



Ontario Shores

Centre for Mental Health Sciences

Objectives

Conference participants will:

- Gain understanding on how an organization carried out a transformative change initiative
 - Recovery and Rediscover *“Our Shared Journey”*
- Review the documented outcomes associated with this organizational change project



Ontario Shores Centre for Mental Health Sciences

- Provides a range of specialized tertiary care mental health programs for both inpatients and outpatients:
 - **Adolescents/Dual Diagnosis**
 - **Assessment and Reintegration**
 - **Special Services – Seniors, Memory Clinic**
 - **Forensics**
 - **Integrated Health Services**
- Ontario Shores began operations in 1919
- Total population served: Approximately 3 million
- 325 inpatient beds
- 1,200 staff

Ontario Shores Centre for Mental Health Sciences

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Vision

Recovering Best Health

Nurturing Hope

Inspiring Discovery



Ontario Shores
Centre for Mental Health Sciences

Strategic Direction

- We had Board of Directors and SMT support to incorporate a *Recovery* philosophy into patient care and to *Rediscover* our clinicians passion
- International partnership with University of Wollongong and Illawara Institute

Strategic Direction

- Identified direction from:
Mental Health Commissions report
“Out of the Shadows at Last”
 - The hope of recovery is available to all
Provincial strategy
“Every Door is an Open Door”
 - The recovery approach looks at the whole person and defines the person positively, focusing on their strengths and goals – rather than their illness



How we began



We had a dream....

- To ensure our patients received excellent care by practitioners who practiced Recovery Oriented Care
- To provide Recovery education to all staff
- To Rediscover the passion of our practitioners

Our Shared Journey began

Kotter's Model for Change



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Kotter's Model for Change

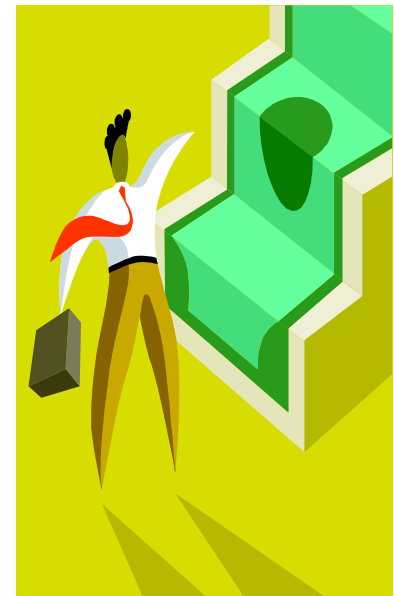
- Changing behaviour is less about providing people with analysis to influence their thoughts than assisting them in seeing a truth to influence their feelings
- “The Heart of Change is in Emotion”

(Kotter, JP., 2002)



Kotter's Stages of (Successful) Change

- Increase Urgency
- Build the Guiding Team
- Get the Vision Right
- Communicate for Buy-In
- Empower Action
- Create Short-term Wins
- Don't Let Up
- Make Change Stick



Step 1- Increase Urgency

How Did We Do It?

- Nothing creates more urgency than a time line
- Create the project plan
- Passion must be part of the urgency
- Believe in what you are doing
- Speak from the heart
- Review literature and political strategies



Step 2 – Building the *Guiding Team*

How Did We Do This?

- Include staff from all areas of the organization that embraced the change required
- Provide positive feedback and appreciation and validation to all involved
- Partnered with International experts in Recovery Orientated Care and adopted their model that was richly based in evidence-based practice



Development of Project Charter

- 5 Work Streams
 - *Curriculum Development*
 - What will staff learn and how
 - *Human Resource*
 - Impact on Performance Management Tool, orientation, interviewing process
 - *Policy and Procedure*
 - *Model of Care and Standards*
 - *Research*
 - What are we going to measure?

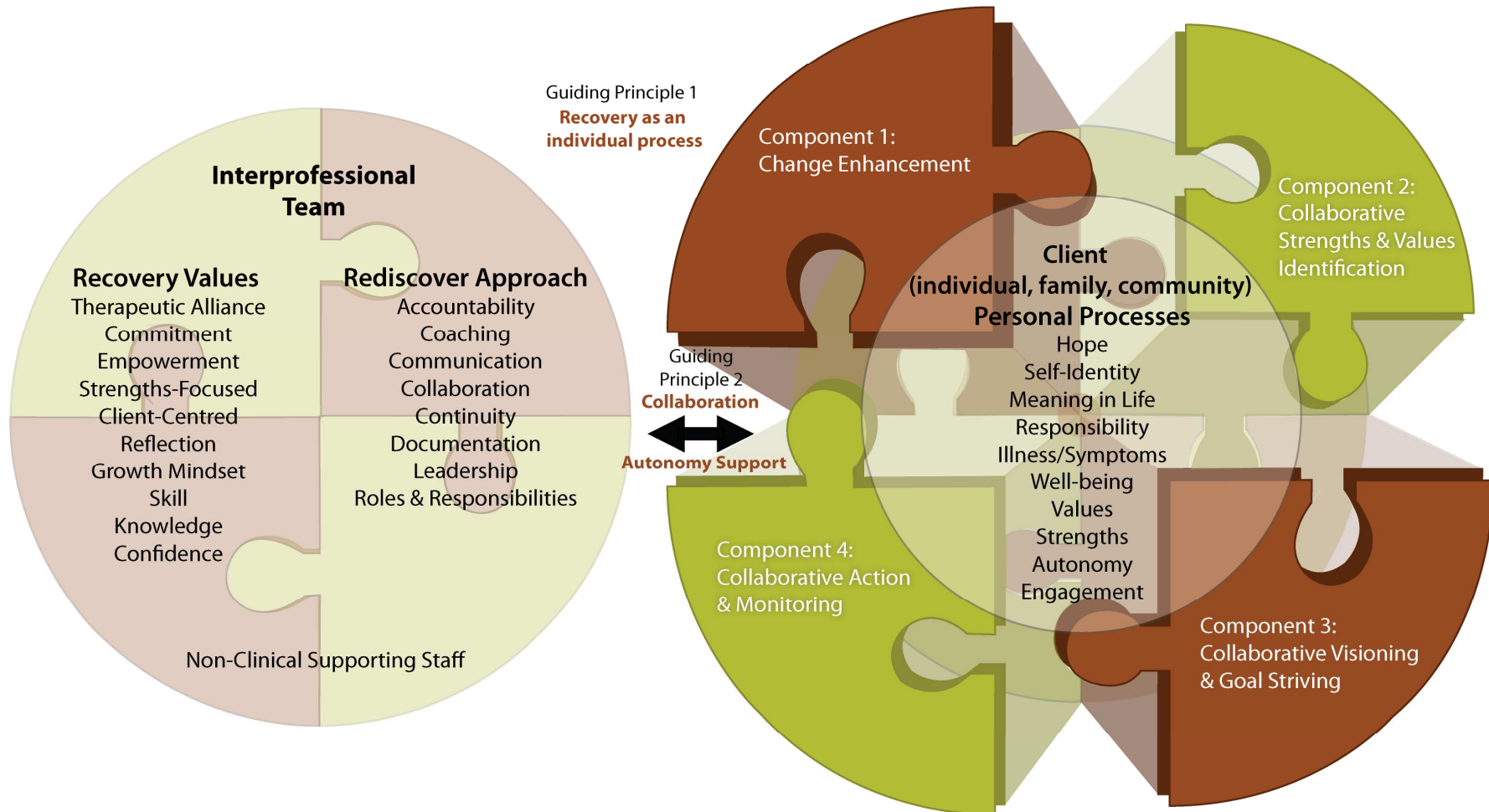
Step 3 – Get the Vision Right

What was our Vision?

- *To create an environment of excellence where clients and staff share their expertise and join in partnership to foster hope, celebrate uniqueness and promote wellness through meaningful relationships*



Ontario Shores Interprofessional Collaborative Recovery Model of Care



Excellence • Innovation • Safety • Respect • Community

Our vision is bold and transforming. Ontario Shores Centre for Mental Health Sciences is recognized by many as having an approach to mental health care and unique services that are focusing on recovery, hope, and inspiration through discovery.

Recovering Best Health, Nurturing Hope, Inspiring Discovery

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Step 4 – Communicate for Buy-in

How Did we Do This?

- Make the Communications Dept. your best friends
- Have a “Kick-Off” launch and a “Wrap-Up” party
- Celebrate successes
- Use “stories” to connect to the heart
- Use all available communication modalities
- Don’t let people forget
- Create “critical mass” through the entire organization



Step 5 – Empower Action

How Did we Do This?

- Empowering patients, staff and leaders
 - Developing a champion group
- Provide intensive, experiential learning for all staff
 - Including, Senior Management, Directors, Clinical Managers, Clinical and Non-clinical staff, patients and family
- Rewards programs that recognize changes that support Recovery and support organizational Values



Step 6 - Create Short-term Wins

How did We Do This?

- Communicate, communicate, communicate
- Highlighted completed areas with evaluations in our Hospital-wide communications
- Posters, testimonials, congratulatory memos from SMT including SMT unit visits
- Monitor evaluations and research measures
 - Pre/post measures, 3 month, 6 month, 12 month and 18 month



Step 7 – Don't Let Up *How Did We Do This?*

- Continue to re-evaluate curriculum to meet the needs of each team
- Support changes to practice –
 - Policy and procedure change :
 - HR Performance Appraisal process
 - Standards of Care document
- Support front-line leaders
- Look at sustainability and plan



Step 8 – Make Change Stick

How Did We Do This?

- Developed “branding’ that supported the organization change
- Orientation includes new organizational expectations
- Patients speaking to Recovery
- Communicate, communicate, communicate
- Sustainability plan



Sustainability of Change

- Recovery Champions
 - 40 across the Organization – at least one per unit
 - Attended 5 days of compulsory training with Australian partners
 - Patients included
- Advanced Practice Nurses
 - One per program
- Leadership support
 - Education to all SMT, Physicians, Directors, Manager
- Individual practitioner responsibility and accountability



Clinical Evaluations

- Overall Evaluation
 - 94.1% felt that the SJ was educational and rewarding to VERY educational and rewarding.
- Learning Objectives
 - 95% of the staff felt that the SJ met MOST, IF NOT ALL of the stated objectives.
- Learning
 - 82.8% of the staff felt that the education would result in a SIGNIFICANT TO VERY SIGNIFICANT change in their practice/behaviour.

Clinical Evaluations

“This was one of the best educational experiences I have ever had in my 13 years of practice. I was very moved – guest speakers were wonderful”

“Very enjoyable week – I have done a lot of self-reflection both personally and professionally”

“This has been the most ‘practice changing’ week I have been to in my years of service @ Ontario Shores”

Non-Clinical Staff Evaluation

- Learning Objectives:
 - 96.7% of the staff felt that the SJ met MOST, IF NOT ALL of the stated objectives.
- Appropriate Level:
 - 96.1% felt that the MAJORITY TO ALL of the topics were presented at an appropriate level for them.

Non-Clinical Staff Evaluations

“I am totally happy the training has started-
thanks for including us!”

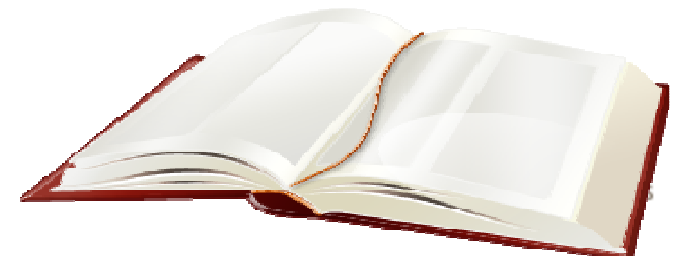
“I found this education to be extremely
informative – I am glad I attended”

“Helped me think of the person – not the illness
– thanks!”



What Did We Learn?

- Provide insight and reflections to those needing to make the change
- Connect-the-Dots for those affected – they want to know WIFM?
- Value history
- Make the learning experiential
- Follow your project plan and readjust as needed



What Did We Learn?

- Continually re-evaluate and re-design the program to meet the needs of those involved in the change
- Go where the energy but challenge the negativity
- Pay attention to process – do not move forward with content
- Be flexible
- Share your passion
- Own your mistakes – share your vulnerabilities
- Validate feelings and encourage the heart



Do not give up

You are here.
I see you,
I do not see mental illness
Do not give up.
When feeling sad
When feeling down
Do not give up.
When feeling old
When feeling crazy
Or not feeling at all
Do not give up.
I am here to listen
I will not judge you
Do not give up.
When the sky is gray
There is a shed of light
Do not give up.
On your recovery journey
We are all with you.
You may fall
And get up
Do not give up.
Just try and try again.
If you feel alone
Know we are here with you
Don't not give up.

By: Team 4
SMHU



Recovery

I am an individual
To learn how to help me you must learn who I am
Although mental illness affects me, it does not define who I am
I will not accept that my situation will not change.
As long as I struggle with mental illness I am able to grow
The struggle is unlike anything you know
Abandon a fixed mindset so that you are able to believe
That change is eventual.

My mental illness does not affect me alone
Do not try to help me on your own.
If you do not include me with the treatment plan
I will feel isolated
The issues that I face are difficult and complex
If I feel that everyone is helping me I will draw on everyone's strength
If I am isolated weakness will envelop me.

Motivational intervening can help me discover what is important to me
Discovery is crucial to my recovery
I ask you to help build my confidence
So that I can work towards accomplishments
I cannot build on my weakness
Help me discover my strengths, so that the situation
No longer seems so bleak.

Because I am alive I am able to strive
So much is going on around me
My recovery persists despite this
Monitor my recovery so that you can tell me
When something has run amiss
Since so much is going on around me, I
May need help to focus.
A sense of focus can prevent the situation
From seeming hopeless.
Once I recover, realize that my recovery
Has involved all of us.

By: SMHU



Shared Journey Essay

I am a person with an identity.

I am not a “schizophrenic,” a “bipolar” or a “personality disorder.”

I have a name. I was once a child, a sibling, a friend. I may have even been a parent or a spouse.

I have dreams and plans. I can make choices.

My illness is an obstacle I must learn to live with if not overcome. It does not define me.

If you take the time to get to know me, you will see I have opinions and viewpoints; I have a sense of humour and am filled with compassion.

I have a lot to offer my community. Just like you, I have needs.

I need hope. I need someone to believe in me and believe I am capable of doing something.

I need to be accepted. Hope is the fuel that will help me reach my goals. I need hope to give me the strength to begin my journey to recovery.

I need meaning. My goals and values may seem different than yours, but they have the same core.

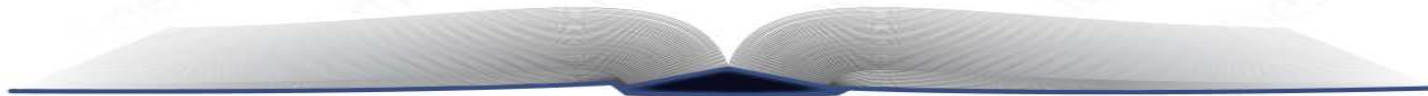
I want to feel needed, feel loved as well as be needed and give love.

I want stability and growth and meaning. My original life goals may not be attainable, and I could use help in identifying new goals.

I may need support in learning to cope with the lot I have been given, but with the right tools I need to have to help guide me on my journey.

You are welcome to walk beside me.

Written by: DDS



A Journey of Recovery



Final Thought..??

*“Our lives begin to end
the day we become
silent about
the things that matter”*

(Martin Luther King Jr., 1929-1968)



Questions

