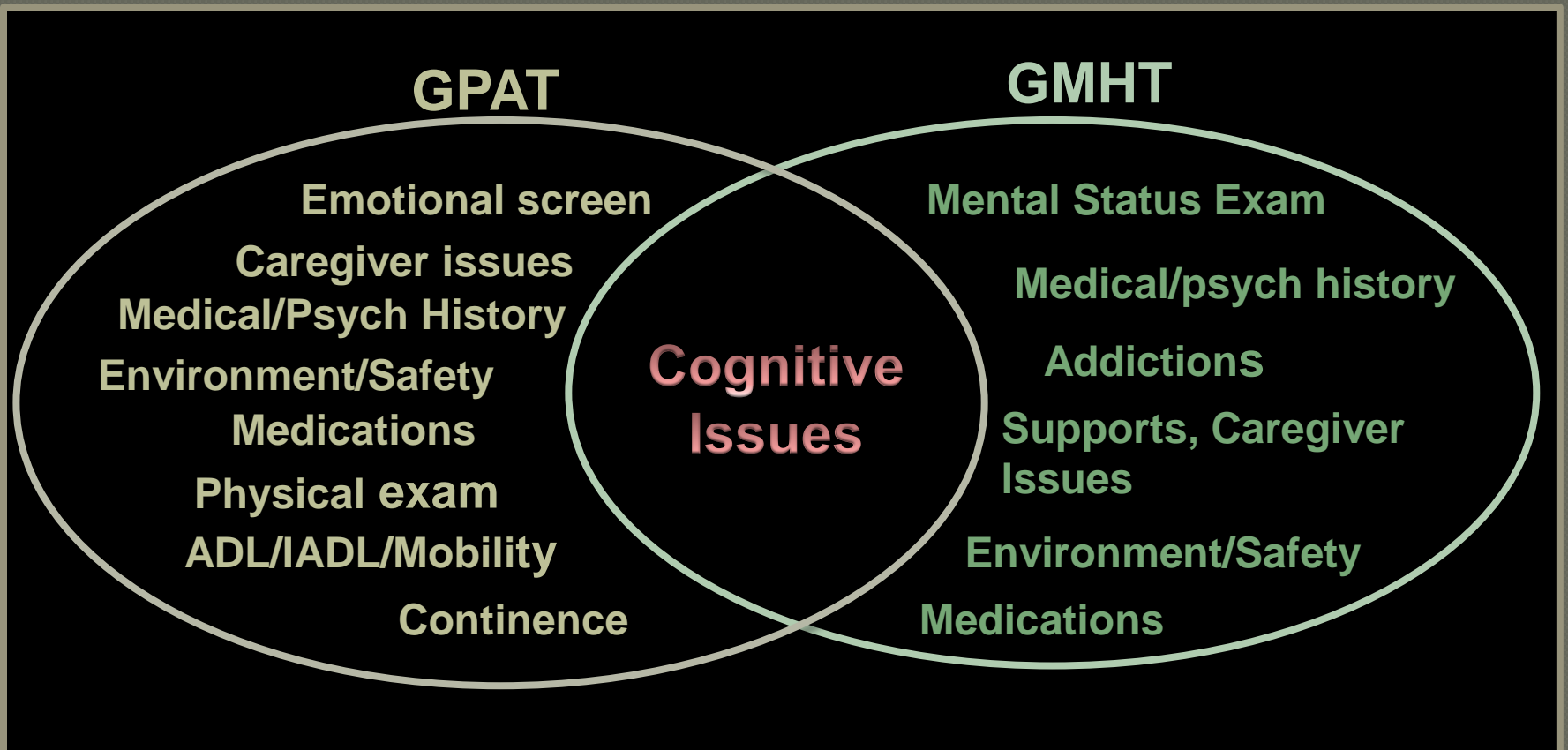
- Not a Crisis or Emergency Response Team
- Quick Response Team
- Contact- 3 days, visit in 10 days
- Clinician contact is made to determine level of risk/appropriate service & schedule appointment



# The Process



# GPAT and GMHT Assessments



# GPAT Roles in the ED

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## Facilitating Admission to Geriatric Rehab Units:

- clinicians compile assessment results (PT,OT,SW, HC) labwork, Xrays, collaborate with ED team members, and gather information about function and management prior to ED presentation
- Review case with team geriatrician, by telephone
- If not appropriate, make other recommendations to ED team

(Medically stable, rehab potential)



# Questions?

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