

## **New quality standards for mental health “a hallmark achievement”**

### *Quality Rounds: Implementing quality standards at Ontario Shores*

Three quality standards for mental health developed by Health Quality Ontario received high praise and a detailed overview at one of the best-attended Quality Rounds held to date.

In addition to the on-site audience at Ontario Shores Centre for Mental Health Sciences in Whitby that attended to hear the inspirational address from Dr. Philip Klassen, more than 70 sites viewed the event remotely through the Ontario Telemedicine Network.

In introducing the session, Ontario Shores President and CEO Karin Mamdani described the standards as “a hallmark achievement for mental health care in Ontario.”

Mamdani said the standards released last fall, which deal with major depression, schizophrenia and the behavioral symptoms of dementia, provide key opportunities for improvement in treatment.

“Ensuring consistent, strategic and exemplary care for patients and families is at the root of quality and these new standards,” he said.

“Mental health care does not have an extensive history of working together,” Mamdani said, yet collaboration was at the core of the successful development of the standards.

“These standards reflect an evolving health care environment in which multiple voices are being heard. This is an example of patients, families and providers working together to create a standard which will enhance care across the province for people who will need us both today and tomorrow.”

The main presentation by Klassen, a psychiatrist, vice president of medical affairs at Ontario Shores and co-chair of Schizophrenia- Care in Hospitals Quality Standard Advisory Committee, dealt with the development process for the quality standards with a focus on implementation at his institution.

Klassen said some of the statements in the three quality standards for mental health represent “a really challenging call to the health care community to produce real change when it comes to issues of access and in adding psychotherapy to medication treatment ...”

He said the standards were specifically developed because of the heterogeneity in care in the clinical areas involved and in the potential for improvement.

“It’s kind of a unique feature of mental health professionals that we have enjoyed enormous autonomy ... but autonomy can lead to variability and variability usually leads to some problems with quality.”

Klassen believes the implementation of quality standards will help drive a more measurement-based culture in mental health.

He also said he hoped quality standards will help drastically reduce the translation gap for the routine application of new knowledge which has currently been pegged at 17 years.

He singled out for special praise the plain language summaries for consumers that accompany each quality standard. He said he anticipated patients and their families reading the standards and entering into discussions with their provider about what care they should appropriately receive.

Ontario Shores has had a head start on implementing the quality standards as a result of already working to implement clinical practice guidelines in the same areas of depression, schizophrenia, and behavioral symptoms of dementia.

“We have shifted now to the quality standards approach but there is a lot of carryover and a lot of learnings,” Klassen said.

“One very important enabler was an excellent technology platform,” he noted, but added he did not think institutions needed to have the same degree of digital sophistication in using electronic health records as Ontario Shores in order to be successful.

He said institutions do not need to implement all three quality standards at once and could phase in the standards or elements of standards.

“You will find that implementing all three, as we will do here by March 31, is a big chunk of work and will require some resources and some preparation.”

Klassen said smaller organizations may want to address this by partnering with other organizations and also focus on only some of the 89 clinical indicators spelled out by Health Quality Ontario for the three standards.

In addition to the importance of having solid data and rigorous measurement to successfully implement the standards, Klassen also talked about the importance of ongoing communications and the need to have a supportive culture.

Overall, Klassen’s message was that taking a quality improvement approach to understanding and changing current practice in mental health is not only possible but desirable to positively impact patient care.