

Quest cohort 3 project summaries

Introduction

Quest cohort 3 consisted of seven teams beginning their Quest journey in January 2023. Teams finished the cohort activities in December 2023. Cohort 3 projects focused on themes related to improving access, brief services, and organizational systems. Read their summaries below.

Children's Mental Health of Leeds and Grenville (CMHLG): Ensuring timely and effective care with limited staff

What was the opportunity?

CMHLG wanted to ensure they were effectively using their clinical time to meet the ever-growing needs of their community. They had experienced a recent increase in demand and clients were being impacted by longer wait times. A previously created target for direct services hours did not consider significant service coordination work and was not representative of the current landscape. The agency identified an opportunity to increase their understanding of not only what goes into direct service hours, but also all clinical hours, to become more efficient and better serve the needs of their clients.

What was the goal?

The team set out to create an accurate expectation for how clinicians spend their time (direct, indirect, other) and use the information to build efficiencies in how they serve their clients.

What were the improvements?

- Defined all the activities that make up a clinician's workday and categorized them into direct service hours, indirect service hours, and agency functions.
- Pilot-tested with a select group of clinicians to provide more insight into where most clinician hours are spent. This has since broadened to include more clinical staff for a longer period, to gather more accurate data.
- Plans to streamline and standardize the processes to collect this information, so that the team can set reasonable and achievable targets and use the data to identify areas to create efficiencies.



What was the impact?

Much of the work of the project implementation is still ongoing so the agency does not yet have data on improvements.

FIREFLY: Episode of care

What was the opportunity?

FIREFLY observed that the majority of clients were experiencing lengthy wait times for counselling after receiving brief services. This led to inconsistencies in the client journey, which resulted in frequent changes in clinicians, clients retelling their stories multiple times, less therapeutic engagement, and client confusion. Clinicians also expressed frustration navigating the multiple pathways for themselves, as well as for clients and families. This issue was consistently reported by clients, families, clinicians, clinical managers, and community partners.

What was the goal?

The team set out to shorten the average wait time between brief services and counselling/therapy and to reduce the percentage of clients going on a waitlist. Additionally, they aimed to prioritize high-risk clients by appropriately rating severity at the initial assessment using a new screening tool. The goal was to increase overall client outcomes and satisfaction as well as shorten length of time in services. Over time, the team would like to eliminate any wait time between brief services and counselling/therapy for all clients.

What were the improvements?

- Mapped out the entire episode of care processes in child and youth mental health and made changes to the flow of clients into service, so that clients are no longer being booked into an initial session calendar during Intake.
- Embedded a new screening tool that uses priority ratings. This facilitates proper prioritization of clients entering counselling services.
- Reviewed and contracted reports in shorter periods of time.
- Focused on EMHware data clean-up to ensure data accurately represents the client journey.



What was the impact?

Much of the work of the project implementation is still in progress so the agency does not yet have complete data on the improvements. However, with the first set of improvements in the summer (primarily involving data clean-up), they observed a 20% decrease in their wait numbers. The team plans to replicate and spread their wins – particularly in communication and change management – across their agency.

Hands TheFamilyHelpNetwork.ca: Enhancing data and evidence-informed system planning

What was the opportunity?

HANDs, the lead agency, in collaboration with Simcoe Muskoka Family Connexions (SMFC) and Community Counselling Centre of Nipissing (CCCNip), identified limitations in their data, the quality of their data infrastructure, standardized data processes, and human resource capacity. Insufficient data was evident in their client information system (EMHware) and other data sources. This resulted in increased effort and duplication when collating useful data for the core service table. Ultimately, these limitations restricted the depth and breadth of evidence available for the service agencies to make informed decisions on how to effectively meet the needs of their clients and communities.

What was the goal?

The objective of this project was to standardize key performance indicators (KPIs) across the three agencies. The team ultimately focused on 10 KPIs from the Business Intelligence (BI) solution, developing a process that can be applied to standardizing future indicators, including aspects such as data definitions, data entry/extraction practices, and more. They also aimed to have a standardized location to store their data. The goal is to replicate this process until all KPIs from the BI solution are standardized. This will enable all three agencies to build and extract reliable and accurate data to support evidence-based decision-making and planning for their service area. The project also focused on improving data literacy and competency of staff within the agency.



What were the improvements?

- Developed a structured process for reviewing, selecting, operationalizing, and storing new KPIs and data.
- Created a shared space on SharePoint to store data and other resources such as dashboards, past reports, and training material.
- Improved data literacy and data capacity through consistent engagement and training efforts.

What was the impact?

Establishing a shared data space on SharePoint has streamlined access to local data, fostering collaborative efforts in decision-making. Simulation of extraction workflows and the data validation and analysis process were discovered through a pilot test of three indicators. Mock dashboards have been created and are being used as a communication tool to engage support from the leadership team.

Hands, SMFC, and CCCNip anticipate achieving a standardized set of KPIs as they replicate this process in the future. They plan to continue effective communication between all partners to facilitate buy-in. Once they have collected enough data, they plan to set short- and long-term targets and benchmarks to help inform decisions and future QI initiatives.

Keystone Child Youth & Family Services: Brief services quick response model review and redesign

What was the opportunity?

Since the onset of the COVID pandemic, Keystone was seeing an increase in referrals for service and in the complexity of cases, while also experiencing staffing shortages. Families were wanting to have ongoing counselling service at intake; however, the demand for ongoing counselling services was higher than the agency's capacity, due to staff turnover. As well, Keystone's intake process was not fully streamlined, causing their waitlist to grow, as there was no definition or structure for their brief services and counselling services. In addition, there was an increase in no-shows, cancellations, and rebooking of appointments for brief services.



What was the goal?

Keystone's goal was to streamline and standardize the internal processes. They wanted to have clear definitions for walk-in, single session, and brief services that would be communicated amongst staff and partners, and with the community. They also wanted these definitions reflected in the client information system (EMHware) and on Keystone's website. They aimed to meet ministry targets and client satisfaction for clinical services, and to decrease no-shows by having clearly defined and streamlined internal processes communicated across the organization.

What were the improvements?

- Delivered a single session therapy training for all clinical staff.
- Established clear definitions, structure, language, and the pathway for services falling under the brief services umbrella.
- Adopted a standardized screening tool at the first single session appointment.
- Offered regularly scheduled psycho-education groups.
- Designed a new client feedback survey.
- Created policies, such as a discharge policy, to support brief service flow with clear time parameters and protocols.
- Standardized improvements are reflected in the client information system (CIS) and communicated to staff, as well as to partners, and clients with an updated website.

What was the impact?

The pathway for brief and ongoing counselling services at Keystone incorporates clinical insights to guide the journey and implement measures to prevent bottlenecking of clients. The improvements include a standardized definition of brief service that did not exist before, enhancing clarity for clients and staff. This standardized definition incorporates changes in language, aligning Keystone brief service and CIS terminology with Ontario Ministry of Health terminology.

The team made discoveries related to the validity of their data, prompting Keystone to advocate for changes within EMHware to improve monitoring of their services.

A new process of regularly collecting and incorporating client feedback was also developed and



implemented, fostering Keystone's commitment to a continuous improvement mindset.

Phoenix Centre: Questing towards strong recruitment and retention at the Phoenix Centre

What was the opportunity?

The Phoenix Centre recognized the need to improve the recruitment and retention of skilled and experienced family and child therapists. This challenge impacted their service delivery model, organizational reputation in the community, clinician well-being, and quality of services. Clients often expressed frustration regarding frequent changes of therapists and needing to “start over” when a transfer from an existing therapist to a new therapist occurred.

What was the goal?

The goal of this project was to improve both the recruitment process and retention practices to decrease the number of therapist vacant positions and decrease their therapist turnover rate.

What were the improvements?

- Streamlined their recruitment strategy by introducing a pre-screening checklist and pre-interview questions to ensure only qualified applicants proceed to the interview phase.
- Implemented PXT, a personality/job fit assessment, to match potential candidates against the performance model for the position. This tool also helps with coaching and onboarding by identifying specific areas of strength and weakness during the onboarding process for new therapists.
- Addressed staff retention by implementing incentives such as dedicated team-building days and employee wellness days.
- Incorporated work-life balance opportunities and challenges as part of their regular supervision to improve communication between therapists and their managers/supervisors. Further to this, they modified their supervision forms to address concerns with work-life balance and introduced “transparency time” to team meeting agendas.
- Changed how cases were assigned to therapists, including brief therapy and intensive cases, to ensure a more balanced caseload and a more equitable distribution of evening sessions to



improve access for children and families.

- Implemented a new total compensation and reward project with guiding principles, decision-making process regarding compensation for hiring managers, and a competency-based compensation approach.

What was the impact?

The Phoenix Centre has seen a significant reduction in the time it takes from posting a job opening to completing interviews with selected candidates. Changes to their supervision template and team meeting agenda have fostered an environment of open and transparent communication, particularly in the areas of self-care and mutual support. They continue to monitor changes, such as the availability of evening appointments and the expectations regarding how those appointments are scheduled.

Implementing new employee incentives, as well as increasing emphasis on honest and transparent communication, have made positive changes in the overall agency culture. Staff have reported feeling supported and heard in relation to work-life balance.

Woodview Mental Health and Autism Services: Improving access to services

What was the opportunity?

After implementing CAPA (Choice and Partnership Approach) at Woodview's Brantford location, new challenges with intake began to emerge. Receiving referrals through multiple channels with an unclear internal process post-referral led to inconsistencies in the intake process. This resulted in confusion for families and service providers, inefficient use of time and resources, and internal staff inconsistencies.

What was the goal?

The goal of this project was to improve the efficiency of the intake process by increasing the number of staff who find the process easy to understand, communicating better with families and service providers, and decreasing the number of steps in the process. The changes would be measured by overall satisfaction from staff, families, and referral sources.



What were the improvements?

- Developed a new simplified process.
- Ensured new practices and policies were well documented, for consistency and efficiency.
- Embedded automation in the process wherever possible, by developing customized referral links on the website, for example. Technology was also leveraged by using EMHware, QR codes, and Woodview social media and website.
- Streamlined referrals and built efficiencies between mental health and autism services to ultimately help clients and families navigate between these services more seamlessly.
- Plans to improve their data capacity by increasing their use of dashboards and analytics.

What was the impact?

Though most data on the improvement results is still forthcoming, the project has had some positive impacts so far. Staff members now have a better understanding of the intake process. Feedback from referral sources, such as pediatricians, has been positive, citing improved clarity of the intake process and a better understanding of what services are available. Complaints from families concerning duplicate intake appointments have also decreased significantly.