

FPH Action Plan Final Progress Report

April 15th, 2020

Improve Patient, Staff, & Public Safety

- **The top 5 security strategies** have been implemented with great results;
 - Violent incidents resulting in time loss for staff, have reduced by 27% in the last year (26 incidents in 2018, 19 incidents in 2019)
 - 8 new Clinical Security Liaison Nurse (CSLN) positions
 - 11 FSOs hired & training enhanced. Wage negotiations complete & MOU for Special Constable Status in place
 - 11 PCCs out of count
 - 3 evening & weekend Patient Care Supervisors hired
 - Hospital wide patient programming anticipated to increase by 30% with new staff
- **We have increased safety & security training completion at FPH.** Increased training opportunities include: Therapeutic and Relational Security (T&RS) introduced into orientation; a Train-the-Trainer session for CSLNs; internal delivery of monthly Introduction to T&RS sessions by CSLNs; ongoing commitment that all new staff complete T&RS training within 6 months of hire.

	March 2018	March 2019	March 2020
PVPC Curriculum	94%	97%	99.2%
PVPC refresher	0%	50%	89.3%
ATR	48%	90%	95%
T&RS	n/a	251 staff	352 staff

- **Safety & security policies have been revised & approved;** Child Visiting policy, Suicide Prevention, Code White, Code Blue and least restraint policy. Security Levels policy is being reviewed.
- **Review of incident reporting systems** (PSLS & Workplace Health Call Centre) has been completed. The working group (OH&S, Decision Support, FPH Manager & PCC) completed an audit, map of contact points for reporting events, and identified 'source of truth' for systems. Strategic Information Management team identified 'The questions we need answers for'. A one-page navigational tool for staff has been implemented. Briefing note with recommendations for FPH and PHSA has been submitted.
- A comprehensive **environmental risk assessment has been completed** and facility maintenance and renovations are underway to improve staff and patient safety. **18 bathrooms in Ashworth and Dogwood** have been renovated. The **security camera upgrade** is almost complete and will increase total number of cameras from 130 to 400. Seclusion room renovations are scheduled to begin in March. PCCs & unit clerks have access to call WSI call centre. Exterior lighting fixtures have been installed in the FPH courtyard, walkways and around the perimeter.

Improve Clinical Service Delivery & Patient-Centered Care

- **Model of Care** refresh is underway to align service delivery. Staff & physicians consulted & identified 'what currently works / doesn't work'. A FPH Visioning and Model of Care refresh day was held on December 4th. 70 staff & physicians participated in creating a shared declaration for the future of FPH, and shared innovative ideas for the future unit structure, patient mix & flow. Working groups for direct care staff and leadership were held during Jan-Feb for shared vision, patient mix, transfers and future unit structure. Consultants have started early development of the MoC document based on planning to date.
- **Patient Needs Assessment** completed and report presented to FPH leadership. Data has been synthesized & key findings were shared with staff & physicians to facilitate the discussions regarding Model of Care. Key highlights were

shared with patients, and they have provided feedback regarding 'what is important to you' and 'what are you concerned about'.

- **The roles of psychologists & clinical counselors are being strengthened.** Psychology JDs revised to clarify scope of practice and remuneration is under discussion. Two positions are being revised to establish leadership opportunities and provide career development. A map of the continuum of clinical services has been completed and competencies/training needs identified. The Model of Care will outline core clinical programming. An education session with psychologists and psychiatrists was held to discuss psychologist scope of practice.
- **Review Board reporting processes have been enhanced** to streamline the process and improve the quality of reports. Tools and templates have been developed to support the process and ensure accountability, including a risk matrix, pre-conference checklist, post hearing synopsis and administrative tools.
- **Review Board Liaisons** have created a hospital report template, are attending pre-board meetings and are presenting their reports to clinical teams for feedback. Review Board Liaison Hospital Reports are being submitted as evidence. Review Board Liaisons are delivering revised orientation education to new hires at FPH and Review Board education for FPH staff is in development.
- **Joint planning with Regional Clinics** to address FPH-Clinic process integration points. Changes include notifications to clinics on admission, adjustments to clinic admission forms for returning patients, improved planning at discharge (patient risk plan review), and joint monthly quality improvement and communications meetings. Regional clinic/FPH workflows drafted; admission, visit leave and conditional discharge.
- **Clinical workflow** maps created with input from 3 staff & physician workshops. Work continues with the Forensic Clinics to help align service flow to patient needs. The FPH Access and Transitions committee has been revised and work is underway to review the scope of the program & privileges committee. Associated documentation has been revised to streamline the process and improve patient flow.
- **Patient journey mapping** was completed with patients & direct care staff. Highlights of the patient journey map were shared & discussed with staff at the May Town Hall.
- **Clinical documentation improvements** have been implemented, with a focus on patient status & risk. The monthly chart audit has been revised & Patient Care Coordinators are completing these.
- **Care Planning** is an interdisciplinary initiative to provide structure and consistency to care planning across the hospital. Current state assessment of care planning process and review of rounds completed; agreement on health outcomes and care planning definitions; investigation of a risk behaviour tracking tool with recommendation for implementation of the Aggressive Incident Scale (AIS) tool. The AIS tool has been implemented on A4, A2, A3 & DWW with the support of Professional Practice. Detailed plan for site wide implementation developed.
- **Physician recruitment** is underway and Physician HR plan developed. A new psychiatrist started mid-November 2019. An Australian Psychiatrist completed a 5-week locum. Active recruitment continues, with 2 prospective Psychiatrists to start in June 2020. Regular meetings between FPH leadership and Forensic Physician Engagement Society. Priority actions also include admissions, video clinic for fitness assessments, workload allocation and formalizing HIS support.

Strengthen Leadership, Interdisciplinary Teamwork & Professional Development

- **Leadership team has been restructured** with an increased focus on clinical and risk management; Senior Director Patient Care Services, Director Access Transitions and Forensic Clinical Risk, Director Professional Practice & Director Allied.

- **Forensic core competencies have been developed.** A comprehensive literature review and environmental scan for forensic core competencies has been completed. Clinical core competencies have been completed by Professional Practice. Professional Practice is presenting at orientation and the CAPE tool has been introduced.
- **Staff & physician engagement** has involved 7 Town Halls including a world café & sharing of PNA preliminary results, Senior Director emails, regular updates on BCMHSUS website, staff & physician participation in planning, Review Board staff walk-through, action plan journey poster, two burrito breakfasts for staff, consultation of interdisciplinary staff and physicians on each of the units regarding PNA findings. FPH visioning day held with 70 staff and physicians. Interdisciplinary representation on working groups.
- **Professional Development** is underway. Social Work team development day held and regular team meetings to discuss and plan enhanced role expectations. Clinical Security Liaison Nurse development day held and regular team meetings to explore role definition. Antony Wragg, a Security Liaison Nurse Manager from Rampton High Security Hospital UK, returned to FPH to work with CSLNs in November 2019.
- We have partnered with WorkSafe, union leadership and health authorities to **strengthen the psychological health & resiliency of the workforce** at FPH. The Guarding Minds survey was completed by 222 staff & physicians. The results will inform a strategy to improve the psychological health and resiliency of staff.