



## **Canadian Mental Health Association -Champlain East**

### **Accredited with Exemplary Standing**

November 2020 to 2024

**Canadian Mental Health Association -Champlain East** has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement. It is accredited until November 2024 provided program requirements continue to be met.

**Canadian Mental Health Association -Champlain East** 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 **Canadian Mental Health Association - Champlain East** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

### **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](http://www.isqua.org), a tangible demonstration that our programs meet international standards.

Find out more about what we do at [www.accreditation.ca](http://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

November 22, 2020 to November 25, 2020

### Locations surveyed

- **1 location** was 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

- **4 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.

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The Canadian Mental Health Association (CMHA), Champlain East Branch provides community-based programs and services that are client centered and designed to enhance the rehabilitation and independence of individuals over the age of 16 years, who are living with a severe mental illness or concurrent disorders. Programs and services include intensive case management, court diversion and support, employment support programs, hoarding support, and family and peer support. The organization delivers these programs and services via satellite offices and Resource Centers located in various communities across the Region of East Champlain. The region faces higher suicide rates than the provincial average, an increasing opioid crisis, poverty, a housing shortage, increasing social isolation, an aging population, and a shortage of primary care practitioners and psychiatrists. The organization's service philosophy is based on the principles of recovery, with a strong focus on wellness. The overarching goal of CMHA is to focus on co-designing client recovery plans using evidence-based assessment tools. Services are flexible, portable, and as many partners stated, community and client driven. Partners describe the organization as responsive and adaptable. The organization obtained its official designation under the French Language Services Act in 1991. This designation guarantees access to services and information in French among the region's significant Francophone population.

This is the organization's first Qmentum survey. The tremendous work effort to support this process was further intensified by the multiple operational and service changes that arose out of the public health measures that were implemented during the COVID-19 pandemic. The organization is commended for its commitment and tenacity toward achieving this important milestone, and for applying the results of the various self-assessments.

The organization is fully aware of the role it plays in the local and regional systems. Employees at all levels participate in coalitions and planning committees interacting with various sectors. The leadership maintains relationships with each of the three Ontario Health Teams still being established to ensure that mental health and addiction are considered planning priorities for the region. The organization has much to celebrate. It was very well prepared for this survey, which was conducted primarily via Microsoft Teams, with some in-person visits for specific priority processes. While the virtual tracer approach had some limitations in terms of direct observations of client and staff interactions in real time, it was overall a resounding success.

Board directors are dedicated to supporting people-centered care throughout the programs and services of the organization. These board volunteers are commended for their commitment and vision to support the development of an impressive quality framework integrated with the domains of client safety and risk management. Quality is viewed as an integral part of the culture, which was evident at all levels, and by the investment in supporting and training employees to be proficient in quality improvement techniques.

The staff and the leadership should be proud of adopting best practices and making people-centered care a priority. The Client –Family-Caregiver Advisory Committee is a model for other organizations to adopt. This committee provides meaningful input, making a difference in the design and delivery of programs and services. Staff feel supported and understand the strategic directions of the organization. Flexible work schedules facilitate work-life balance, and additional supportive strategies have been implemented considering the additional pressures created by working from home-based offices during the pandemic.

Services are provided by teams who are very dedicated to their clients. This was evidenced by several examples of staff going well beyond the call of duty to support clients and provide additional virtual outreach during the pandemic. Employees at all levels and in all areas of the organization live the values of the organization.

Client satisfaction is high. Clients shared that the programs and services of the organization are excellent. While education is valued by the organization, at times it may be delayed due to competing priorities. This is primarily the result of having a very limited budget, and the fact that for the past eight years, the organization has yet to receive an increase to its base funding. This is particularly problematic for the organization as it faces an unprecedented demand for virtual services as a result of the pandemic. A dramatic increase in referrals has been noted as the second wave of the pandemic has begun. Ongoing advocacy to gain additional resources from funders will be key to provide longer term virtual supports to the communities in the region.









The leadership team is transparent and responsive. Managers have all been trained in the LEADS in a Caring Environment (LEADS) framework. Staff have access to leadership opportunities, such as becoming leaders who provide subject matter expertise and perform a liaison role between teams and management. The organization is encouraged to continue using a collaborative, open, and transparent approach when working with partners; looking for opportunities to lead or participate in further coordinating and integrating service elements that can reduce the number of referrals in the system and overall wait times; and fostering a culture of quality.

## 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.

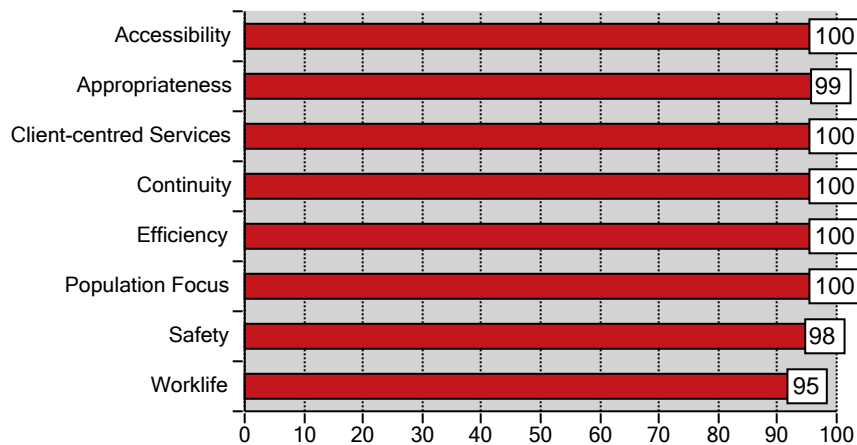
The quality dimensions are:

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

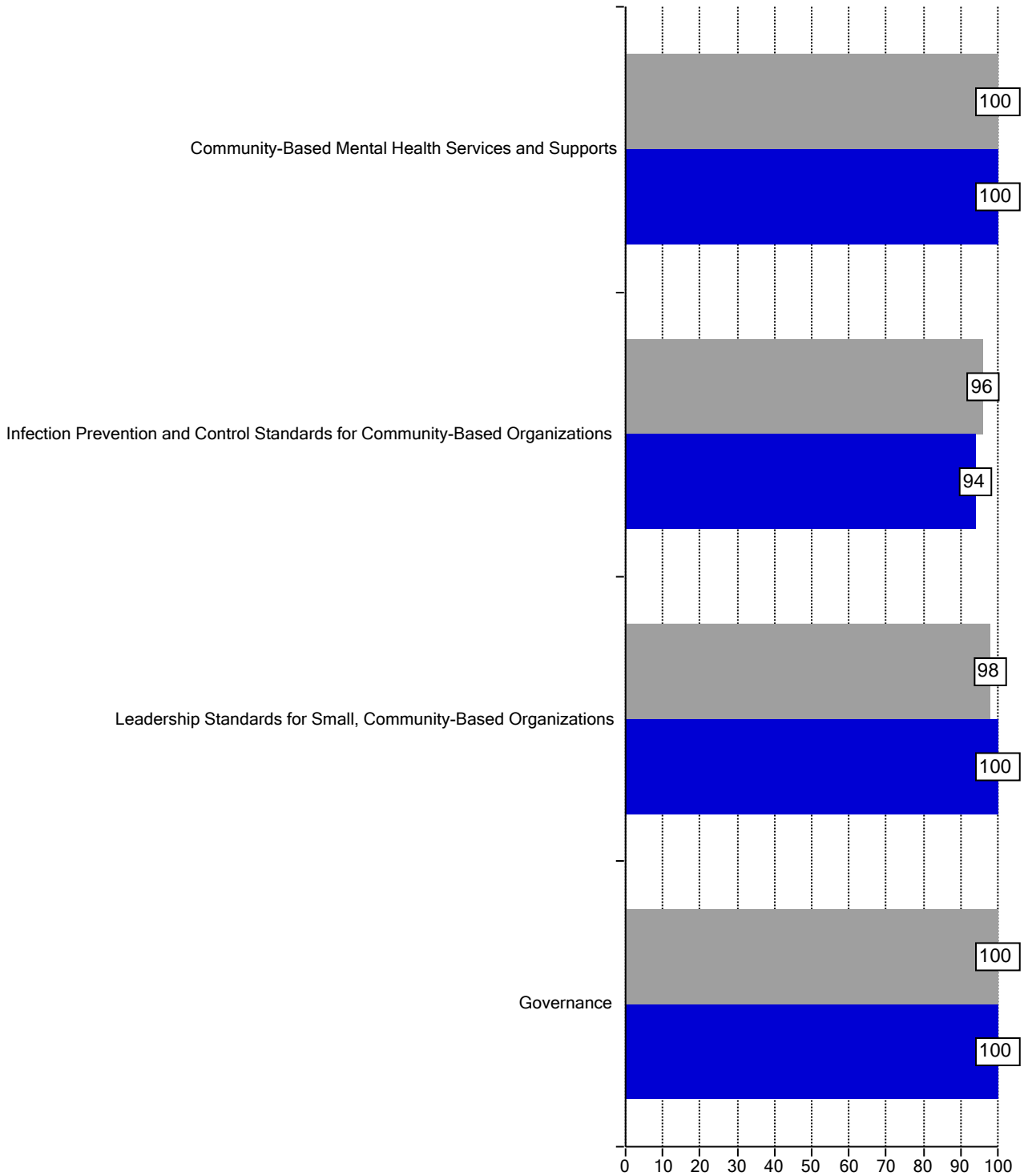
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

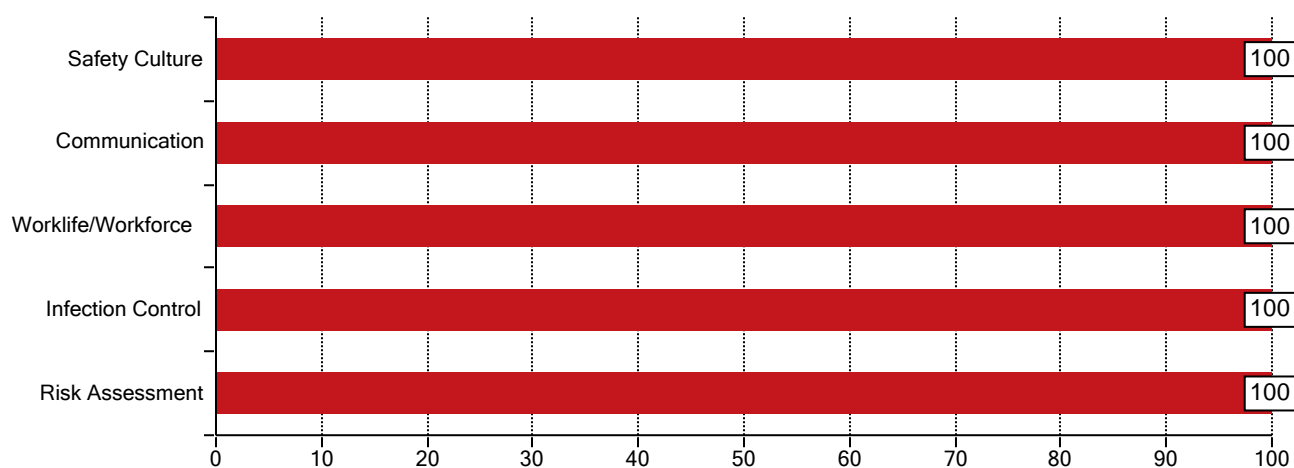
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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





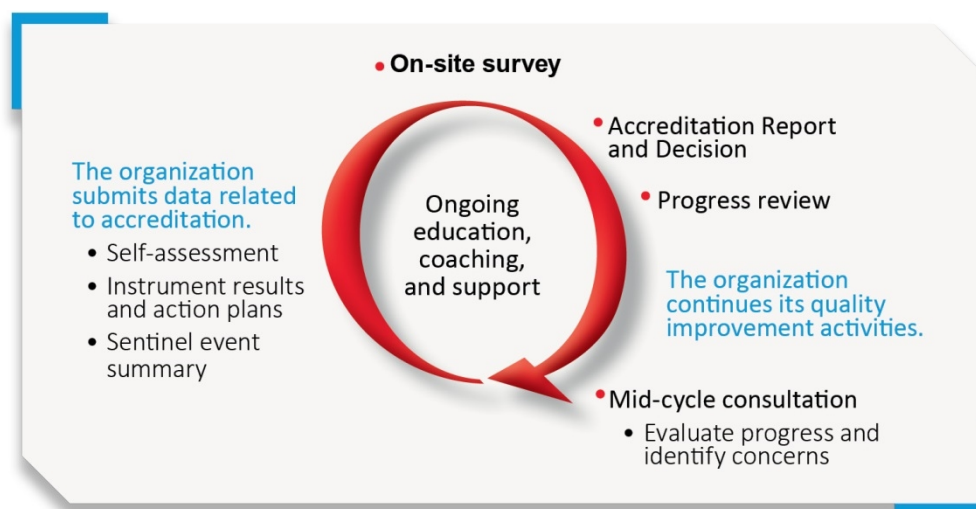
## The quality improvement journey

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 **Canadian Mental Health Association -Champlain East** 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 CMHA-CE (Cornwall, Head Office)

## 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

- Information transfer at care transitions
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#### Worklife/Workforce

- Patient safety plan
  - Patient safety: education and training
  - Workplace Violence Prevention
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#### Infection Control

- Hand-Hygiene Compliance
  - Hand-Hygiene Education and Training
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#### Risk Assessment

- Suicide Prevention
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