

## **Progress Update 2020**

## CAMH reports on progress to improve public safety and care for forensic patients

One year ago, CAMH accepted and committed to implement all twelve recommendations from an expert review panel that was struck to provide advice on improvements to the system of passes and privileges in CAMH's forensic program. The recommendations outlined how CAMH could enhance public safety, while improving care and helping forensic patients recover.

Highlights of CAMH's progress over the past year include construction of a new fully secure outdoor therapeutic space and a memorandum of understanding with Toronto Police Service (TPS) to improve information sharing that will be finalized early in 2021.

The new, secured outdoor space will increase the number of opportunities for patients to take part in therapeutic and recreational activities as part of their recovery. Space is limited in the old, institutional buildings that were not purpose-built for modern forensic health care. The last phase of CAMH's redevelopment, which includes a new forensic facility, will be completed as early as 2026 and the secured outdoor space provides some flexibility for programming until that time.

To further the dual goal of protecting public safety and improving patient recovery, CAMH has been working with TPS to formalize communications and information sharing policies through a comprehensive memorandum of understanding.

While CAMH continues to make great strides to keep the community safe, and provide meaningful opportunities for recovery for patients, it is clear that forensic mental health remains one of the most misunderstood aspects of the health care system.

People found not criminally responsible or unfit to stand trial because of their mental health condition do not go to jail. Instead, they receive treatment at a forensic mental health program like the one at CAMH. The goal of the forensic mental health care system is to help people recover so that they may reintegrate into the community.

As leaders in mental health care, CAMH remains committed to improving understanding about the forensic mental health program and the patients it serves. We appreciate the support of our local community and partners as we work together toward continuous improvement.



	Recommendation	Recommendation Status	CAMH Action Plan Dec 2019	CAMH Update Dec 2020
1.	Immediately create a secure perimeter to enable ready access to fresh air without the need for passes for patient movement through non-secure areas. This action will reduce motivations and opportunities for absconding, and reduce the number of passes that require daily review. It will also reduce the need for escorted passes which will free up staffing resources for.	Accepted.	Recovery and reintegration into the community is a multi-staged process. An initial phase of reintegration will take place within a new secure outdoor therapeutic space, to be achieved using fencing. This work will commence immediately in the new year and be completed by fall 2020, pending timing of appropriate City of Toronto permitting and consistent with broader public sector procurement processes.  CAMH is already using secure tunnels for patient movement between programming, and we will look to dedicate a gym specifically for expanded forensic programming. CAMH will assess making additional corridors part of the secure envelope.	Interior work to connect patients to the exterior space from within the secure perimeter was completed Sept 2020. The secure outdoor space will be fully operational in December 2020.
2.	Prioritize and expedite the long-term redevelopment of the forensic buildings.	Accepted.	CAMH was pleased to see the redevelopment of CAMH's forensic facility included in the Infrastructure Ontario's recent market update. We look forward to continuing to work with the provincial government to advance this important project.	CAMH submitted the Phase 1D Stage 2 project (including Forensic Services and Research services) to the Ministry of Health in October 2018.  CAMH has reached scope agreement with Ministry of Health staff for the 1D-Forensic



		The new building will include ample spaces for programming and recovery, safe perimeter with access to fresh air and recreational space and a more therapeutic environment than existing institutional settings that do not meet hospital standards.	project and is awaiting a formal letter of approval.  Infrastructure Ontario is targeting to issue a Request For Proposals in Fall 2022. The Planning Design Compliance team is expected to be on board Spring 2021.  Delays in the approval process mean that patients continue to receive treatment in institutional settings not purpose built for healthcare. We urge the government to accelerate the 1D-Forensic project to ensure that patients can receive dignified care in safe and modern facilities.
3. Immediately create a memorandum of understanding (MOU) that specifies the information that can be shared between CAMH and TPS and timeframes within which it must be shared. The goal is to ensure timely and safe return of patients to CAMH. This MOU must be shared with and understood by staff at both organizations	Accepted.	Building on the existing partnership with TPS through the longstanding CAMH-TPS Liaison Committee, we will take immediate steps to develop and implement an MOU between our organizations, including staff communications plans so that the MOU is well understood by staff at both organizations.  CAMH will look to balance the regulatory college requirements of staff, privacy protections for patients, and the need to ensure	CAMH and TPS will finalize the new MOU early in 2021. The new MOU will reflect policy and operational improvements that are described in this progress report.



			open and transparent communications with police.	
4.	CAMH and TPS identify a key set of indicators to track, trend, evaluate, and improve performance on return of F-ULOA patients to CAMH and review these indicators as part of their regular meetings.	Accepted.	Using existing collaborative processes that exist between CAMH and TPS, we will develop a set of key performance indicators, consistent with principles and work detailed in the MOU. The indicators will be used to monitor progress in a transparent and accountable way.	When the MOU is finalized in early 2021, TPS and CAMH will continue their work to implement a set of indicators to track, trend, evaluate and improve performance on return of F-ULOA patients.  The indicators will be reviewed regularly by the CAMH-TPS Liaison Committee.
5.	Make passes, privileges, and F-ULOAs an integral part of the EHR system, including pass management and pass reconciliation.		CAMH is actively working with our EHR vendor and internal information management teams to develop a customized technology solution for pass ordering and tracking in our electronic health record (EHR) system, (I-CARE)	The implementation of customized technology solution for pass ordering and tracking is underway.
6.	Ensure the EHR can support easy, regular, and useful performance measurement of passes such as dashboards.	Accepted.	The pass monitoring data discussed in the previous recommendation response will be included in quarterly clinical leadership dashboards, starting in early 2020. Currently, a review of what type of discreet data can be pulled out of I-CARE to build an interim dashboard with existing data is already underway.	An interim pass dashboard utilizing current I-CARE data was implemented in August 2020. The interim dashboard is currently being used to help inform clinical decisions.
7.	Include F-ULOAs and therapeutic goals for forensic	Accepted.	I-CARE does not contain the requirements to track structured therapeutic programming. The	Work is underway across CAMH's to implement a first-of-



patients as part of the corporate scorecard.		development of a customized solution is required to undertake tracking of that kind and a project charter to initiate that work is being actively developed.  CAMH is evaluating options to build a first-of-its-kind pass tracking system, integrated into I-CARE. This system would track both passes and therapeutic goals. This work will also include considerations around workflow to ensure tracking is consistent with actual clinical practice.  CAMH will move to track therapeutic programming at the unit level on a consistent basis. This data will be shared in the quarterly safety report that goes to CAMH's Board of Trustees F-ULOA rates are already shared with the Board of Trustees through the Quarterly Patient Safety Report that is presented to the Clinical Quality Committee of the Board.	its-kind therapeutic programming tracking solution.  This work is connected to other EHR initiatives underway as part of recommendation #5 and connected to the programming review underway as part of recommendation #9.
8. Work with patients and their advocates to ensure clear understanding of the new system of passes and privileges.	Accepted.	Development of the new system of passes and privileges, while clinician-led, included patient and family advice and perspective, through the CAMH patient and family experience team.	The new system of passes and privileges or 'pass ladder', was officially launched across all forensic inpatient units in February 2020.  By April 2020, 97% of CAMH's Ontario Review Board



9 Increase the level of	Accepted	As we move into full implementation of the new pass system in winter 2020, CAMH will work with the patient and family experience team, the Empowerment Council and other patients and their advocates to co-create communications that resonate with patients.  We expect the full implementation process for the new pass system to be iterative and adjusted using feedback and input from patients and their advocates.  Once fully implemented, the new process will be communicated through the CAMH orientation package shared with all patients upon arrival at CAMH. Moving forward, this information will become the foundation for ongoing communication between patient and care team regarding passes and recovery.	inpatients had pass ladder documentation completed.  As of December 2020, all pass applications for forensic patients now include the ladder steps.  The patient and Family Experience Team, Empowerment Council, forensic inpatients and their advocates were consulted both in the ladder design and the development of resources to support the initiative.  We will continue to communicate this new process to patients at inpatient community support meetings by Forensic Leadership supported by Family Engagement Specialists.  An evaluation of the ladder has been drafted to review the patient and staff perceptions.
<ol> <li>Increase the level of meaningful activities and therapeutic programming to promote progress of forensic patients towards safe discharge.</li> </ol>	Accepted.	CAMH work to increase the volume and quality of meaningful therapeutic programming has been ongoing.  Existing programs include:	Beginning in March 2020, CAMH focused most of its efforts on developing innovative ways to hold safe individualized or virtual programming for forensic patients in keeping with



		<ul> <li>Forensic Treatment Mall: a collection of recovery oriented, group-based programs that provide participants who are under the ORB with treatment, education, and skills training to directly address their risk factors and support recovery.</li> <li>Unit-Based Programming: inpatient teams offer a number of different individual and group-based programming, including therapeutic, skill-based, leisure, and peer-support.</li> <li>Engaging Consumers in Opportunities for Recovery Education (ENCORE): a unique program that addresses specific needs of patients through workshops that are informed by patient interests.</li> <li>Starting in winter 2020, CAMH has assigned additional space on campus for exclusive use in forensic patient programming.</li> </ul>	infection prevention and control procedures.  Despite COVID-19, efforts continued to improve programming overall. Work began to map all CAMH programs offered to forensic patients to their associated pillar in the 'DUNDRUM' framework- which is comprised of validated risk assessment and progress tracking tools designed for use with forensic patients.
10. Work with the media to promote better understanding of the forensic mental health system and its role in public protection.	Accepted.	Media are key partners in reducing stigma and increasing awareness of the role of forensic mental health services within our broader system of health care.	The COVID-19 pandemic impacted CAMH's ability to invite non-essential visitors to tour the campus or speak with clinicians and people with lived experience.



		CAMH will continue to work closely with the media through on-campus tours, hosting community and media events on campus featuring CAMH experts, including people with lived experience. Working together, CAMH and the media have an opportunity to shed insight and perspective into a complex and misunderstood part of our health care system.	CAMH continues its work with individual members of the media to improve understanding of the complexities of the forensic system and will resume inperson invitations once it is safe to do in 2021.
11. Regularly monitor the new passes and privileges system to ensure that it contributes effectively to clinical care and decision-making, policy and procedures, engagement with clinicians, and community safety.	Accepted.	As Canada's largest mental health academic health science centre, CAMH is deeply committed to on-going monitoring and measurement of clinical practice to inform practice improvements and to contribute to global research. Once the new pass system is fully implemented, CAMH will work across the hospital to ensure a comprehensive evaluation plan is in place.  The new pass system is a structured pathway to help support patient progress in their recovery. This roadmap for reintegration into the community provides clarity, openness and transparency for patients and continues to emphasis community integration.	The new system of passes and privileges, or 'pass ladder,' was officially launched across all forensic inpatient units in February 2020.  An evaluation framework has been implemented to measure whether there is consistent guidance to patients, staff and families about progression along the forensic care pathway; about principles linking progression in therapeutic engagement and treatment with progression in passes and privileges; and about consistent approaches to situations of breaches of passes or ORB disposition requirements, or in response to the deterioration in a patient's mental state.



12. Continue to review patient placement within the new system to ensure that passes and privileges are commensurate with patients' needs, risks, and engagement with therapeutic activities.	Accepted.	To ensure we have the right balance between patient recovery and public safety, we are committed to quality improvement and a continuous learning environment. A new forensic building offers an opportunity to develop a unique model of care. CAMH is already undertaking work to develop a new, progressive model, informed by evidence and best practice.	Individual patient placement was reviewed for all patients in 2019.  In October 2020, CAMH introduced the DUNDRUM 3 and DUNDRUM 4 (as described above) into its standard of care for the forensic population. A new requirement for all forensic patients to have these assessments of need completed at regular intervals throughout their journey.  The DUNDRUM allows for identification of progress in recovery, risks and level of supervision need, which provides a basis for an evidence based approach to patient placement.
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