



Centre for Addiction and Mental Health

Accredited with Exemplary Standing

June 2019 to 2023

Centre for Addiction and Mental Health has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement. It is accredited until June 2023 provided program requirements continue to be met.

Centre for Addiction and Mental Health is participating in the Accreditation Canada Qmentum accreditation program. Qmentum helps organizations strengthen their quality improvement efforts by identifying what they are doing well and where improvements are needed.

Organizations that become accredited with Accreditation Canada do so as a mark of pride and as a way to create a strong and sustainable culture of quality and safety.

Accreditation Canada commends **Centre for Addiction and Mental Health** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

Centre for Addiction and Mental Health (2019)

The Centre for Addiction and Mental Health (CAMH) is Canada's largest mental health teaching hospital, as well as one of the world's leading research centres in its field. CAMH is fully affiliated with the University of Toronto, and is a Pan American Health Organization/World Health Organization Collaborating Centre.

With more than 3,000 physicians, clinicians, researchers, educators and support staff, CAMH offers outstanding clinical care to more than 37,065 patients each year. Our organization conducts ground breaking research, provides expert training, develops innovative health promotion and prevention strategies, and advocates on public policy issues at all levels of government.

Accreditation Canada

We are independent, not-for-profit, and 100 percent Canadian. For more than 55 years, we have set national standards and shared leading practices from around the globe so we can continue to raise the bar for health quality.

As the leader in Canadian health care accreditation, we accredit more than 1,100 health care and social services organizations in Canada and around the world.

Accreditation Canada is accredited by the International Society for Quality in Health Care (ISQua) www.isqua.org, a tangible demonstration that our programs meet international standards.

Find out more about what we do at www.accreditation.ca.

Demonstrating a commitment to quality and safety

Accreditation is an ongoing process of evaluating and recognizing a program or service as meeting established standards. It is a powerful tool for quality improvement. As a roadmap to quality, Accreditation Canada's Qmentum accreditation program provides evidence-informed standards, tools, resources, and guidance to health care and social services organizations on their journey to excellence.

As part of the program, most organizations conduct an extensive self-assessment to determine the extent to which they are meeting the Accreditation Canada standards and make changes to areas that need improvement. Every four years, Accreditation Canada surveyors, who are health care professionals from accredited organizations, visit the organization and conduct an on-site survey. After the survey, an accreditation decision is issued and the ongoing cycle of assessment and improvement continues.

This Executive Summary highlights some of the key achievements, strengths, and opportunities for improvement that were identified during the on-site survey at the organization. Detailed results are found in the organization's Accreditation Report.

On-site survey dates

June 16, 2019 to June 21, 2019

Locations surveyed

- **2** locations were assessed by the surveyor team during the on-site survey. Locations and sites visited were identified by considering risk factors such as the complexity of the organization, the scope of services at various sites, high or low volume sites, patient flow, geographical location, issues or concerns that may have arisen during the accreditation cycle, and results from previous on-site surveys. As a rule, sites that were not surveyed during one accreditation cycle become priorities for survey in the next.
- All sites and services are deemed **Accredited with Exemplary Standing** as of the date of this report.

See **Appendix A** for a list of the locations that were surveyed.

Standards used in the assessment

- **9 sets of standards** were used in the assessment.

Summary of surveyor team observations

These surveyor observations appear in both the Executive Summary and the Accreditation Report.

During the on-site survey, the surveyor team undertook a number of activities to determine the extent to which the organization met the accreditation program requirements. They observed the care that was provided; talked to staff, clients, families and others; reviewed documents and files; and recorded the results.

This process, known as a tracer, helped the surveyors follow a client's path through the organization. It gives them a clear picture of how service is delivered at any given point in the process.

The following is a summary of the surveyor team's overall observations.

The accreditation process at the Centre for Addiction and Mental Health (CAMH) is continuous and ongoing. The organization's leadership and addiction and mental health advocacy is commended, as is the acknowledgement of the history of two centuries of mental health in Canada. Though known for being the largest Canadian mental health teaching hospital and one of the world's leading research centres, CAMH is also very focused on people and shows a commitment to continuous quality improvement, safety, and care for clients, patients, families, and staff.

Excellence is noted throughout the organization, including the board. There is a significant depth of skills and knowledge with an active succession planning process. The meeting structure has been adapted to be more focused and productive and everyone is familiar with the organization's philosophy.

CAMH is commended for ensuring board members receive Indigenous cultural safety education. The community is a valued partner and there is significant patient and family engagement. Volunteers and the Foundation are valued players and there is an increasing awareness of CAMH and of the promotion of "mental health is health."

CAMH has successfully created a campus of care based on dignity and respect. Patients mingle with staff and visitors and all clearly feel safe. The First Impressions program supports a warm and friendly community environment. There are local, national, and international community partners who identify the organization's strengths as advocacy and expertise. They value working together and look forward to continued partnerships including research.

The organization has a well-established leadership structure that offers multiple layers of support for staff. The knowledge of the leaders and the support they offer are obvious. The organization is encouraged to be mindful of change fatigue by pacing change and transformation work. There is an innovative partnership with collective agreement partners. As Vision 2020 is reached, the organization is embarking on a strategic planning process that includes extensive engagement. Good luck!

Staff speak with pride about working at CAMH. Orientation is comprehensive. There are many opportunities for educational and professional development and a well-resourced staff Wellness Centre. Staff from different areas describe being able to advance and be supported during leaves, and that the organization is one big team and a family. There is work/life balance and staff feel supported, trusted, and recognized for a job well done. There is a clear sense of connection with the wider goals of the organization.

Delivery of care is standardized while meeting individual needs with the help of the electronic medical record called I-CARE. It has been in use for five years and is reported to be user friendly.

There is a coherent overall philosophy of care across the organization as well as care delivery that is tailored and sophisticated across a wide range of services and programs. The commitment to trauma-informed care is evident and staff are fluent in trauma-informed language, approaches to care, and engaging patients and clients where they are. A noticeable message of hope is communicated to patients, clients, and families. The organization is encouraged to continue to try to balance demand for service with a focus on outcomes rather than just length of stay.

Clients, patients, and families are positive about the organization and report an overall high level of satisfaction with care. They report feeling heard, respected, and included in their care. Several commented that despite their contacts with other services, this was their first experience of feeling hopeful about recovery.









CAMH is congratulated for its dedication and its willingness to go “above and beyond,” and is wished much success as it continues its work to transform lives.

Overview: Quality dimensions results

Accreditation Canada uses eight dimensions that all play a part in providing safe, high quality health care.

These dimensions are the basis for the standards, and each criteria in the standards is tied to one of the quality dimensions.

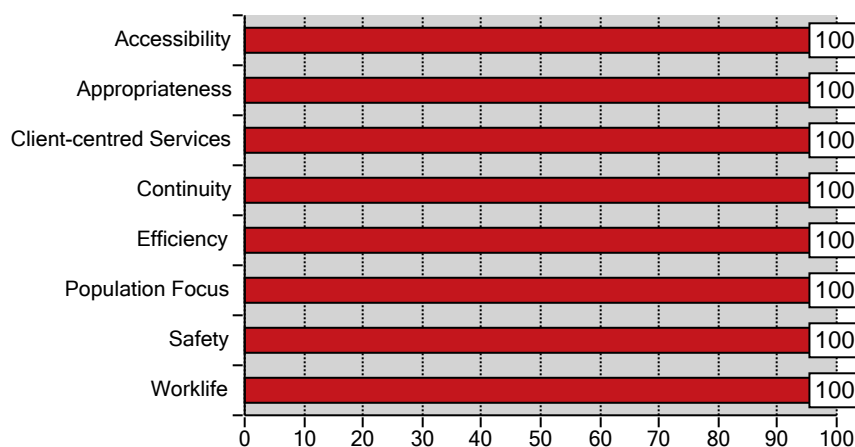
The quality dimensions are:

	Accessibility:	Give me timely and equitable services
	Appropriateness:	Do the right thing to achieve the best results
	Client-centred Services:	Partner with me and my family in our care
	Continuity:	Coordinate my care across the continuum
	Efficiency:	Make the best use of resources
	Population Focus:	Work with my community to anticipate and meet our needs
	Safety:	Keep me safe
	Worklife:	Take care of those who take care of me

Taken together, the dimensions create a picture of what a high quality health care program or service “looks like.” It is easy to access, focused on the client or patient, safe, efficient, effective, coordinated, reflective of community needs, and supportive of wellness and worklife balance.

This chart shows the percentage of criteria that the organization met for each quality dimension.

Quality Dimensions: Percentage of criteria met



Overview: Standards results

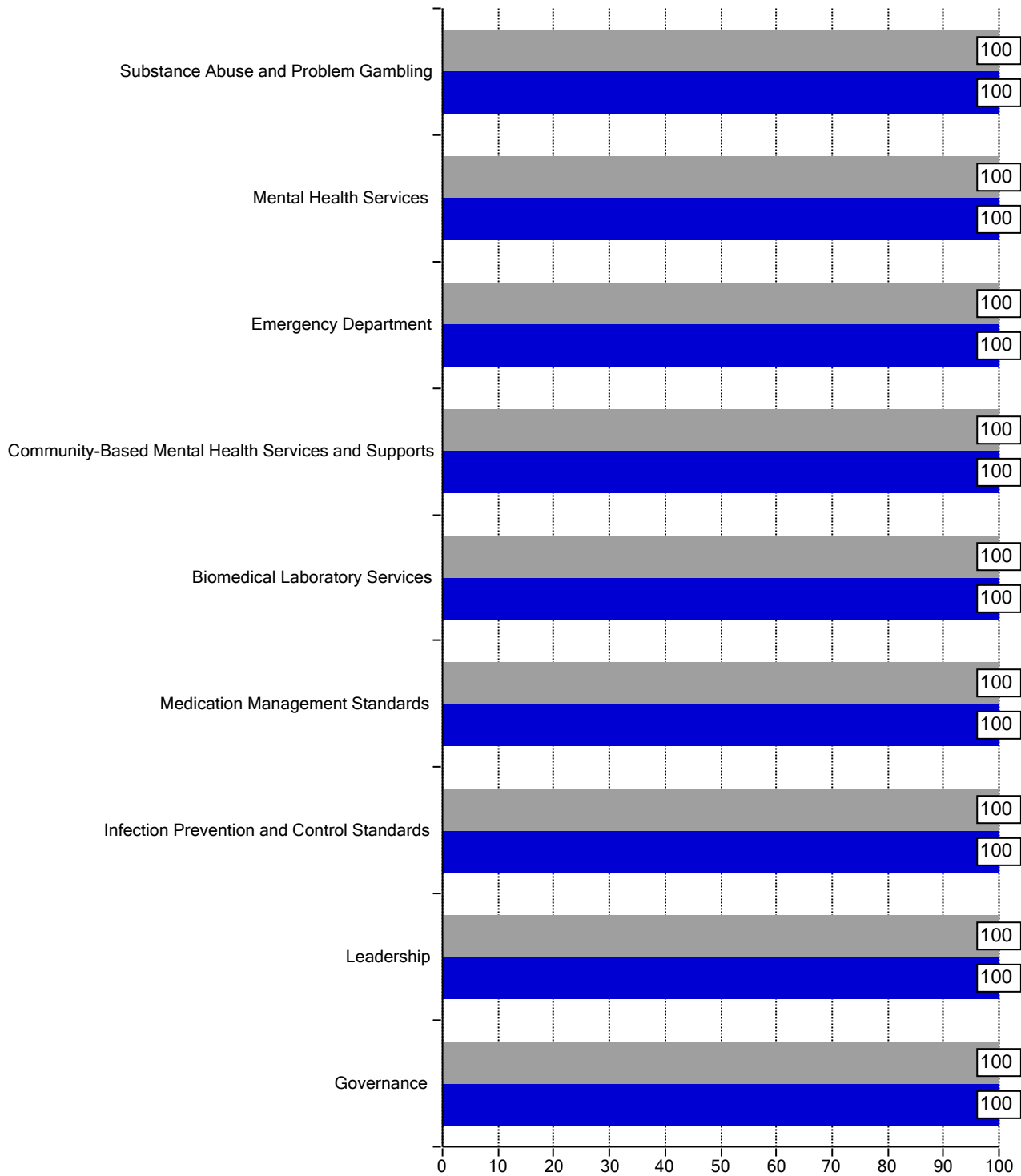
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

Some criteria—specifically those related to safety, ethics, risk management, or quality improvement—are considered high priority and carry more weight in determining the accreditation decision.

This chart shows the percentage of high priority criteria and the percentage of all criteria that the organization met in each set of standards.

Standards: Percentage of criteria met

High priority criteria met
 Total criteria met



Overview: Required Organizational Practices results

Accreditation Canada defines a Required Organizational Practice (ROP) as an essential practice that must be in place for client safety and to minimize risk. ROPs are part of the standards. Each one has detailed tests for compliance that the organization must meet if it is to meet the ROP.

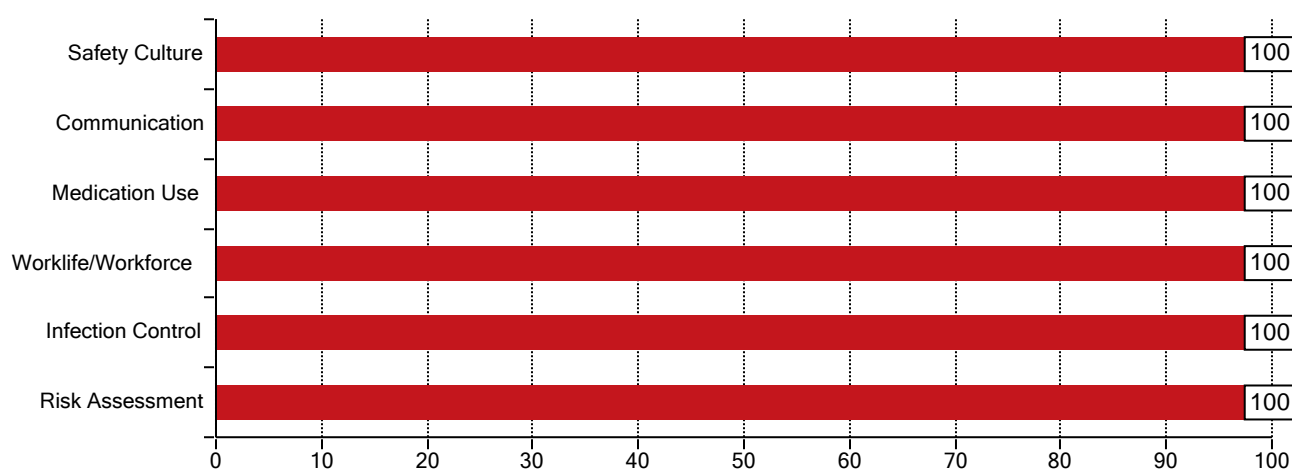
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes how select ROPs are being met across the country.

ROPs are categorized into six safety areas, each with its own goal:

- **Safety culture:** Create a culture of safety within the organization
- **Communication:** Improve the effectiveness and coordination of communication among care and service providers and with the recipients of care and service across the continuum
- **Medication use:** Ensure the safe use of high-risk medications
- **Worklife/workforce:** Create a worklife and physical environment that supports the safe delivery of care and service
- **Infection control:** Reduce the risk of health care-associated infections and their impact across the continuum of care/service
- **Risk assessment:** Identify safety risks inherent in the client population

See **Appendix B** for a list of the ROPs in each goal area.

ROP Goal Areas: Percentage of tests for compliance met



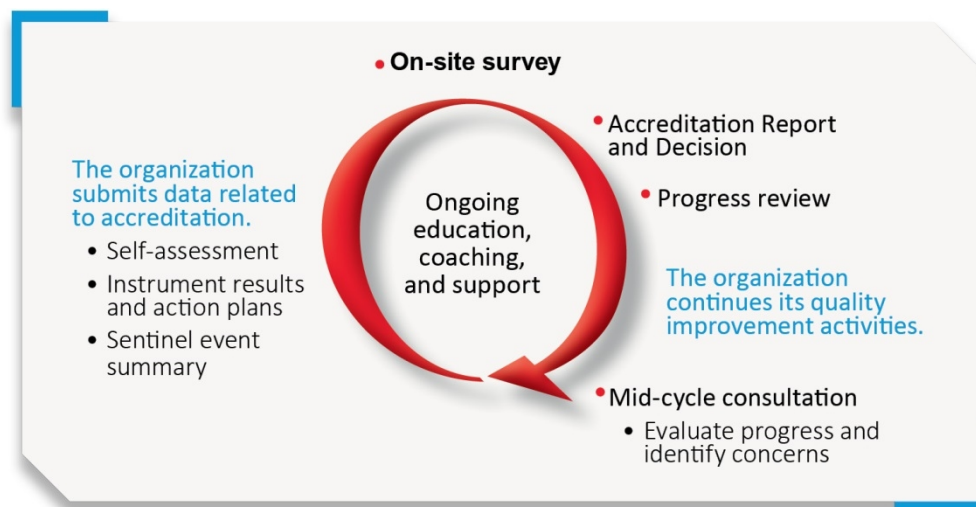
The quality improvement journey

The Qmentum accreditation program is a four-year cycle of assessment and improvement, where organizations work to meet the standards and raise the quality of their services. Qmentum helps them assess all aspects of their operations, from board and leadership, to care and services, to infrastructure.

The program identifies and rewards quality and innovation. The time and resources an organization invests in accreditation pay off in terms of better care, safer clients, and stronger teamwork. Accreditation also helps organizations be more efficient and gives them structured methods to report on their activities and what they are doing to improve quality.

In the end, all Canadians benefit from safer and higher quality health services as a result of the commitment that so many organizations across the country have made to the accreditation process.

Qmentum: A four-year cycle of quality improvement



As **Centre for Addiction and Mental Health** continues its quality improvement journey, it will conduct an in-depth review of the accreditation results and findings. Then a new cycle of improvement will begin as it incorporates any outstanding issues into its overall quality improvement plan, further strengthening its efforts to build a robust and widespread culture of quality and safety within its walls.

Appendix A: Locations surveyed

- 1 Centre for Addiction and Mental Health, College Street
- 2 Centre for Addiction and Mental Health, Queen Street

Appendix B

Required Organizational Practices

Safety Culture

- Accountability for Quality
 - Patient safety incident disclosure
 - Patient safety incident management
 - Patient safety quarterly reports
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Communication

- Client Identification
 - Information transfer at care transitions
 - Medication reconciliation as a strategic priority
 - Medication reconciliation at care transitions
 - The “Do Not Use” list of abbreviations
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Medication Use

- Antimicrobial Stewardship
 - Concentrated Electrolytes
 - High-Alert Medications
 - Narcotics Safety
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Worklife/Workforce

- Client Flow
 - Patient safety plan
 - Patient safety: education and training
 - Preventive Maintenance Program
 - Workplace Violence Prevention
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Infection Control

- Hand-Hygiene Compliance
 - Hand-Hygiene Education and Training
 - Infection Rates
 - Reprocessing
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Risk Assessment

- Falls Prevention Strategy
 - Suicide Prevention
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