

## INNER CITY AND MENTAL HEALTH PROGRAMS

### CREATIVE WORKS STUDIO REFERRAL FORM

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The Creative Works Studio provides members of the Inner City Community who are dealing with mental health and or related medical issues (i.e. HIV/AIDS, substance abuse and addictions)

1. Support and skill training in the area of visual and community arts.
2. Develop and strengthen skills and build self esteem.
3. Discover artistic abilities and provides opportunities to market items.
4. Prevocational and mentorship opportunities in the area of creative arts.

The group meets:

Monday, Tuesdays, Wednesdays, Thursday and Fridays at 793 Gerrard East (Gerrard and Logan) from 1:30 –4:30 and Thursdays 10:00 am -1:00pm

#### PATIENT INFORMATION

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Diagnosis: \_\_\_\_\_ Chart #: \_\_\_\_\_  
Medication: \_\_\_\_\_

Psychiatric Follow Up: \_\_\_\_\_  
\_\_\_\_\_

Education: \_\_\_\_\_  
Community Supports: \_\_\_\_\_  
\_\_\_\_\_

Has client participated in Occupational Therapy groups before?  
(If yes which ones) \_\_\_\_\_  
\_\_\_\_\_

Case Worker: \_\_\_\_\_

Reason for Referral: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Referred by: \_\_\_\_\_  
\_\_\_\_\_

Date Referred: \_\_\_\_\_

**\*\*\*PLEASE SEND A COPY OF THE PATIENTS ADMISSION AND DISCHARGE SUMMARY ALONG WITH THIS FORM\*\*\***

Send Referral forms to:  
Isabel Fryszberg, Occupational Therapist, 793 Gerrard Ave East, Ontario M4M 1Y5 (416) 465 5711