

Quality Improvement Plan

Approved by Board of Directors, March 5, 2014

| Quality Dimension | Indicator | Target | Process / Workplan |
|-----------------------|---|--|--|
| Access | a. Use of referral rating criteria to prioritize access to MH counselling b. Occupancy rate for Apartment Program c. Use OTN to increase access to service, maximize resources / capacity | a. Meet timelines for admitting priority populations for counselling b. Achieve/maintain 90% occupancy rate for apartment program c. Increase use of OTN for clinical purposes by 15% and measure impact on service capacity | a. Track wait times for priority counselling clients b. Monitor occupancy rate c. OTN <ul style="list-style-type: none"> • Strike OTN working group • Count clients and workers attending OTN clinical sessions • Track types of services using OTN |
| Client Centred | a. Client satisfaction rate b. Adopt / implement recovery philosophy <ul style="list-style-type: none"> • Use of OCAN (client-centred tool) • Use of WRAP | a. 85% of respondents rate services as good to very good b. Implement recovery philosophy: <ul style="list-style-type: none"> • Meet OCAN completion targets • Identify capacity for WRAP groups • Train one new group facilitator • Pilot one new type of WRAP group | a. Implement new client perception of care tool (OPOC) b. Recovery philosophy <ul style="list-style-type: none"> • Monitor and increase OCAN completion rates • Allocate funding for WRAP training and explore possibility of using OTN for groups |
| Safety | a. Use of standardized Suicide Risk Assessment b. Hand hygiene (IPAC) program c. Complete medication reconciliations (Telemedicine) d. Provide health and safety training | a. 100% completion of CSSRS comprehensive lifetime rating scale for all clients of specified programs b. 100% of staff trained in hand hygiene at orientation and at annual general staff meeting; 70% compliance rate at monthly one-day audit of hand hygiene at 9 sites (all visitors & staff at main entrance) c. Med. reconciliations conducted per standards (Telemedicine only) d. 95% staff attendance at 3 core trainings: CPI, CPR/First Aid | a. Confirm policy and procedure for use of Columbia Suicide Severity Rating Scale, identify target programs, train staff, automate (if possible) and monitor the use of the tool b. Develop and implement policy, use handwashing video, implement audit and review results c. Develop and implement medication reconciliation policy and procedure, audit for compliance d. Schedule training, track attendance |
| Effectiveness | a. Staff satisfaction b. Staff development c. Financial sustainability | a. 85% of staff rate satisfaction as good to very good b. Two mandatory educational events with 90% participation of eligible staff c. Financial sustainability <ul style="list-style-type: none"> • Meet 100% of reporting requirements • Avoid corporate deficit • Reduce bad debt in apartment program by 10% | a. Implement annual staff satisfaction survey, monitor results, identify key satisfiers, address concerns b. Identify and address two education priorities, allocate resources, track attendance and gather feedback c. Financial sustainability <ul style="list-style-type: none"> • Track compliance with reporting requirements • Identify contributing factors for bad debt, set target to reduce, implement policies, procedures for timely collection of arrears |
| Integration | a. Formal partnerships, joint ventures b. Collaborative care | a. Develop / participate in 3 formal partnerships, joint ventures (Telemedicine, Mental Health Grey Bruce, Addiction Court Support) b. Provide system leadership re: service coordination for vulnerable populations (Concurrent Disorders, ASH, Telemedicine) c. Chair &/or attend at least 3 inter-agency groups: Care Pathways, MH&A Network, Meth Task Force & Treatment Working Group, d. Pool resources for 2 collaborative care initiatives (Mental Health Grey Bruce, Telemedicine) | a. Identify partnerships, joint ventures, track activities, meetings attended and role played b. Identify projects, track activities |