2024 Ontario Seniors' Mental Health Forum
Summary Report

January 2025

Provincial
**Geriatrics
Leadership**
Ontario

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Introduction

On December 4, 2024, Provincial Geriatrics Leadership Ontario (PGLO) hosted the 2024 Ontario Seniors' Mental Health Forum (the Forum), convening 50 clinical and administrative leaders to address mental health challenges faced by older adults. Hosted at Sinai Health, Bridgepoint Site, in Toronto, Ontario, key goals included planning infrastructure for seniors' mental health, leveraging partnerships, and celebrating successes.

The event included invited policy and practice experts who delivered a series of thought-provoking presentations archived at https://geriatricsontario.ca/resources/2024-ontario-seniors-mental-health-forum/. Participants also engaged in table discussions focused on key topics such as the growing demand for seniors' mental health services in primary care and long-term care, strategies for serving complex patients and care partners, and measurement and evaluation across programs and services supporting older adults living with mental health and addictions challenges.

The day also highlighted the important contributions of existing programs and organizations such as the Mental Health Commission of Canada, the Canadian Coalition for Seniors Mental Health, the Canadian Mental Health Association (Ontario), the Behavioural Supports Ontario program, and the Provincial System Support Program of the Centre for Addictions and Mental Health to name a few.

Discussions emphasized actionable solutions to improve care quality, accessibility, and equity. This report summarizes key themes generated by participants and potential action items.

Figure 1: Participant Discussions at the 2024 Ontario Seniors Mental Health Forum

Forum Overview

The Forum began with a review of goals for the day, which included celebrating successes, strengthening partnerships and leveraging, linking and leading for the future. Participants were invited to engage in real-time using audience interaction software (Slido), starting with an initial question about principles that should shape the work of Seniors' Mental Health (Figure 2).

Figure 2: Audience reflections on principles for Seniors' Mental Health

Dr. Mark Lachmann, Geriatric Psychiatrist Co-Medical Director, PGLO, provided a welcome and opening remarks, setting the context for a day of courageous thinking about the future of Seniors' Mental Health in Ontario. Dr. Kelly Kay, Executive Director, PGLO, highlighted the many older adults experiencing mental health and addiction challenges as a call for action.

Citing recent data from the Institute for Clinical Evaluative Sciences (ICES), opening highlights included data showing that across Ontario, more than 710,000 older adults live with an anxiety disorder, including 200,000 also living with dementia or frailty. A further 187,00 older adults experience a mood disorder, including 80,000 also experiencing dementia or frailty. In addition, more than 100,000 older adults live with substance use disorders and 27,000 experience schizophrenia or psychotic disorders. The Geriatric and Long-Term Care Death Review Committee (Provincial Coroner's Office) reported that "the elderly, as a population, present challenges in the management of complex medical and psychiatric conditions; they are best served by a multidisciplinary team of providers with specialized skills. This starts at the level of training and finishes with oversight and effective quality review" (GLTCRC, 2022, Chapter 4).

Danyal Martin, Director of Clinical Programs at the Mental Health and Addictions Centre of Excellence and Phoebe Smith-Chen, Interim Director, Primary Care at Ontario Health, outlined Ontario Health's strategic initiatives and goals for improving mental health, addictions, and primary care services across the province.

The Mental Health and Addictions Centre of Excellence (MHA CoE) aims to build a comprehensive mental health and addictions system, overseeing service delivery, supporting quality improvement, and implementing the Roadmap to Wellness. Key focus areas include standardization and equity to ensure consistent care across the province, using data and measurement to track and improve care quality, transparency and accountability in promoting high-quality care and outcomes.

Goals for the MHA COE in 2024/25 include improving quality and access for specific diagnoses such as depression and anxiety through programs like Ontario Structured Psychotherapy (OSP) and repetitive transcranial magnetic stimulation (rTMS); substance use disorders through integrated care pathways and bed-based services; schizophrenia and psychosis through programs such as the Early Psychosis Intervention (EPI) Program; and, eating disorders, through provincial outpatient services programs. The MHA COE is also working to improve system strategy and operations through a provincial coordinated access initiative, an oversight model, and data and digital initiatives.

Ontario Health's Primary Care Program was established in 2022 and focuses on team-based primary care, supporting access, and managing contracts for Community Health Centres, Family Health Teams, and Nurse Practitioner-Led Clinics. The program's notable developments include the shift of Nurse Practitioner-Led Clinics to Ontario Health oversight in 2023 and the investment of $90M to create or expand 78 interprofessional primary care teams (IPCTs). Primary Care objectives for 2024/25 include increasing patient attachment to primary care, improving access to care for marginalized populations, using data for local planning and identifying capacity gaps, and supporting local leadership and client-based funding allocations.

The afternoon sessions commenced with presentations from representatives from organizations currently supporting activity in the Seniors' Mental Health ecosystem. Speakers included Claire Checkland, Canadian Coalition for Seniors Mental Health (CCSMH); Marija Padjen, Canadian Mental Health Association (CMHA) (Ontario); Monica Bretzlaff, Behavioural Supports Ontario (BSO); and Angela Yip, Centre for Addiction and Mental Health (CAMH) Provincial Support Program. Presenters shared an overview of their organization and the support available to optimize older adults' mental health and highlighted opportunities for collaboration. Sessions were interspersed with generative table discussions, and ideas are summarized in the section titled "Participant Reflections and Insights".

Dr. Marie France Rivard, former chair of the Seniors Advisory Committee of the Mental Health Commission of Canada, provided closing leadership reflections. She emphasized the importance of person-centred care, clinical research, and educational strategies to improve mental health

services for older adults. Dr. Rivard noted that advocacy at the provincial level is crucial, as demonstrated by the successful development of programs like Behavioural Supports Ontario (BSO). Collaboration among various organizations and the sharing of data and educational resources are essential for continued progress. Dr. Rivard also stressed the need for increased training spots for geriatric mental health professionals and the importance of national organizations in supporting provincial efforts.

Figure 3: Dr. Mark Lachmann, PGLO and Dr. Marie France Rivard

Participant Reflections and Insights

Emerging Contexts for Seniors Mental Health Care

Following the opening sessions, participants engaged in table discussion in World Café format and focused on key topics identified by participants during the Forum registration process. Facilitated by Heather MacLeod, Manager, Programs and Partnerships, PGLO, participants were asked to consider how Seniors' Mental Health services currently support various sectors (e.g. primary care, long-term care), actors (e.g. care partners, populations under 65, complex patients) and activities (e.g. measurement). Key points of discussion included:

1. **Primary Care Engagement**:
   - Successes in small northern areas with virtual assessments and locum care.
   - Challenges in larger cities with navigating care and collaboration between primary care and specialists.
   - Future aspirations include training for seniors' care, shared care models, and embedded care teams.

2. **Care Partners Engagement**:
   - Overwhelmed and tired care partners need support and system navigation.
   - Opportunities to create awareness, incorporate metrics for care partners, and provide coordinated services.
   - Importance of education and health teaching for family and friend care partners.

3. **Serving the Under 65 Population**:
   - This includes populations with intellectual disabilities and serious mental health conditions who may reside in LTC.
   - Challenges with criteria for services and lack of standardization.
   - Opportunities to create supportive housing models and improve transitions and continuity of care.
   - The importance of systemic thinking and capacity building in supporting services for those under 65.

4. **Serving Complex Patients**:
   - Identifying and addressing the needs of complex populations, such as those who are under-housed or have specific conditions like Huntington's disease.
   - Lack of support and inequitable funding for complex clients.
   - Importance of meeting clients where they are and addressing equity concerns.

5. **SMH in Long-Term Care**:
   - The current state includes limited access to dedicated teams with varying compositions and challenges in serving complex populations.
   - Future aspirations include better integration of services, capacity building, and establishing standards of care.

- Addressing gaps posed by residents with complex mental health needs and changing legislation for crisis placements.

6. **Metrics and Evaluation**:
   - Current metrics focus on volumes and wait times rather than meaningful outcomes.
   - Challenges in measuring outcomes and demonstrating impact.

Strengthening Partnerships

Following presentations by representatives from organizations currently supporting activity in the Seniors' Mental Health ecosystem, participants then discussed opportunities to strengthen existing partnerships and engage new partners. Emergent ideas to enhance partnerships included:

1. **Service Gap Identification**: Identify service gaps and collaboratively plan support strategies.

2. **Advocacy for the SMH Voice**: Develop strategies for provincial partners to advocate for SMH representation at regional and provincial levels.

3. **Collaborative Approaches to Training**: Review and leverage existing education/curriculum for consistent capacity building by identifying key providers. Organize collaborative training sessions to enhance skills and knowledge sharing.

4. **Funding Partnerships**: Secure funding to support partnerships similar to the OSP model.

5. **Coordination**: Enhance coordination among existing networks (e.g., CMHA, CCSMH, BSO) to streamline efforts and address common gaps. Establish formal pathways for collaboration and communication. Ensure mutual respect among partners, set clear goals and expectations, and hold regular meetings.

6. **Role Clarification and Communication**: Communicate and clarify roles to address gaps effectively. Use existing communication and engagement channels for shared projects that support reciprocity.

7. **Networking Opportunities**: Create opportunities for networking, leverage funding to expand roles, and reduce competition to increase collaboration. Form collaborative working groups with shared interests and goals to facilitate the sharing of ideas and experiences.

Participants agreed that these ideas would foster collaboration, streamline efforts, and enhance the overall impact of the SMH-related activity.

New Partnership Opportunities

Participants also identified several new opportunities for partnerships and supporting infrastructure, including:

Health and Emergency Services

- Create joint education sessions across system partners such as emergency services and community support services.
- Develop new collaborations with various healthcare providers such as Developmental Services Ontario, Long Term Care entities, and Primary Care.
- Explore integration with health teams and networks such as Ontario Health Teams and Primary Care Networks.
- Stimulate partnerships with organizations focused on substance use.

Government and Municipalities

- Explore engagement with local municipalities.
- Create regional infrastructure for SMH Services and Geriatric Psychiatry to improve coordination at the regional level for mental health services for older adults.

Social and Community Organizations

- Leveraging social care and community organizations outside of healthcare to support SMH.
- Explore partnerships with food banks, shelters, housing providers and other community services.

Academic and Research Institutions

- Forge new relationships with academic campuses and collaborate with educational institutions.
- Connect with Indigenous partners and leaders in Indigenous Research (e.g., ICAARE).

Mental Health and Specialized Services

- Expand partnerships with existing mental health organizations.
- Engage with counterparts at Alternate Care Facilities (e.g. transitional care spaces)

Partnership Mapping

- Map existing partners and linkages to identify additional gaps and opportunities in current partnerships.

Designing the Future of Seniors Mental Health Services in Ontario

Participants then discussed their vision for the future of Seniors' Mental Health in Ontario. Suggested action areas and required resources were identified under three core themes: models of

care, capacity building (e.g., training, mentorship, and continuing professional development), and system design and infrastructure. These themes are described below, along with the necessary resources required to support action across each thematic area.

Models of Care

Areas of suggested action include:

- **Advance Interprofessional Team-Based Models**: Participants identified the importance of integrated teams across sectors that included SMH supports and could also aid in the promotion of preventive care. Four specific examples included:

  - **Screening Programs**: Implement mental health screening, wellness programs and seniors' mental health workshops in primary care settings to identify issues early and provide timely interventions and support. Engage early in health promotion, disease prevention, and optimization of function, offering resources and support to maintain seniors' well-being.

  - **Community Outreach Programs**: Expand Seniors Mental Health Outreach programs to provide mental health education, early detection of mental health issues, and promotion of healthy lifestyles among seniors. Partner with local organizations to reach a wider audience.

  - **Flexible Assertive Community Treatment Teams (FACTT):** Create teams based on proven models that could be adapted to local needs and that could provide flexible, community-based mental health care.

  - **Mobile and Virtual Clinics:** Develop services that could be deployed to reach older adults in remote areas (e.g. fly-in Indigenous communities) and offer telehealth services for those with mobility issues, ensuring they receive necessary care without significant travel.

- **Integrate Geriatric and SMH Service Delivery**: Participants identified the need for closer integration of existing geriatric and SMH programs and multidisciplinary teams that can address both physical and mental health needs in older patients. A specific idea included establishing joint clinics where geriatricians and mental health professionals can collaborate on patient care, providing comprehensive assessments and treatment plans.

- **Coordinate Specialized Services**: Participants noted the value of integration across current specialized programming, such as BSO and SMH services. While such integration may already occur in some regions, it was viewed as a necessary approach to caring for complex populations that should be evident everywhere. Specific suggestions included establishing regular meetings and communication channels with specialized programs like BSO to discuss transitions, monitor patient progress, share updates, and adjust care plans as needed.

Required Resources

- **Funding Support for IADLs and Support Groups:** Enhanced support for older adults with persistent mental health conditions with Instrumental Activities of Daily Living (IADLs), such as safe medication administration and meal preparation. Increase funding for support groups for older adults living with mental health conditions.

- **Care Coordination Platform**: Implement a digital platform that allows healthcare providers to contribute to individualized comprehensive care plans reflecting mental health assessments, medication management and other interventions, patient progress, and follow-up appointments across various healthcare settings to coordinate care seamlessly and ensure continuity of care.

- **Triage System**: Develop a triage system to prioritize urgent mental health cases, reduce wait times, and ensure timely interventions.

Capacity Building

Participants identified training, mentorship and continuing professional development as important aspects of a SMH ecosystem. Suggested actions included:

- **Develop and Implement SMH Training and Education Programs**: Provide broad training and education across all health services, leveraging expertise from PGLO and Geriatrics communities. Organize workshops that bring together professionals from different disciplines to develop innovative solutions for common challenges in senior mental health care.

- **Create Communities of Practice**: Develop and share best practices, lessons learned, and successful models through communities of practice (CoPs) and annual meetings.

- **Provide Professional Development Support**: Incent continuous professional development among healthcare providers by providing funding and reimbursement for workshops, online courses, and certifications.

Required Resources:

- **Funding Support**: to enable the development and ongoing delivery of training programs for healthcare providers to adopt holistic, person-centred approaches, focusing on individualized care plans specific to older adults living with mental health conditions.

Leadership, System Design and Infrastructure

Participants reflected on the need for standardized approaches to the design of SMH services, including system leadership.

Leadership

Participants discussed the need for system leadership that could facilitate the creation of a clear vision and action plan for SMH, supported by data on the current state and scope of need, and guide efforts and ensure alignment. Features of this leadership structure might include:

- **Backbone Leadership**: A leadership team to oversee the implementation and evaluation of validated SMH programs and innovative practices, ensuring alignment across the continuum of care. A specific suggestion included establishing a dedicated branch within PGLO to oversee senior mental health initiatives, advocate for policy changes, and provide leadership and guidance to local organizations.

- **Coalition Building**: Create a coalition of healthcare providers, policymakers, lived and living experience advisors, and community organizations to develop and promote a shared vision for seniors' mental health care. Partner with community organizations to address social determinants of health, providing services like housing support, food security, and social engagement programs.

- **Regional Tables:** Set up local collaborative tables to facilitate partnerships and shared decision-making, bringing together stakeholders from different sectors. Leverage primary care, public health, and provincial networks to enhance service delivery and ensure that all providers are working towards common goals.

- **Policy Advice**: Use evidence to inform policy changes and identify resource requirements for seniors' mental health, working with government agencies and policymakers and ensuring that the needs of seniors are represented at all levels of government.

- **Coordinated Capacity Building**: Create a mechanism to coordinate capacity-building efforts across programs and organizations to avoid duplication of efforts and streamline resources, ensuring that training and support are consistent and effective.

Service Design

Participants suggested several required elements for SMH service design that could guide future development and evaluation efforts, including

- **Inclusion of Social Drivers of Health**: Screening and assessment systems should integrate social determinants of health to ensure that needs like housing, nutrition, and social support are identified.

- **Bridging Cultural Divides**: Cultural competency training is required for healthcare providers to address cultural differences and ensure inclusive care.

- **Linking Providers**: Program development cannot occur in isolation and should be supported by a network of providers and agencies across the care continuum to facilitate communication and collaboration, avoiding silos.

- **Holistic Approaches to Care**: Programs and services should adopt care practices that emphasize empathy, active listening, and personalized care plans and that address both mental and physical health needs.

- **Continuity of Services**: SMH services should collaborate with primary care to provide continuous services along a continuum of care, ensuring that older adults receive consistent support throughout their aging journey.

Required Infrastructure and Resources

- **Technology and Infrastructure**: Invest in technology and infrastructure that facilitate seamless integration of health and social care services, such as electronic health records and integrated care platforms. Enhance the sharing of electronic medical records (EMR) to improve care coordination and ensure that all providers have access to up-to-date patient information.

- **Investments in Accessible Options**: Enhance accessibility by providing transportation assistance, home visits, IADL supports and telehealth options.

- **Coordinated Access**: Implement a centralized referral and scheduling system to manage appointments and reduce wait times, ensuring equitable access to services.

- **Data Collection and Reporting**: Invest in better data collection and reporting infrastructure, enabling data-driven decision-making and continuous improvement.

- **Communication Tools**: Develop communication tools and coordinated access systems to streamline information sharing and improve collaboration.

Figure 4: Forum participants Dr. Jacobi Elliott and Dr. Sabeen Ehsan

Conclusions

The 2024 Ontario Seniors' Mental Health Forum highlighted the significant progress and ongoing challenges in seniors' mental health services across Ontario. Participants **reflected** on the need for provincial leadership and collaboration between geriatric medicine and seniors' mental health services. They highlighted the significance of advocacy, historical context, and the collective passion and knowledge present at the Forum. Key takeaways from participants included the necessity of a unified provincial voice, the challenge of engaging those not present, and the importance of translating their work into actionable steps and convincing advice for government and funding bodies. Participants also discussed the need for continued advocacy for wages, the value of sharing best practices, and the potential for regional collaboration. The reflections underscored a sense of shared challenges and opportunities, the importance of mentorship, and the need to build on existing successes.

Forum participants committed to several **individual actions** to advance SMH services. They emphasized reflecting on local and regional priorities, celebrating successes, and maintaining open networks. Participants planned to seek regional opportunities for cross-sector discussions, connect formally with provincial partners, and review shared resources to benefit their teams and clients. They committed to ongoing engagement, providing feedback, and promoting SMH with leadership. Building and strengthening relationships, advocating at provincial tables, and integrating services with geriatric medicine were also key actions. Participants aimed to use data effectively, contribute to developing a provincial system for older adults and explore innovative ideas for equitable, inclusive, and person-centred care. They expressed a desire to increase involvement, advocate with decision-makers, and continue attending relevant meetings to support SMH services.

In closing, there was strong agreement that the event sessions were engaging and relevant and the Forum was rated as excellent (4.8/5) overall. The Forum conversations underscored the value of mentorship, data collection, and partnership while acknowledging the contributions of all partners. The proposed next steps following the 2024 Ontario Seniors' Mental Health Forum include sharing slides and summaries (see https://geriatricsontario.ca/resources/2024-ontario-seniors-mental-health-forum/), increasing involvement with the Centre of Excellence (CoE), and advocating for more opportunities to exchange and grow SMH services. Participants emphasized the need for continued collaboration on policy and initiatives, establishing a provincial mandate for PGLO, and identifying common visions and priorities. They also highlighted the importance of planning and collaborating on public policy development, involving frontline staff and booking meetings to develop policy and provincial frameworks. PGLO is expected to anchor a Seniors Mental Health network, with a focus on collating discussions and creating reports. There is a consensus to move from conceptual discussions to specific actions to achieve better care for older adults.

Appendices

Forum program

Provincial Geriatrics Leadership Ontario

Ontario Seniors' Mental Health Forum
An Invitational Event

Wednesday,
December 4, 2024
9:30 am to 4:00 pm

Sinai Health:
Hennick Bridgepoint
Hospital
1 Bridgepoint Dr.
Toronto
Main Auditorium

Join invited clinical and administrative leaders to plan an infrastructure for Seniors' Mental Health in Ontario

- Celebrate success
- Strengthen partnerships
- Leverage , link and lead for the future

Invited guests, please confirm your participation by clicking here

Questions?
info@geriatricsontario.ca

Agenda	
9:00 am	Coffee conversations (arrival)
9:30 am	Welcome and Opening Remarks: Building a Collective Voice
10:00 am	Strong Roots: The Foundation of Seniors' Mental Health in Ontario
10:30 am	Ontario's Policy Environment
11:00 am	Networking Break
11:15 am	Table Discussion: Building on Successes
12:15 pm	Lunch (provided)
1:00 pm	Understanding the Seniors' Mental Health Support Network: A Partnership Panel and Table Discussion
2:00 pm	Table Discussion: Leading in an era of constraint: Designing the future for Seniors' Mental Health in Ontario
2:30 pm	Networking Break
2:45 pm	Leadership Reflections
3:15 pm	Participant Commitments: Advancing a Collective Voice
3:45 pm	Closing Remarks

Speakers Biographies

Danyal Martin is the Director of Clinical Programs at the Mental Health and Addictions Centre of Excellence at Ontario Health. Before joining Ontario Health, Danyal worked with primary care teams and organizations to improve quality and patient safety.

Phoebe Smith-Chen currently serves as Interim Director, Primary Care at Ontario Health. She was a speech-language pathologist for over 10 years, working in community, rehabilitation, acute care and palliative care settings. She completed an MHSc in Bioethics and an MHSc in Health Administration.

Claire Checkland is the Executive Director of the Canadian Coalition for Seniors Mental Health and has been working with national, not-for-profit health organizations for approximately 25 years. She began her career as an advocate and policy analyst in the HIV/AIDS field in the 1990s and has since done similar work at the Canadian Cancer Society and the Mental Health Commission of Canada. She took on the role of Executive Director of the CCSMH in 2017, where she established organizational sustainability and significant growth. Claire is adept at stakeholder relations and at leveraging the voices of healthcare champions toward system change.

Marija Padjen is the Director of the Centre for Innovation in Campus Mental Health and the Chief Clinical Officer for the Canadian Mental Health Association- Ontario Division. She holds a BA in Political Science and History from McGill University and a BSW and MSW from York University. Marija spent 18 years in the dementia field as a frontline social worker and as Chief Program Officer for the Alzheimer Society of Toronto. She has a strong commitment to person-centred care and is a firm believer in collaborative relationship building. As Director of CICMH, the focus of her work is on enhancing the capacity of colleges and universities to support student mental health.

Monica Bretzlaff is the Director of the Behavioural Supports Ontario Program. She has a longstanding passion and commitment to the field of Geriatric Mental Health and Dementia Care. She is currently the Director of the Behavioural Supports Ontario (BSO) Provincial Coordinating Office (PCO), North East BSO, and Nipissing Specialized Geriatric Services at the North Bay Regional Health Centre (NBRHC). Monica has dedicated over two decades to NBRHC, initially serving as a Psychogeriatric Resource Consultant for 10 years before transitioning into leadership roles over the past 12 years. Prior to joining NBRHC, she began her career at the Centre for Addiction and Mental Health, working in the Geriatric Mental Health program.

Angela Yip is the Acting Senior Manager of Knowledge Mobilization at the Provincial System Support Program (CAMH). Angela first joined CAMH in 2006 and has over 18 years of experience working in knowledge mobilization, health systems and services, research and consulting. Angela is passionate about bringing together diverse groups across the mental health, substance use and addictions system. Her commitment to being a community builder is evident in the vast network of authentic relationships she holds across the system. Angela is continually open to learning from different perspectives that can help advance progress toward a more accessible, evidence-informed, and equitable system.

Dr. Marie-France Tourigny-Rivard, M.D., FRCPC, is a Geriatric Psychiatrist and Professor of Psychiatry at the University of Ottawa. From 2007 to 2012, she served as the Chair of the Seniors

Advisory Committee of the Mental Health Commission of Canada and continued her involvement with MHCC until recently, hoping to further the uptake of her last major publication called "Guidelines for Comprehensive Mental Health Services for Older Adults in Canada", published in 2011 (MacCourt P, Wilson K, Tourigny-Rivard MF, MHCC website).

As Clinical Director of the geriatric psychiatry program of the Royal Ottawa Health Care Group over many years, her leadership led to the development of a full range of mental health services for older adults in the region of Champlain.

Her commitment to education inspired and increased the capacity of many healthcare professionals (psychiatrists, family physicians, nurses, and personal support workers) to provide better mental health care to older Canadians.

Given her longstanding interest in education and clinical service development, she continues to act as a resource to healthcare planners and providers across the country. She also continues to collaborate with the Canadian Academy of Geriatric Psychiatry (CAGP) and the CCSMH on various advocacy and development projects.

Organizations Participating

Alzheimer Society of Ontario

Baycrest

Behavioural Supports Ontario - Provincial Coordinating Office

Canadian Mental Health Association, Fort Frances Branch

Canadian Mental Health Association (Ontario)

Canadian Mental Health Association Waterloo Wellington

Geriatric Psychiatry Community Services of Ottawa

Hotel Dieu Grace Hospital

Health Science North Geriatric Mental Health Outreach

North Bay Regional Health Centre

North East Specialized Geriatric Centre

North Simcoe Muskoka Specialized Geriatric Services

Ontario Shores Centre for Mental Health Sciences

Providence Care

Provincial Geriatrics Leadership Ontario

Reconnect Health Services

Regional Geriatric Program of Toronto

Royal Ottawa Mental Health Centre

Sinai Health

St Joseph's Health Care London

St Joseph's Healthcare Hamilton

St. Joseph's Care Group (Thunder Bay)

University Health Network

Waypoint Centre for Mental Health Care

Wendat Community Programs

WoodGreen Community Services