



## CASA Child, Adolescent and Family Mental Health

### Accredited with Commendation

October, 2017 to 2021

**CASA Child, Adolescent and Family Mental Health** has gone beyond the requirements of the Qmentum accreditation program and is commended for its commitment to quality improvement. It is accredited until October 2021 provided program requirements continue to be met.

**CASA Child, Adolescent and Family Mental Health** 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 **CASA Child, Adolescent and Family Mental Health** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

### **CASA Child, Adolescent and Family Mental Health (2017)**

CASA Child, Adolescent and Family Mental Health is a non-profit community organization that provides addiction and mental health services to infants, children, adolescents and their families in Alberta, with a concentrated effort in the Edmonton area and Northern Alberta. For over 25 years CASA has been recognized as a family-centred, community driven organization that is focused on the prevention and early identification, and assessment and treatment of addiction and mental health disorders.

### **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

October 15, 2017 to October 18, 2017

### Locations surveyed

- **4** locations were 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 Commendation** as of the date of this report.

See **Appendix A** for a list of the locations that were surveyed.

### Standards used in the assessment

- **5 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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Child, Adolescent and Family Mental Health is a community-based, non-profit mental health and addiction services provider created in 1991. It provides comprehensive assessment, treatment and consultation services in the Edmonton area and Northern and Central Alberta. In the past year, it served 4,300 children and their families. It has 150 staff members.

It focuses on clinical treatment with a variety of services available. These include infant and preschool services, school age services, day programs, a residential program and a number of specialized programs and services.

The organization is to be commended for their dedication to their children, youth and families. It is actively engaged in many quality initiatives. An affiliation with the University of Alberta provides an excellent link for investigative opportunities. A dedicated team for evaluation and research is further evidence of its commitment to evidence based practices.

Communication with such a complex organization is always demanding. There appears to be good connections by board members and with funders. An opportunity appears to be the communication pathways with community service partners. A lack of knowledge about the strategic plan, the planning of the operations and understanding regarding the philosophy regarding the programs of the corporation was expressed by the community service partners. A lack of inclusion in the strategic planning was identified. Community partners also felt that there was inadequate consultation and insufficient negotiation on points of disagreement. Opportunities for communication could include a more regular sharing of information on the quality information plan. The website could include specifics on measurable outcomes and the advancement of the strategic plan.

The board of directors represents considerable expertise and strength from the community. It is well informed and engaged in the governance functions of the corporation. Members are carefully chosen according to a matrix of skills required to ensure a robust group of governors. The members of the board exhibit passion and commitment to safety and quality.

The strength of the board is seen in the success of fundraising ventures and community linkages to community leaders who support Child, Adolescent and Family Mental Health, CASA, and its goals.

The members of the board might consider becoming familiar with their roles and responsibilities that may occur at a time of extreme emergency. This could enable a more timely response if the board is required to become involved.

The organization has a strong leadership team of dedicated professionals. They are passionate, focused on quality and safety and committed to the values of the organization. There is a strong degree of trust between the chief executive officer and the board of directors.

Staff leadership vacancies and a lack of resources to dedicate to management positions has resulted in current members having to carry additional work loads. They have done an excellent job in maintaining the required work of a leadership team. The risk of creating a system that cannot be sustained has been identified. Organizational leadership needs to be mindful of the possibility of middle management burnout. The challenge of competing with other employment opportunities that provide a greater compensation package is known. There is advocacy to address the issue of wages.

The work of engaging a consultant to assist in the evaluation of the current structure and the needs of the organization is an excellent plan. This planning may permit the organization to assess their capacity and plan for the future. While the incumbents have done a great job of ensuring good organizational management, consideration of future leadership demands might assist in a continuance of the success of the organization.

The staff of CASA are highly committed to providing quality services children, youth and families. Staff are dedicated to supporting practices that support best service outcomes. There is a strong commitment to teamwork and knowledge sharing. Staff benefit from the organization's substantial support of education and training opportunities. They are doing more with less. The organization is attentive to the quality worklife as evidenced by the improvement strategies linked to the Worklife Pulse. The organization is commended for the value placed on student and volunteer engagement – a benefit for clients, students and staff.

CASA provides a wide range of mental health and addiction services for children aged 0 to emerging adults over 18 years and their families. These services address the spectrum of needs including higher intensity day treatment and residential services. Operating from a family-based approach, CASA is commended for the meaningful and substantive engagement of youth and families in service delivery and planning. Additionally, CASA is commended for the multi-disciplinary approach to service delivery. CASA is piloting a new intake process, streamlining steps to better access for clients and their families. The team is encouraged in their work to reduce duplicate access processes for clients and facilitate more timely service response. The high turnover of staff members leads to gaps and breaks in the continuity of care. An increased length of staff for in-patients and an increased length of treatment for out-patients could result from these vacancies.

The organization has done an outstanding job of supporting a Youth Council and a Family Advisory Council. The former group has produced several outstanding issues of a magazine 'Unseen' and its

efforts to provide advocacy for young people are truly commendable. The Family Advisory Council is an active group of parents and caregivers who want to make a difference at CASA. The chief executive officer wisely encouraged family members who were unhappy with their experience at CASA to join the Family Advisory Council. This has resulted in a greater degree of involvement and understanding as well as considerable passion for quality and consistency.

Client satisfaction surveys are a key part of the quality plan. They receive attention and action for improvements.

Families appreciate the quality of care provided for their children and for themselves, as part of the service for their child. Also, families noted the tools and support provided to them helped them feel more confident and successful in helping their children. Finally, families are encouraging CASA to extend hours of service to include evening and weekend services as access during daytime hours is a service barrier.

CASA is dedicated to moving forward on safe and quality services for the people it serves.

## 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.

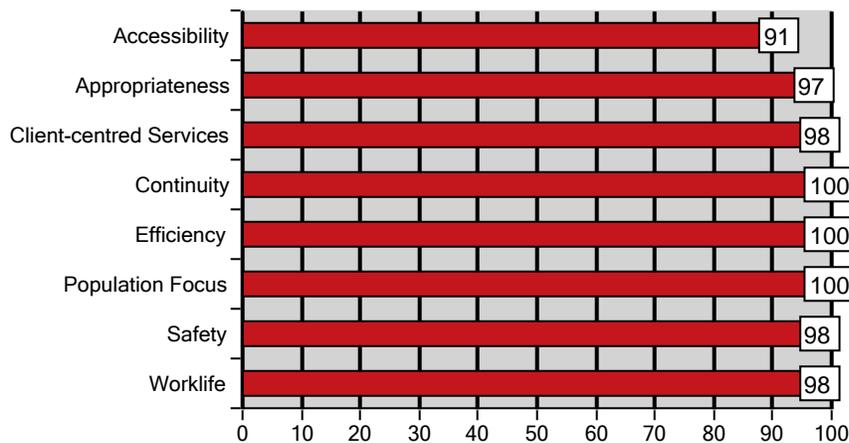
The quality dimensions are:

	<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

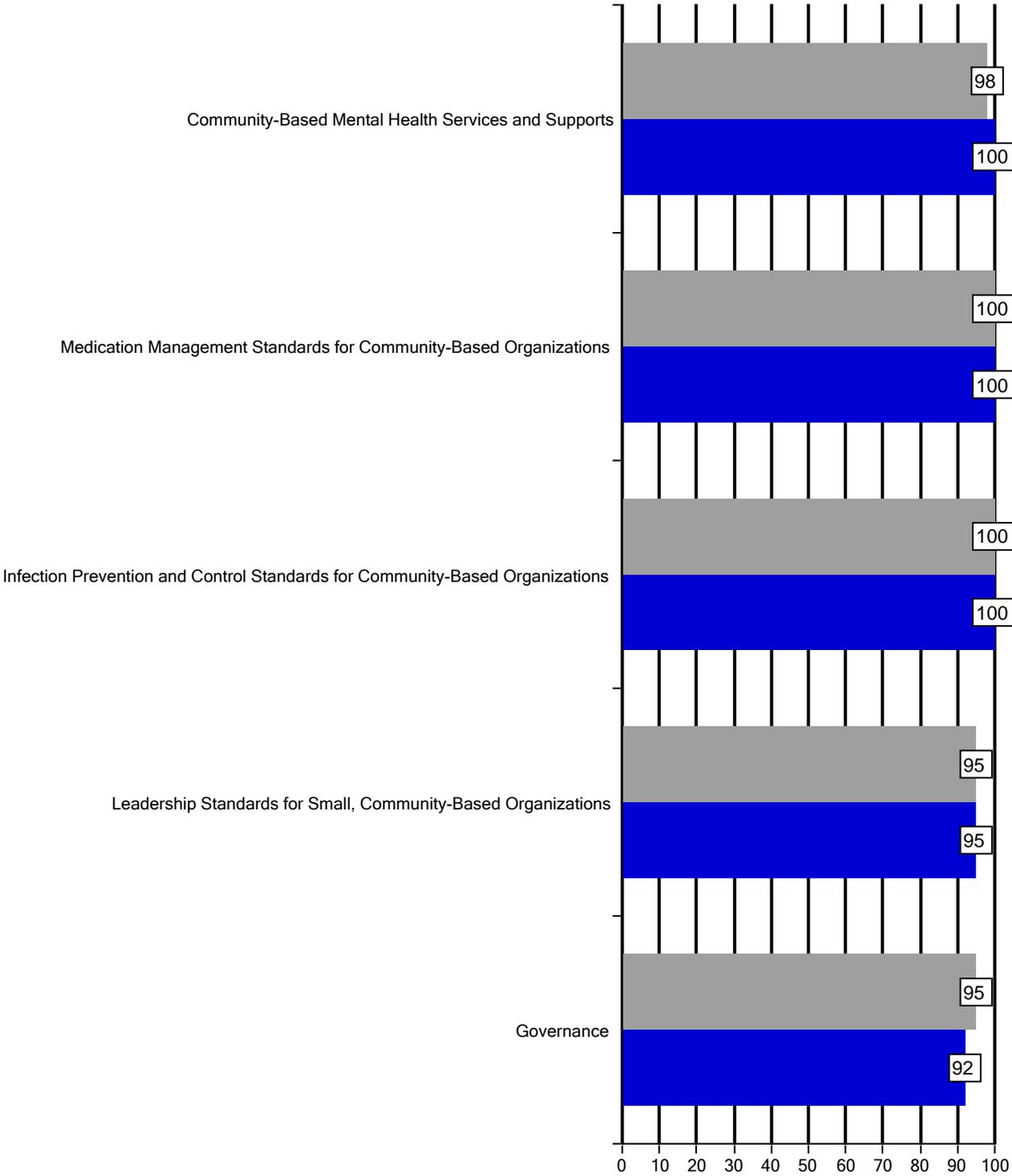
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

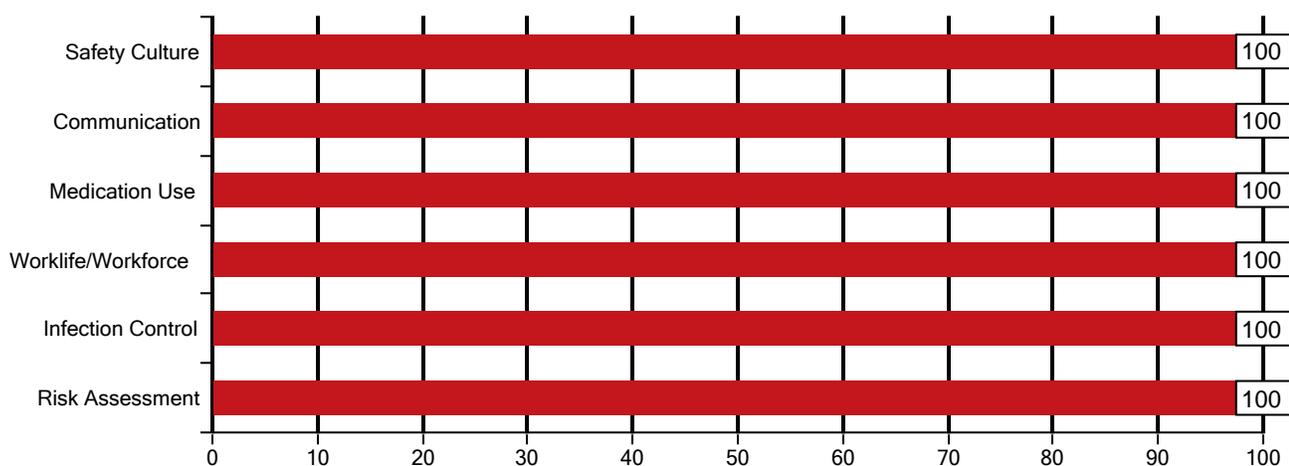
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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



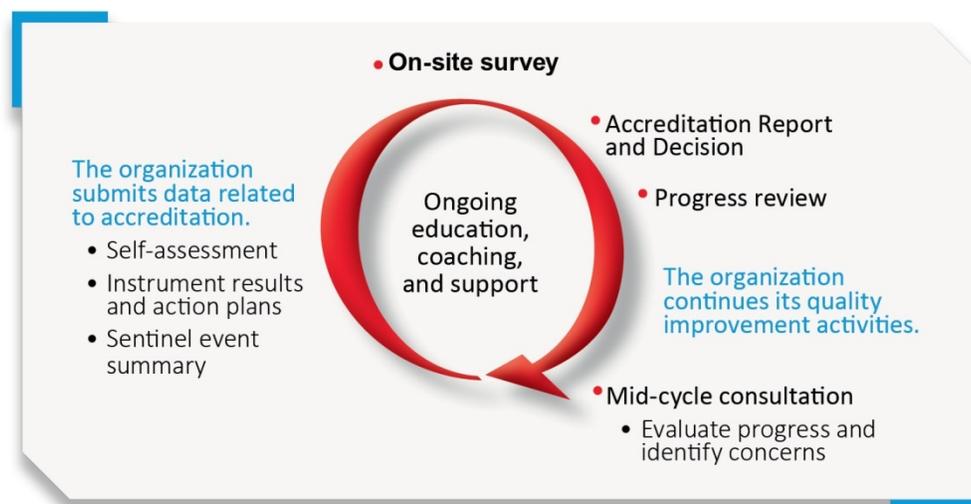
## The quality improvement journey

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 **CASA Child, Adolescent and Family Mental Health** 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 CASA Centre
- 2 CASA Downtown
- 3 CASA Fort Road
- 4 CASA House

## 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
  - Medication reconciliation as a strategic priority
  - Medication reconciliation at care transitions
  - The “Do Not Use” list of abbreviations
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#### Medication Use

- High-Alert Medications
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#### Worklife/Workforce

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

- Hand-Hygiene Compliance
  - Hand-Hygiene Education and Training
  - Infection Rates
  - Reprocessing
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#### Risk Assessment

- Suicide Prevention
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