



## Outpatient Mental Health Services: Referral Form

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

DOB (DD/MM/YYYY): \_\_\_\_\_ Health Card: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ Phone (Alternate): \_\_\_\_\_ Messages:  Yes  No

E-Mail Address: \_\_\_\_\_

Referring Source: \_\_\_\_\_

Family Physician: \_\_\_\_\_

Mental Health Diagnosis: \_\_\_\_\_

History of violence: \_\_\_\_\_

Presenting Problem:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### ALL REFERRALS WILL BE SCREENED FOR ELEGIBILITY

Referrals for assessment/treatment where the **PRIMARY** concerns are related to the following will **not** be accepted:

- ❖ Anger Management
- ❖ Chronic Pain
- ❖ Relationship Counselling
- ❖ Autism Spectrum Disorders
- ❖ Developmental Delay
- ❖ Addictions

*We do **not** provide assessments for legal, insurance, custody, child welfare, WSIB, or forensic reasons.*

Please choose **one** of the programs below and direct the referral to the appropriate destination:

Brief Shorter Term Service (Day Hospital & Outpatient Services) **Fax:705.330.3221**

Extended Longer Term Service (Community Mental Health Service) **Fax:705.325.0450**

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**Mental Health Day Hospital: Tel 705.325.2201 ex.6395 Fax 705.330.3221**

Day Hospital provides a multi-disciplinary approach using group based interventions for acute symptoms of psychosocial stressors specific to depression and anxiety that interfere with daily living. Day Hospital is an alternative to an in-patient admission for the duration of three weeks. The program provides intensive treatment full-time, Monday-Friday, for participants who have enough support to stay at home at night and can travel to the hospital each day. The program encourages and promotes the development of structure and routine while learning new coping tools, stress management strategies, self-awareness and insight development.

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**Outpatient Counselling/Therapy Services: Tel 705.325.2201 ex.3934 Fax 705.330.3221**

Outpatient Services can provide short-term clinical intervention by a mental health therapist to provide support to people who are experiencing situational crisis and/or psychosocial difficulties. Treatment provided for depression, anxiety, panic attacks, loss/grief, and major life changes. Clients must be able to engage in treatment and be self-directed towards change. Mindfulness and Cognitive Behavioural Therapy (CBT) offered along with education around healthy lifestyle engagement.

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**Community Mental Health Service(CMHS): Tel 705.325.2201ex.3122 Fax 705.325.0450**

CMHS is a voluntary, extended term service that aims to provide integrated community care and support for individuals aged 16 and older with a serious mental illness (defined by diagnosis, chronicity and level of dysfunction). Self-referrals are encouraged. Upon receipt of referral, an intake time will be provided to further clarify eligibility for service at CMHS and/or redirect individuals to other suitable services. If client meets criteria and is eligible for service, treatment planning within program streams such as Counselling and Treatment or Case Management will be arranged.

Counselling and Treatment can include Cognitive Behavioural Therapy (CBT), Dialectical Behavioural Therapy (DBT), Eye Movement Desensitization and Reprocessing (EMDR) and/or perinatal mood support.

Case Management is geared primarily towards those with psychotic disorders requiring support and assistance with independent living skills. Case Management clients may be assessed for membership at the Meeting Place, which is an independent, peer-support clubhouse directed by CHMS clients and supported by CMHS staff.

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**\*\*\*\*\*Please be sure to send both pages of the referral to the desired location with any pertinent collateral information or clinical notes \*\*\*\*\***