

Interdisciplinary Care

Psychiatric services are provided by an interdisciplinary team led by psychiatry. The team includes child & youth counseling, nursing, psychology, and social work. Staff have extensive training and experience in the care of seriously mentally ill youth, and the provision of services to Aboriginal and Francophone groups, and Northern Communities.

Patient & Family Participation

Patients, families, and guardians are invited to participate in care planning, encouraged to accompany their child to hospital, and to call/visit frequently to facilitate positive outcomes upon discharge.

Collaboration with Community Care

Throughout a youth's admission, staff strives to promote active collaboration with the referral sources and community supports. With consent, community partners are routinely invited to collaborate in prevention of unnecessary hospitalization and readmissions, in care planning, care provision, discharge and follow-up.

Education, Training & Research

In collaboration with Laurentian and McMaster Universities, Cambrian College and other educational settings, the Inpatient Unit is a training site for Child and Youth Counselors, Nursing, Psychiatry and Medicine, Psychology, and Social Work students. It also engages in program evaluation, quality improvement activities, and research.

Contact Information

The Inpatient Unit is located on the 4th floor of the Northeast Mental Health Centre (Sudbury Campus). Please contact us if you have any questions.

Regional Children's Psychiatric Centre

A service of the Northeast Mental Health Centre

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**northeast mental
health centre**

**centre de santé
mentale du nord-est**

Regional Children's Psychiatric Centre

**Child & Adolescent Psychiatric
Inpatient Services**

**Information for Referring
Professionals**

**(la version française est
disponible sur demande)**

www.nemhc.on.ca

Referrals

The 12-bed Inpatient Unit serves children under the age of 18 in Northeastern Ontario whose behaviors pose significant risks for themselves or others by virtue of diagnosed or suspected psychiatric disorders. Examples include psychosis, mood disorders, and anxiety. Referral workers accept referrals from physicians and other mental health professionals between 8:30 am and 4:30 pm on weekdays. At all other times, referrals are accepted by a physician on-call.

Limitations

The Inpatient Unit does not provide:

- respite beds for families or group homes
- long-term residential placements
- services for problems falling within mandates of juvenile justice or community living systems

The Inpatient Unit redirects referrals to outpatient services for youth who demonstrate an ability to function without presenting clear and present danger to self/others.

Videoconferencing

Video and teleconferencing sessions are available to most community professionals in Northeastern Ontario. These sessions help hospital staff to outreach to distant communities. By working together community and hospital staff are able to make the best possible decisions and prevent unnecessary hospitalization and to provide the best care possible. Outreach sessions are available not only at referral but throughout hospitalization, discharge and follow-up.

Admissions & Consent

Most children and adolescents are admitted in crisis and involuntary basis, under the provisions of a Form 1. The Form 1 is an application for psychiatric assessment (not treatment) for a period of 72 hours. The purpose of the assessment is to determine whether a mental illness is contributing to imminent risks of harm to self or others.

Referred children with capacity to provide consent, and parents/guardians of children without capacity, can also contract for the provision of elective assessments or brief treatments to complement community care.

Hospitalization

The Inpatient Unit provides a therapeutic inpatient milieu with expectations for patient participation in meals, self-care, recreation, and therapeutic activities. Day treatment at a school on the hospital site is available, as is residential family programming if and as appropriate.

The length of stay is typically about 7 days. Many children and adolescents such as those without diagnosable mental illness leave hospital within the 72 hours specified by the Form 1. Services to others with longer stays can include family and extended milieu assessment, psychological assessments, medication review, and treatments.

Discharge & Follow-Up

RCPC staff review recommendations for aftercare at discharge with youth, parents, and community care providers except in the absence of consent, or unavailability of community care providers.

Many families and their community care providers contract for follow-up services through our outpatient video and teleconferencing outreach.