Poster Title: Care Pathway: Schizophrenia Quality Standards Implementation

Hospital/Organization- Southlake Regional Health Centre, Newmarket, ON

# Poster authors'/ contributors

- Arjun Mehta Clinical Observer
- Thivya Sornalingam- Project Manager, Office of Strategy Management
- Aga Dojczewska Manager, IP Mental Health
- Monika Samant –Lead, Adult Crisis Team
- Jacquii Anderson Manager , IP Mental Health
- Jeanette Conceicao Team lead , Clinical Information
- Rehnuma Tabassum Nurse Educator
- Dr. Mahdi Memarpour Chief of Psychiatry
- Stella Johnson Director Mental Health
- Dr Gaurav Mehta Deputy Chief of Psychiatry

## Contact – Dr Gaurav Mehta gmehta@southlakeregional.org

**Topic:** A major transformation is taking place in the development of schizophrenia treatment care pathway, by creating more comprehensive management plan in Ontario hospitals. Based on the health quality Ontario quality standards in schizophrenia, this is seen as the best practice backed by evidence based medicine. Earlier use of medication, such as Clozapine and LAIs, smoking cessation advice, recommending healthy eating and exercise, all are strong pillars of these recommendations, along with offering CBT and physical health monitoring.

**Methodology:** This included various steps such as Project Planning, Project Governance, Gap analysis, creating Action plan for Gaps, Ontario Shores Site visit, Develop processes/workflow, Change Management Plan, Ontario Shores Indicator Document, Build documentation (Meditech), Performance Management Framework (KPIs), Data Collection and Submission and Implementation.

We used the following process indicators for Percentage of adults admitted to hospital with a primary diagnosis of schizophrenia about-

- Receiving a comprehensive interprofessional assessment
- Assessed for substance use disorder
- Poor response treatment with at least two antipsychotic medications and who are offered clozapine
- Being offered a long-acting injectable antipsychotic medication
- Screened for appropriateness of cognitive behavioural therapy for psychosis
- Offered family intervention therapy
- Care plan made available to the receiving provider within 7 days

- Experience an improvement in behavioural symptoms between their admission and discharge, stratified by their length of stay
- Experience an improvement in positive symptoms between admission and discharge, stratified by their length of stay

## Discussion:

### MediTech Build-

- Screens for GAINSS being developed
- Screens for Smoking History, BPRS-6 and Mini-FROGS developed and being reviewed
- MH Discharge Summary screens approved, being developed in live
- Screens for Physical Health Assessment being developed
- Final quality standard (Promoting Physical Activity and Healthy Eating) being reviewed with Meditech working group

### Indicators

- HBI reports created for Schizophrenia Treatment Plan and CBT/FIT
- Data submitted for select process and outcome indicators to Ontario Shores for April to July

### **Education and Training Plan**

- Education plan for nursing: Clinical champion (nursing)
- Physicians: Continue with Clinical Informatics 1:1 training sessions

#### **Smoking Cessation**

• Submission being reviewed by Ottawa Model for Smoking Cessation

## **Final Executive Sponsor Meeting**

• Achieved Level 2 status

#### **Outcome/ Summary**

We wish to present our findings, solutions, along with challenges faced in creating these pathways.