

Let's Make Healthy
Change Happen.



Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



Mental Health - Care & Research
Santé mentale - Soins et recherche

2/17/2021

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

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Overview

The Royal Ottawa Health Care Group ("The Royal") is made up of The Royal Ottawa Mental Health Centre, the Brockville Mental Health Centre, Royal Ottawa Place (long-term care), The Royal's Institute of Mental Health Research and the Royal Ottawa Foundation for Mental Health.

For the purposes of Quality Improvement Plan (QIP) submissions to Health Quality Ontario (HQO), we report for The Royal's mental health services (referred to in this narrative as The Royal) and our long-term care facility, Royal Ottawa Place (referred to herein as ROP). A single Board of Trustees governs these two entities. However, indicators and quality improvement projects for The Royal and ROP are reported separately within one QIP document to ensure clear and appropriate oversight of work undertaken.

This year, perhaps more than any other, has left its mark on health care. There is, however, one constant amid this turbulence, a desire to bring access, hope, and new possibilities to people with mental health and addictions needs. In fact, *Access, Hope and New Possibilities* is the title given to The Royal's new organizational strategy, which was created in 2020-2021. The strategy is a roadmap that will shape the future of The Royal and our community for many years to come and was developed in consultation with a broad group of people, including clients and families, community partners, physicians, and staff. The following strategic priorities will frame the work of the organization in the next five years:

1. Innovate and shape care to client and family needs
2. Advance specialized care
3. Connect care and services for a more accessible system
4. Integrate research, education, practice, and lived expertise to improve client and family-oriented outcomes and experiences
5. Advocate and partner for systemic equity

Our Quality Improvement Plan is a mechanism to help drive forward progress on the strategic plan. This year, like everyone in health care, we have been faced with huge challenges, and opportunities, as a result of the pandemic. Due to our urgent and excellent response to the pandemic, the work on our QIP was slower to launch than originally anticipated. The importance of the QIP initiatives however was not lost and great progress towards our QIP goals did start in 2020-2021. As a result, we have chosen to keep the same indicators from 2020-2021 into 2021-2022 to ensure that the important work to achieve those targets continues.

Describe your organization's greatest QI achievement from the past year

The Royal, like all health care institutions, was faced with difficult decisions as a result of the pandemic. How can we continue to provide services to our clients/patients, play a regional role in the pandemic response, and support of staff, physicians, volunteers, and learners? While many mental health care services were unavailable during the early stages of the pandemic, The Royal responded by developing an innovative virtual care clinic to provide much needed mental health care services. The clinic, open for 17 weeks and called C-Prompt, received 910 referrals, or almost 14 new clients a day. It served 540 of them, with the rest either declining help or finding services elsewhere. Nearly all – 97 percent – were served by video or telephone appointments, with over 54 percent seeking mental health services for the first time. This is an unprecedented number of new referrals to services and demonstrated the urgent need for quick access to mental health services. The Royal has now launched a more permanent version of the clinic, entitled the Prompt clinic, which started offering services in January 2021.

Ensuring that The Royal's infection prevention and control (IPAC) practices were strong has been a key focus of The Royal's pandemic response. The Royal completed a full organizational IPAC audit at the start of the pandemic and made significant upgrades to ensure our practices were in line with the IPAC standards. We have ensured that our IPAC policies and protocols have been in alignment with the directions from Public Health throughout the pandemic ensuring a safe working environment for a staff, physicians, learners, and volunteers.

Keeping flu outbreaks at bay during a pandemic was a priority in the fall of 2020. In 2019-2020, The Royal started a multi-disciplinary working group to increase the number of patients, staff, physicians, and learners who received

the flu vaccine. The work of this group laid an important foundation which allowed The Royal to act quickly as soon as the flu shot was available in 2020. In the past two years, utilizing a flu vaccine champion model and real time data reporting, The Royal has increased its flu vaccine rates to patients by 24%. The group also facilitated collaborations between our pharmacy, nurse managers, and occupational health department to provide flu shots to our staff resulting in the fastest roll out of the flu vaccine in the history of the Royal.

As a last QI highlighted achievement, in order to support our staff, physicians, learners, and volunteers, The Royal opened its own COVID testing facility at the back of our main Carling Avenue site in the fall of 2020. Opened as a way to assist with testing volumes in the region, and a way for staff, physicians, learners, and volunteers and their families to quickly access a test, it also served to ease the burden on wait times at the public testing sites. Coupled with an increase in staff wellness options including peer support and the COVID front-line wellness initiative, The Royal has been able to provide multiple supports to our staff, physicians, learners, and volunteers during this remarkably difficult time.

Collaboration and integration

All programs at The Royal work collaboratively with our partners in the Champlain region, provincially, and nationally. As the region's provider of specialized mental health services, The Royal has placed considerable focus on building capacity within our primary and community health care partners to ensure that our clients' mental health needs are adequately met. These efforts have resulted in many clients of The Royal receiving excellent care in the community rather than readmission into our facility.

Throughout the pandemic, The Royal has played an active role in the regional response. The Royal sits on a variety of regional committees across a range of topics, which helps to ensure that all hospitals in the region are implementing similar policies in response to the pandemic across the region and that patients are able to flow through the system as efficiently as possible.

The Royal is also a partner in the Champlain Pathways to Better Care initiative. Pathways works with others to implement coordinated changes to the Champlain mental health and addictions system, leading to improvements for those with lived experience and their families. Initiatives include psychiatry recruitment, wait time analysis, primary care partnerships, collaborative care planning and regional psychosis care.

Patient/client/resident partnering and relations

The Royal continues to work at engaging clients and families throughout the hospital in our quality improvement initiatives. Our Client Advisory Council and Family Advisory Councils were actively engaged in the strategic planning process and continue to bring their projects for implementation to the Client and Family Centred Care Committee. Both councils have developed a vision of The Royal they would like to see and are now moving to the implementation phase of the project with their hallmark initiative – Peer Support and Navigation.

As well as their commitment to advising at the Senior Management and Board of Trustees level, the Client and Family Advisors continue to lend their lived expertise and experience to various committee across The Royal such as the Innovation Council and the Equity Diversity and Inclusion Committee. Of late, advisors have been active in the design and set up of a new Esketamine clinic at The Royal for people who live with treatment-resistant depression.

Workplace Violence Prevention

At the Royal, patient and employee safety remains a top priority. Workplace violence is one of the most frequent and serious safety concerns faced by staff at the Royal. In the past year, over 70% of workplace incidents at the Royal have been related to the workplace violence. The Workplace Violence Prevention Committee (WVPC) and the Joint Health and Safety Committees (JHSC) work closely and collaboratively with the Occupational Health and Safety Services (OHSS) to focus on reducing the risk and severity of violence.

The Royal continues to increase awareness about the risk of violence, implement and adopt new programs, update policies and is providing additional mandatory training for staff to ensure that they recognize and respond to escalating behaviours and physical aggression appropriately. The Senior Management Team, the Quality Committee of the Board and the Board of Trustees closely monitor workplace violence performance indicators.

Patient Safety and Employee Safety key performance indicators are also posted on the Royal's intranet, which is available to all staff and physicians. The Royal continues to develop new strategies and improve on existing strategies to better manage violence in the workplace. Some of these strategies are;

- Conducting department level Violence Risk Assessments.
- Researching and introducing new training tools.
- Conducting post-incident investigations to identify root causes and develop action plans to prevent recurrence.
- Improving code stats (including code white) to better gauge the severity of the incidents.
- Encouraging more reporting through our Client and Staff Incidents Feedback System Incident Reports (CSIFs)
- Monitoring the frequency that Code White Debriefs are completed
- Adapting Non-Violent Crisis Intervention in order to be able to continue the training during Covid-19 with appropriate IPAC protocols.
- Introducing *Safely Managing Change* program to assess changes and to ensure new violence hazards (and other safety hazards) are not introduced.
- Increasing accountability for consistent testing of Personal Alarm Safety Devices (PASD).
- Collaborating with Learning & Development to provide timely, on unit refresher training in response to trends in the types of incidents.
- Assessing the risk of exposure to Covid-19 for all changes made within the hospital. The risk of workplace violence was a consistent factor considered in the risk assessment process.

Virtual care

For many years, The Royal has invested in virtual care through virtual visits, online scheduling, training and e-consultations. The Royal is a participant in a number of virtual care offerings (see the program descriptions below). Virtual care creates access and allows The Royal to provide specialized mental health care to individuals in their own community, reducing wait times and travel to care.

Telemedicine

The Telemedicine program at The Royal has provided services for over 11 years and has built a network of community partnerships with organizations that have unique mental health needs including the University of Ottawa, Carleton University, Algonquin College, the Ottawa Paramedic Services, 15 community health organizations in the Champlain Region and 4 organizations in northern Ontario, and 7 correctional facilities across Ontario. Through community partners, The Royal provides virtual access to specialized mental health services and care while at the same time building the mental health capacity of the referring primary care provider. We provide direct consultation with a dedicated psychiatrist, case conferencing with primary healthcare providers, and ongoing education to build mental health capacity among community partners.

Telemedicine at The Royal also supported all clinical programs at The Royal in their transition to virtual care using the provincial preferred virtual care platform OTN – Ontario Telemedicine Network

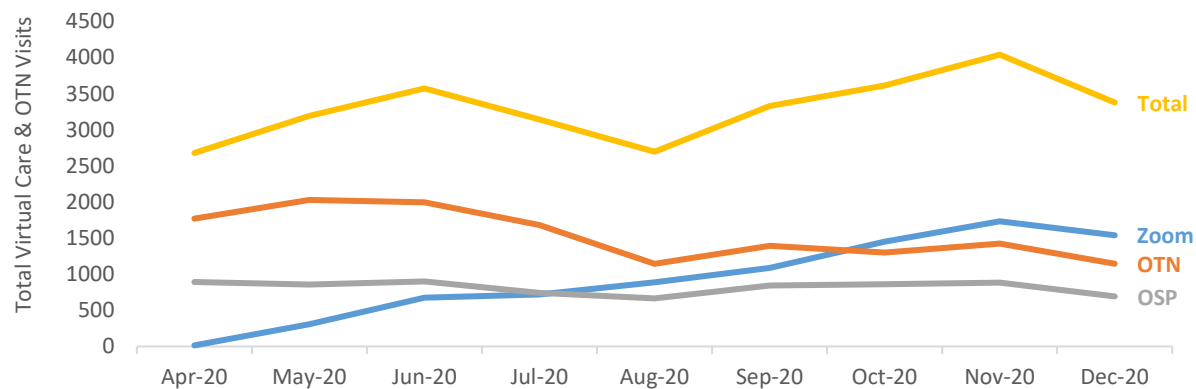
Provide mental health access to 230 community-based Family Physicians and Nurse Practitioners.

In 2020-2021, a total of 29,661 virtual visits took place on the OTN or Zoom Health Care platforms (note- the Doxy.me platform used by the C-prompt clinic are not included in these numbers).

As evidenced in Chart 1, the number of virtual care and OTN appointments grew throughout the 2020-2021 fiscal year, as a direct result of the pandemic. An evaluation of virtual care conducted in 2020-2021 found strong support for all aspects of virtual care to remain, with recommendations to continually resource the equipment that is required to provide the service.

Chart 1. The use of virtual care increased during the 2020-2021 year

Data: Virtual care monthly totals by type



Northern Ontario Francophone Psychiatry Program

The Northern Ontario Francophone Psychiatry Program provides psychiatric care to designated francophone communities in Northern Ontario. Our French-speaking psychiatrists maintain ongoing liaison with the community they serve, providing clinical support to patients either on site or via telepsychiatry. They also provide health care practitioners working in underserved areas with readily available consultation by phone for challenging cases, and education and training to local medical practitioners and other mental health professionals.

Ontario Structured Psychotherapy (OSP) Program

The Ontario Structured Psychotherapy (OSP) program's stepped-care suite of service offerings include lower intensity services [BounceBack (a virtual CBT-based guided self-help program) and iCBT (Internet-based therapist assisted CBT treatment)] and higher intensity services (individual and group CBT therapy) for people living with mild to moderate depression and anxiety. The Royal, in collaboration with community partners, delivers OSP services to clients within the Champlain region and Northern Ontario through a distributed service model. Psychologists at The Royal provide CBT training virtually to 30+ therapists at nine community partner sites, including consultation and supervision services for the clinical team. An online scheduling system connects all clinicians and is able to book directly into the calendars of all therapists in the community. OSP currently offers screening, triage, intake, and assessment as well as all high intensity CBT treatment modalities to clients virtually, including using telemedicine and zoom for healthcare. An online documentation tool supports the clinical records and information platform plus tracks our outcomes. It also allows clients to track their progress and submit self-rated tools through their computer or phone. All referrals to the program can be completed online allowing primary care providers to use their electronic health records versus faxing paper referrals. This online referral platform permits communication between The Royal and primary care providers, ensuring that there is timely communication between providers to support client care.

COVID Frontline Wellness

The Royal is one of five hospitals in Ontario partnering with the Mental Health and Addictions Centre of Excellence (CoE) at Ontario Health providing enhanced mental health supports to frontline healthcare workers (HCW) impacted by stress related to COVID-19. Supported by digital solutions, The Royal's COVID Frontline Wellness has provided rapid access to mental health and substance use support, brief intervention, and navigation services to Ontario HCWs self-referring from a broad array of healthcare settings and professions. HCWs can access services quickly and easily using an online portal on The Royal's website to book their own appointment. All services are offered virtually.

Executive Compensation

The Royal has a performance-based compensation plan in place for the Senior Management Team which includes: the Chief Executive Officer; Chief of Staff and Psychiatrist-in-Chief; Chief Operating Officer and Chief Financial Officer; Vice President, Professional Practice and Chief Nursing Executive; Vice President, Patient Care Services and Community Mental Health.

Accountability for the execution of both the annual QIP and the Strategic plan are delegated to the Chief Executive Officer from the Board of Trustees. The plans are reviewed, approved and monitored by the Board of Trustees through performance evaluations of the Chief Executive Officer which is cascaded to the parties listed above. It is the sum of all objectives in these plans that determine the performance pay component of The Royal's Executives. As per Regulation 304/6 of the Broader Public Sector Executive Compensation Act, 2014 (BPSECA), The Royal developed an Executive Compensation Framework.

The Royal has allocated 25% of the performance-based pay to the Quality Improvement Plan, with allocation to all 7 initiatives developed under the quality dimensions of QIP for The Royal and Royal Ottawa Place. Specifically, 25% is allocated to each of the indicators as outlined below:

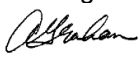
	Indicator	Allocation
1	% of inpatients with a Clinical Assessment Protocol (CAPS) from the Recovery Plan of Care tool updated within 28 days	3.57%
2	% of medication reconciliation completed in ambulatory care where medication is a large component of treatment (Schizophrenia/Mood & Anxiety/Geriatric Psychiatry) as measured by the % of BPHM completed by a pharmacy technician on all new referrals to the program	3.57%
3	% of medication reconciliation completed in ambulatory care where medication is a large component of treatment (Schizophrenia/Mood & Anxiety/Geriatric Psychiatry) as measured by the % of BPHM confirmed by the attending physician	3.57%
4	Number of programs who have implemented clinical outcome measurement that is both clinically appropriate to the client population and evidence based that is reviewed on a quarterly basis to drive service improvement	3.57%
5	% of clinical research projects involving clients and families at The Royal	3.57%
6	% of document assessment of palliative care needs among residents identified to benefit from palliative care	3.57%
7	Number of workplace violence incidents (overall)	3.57%
Total		25%

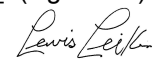
Contact Information

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Sign-off

I have reviewed and approved our organization's Quality Improvement Plan

Board Chair Anne Graham  (signature)

Board Quality Committee Chair Lewis Leikin  (signature)

Chief Executive Officer Joanne Bezzubetz  (signature)

Chief of Staff Dr. Raj Bhatla  (signature)