

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



03/30/2023

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.

ontario.ca/excellentcare



Overview

Waypoint is a Catholic hospital, whose mission is to provide excellence in specialized mental health and addiction services, grounded in research and education and guided by the faith-based values of caring, respect, accountability and innovation. Our vision is to be an inspired organization that will change lives by leading the advancement and delivery of compassionate care.

As a fully accredited mental health hospital operating over 300 beds, Waypoint is Ontario Health Central region's specialty mental health provider, is home to Ontario's only high secure forensic mental health programs, and provides an extensive range of acute and longer-term psychiatric inpatient and outpatient services, as well as specialized geriatric services. The hospital works with a broad array of patients, clients, families, and partners throughout our region. Staff aspire to meet the emotional, social and spiritual needs of all our patients and clients, promoting independence and enhancing quality of life, and working toward the best possible outcomes and experiences.

Waypoint is an academic research centre, affiliated with the University of Toronto, along with numerous other institutions, and its contributions to scientific knowledge on violence and the assessment and treatment of mental disorders is recognized internationally. Waypoint is a partner in the Central Regional Expert Networks for Specialized Populations. The network of agencies provides person centered care for vulnerable people and their families/caregivers, including those with highly complex needs, requiring specialized intensive services through their lifespan, and with a lens of trauma, mental health and addictions, senior's health services and end of life care services.

Waypoint's Strategic Plan for 2020-25 highlights the next leg of our journey, focused on three strategic directions: Serve, Discover, and Lead. These directions leverage our Board endorsed Quality, Risk and Safety Plan (2023-2026), which lays out a quality framework and aspirational vision that drives clinical excellence through a learning approach, grounded in evidence-based standards of care and empowered expert staff, and co-designed through the voices of lived experience. Each year, staff and leaders work together – with input from patients/clients and families – to select, prioritize, resource and monitor the improvements that propel us toward this vision of care and service.

For 2023-2024, these efforts include:

- Reducing the time patients spend in the hospital waiting for an alternate level of service
- Improving patients' experience through delivery of high quality services
- Supporting a safe workplace, with physical security, as well as positive relational, emotional, and psychosocial health
- Being effective and reliable stewards of fiscal resources

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

As with most health care organizations, the predominant quality activity for 2022-23 was adapting our services and partnerships to meet needs that stemmed from the global COVID-19 pandemic. Teams delayed progress planned for quality improvement projects and partnerships due to competing priorities in 2022. Instead, the hospital continued to focus its efforts to minimize or contain potential exposures to the virus for patients, clients, staff and members of our community while still providing quality care. The list below highlights some of the key decisions and actions taken during the process:

- Maintained a twenty-bed mental health admission unit which was initially the sole point of entry to the hospital to minimize transmission of COVID. Direct admissions to other units occurred gradually over time with processes developed to facilitate COVID containment as part of the admission process.
- At times, more than doubled the Acute Assessment Program bed count. This facilitated urgently needed access to mental health care to patients from across the region and the GTA, thereby supporting acute care hospitals and their Emergency Departments to focus on responding to pressures from COVID positive patients.
- Specialized Geriatrics Services (SGS) raised awareness around mental health and confinement of residents in congregate settings within Simcoe Muskoka.
- Our Ontario Structured Psychotherapy Program, Specialized Geriatric Services, Georgianwood Concurrent Disorders Program, Outpatient Assessment and Treatment Service, Mobile Treatment and Support Team and Family, Child and Youth Mental Health programs all expanded the use of virtual care technologies, such as the Ontario Telemedicine Network, including supporting access to digital devices to reduce barriers to virtual care and address equity considerations. Our inpatient programs also increased access to digital devices to ensure ongoing access to virtual visits with family, friends and loved ones when in person visiting restrictions were required due to COVID.
- Streamlined behavioural support services in long term care settings to better identify and prioritize patients who need assessment to avoid Emergency Department visits.
- Maintained the provincial COVID Front Line Wellness program in collaboration with four other Ontario hospitals and the Mental Health and Addictions Centre of Excellence at Ontario Health, to provide mental health supports to healthcare workers.
- Due to restricted patient access to the community and the campus to reduce exposure to COVID-19, assigned additional therapeutic recreation staff to all programs to ensure patients had access to activities and, where available, unit-adjacent courtyards throughout the most restrictive phases of the pandemic.
- The practice of floating staff across departments was limited, and a dedicated unit for the COVID admissions, noted as the Swing unit, was implemented to enable isolation for new admissions.
- Safely reinstated patient activities, vocational therapy, education, central recreation, off-unit walk programs and broader campus access during intermittent periods of low case counts.
- Developed a new in-house physical medicine call system to prevent avoidable transfers of patients to the Emergency Department and related capacity issues and better manage medical issues after hours.

• Implemented strategies to provide COVID vaccinations for all patient populations admitted to Waypoint and those living in congregate settings in the community.

Achievements related to partnerships include the following:

- Collaboration between Waypoint and the three other stand-alone specialty mental health hospitals in successfully developing a Mental Health Credit program in partnership with Georgian College. This program was accredited through the Ministry of Colleges and Universities and commenced in the fall of 2022.
- Specialized Geriatric Services expanded their Central Intake Service to support specialized geriatric services within the Couchiching and South Georgian Bay regions.
- Specialized Geriatric Services engaged leadership from the Horizon program as well as the County of Simcoe (new Behaviour Support & Transition Unit at Georgian Manor) and LOFT (new beds at Georgian Bay Seniors Lodge) to collaboratively design and implement a more integrated system of geriatric mental health beds in the region.

Collaboration and integration

Central Regional Expert Network for Specialized Populations the CREN <u>https://www.ohtspecialized.ca/</u> is the *provisional* title for the Central Ontario Health Team for Specialized populations, which is undergoing a rebranding and evolution process as a result of recent direction provided by the Ministry of Health and Ontario Health on the further development of Ontario Health Teams (OHT). CREN is a network of agencies, clients, families and care partners providing person centered care for vulnerable people living in Central Ontario and their families/caregivers. These include people living with mental illnesses and substance use disorders throughout the lifespan, including children with mental health issues with developmental, addictions, learning or other presentations; older adults living with dementia and/or frailty; people receiving palliative and end of life care; and Indigenous populations. Waypoint provides a leadership role with the CREN.

Members of the CREN are committed to collaborating with local OHTs to better integrate our services, build capacity for a full continuum of services, and ensure specialized services are accessible to patient populations whose care exceeds the knowledge and capacity of local OHTs.

Why initially a regional OHT Model? When Ontario Health teams were introduced in 2019, the guidance was to form teams able to deliver a full continuum of services to population sizes between 350,000 and 500,000. In the northern part of Central Ontario, six OHTs were approved with attributed population sizes of 60,000 to 90,000. The challenge is that OHTs serving small populations do not have the critical mass to provide specialized team based care for people with less prevalent but very disabling conditions. To make the best use of limited specialist capacity, several organizations came together and initially created the Central OHT for Specialized Populations, an OHT that would provide specialized services across the six smaller OHT in the region. Given the recent direction by the Ministry of Health and Ontario

Health for OHTs, the Steering Committee determined that it would continue to build on the successes to date, rebrand, and evolve COHT to CREN for Specialized Populations. The Central Regional Expert Networks for Specialized Populations uses the *Development Model of Integrated Care* (Minkman, 2012) to phase the development of a coordinated, integrated health team. This model aligns with Merit Vanguard, a partnership of organizations in the U.K. that have come together to develop new ways of working www.wmmeritvanguard.nhs.uk.

The model includes four phases:

- 1. Initiate and Design
- 2. Experiment and Execute
- 3. Expand and Monitor
- 4. Consolidate and Transform

This regional CREN model will:

- avoid fragmentation of specialized services
- ensure there is a critical mass needed to deliver specialized services
- ensure access to specialized services
- support the identification of service efficiencies so that resources can be re-allocated to address service gaps

The initial members of the Central Ontario Health Team for Specialized Populations are listed below. All members recently committed to continuing to work collaboratively as the model evolves to CREN. It is anticipated that the number of partners will grow, as the model develops to include others who interface with the people we serve.

- Alzheimer Society of Simcoe County
- Canadian Mental Health Association Simcoe
- County of Simcoe LTC, Seniors and Emergency services
- Hands, The Family Help Network
- Mamaway Wiidokdaadwin Indigenous Primary Care Team
- New Path Child and Youth Mental Health Services
- North Simcoe Muskoka Hospice Palliative Care Network
- Patient/Client and Family Council
- Pine River Institute
- Waypoint Centre for Mental Health Care, including the North Simcoe Muskoka Specialized Geriatric Services (SGS)

The long-term goal of the Central Regional Expert Networks for Specialized Populations is to focus on continuing to improve quality of care so that people with complex health needs can live well in their communities. We will work closely with local OHTs to ensure seamless pathways for access to specialized care and excellent communication with providers in local OHTs. We have a foundation of trust and a track record of improvements that will serve as the foundation for our system transformation to CREN. As our immediate priorities, we will continue to move forward on:

- improving access to crisis and community services
- building capacity for child and youth mental health and addiction
- improving access and building capacity for care of frail seniors
- building supports for end of life care
- providing culturally safe services for Indigenous peoples

The CREN's focus is squarely on three priority populations: Frail seniors, Indigenous populations, and children and youth with mental health and addiction issues. The near-term goals for each population includes:

- Evolving local Specialized Geriatric Services teams in each sub-region of North Simcoe-Muskoka to enhance support to OHTs and partner agencies.
- Reducing opioid related harms by continuing to support the implementation of recommendations from Indigenous Opioid Strategy, which includes the development of a culturally safe community based opioid treatment program.
- Improving early identification and intervention by continuing to implement, in partnership with the local OHTs, a standardized integrated pathway for treatment of anxiety & depression for children and youth.

The CREN made significant progress during 2022 - 23, including:

1. Leadership and Governance

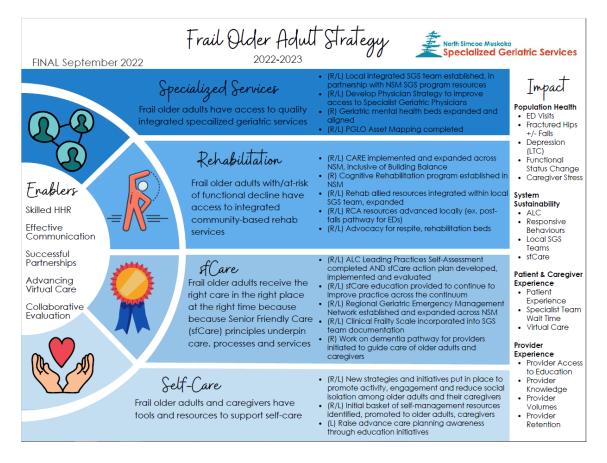
- In response to new policy direction for OHTs provided by the Ministry of Health and Ontario Health, CREN held retreats to:
 - Reaffirm current members' commitment to continuing to collaborate and focus on supporting the continuum of care for specialized populations.
 - Build-out the elements of the model and the value proposition.
 - Assess and begin revising the current membership, governance structure and operating model.
 - Continue dialogue with various Ontario Government Ministries and Ontario Health re: critical role in the evolving health system, and the need to legitimize CREN's position in the system.

2. Mental Health and Addictions starting with Children and Youth

- Successful application to Ontario Health on behalf of OHT partners to advance Mental Health and Addictions Online Appointment Booking.
- Created "Feelings Pathway: A Guide to Mental Health Resources for Children and Youth in Simcoe and Muskoka".
- Initiated review of Child and Youth Mental Health and Substance Use Crisis response & held Visioning Day to confirm system goals/priorities.
- Completed Data and Access mapping for Child and Youth Mental Health and Substance use services in effort to advance Coordinated Access.

3. Seniors starting with Specialized Geriatric Services

- o Rehabilitation Strategy
- Performance Monitoring & Evaluation Framework
- Older Adult Strategy
- Funding requests



4. Ontario Structured Psychotherapy

- Program outcome indicators for Recovery Rate and Reliable Improvement Rate remain above the provincial average
- Collaborating with our Indigenous partners, CMHA York South Simcoe and CarePoint Health to create Indigenous Services Pathway for Central Ontario
- o Referral volumes have increased including referrals from priority populations.
- Collaborating with the other Network Lead Organizations who need clinical supervision and other supports including clients receiving services in French

5. Digital Health

- Supported the successful funding application for Online Appointment Booking, resulting in 450 appointments booked on 1 door.ca to date.
- Completed a Digital Health Current State Assessment with OHT partners.
- Re-aligned our work plan to the Ontario Health Digital Health Playbook allowing us to demonstrate achievement/progress toward the key areas in the Digital First for Heath Strategy.

6. Patient/Family, Client, Family and Care Provider Partnerships

- Unanimous agreement of all partners to collaborate with the Patient/Client & Family partnership to implement co-design which is foundational to the work of our OHT.
- Discussion with each partner agency to get a fulsome understanding of where each is at re successes and barriers/challenges.
- Discussions with patients/clients and families across the region to get their feedback on collaborating.
- Given the renewed OHT direction from the Ministry of Health and Ontario Health in the latter part of fiscal 2022 – 23, the CREN for Specialized Populations will revisit the Design component of the model's first phase (*Initiate and Design*) while continuing to move the working groups into the model's second phase (*Experiment and Execute*) during 2023 - 24, with plans that include:
 - Clinical Pathway Coordination and Integration: Build on foundational work completed in 2022 – 23 and continue the development and implementation of the inpatient and community based Schizophrenia and Psychosis pathways, spread and scale the Children and Youth living with depression and anxiety – my DAWN pathway from SGB to other OHTs in NSM, partner with primary care to begin implementing Universal Screening for Depression, and continue to move to Coordinated Access for MHA.
 - *Monitoring Evaluation and System Performance:* Establish System Performance Indicators along with a process for regular monitoring.
 - *Patient, Caregiver and Community partnership:* Continue to meaningfully partner with patients, families and caregivers by implementing an experience based co-design approach to improvement.
 - Communication: Continue newsletters and website updates to reach wider audience.

Patient/client/resident partnering and relations



From Yvette Brook, Executive Director of the Patient/Client & Family Council

The Patient/Client & Family Council (the Council) is a separate, non-profit organization staffed entirely by service users and family members. The Council partners with Waypoint Centre for Mental Health Care on specific initiatives. One of its core roles is to gather and share the voice and experiences of clients and families. The Council engages clients one-to-one, via autonomous surveying, focus groups, community meetings and specific consultation activities.

This year the PCFC is restarting surveying of patients on key themes from the Declaration of Recovery Values. This will provide ongoing patient experience feedback to help drive the work of Waypoints Quality Improvement teams. The Council is also a partner in the Central Region Expert Networks. Our work surveying organizations and patients/family members across the network, and leading the development of a model for regional partnership with clients and families, supports the work of this network and aims to embed Experience Based Co-design as foundational.

As the Council's Executive Director, I have an advisory function and collaborate with the hospital Leadership Team. I am also a member of the Quality Committee of the Board. The Council's role in quality improvement continues through membership in Business Review Meeting committees for the Clinical division and Partnerships division, as well as at the program level. Direct Council involvement through participation in strategic project teams and other quality of care improvement working groups is continuing to grow.

Workplace Violence Prevention

Waypoint's Senior Leadership Team and Board of Directors remain committed to providing a safe and high quality workplace; one marked by high levels of safety and engagement. This critical commitment to staff well-being aligns with our strategic direction of "Serve", which outlines the intent to "...foster a healing culture where staff, physicians and volunteers are inspired to provide exceptional service and care". Waypoint works to strengthen its healthy workplace with the tools, training, and processes for staff to better support our patients and each other, and receive satisfaction from their challenging work.

Given its unique experience and expertise in the province, Waypoint sees itself as a leader in the area of continuously improving workplace safety practices to provide a safe and healthy environment. The Board continues to monitor and invest in key initiatives to support staff health and safety. Recent investments include participation in a provincial pilot program led by the Yale Center for Emotional Intelligence, Ontario Hospital Association, and funded by a Ministry of Labour Grant for Imperative for Organizational Wellness.

Virtual care

The pandemic created a tremendous sense of urgency as our staff sought new ways to support patients and clients. Despite the short-term setback during early days of the pandemic, access to outpatient visits increased tremendously, with virtual visits increasing significantly year over year.

Waypoint provides Telemedicine Services through the Ontario Telemedicine Network (OTN) at its main campus in Penetanguishene, as well as Outpatient Services location in Midland and through the Specialized Geriatric Services throughout North Simcoe Muskoka. Staff and patients can connect through a secured network through any one of our ten units, or through their own personal computer via Personal Computer Videoconferencing (PCVC). During a Telemedicine visit clients can see, hear, and talk to their health care professionals just as they would if they were attending in person.

Patient use of technology includes virtual pre-admission assessments, psychiatric consultation and follow-up, case conferences, and family visits. Other important uses of technology at Waypoint include appearances at hearings before the Consent and Capacity Board or the Ontario Review Board for forensic patients as well as patients corresponding with their legal counsel. Waypoint has also been using e-consults to reduce wait times to appointments with specialists, including dermatologists, endocrinologists and psychiatrists. Waypoint physicians at Outpatient Services, Family Child & Youth Mental Health Program and Specialized Geriatric Services provide e-consults for psychiatry and geriatric psychiatry patients and clients throughout the region.

The administrative and education functions of virtual platforms including OTN and Zoom allow staff real time communication through participation in various internal or external networking and educational events, or other professional development events including conferences or seminars.

Virtual services are offered by many of the outpatient-based services within Waypoint including; the North Simcoe Youth Wellness Hub which provides a suite of virtual services to youth aged 12 to 25, Specialized Geriatric Services programs, Ontario Structured Psychotherapy programs and Georgianwood outpatient programs. These include primary care, mental health and addiction services, including dedicated times for patients to access providers directly, housing and employment services, and peer support services. Other services offered virtually include Indigenous cultural teachings, youth drop-ins, as well as Queer-Trans Connect. The Health Hub maintains a very active social media presence using multiple media platform.

The CREN is also developing a digital health strategy, which will focus on optimizing virtual care opportunities.

Executive Compensation

For 2023-24, our executives' compensation linked to performance on the following subset of quality commitments:

- 1. Total Margin
- 2. Inpatient satisfaction
- 3. Workplace violence indicator re: frequency
- 4. Workplace violence indicator re: severity

The following positions meet the definition of "executive" within the meaning of the *Excellent Care for All Act*, Section 1 and Regulation 444/10 and are subject to the variable compensation:

- Chief Executive Officer
- Vice President, Medical Affairs and Chief of Staff
- Vice-President, Clinical Services and Chief Operating Officer
- Vice-President, Patient Experience and Chief Nursing Executive
- Vice-President, Corporate Services and Chief Financial Officer
- Vice-President, People and Chief Human Resources Officer
- Vice-President, Partnerships and Chief Strategy Officer
- Vice-President, Research & Academics and Chief Scientific Officer

The amount of pay for performance is 3% for each position. All individuals are held accountable for achieving the priority indicators tied to compensation, and all indicators will have equal weighting. Following the completion of fiscal 2023-2024, an evaluation of the organization's performance for each objective will be undertaken to determine whether the target was met, or partially met, and whether the full amount or any portion will be paid. The Board/Governance Committee will determine the pay per performance amount for the President/CEO, who will do so for the remaining eligible executives.

Contact Information

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Sign-off

I have reviewed and approved our organization's Quality Improvement Plan for 2023-24

Hownd Babau

Board Quality Committee Chair



Board Chair

President & Chief Executive Officer

March 2, 2023



Waypoint Centre For Mental Health Care 500 Church Street, Penetanguishene, ON, L9M1G3 Type Legend

CENTRE de SOINS de	SANTE MENTALE	Type Legend M - Mandatory	P - Priority	C - Custom											
AIM		Measure		Unit /			Current				Change Planned improvement			Target for process	5
Issue	Quality dimension	Measure/Indicator	Туре	Population	Source / Period	d Organization Id	l performance	Target	Target justification		initiatives (Change Ideas)		Process measures	measure	Comments
		1						M = Ma	andatory (all cells must be completed) P = Priority (complete ONLY the comme	nts cell if you are not working	on this indicator) C = custom	a (add any other indicators you are working on)			
Theme I: Timely and Efficient Transitions	Efficient	Alternate Level of Care (ALC) Throughput. The ratio of the number of discharged ALC cases to the number of newly added ALC cases within a specific period of time	Ρ	All inpatients	Local Data Collection / 2022-23	972*	0.9	1.00	Waypoint historically negotiates the ALC target as part it's Hospital Service Accountability Agreement based Q3 YTD performance. We strive to maintain that Q3 YTD performance of 0.9 ALC throughput 2022-23, and work toward further increase through 2023-24. Given the current ALC environment related to the system inter- dependencies to Waypoint patient movement (e.g., housing), the ALC throughput is at risk of trending downward over the next few years.	Ontario Health Team for Specialized Populations,	searching for client housing	t Implement a Housing Resource Center	 Launch Housing resource toolkit # staff oriented to the Resource Centre toolkit # staff oriented to partner resource 	Initiate by June	Standardized resources and processes, implementer with via community agencies, anchored by a hospit Coordinator will increase efficiency of housing search staff and partners who receive the refer
											2) Implement ALC leading practices	Build upon industry standards used in acute care settings	% self-assessment gaps addressed	TBD once self- assessment complete	
Theme II: Service Excellence	Patient-centred	Percent positive response to the OPOC survey question "I think the services provided here are of high quality"	e C	% / Mental Health - Inpatients	Ontario Perception of Care Tool for Mental Health / 2021-22		70%	75%	This year's target is aligned with Waypoint's Quality Risk Safety Plan goal to improve patient satisfaction by 25% by 2023, and to exceed at least 50% peer specialty psychiatric hospitals. Pandemic response delayed the 2021 survey. Current performance cites 2021-22 results including both inpatient and outpatient targets.	Patient Client & Family Council	1)Implement Health Quality Ontario hospital quality standards for schizophrenia	To be monitored by project evaluation committe	 long-acting injectables offered and received % clozapine offered and received % patients screened as appropriate % patients referred for Cognitive Behavioural Therapy for psychosis # of Quality statements implemented 	1) 50th %'ile 2) 50th %'ile 3) 50th %'ile 4) 50th %'ile	This work is a partnership with the specialty psychiat being implemented in partnership with a community
											2)Increase activities available to patients during their free time	To be monitored by the Rehabilitation & Transition Services team	 (1) Number of after hours programming per wee available to inpatient units (2)The number of weekend services offered 	k Collecting baseline	Until November 2022 off program activities were reac COVID, since then IPAC directives and the end of star have allowed for off program activities to increase w infection control guidelines. Inpatient and outpatient satisfaction rates will be bro during reporting to improve our understanding of wh focus our improvement activities.
		Percent positive response to the OPOC survey question "I think the services provided here are of high quality"	c C	% / Mental Health - Outpatients	Ontario Perception of Care Tool for Mental Health / 2021-22	972*	98%	98%	This year's target is aligned with Waypoint's Quality Risk Safety Plan goal to improve patient satisfaction by 25% by 2023, and to exceed at least 50% peer specialty psychiatric hospitals. Pandemic response delayed the 2021 survey. Current performance cites 2021-22 results including both inpatient and outpatient targets.	Patient Client & Family Council	1)Implement Health Quality Ontario hospital quality standards for schizophrenia	To be monitored by project evaluation committe	 long-acting injectables offered and received % clozapine offered and received % patients screened as appropriate % patients referred for Cognitive Behavioural Therapy for psychosis # of Quality statements implemented 	1) 50th %'ile 2) 50th %'ile 3) 50th %'ile 4) 50th %'ile	This work is a partnership with the specialty psychiat being implemented in partnership with a community
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Theme III: Safe and Effective Care	Effective	Total Margin: Total Operating Surplus (Deficit) with amortization added back divided by Revenue (expressed as a %)	С	% / organizational	Local Data Collection/ 2022-23	972*	2.99%	0%	To maintain a positive fiscal standing within an acceptable performance corridor, with a lower limits not less than 0%		 Decrease staffing costs Decrease staffing costs 	Reduce sick time Reduce overtime	Improve % of staff on an Attendance Support Program (ASP) contracts Decrease unapproved leave of absence	100%	
	Safe	Workplace Violence Frequency (Lost time claims per 100 full time equivalents)		Rate per 100 / Worker	, Local data collection / 2022-23	972*	2.8	1.5	Maintain at 1.5 incidents 100 full time equivalent staff hours. This is an index indicator and the target represents one or fewer long term injuries per month. Any value exceeding the target represents two o more long term injuries per month. The performance goal is to sustain and stabilize performance during 2023-24, with a focus on continuous improvement of multiple processes put into place over the past number of years (See previous QIPs)			 To be monitored by program Business Review meetings and through Harm A3 with updates at Leadership Team & Leadership huddles along with SLT reporting all to the Board Quality Committee. 	 (1) Number of staff and patient injuries (2) Number of planned room entrance interventions (3) Adherence to standard work (4) Safewards and 6 core strategies are being implemented to decrease patient and staff injuries. 	TBD	The intent of the initiative is to reduce the frequency and to make them safer, with a goal of zero staff and per year. Implementing Therapeutic intervention training to un to address escalating interactions with patients will be planned work in Safewards and 6 Core strategies.
		Workplace Violence Severity (Lost time claim days per 100 full time equivalents)	C	Rate per 100 / Worker	, Local data collection / 2022-23	972*	19.2	25.0	Experience with this measure shows that a single extended staff health leave has a dramatic effect on performance. Given the fluctuation in this measure over time, the goal is to sustain and stabilize performance during 2023-24, with a focus on continuous improvement of multiple processes put into place over the past number of years (See previous QIPs)		1) Improve the execution of planned room entries.	To be monitored by program Business Review meetings and through Harm A3 with updates at Leadership Team & Leadership huddles along SL all reporting to the Board Quality Committee.	 (1) Number of staff and patient injuries (2) Number of planned room entrance T interventions (3) Adherence to standard work (4) Safewards and 6 core strategies are being implemented to decrease patient and staff injuries. 	TBD	The intent of the initiative is to reduce the frequency and to make them safer, with a goal of zero staff and per year. Implementing Therapeutic intervention training to un to address escalating interactions with patients will be planned work in Safewards and 6 Core strategies.

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