Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 21, 2023
OVERVIEW

The Centre for Addiction and Mental Health (CAMH) is Canada's largest mental health teaching hospital, a world-leading mental health research centre, and where more than 37,000 people receive care each year.

As CAMH emerges from the most acute phase of the COVID-19 pandemic we face challenges that must be met to ensure the safety of patients, families and staff and that the care provided is of best quality.

Pre-pandemic there was a crisis of access to and demand for mental health care. Post-pandemic we face unprecedented demands for our services. Our Emergency Department volumes have surpassed pre-pandemic levels (14,583 for year ended March 31, 2022) and are on track for more than 16,000 visits in fiscal 2022-23 (see figure 1). Wait times for our outpatient services have nearly doubled (figure 2). Wait Times is a critical measure for both CAMH’s operational efficiency and that of the health care system. Longer wait times create a cycle where system efficiency is reduced due to the use of multiple referrals across the system as a means to get access to services, discharging patients becomes more difficult in part due to long wait times, and it increases the use of the emergency department given long waits for outpatient care. This was compounded by the pandemic and is particularly problematic for children and youth who are developing, the elderly who may be experiencing cognitive decline, and for patients across the lifespan with multiple adverse circumstances especially in relation to the social determinants of health.

The experience of the last few years has also created a strain on
health human resources, with CAMH experiencing staffing issues similar to the rest of health care due to burnout, turnover and recruitment challenges.

When emergency visits rise, wait times get longer and stable staffing becomes a challenge, this creates concern around quality of care and the safety of our patients, their families and CAMH staff.

For these reasons CAMH is prioritizing three key areas for quality improvement: Safety, Access, and Staffing, all of which are reflected in our existing Strategic Plan and 2023/24 Operating Plan.

- Safety
  - Within the priorities of our broader Safe & Well CAMH strategy, we will improve key staff and patient indicators including: Workplace Violence Lost Time Injury Frequency (# of WPV incidents/100 FTEs) and Percent of Inpatients Physically Restrained while in care at CAMH.

- Access
  - We will reduce the median wait time from referral to consult to increase access to our programs and services.

- Staffing
  - CAMH is not immune from the human resources challenges across the health care system, and we will focus efforts on staffing, specifically monitoring staff vacancy rate and voluntary turnover (resignation and retirement).

Feedback and insights from CAMH patients, families, and people with lived experience informed our decision to focus on safety, access and staffing in this Quality Improvement Plan. See patient engagement and partnership section for more details. Improving access to our care, keeping people safe in our spaces, and ensuring our teams are robust, will strengthen the care we provide and the connections between CAMH and our community and will put mental health at the centre of health in 2023 and beyond.
PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

CAMH commits to continually improve the care provided to patients and families by including patients and families in all aspects of our organizational, clinical, research and education initiatives. This work is guided by our goals to partner authentically, improve patient-centred health outcomes and invest in people and infrastructure. The co-designed Patient and Family Engagement Roadmap establishes measurable outcomes to ensure engagement at all levels of the hospital.

The Patient and Family Partners Program recruits and matches patient and family partners to advisory groups, committees, working groups and special projects across CAMH to partner and co-design research and improvement initiatives that impact quality, patient safety, and experience.

This QIP was informed by the experiences, ideas, and concerns of patients and families:

- The annual Ontario Perception of Care for Mental Health and Addictions (OPOC-MHA) survey identified areas of strength and improvement related to access, quality of services, participation and rights, clinicians' knowledge, care environment, and overall experience. 140 patients and 11 family members were engaged through focus groups and one-on-one discussions related to the survey results and quality improvement ideas. Programs reviewed OPOC analyses (demographic and correlational) and engagement feedback to inform quality improvement ideas, as operationalized in their respective work plans.

- Consultations were held with the Patient and Family Advisory Committees.

- Patients, families, youth engagement facilitators and the Empowerment Council are represented on our three program Quality Councils and Family Advisory Committee members, Empowerment Council and community members are represented on the Board Quality Committee.

- Trends in complaints from the Client Relations Office informed indicator selection and change ideas.

- We utilize health equity and incident data from our Systematic Tracking and Review of Incidents: Disclosure for the Enhancement of Safety (STRIDES) system to inform QIP development.
PROVIDER EXPERIENCE

The health and safety of our patients, families, staff and community is our first priority. Our staff continue to rise above the call of duty adapting to ever-changing directives and protocols. Some clinical staff have modified the way services are provided, shifted roles, or taken on new responsibilities.

At the start of the pandemic, the Ministry of Health and Ontario Health partnered with five hospitals to provide psychotherapy and psychiatric services to frontline health care workers (HCW). Since then, over 500 HCWs have received services at CAMH, 300 have been referred to the network of providers and survey results show high satisfaction.

Additional supports for staff:
- Regular communications with staff, managers and union leaders
- Mental health supports offered with an increase to mental health services under our extended health care benefits to $1500 starting April 1st
- Continued implementation of our 3-year Mental Health Strategy for staff
- Psychological service continued virtually
- Reopened our Queen Street Wellness Centre with approximately 540 visits per month, and offered about 3 in person classes/week, as well as over 270 wellness breaks for teams
- Continued offering virtual programs for wellness with approximately 9 classes/week and 1 or 2 workshops focusing on wellness/month.
- Offered more than 14 fun events supporting wellness for staff
- Caring for CAMH committee relaunched with a specific focus to support, acknowledge and thank all staff who are working onsite providing patient care and those supporting the running of the hospital holding 15 different events through the year
- New tools for managers to discuss challenges they are facing and create a supportive environment for sharing with peers through Manager ‘Labs’ and monthly tip sheets
- Various staff recognition events came back in-person (with a hybrid option) for our service awards and holiday tea
- Leadership training was converted to virtual to enable more participation
- Launched a new Anti-Racism, Anti-Harassment, Anti-Discrimination policy with mandatory training for managers done virtually
- Online training for all CAMH staff on the Foundations of Anti-Black Racism
- Adapted policies, procedures and medical directives to include additional safety and Infection Prevention and Control (IPAC) directives
- Relaunched clinical orientation in person to assist clinical staff’s transition to their new roles, with nonclinical orientation remaining virtual.

WORKPLACE VIOLENCE PREVENTION

Workplace violence is a top priority at CAMH. Our strategic initiative Safe & Well CAMH, is now in its seventh year and continues to support existing and new projects. The work continues to be guided by a strong governance structure led by senior leaders with representation from all portfolios at the steering committee. Our collaboration with our union partners, ONA and OPSEU, continues on all our Safe & Well initiatives. There have also been significant efforts – with very positive outcomes – to work proactively and collaboratively with our ONA and OPSEU union partners on all initiatives. Through Safe & Well CAMH’s prevent,
respond, and improve approach, we are focusing on further reducing workplace violence incidents. Trauma-informed De-escalation Education for Safety and Self Protection (TIDES) is a mandatory training program for all staff members and is continuing to roll out across the organization. Training for leaders through the Supervisor Competency Training called Lead the Way to Health and Safety was resumed in 2022. In addition, we implemented a new Anti-Racism, Anti-Harassment, Anti-Discrimination policy in the spring of 2022 and introduced mandatory training for managers on the policy. Currently, we have trained over 140 managers on this policy. We are in Year 2 of our Workplace Mental Health Strategy, which is aimed at supporting our staff with their psychological safety and wellness in the workplace. In April 2022, we implemented an increase to the mental health benefits in the benefits plan. Usage of this benefit has increased, supporting the needs of our staff. The Caring 4 CAMH committee has become an employment mechanism for workplace mental health through their work to support and recognize onsite staff. Our Wellness Centre at Queen Street reopened this year after being closed through the pandemic, and continues to provide in person and virtual wellness classes of all kinds to our staff.

We continue to report quarterly on our Workplace Violence rates via the Patient Safety Quarterly Report to the Clinical Quality Committee of the Board of Trustees, and through updates to the entire Board of Trustees.

PATIENT SAFETY
The safety of our patients, families, staff, physicians, volunteers, and visitors is a top priority at CAMH. We know that key elements of a safe environment include factors such as trust, teamwork, communication, and the ability to discuss and learn from patient safety incidents. Together, these elements of our organization make up our ‘culture of safety’. A culture of safety is strongest when staff are engaged in reporting incidents, errors and good catches; understand the role of systems’ factors that can lead to risk; learn from incidents; and when staff, physician, and patient/family expertise is engaged to generate ideas for improvement.

Our internal incident reporting and management system, STRIDES (Systematic Tracking & Review of Incidents: Disclosure for the Enhancement of Safety), is a key element of our organizational culture that promotes safety and quality. STRIDES is integral to the reduction of patient safety incidents by providing mechanisms for analyzing incident data and directing focus for the implementation of solutions. As part of the commitment to continuously improve the quality of care and services for all patients, all safety incidents, which result or could result in injury/illness, are documented and reported through STRIDES.

The purpose of our incident analysis and review process – adapted from the Canadian Incident Analysis Framework – is to ensure that we analyze, manage, and learn from patient safety incidents at CAMH. We have a structured process for identifying what, how and why it happened, what was learned, and what can be done to reduce the risk of recurrence and make care safer. Engaging patients and families early on in the review process is vital to ensure we hear their perspectives about the care received at our organization. This is an integral activity in the incident management continuum, which also includes sharing any recommendations that may arise as part of the review process with patients and families to improve the quality and safety of care and the experience of
patients and families. Staff, physicians, leadership, and other key stakeholders impacted by patient safety incidents are engaged throughout the review process, which promotes a culture that is just and based on learning and system improvement.

Patient safety reviews are overseen by a centralized committee that finalizes recommendations, provides organizational and systemic perspectives and engages in knowledge sharing and problem solving on the issues raised. Finalized recommendations arising from reviews are also shared with program Quality Councils (which include patient, family, and youth advisors and advocates) to support their implementation, follow-up and monitoring at the program level.

CAMH also uses Accreditation Canada’s Canadian Patient Safety Culture Survey to measure staff and physician perceptions and opinions about patient safety. In addition to helping us understand our safety culture, the tool also generates awareness and discussion around topics that affect our staff and physicians, and patient safety, and allows us to identify our strengths and areas requiring improvement and attention. CAMH also includes patient stories in clinical program reports to our Clinical Quality Committee of the Board to nurture a culture of quality and safety, to complement quantitative data to increase focus and engagement with quality and safety issues, and to ensure we continually learn from and improve patient and family experience.

CAMH recently implemented an organization-wide Daily Safety Check Huddle to increase awareness of safety and operational issues, to promote a shared-responsibility for ensuring a safe environment for patients and staff, and to enhance cross-organizational connectedness. We also have an annual CAMH Safe & Well Day during Canadian Patient Safety Week to recognize the importance of safety and wellness at CAMH and to celebrate our Safe & Well achievements over the past year. A key component of celebrating our successes is the Safe & Well Ambassador Awards and the Good Catch Awards, which acknowledge an individual and a team for proactively identifying and reporting a Good Catch in STRIDES.

HEALTH EQUITY

Supporting unique populations, CAMH serves many marginalized people with complex mental illness, substance use disorders and concurrent disorders across the lifespan. Many of our patients lack access to appropriate housing, income support, food security and employment. CAMH works with community and regional partners to address our patients’ complex needs.

Our Child, Youth & Emerging Adult program provides a range of specialized inter-professional care, from assessments and consultations to individual/family therapies; specialized treatment groups for co-occurring mental illness and substance use; and consultations on request from primary care providers.

Our specialized clinics include:
- Youth Justice Clinic
- Gender Identity Clinic
- Youth Addiction & Concurrent Disorders Service
- New Beginnings Clinic for newly arrived refugees

CAMH serves patients from First Nations, Inuit & Metis communities on-site through a culturally appropriate, evidence-based approach.
informed model of care through Aboriginal Service. Shkaabe Makwa is the first hospital-based Centre in Canada designed to drive culturally-responsive systems initiatives to achieve health justice and wellness for Indigenous communities through the advancement of research, workforce development and innovative healing models that harmonize traditional knowledge and medical expertise. CAMH’s Geriatric Mental Health Service (GMHS) provides interprofessional assessment, treatment, consultation and follow-up services to older persons with mental health concerns, including addiction.

The forensic mental health program provides a continuum of care that includes assessment, treatment and rehabilitation at different levels of security, community supervision, consultation, and specialty services.

The Substance Abuse Program for African Canadian and Caribbean Youth (SAPACCY) provides anti-oppressive, context-specific and holistic care for Black youth and their families. CAMH is working with Black Health Alliance and other community partners on a network of seven community-based sites across the province.

Services available through the Office of Health Equity include interpretation services, health equity capacity-building at local, provincial and national levels, the cultural adaptation of clinical services such as Culturally-Adapted CBT, and the federally-funded Refugee Mental Health Project.

### EXECUTIVE COMPENSATION

At CAMH, the executive team's compensation includes "at risk" pay in the range of 25% for the CEO and 15% for the executive team. The link to the QIP target achievement, as noted in the table below, is set at 5.0% for the CEO and 3.0% for the executives.

<table>
<thead>
<tr>
<th>Quality Dimension</th>
<th>Objective</th>
<th>Weighting</th>
<th>CEO Compensation</th>
<th>ELT Compensation</th>
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</thead>
<tbody>
<tr>
<td>Safe and Effective</td>
<td>Prevent workplace violence</td>
<td>20%</td>
<td>1.0%</td>
<td>0.6%</td>
</tr>
<tr>
<td></td>
<td>Reduce the use of physical restraints</td>
<td>20%</td>
<td>1.0%</td>
<td>0.6%</td>
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<tr>
<td>Timely</td>
<td>Median Wait Time from Referral to Consult</td>
<td>20%</td>
<td>1.0%</td>
<td>0.6%</td>
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<tr>
<td>Efficient</td>
<td>Vacancy Rate</td>
<td>20%</td>
<td>1.0%</td>
<td>0.6%</td>
</tr>
<tr>
<td></td>
<td>Voluntary Turnover</td>
<td>20%</td>
<td>1.0%</td>
<td>0.6%</td>
</tr>
</tbody>
</table>

Total 'at risk' pay related to QIP\:
- CEO: 5.0%
- ELT: 3.0%

Total 'at risk' pay not related to QIP:
- CEO: 20.0%
- ELT: 12.0%

Total 'at risk' pay:
- CEO: 25.0%
- ELT: 15.0%
SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization’s Quality Improvement Plan (where applicable):

I have reviewed and approved our organization’s Quality Improvement Plan on March 31, 2023

______________________________
Rebecca Shields
Chair, Clinical Quality Committee

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Sarah Downey
President & CEO

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Medhat Mahdy
Chair, Board of Trustees

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Rebecca Shields
Chair, Clinical Quality Committee

______________________________
Sarah Downey
President & CEO

Other leadership as appropriate