

Quality Improvement Plans (QIP): Progress Report for 2019/2020 QIP

Workplace Violence Prevention - Expansion of HPHA processes to outpatient mental health & sustainability of Critical Care Indicator model

ID	Measure/Indicator from 2019/20	Org Id	Current Performance as stated on QIP2019/20	Target as stated on QIP 2019/20	Current Performance 2020	Comments
1	Number of workplace violence incidents reported by hospital workers (as defined by OHSA) within a 12 month period. (Count; Worker; January - December 2019; Local data collection)	9999991	57.00	100.00	152	RL6 reports included specific event type: Abuse/Assault Physical, Abuse/Assault (Verbal), Code White, Disorderly Person, Violence to Worker

Realizing that the QIP is a living document and the change ideas may fluctuate as you test and implement throughout the year, we want you to reflect on which change ideas had an impact and which ones you were able to adopt, adapt or abandon. This learning will help build capacity across the province.

Change Ideas from Last Years QIP (QIP 2019/20)	Was this change idea implemented as intended? (Y/N button)	Lessons Learned: (Some Questions to Consider) What was your experience with this indicator? What were your key learnings? Did the change ideas make an impact? What advice would you give to others?
<p>Within the broader Critical Care Indicator (CCI) program and focused on individuals with a History of Violence (HOV) and /or Specialized Care Plan (SCP), develop the process to expand the implementation of the Violence Assessment Tool (VAT) to HPHA Outpatient Mental Health Services. Includes:</p> <ul style="list-style-type: none"> • Staff education and training • Documentation practices • Communication expectations 	Y	<p>Describe your experience with this indicator:</p> <p>This indicator is an extension of last year’s QIP aimed at addressing Workplace Violence. Including processes to identify patients/clients displaying certain behaviours in the Outpatient Mental Health environment will assist the organization in ensuring violent/potentially violent behaviours are identified, staff are protected and patients/clients receive appropriate care.</p> <p>What were your key learnings? Application in Outpatient Mental Health Services was heavily dependent upon effective communication within the team and across teams. All teams had an appreciation and understanding of the importance</p>

Update current HPHA CCI policy to support expansion of VAT assessment and communication within Outpatient Mental Health Services.

Ensure sustainability of the HOV and SCP components within the corporate HPHA CCI program to support the HPHA Workplace Violence Program through the development of a comprehensive protocol that meets Occupational Health and Safety Act and Accreditation Canada guidelines.

Ensure sustainability of the HOV and SCP components within the corporate HPHA CCI program to support the HPHA Workplace Violence Program through the development of a comprehensive management protocol

coordinated care planning has on outcomes for our patients and on staff safety. Collaborative team communication included individual client assessments upon patient/client presentation and again during regular team reviews.

We were able to achieve success by identifying a key individual to lead the organization through this process enhancement, having active support from the Manager Outpatient Mental Health and the expertise of IT to incorporate changes in the corporate electronic medical record.

Did the change ideas make an impact?

At the time of this report (Feb 24, 2020), the processes required to support this enhancement on an ongoing basis have recently been finalized. For this reason, it is premature to evaluate the effectiveness of this change for the Outpatient Mental Health programs. Positive impacts from the implementation of this initiative in 2018/2019 have been sustained throughout the inpatient units and similar outcomes are anticipated for the safety of both staff and patients.

What advice would you give to others?

Collaborative efforts between all stakeholders (e.g. mental health, patient registration, IT, Quality Improvement, Workplace Health & Safety, patient partners and staff) are essential to ensure all requirements and issues are identified and considered during the development and implementation of workplace violence initiatives.

The HPHA policy has been updated to include the Violence Assessment Tool and Critical Care Indicators processes for outpatient mental health services.

A Violence Assessment Tool and comprehensive reporting protocol that best reflected the outpatient mental health population has been implemented.

Workplace Violence reports have been created for leaders (daily), Management Committee (monthly) and the respective Board sub-committee (quarterly).

A harmonized Incident Management policy was developed and implemented amongst the seven Huron Perth Sub-Region Accreditation Team partners. The Huron Perth Healthcare Alliance incorporated an organization-specific addendum to reflect internal processes and resources.

A Violence Assessment Tool and comprehensive reporting protocol that best reflected the outpatient mental health population has been implemented.

At time of this report (February 24, 2020), a report has been built to capture VATs reporting observable threatening behaviours and the corresponding RL6 employee incident report; this report requires further

that meets and supports increased awareness and effective management of workplace violence.

attention given the inpatient and Emergency Department data in Meditech. Once this reporting structure is finalized, these details will be incorporated into the monthly report to the Management Committee. An audit conducted February 11, 2020 indicated that 31 of 32 (97%) workplace violence RL6 incidents had documented investigation, follow up and review by the respective manager and/or Workplace Health & Safety Business Partner at the time the incident was closed.