



## New Clinical Monitoring Policy

**Go-Live of Policy December 3, 2012.**

The new Clinical Monitoring policy has been developed to reflect Ontario Shores' Recovery philosophy of care and best practices, shifting towards a patient-centred and least prescriptive approach. The aim of the policy is to create greater autonomy for the interprofessional teams in their clinical practice, with a focus on the clinical needs of the patient.

This new policy is to replace the current Observation Level (close, constant, and intensive observation) policies. To date we have held four "virtual pilots,"

engaging frontline staff from FAU and ASU, as well as other key stakeholders in the development of the policy. ASU staff successfully implemented the policy and have been operating within it since February 2012.

Mandatory online education has been implemented for all clinical staff since October 15th and



program-specific on-unit education sessions have commenced since October 30, 2012. This has utilized a case-based methodology to enhance learning in the clinical practices related to this policy.

Professional Practice wants to thank all the ASU clinicians who have kindly supported the on-unit education sessions with their expertise and knowledge related to the integration of the policy into practice.

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### Recovery Rounds Team

**Will be implemented on December 10, 2012.**

In the spirit of strengthening our culture of safety and providing support to our staff and patients who have encountered seclusion or restraint, we will be introducing Recovery Rounds. The Recovery Rounds Team is comprised of Senior Management, Professional Practice, Peer Support, and Ethics who will visit patient care units that have experienced seclusion or restraint events each day from 1300-1400. These rounds will provide an opportunity to collaborate with care team members to review the circumstances related to the use of seclusion and restraint and explore strategies to prevent the use of seclusion and restraint. We will also celebrate successes and share learning from other units to further build on our mission to deliver exemplary mental health care.

This team will also attend Code White events to provide further support to interprofessional teams.

### Transfer of Accountability (TOA)

In our commitment towards evidence-based practice and quality of care and safety at Ontario Shores transfer of accountability will occur at:

- Every shift change and at any point during a shift whenever there is a change in patient assignment; OR
- When the interprofessional team member is not readily available to meet the needs of assigned

patients during their scheduled shift.

TOA is the transfer of professional responsibility and accountability for some or all aspects of care for a patient or group of patients to another member of the interprofessional team on a temporary or permanent basis. TOA also includes coverage for absences of care providers during such times as vacation, sick leaves, etc. This negotiated coverage is communicated to the: patient; assigned clinician; program and/or discipline specific manager to

ensure all are aware.

The SBAR (Situation-Background-Assessment-Recommendation) is a standard framework which is a required mechanism used to facilitate TOA, between members of the interprofessional team about a patient's clinical condition.

Please refer to Transfer of Accountability, Interprofessional Admin 3.180 policy for further details or contact your Clinical Nurse Specialist or a Professional Practice team member with any questions.

### Canadian Nurses Association (CNA) Certification Exam Registration Fee and Exam Preparatory Course Reimbursement

Ontario Shores will reimburse 100% of the cost of the CNA Certification Exam in April 2013 for RNs wishing to obtain certification in Psychiatric/ Mental Health or Gerontology specialties.

Professional Practice in collaboration with Ontario Shores Certified Psychiatric and Mental Health Nurse certified nurses will provide support to registrants through

facilitation of study groups which will review various topics within CNA certification framework such as:

- Mock exam practice with take up
- Materials provided (plus electronic content)
- New for 2013 – Web Based Self Learning Modules for Psychiatric and Mental Health Nursing Content
- No fee for study group and connect with others in the exam

Please contact Professional Practice at ext. 6771 or Chris Uranis at ext. 6916 for more details.



#### RNAO Knowledge Fair October 2012

Professional Practice provided a display and resources to support education in Mental Health and Addictions.

#### Interprofessional Grand Rounds:

December 6: Hoarding  
Rose-Marie Fraser/Dr. Dawe

December 13: Spirituality in Mental Health  
Kaysia Taylor

### Clinical Cultural Competence Champions

On November 7, 2012 Ontario Shores implemented its initial education workshop day for the Clinical Cultural Competence Champions.

41 Ontario Shores staff have volunteered to participate as champions to support advancing cultural competence at the organization.

The ongoing course overview will entail monthly face-to-face and virtual consultations with the champions to discuss integration of identified goals in clinical settings.

Some key objectives for the champion group include:

Engage in self-reflection with acceptance regarding own cultural competence, identifying strengths and weaknesses in self and current programs.

Initiate a process of transformation towards personal ownership and identity change as cultural competence champion/opinion leader.

Culture Competence is:

“A set of congruent behaviours, attitudes, and policies that come together in a system, agency, or among professionals and enable that system, agency or those professionals to work effectively in cross-cultural situations.”

(Terry Cross et al., 1988)



### Recovery Ambassadors

Recovery Ambassadors at Ontario Shores consist of representation from CNE, Professional Practice, HR, Communications, Medical Clinic, direct care clinicians, Patient Experience, inpatients and family members who meet monthly to:

- Discuss collaborative strategies to further strengthen recovery practices at Ontario Shores;
- Utilize expertise and knowledge to advance corporate initiatives supporting recovery.

### Interprofessional Practice Highlights

For Interprofessional Practice inquiries please contact Maluah Dewhurst:  
dewhurstm@ontarioshores.ca  
905.430.4055 ext 6771

#### Vocational Therapy

Vocational is successfully transitioning towards registering their council with CVRP (College of Vocational Rehab Professionals) or VRA (Vocational Rehabilitation Association.) Over the next couple of months CVRP will roll out their college exam to support Vocational Professionals to transition to becoming regulated.

#### Behaviour/Rehabilitation Therapy

Council members will be documenting Functional Behaviour Assessment reports in ITS module of Meditech.

Starting in December, Behaviour Analysis Reading Group will commence where relevant topics of experimental analysis, applied, translational or professional practice of Behavioural Analysis will be discussed at Council.

### Interprofessional Practice Highlights Continued

#### Social Work Council

Championing Home First initiative at Ontario Shores. Home First is a partnership between CELHIN, Central East CCAC, Ontario Shores, Community Care Durham and community mental health providers to adopt a philosophy which promotes safe and timely care, services and supports to meet the health care needs of patients and families.

Wrapping up the joint collaborative Family Education Series Initiative between Social Work Council and Family Council

#### Celebrating Child and Youth Counsellors Day!

On November 15, 2012, Bob Heeney, Professional Practice Leader for Child and Youth Workers organized a day of celebration to support the discipline. Key speakers included:

- Deb Sliwinski: Update from the Ontario Association of CYC
- Dr. Marc Fadel: Complicated cases and the CYW skill set
- Sanaz Riahi: Interprofessional Practice at Ontario Shores
- Abby Whitehurst, Craig McCormack, Barb Heeney and Bob Heeney: Adolescent Program Updates

- Megan Lummiss: Keynote speaker “My story of hope and recovery”

#### Medical Staff

At November’s Medical Advisory Committee (MAC) reports were received from the MAC subcommittees responsible for Clinical Information Services, Credentials, Medical Education and Research, Pharmacy and Therapeutics and Infection Prevention and Control.

The following policies and guidelines were reviewed:

- Reporting a Registered Clinician to their Regulatory College,
- Interprofessional Standards of Care,
- Least Restraint policy

#### Nursing

November’s Nursing Council highlights:

- The launch of the first initiative in preparation for Nursing Week 2013 by sponsoring a “Design your T-shirt Contest”. Stay tuned for more details.
- Approval of Scope of Practice for RNs and RPNs. The revisions will be posted on the intranet in December.

#### Tis’ the Season...

#### Of Giving and Spreading Holiday Cheer!

Every year Nursing Council celebrates the Holiday Season by giving back to our community. This year, Nursing Council is giving back to our community by collecting donations for our patients here at Ontario Shores. Donations will be given to the Volunteer Association and these monies will be distributed amongst the inpatient units to provide for any patient needs. (e.g. personal items, clothing, celebrations etc.)

Please drop off any donations to Cathy Duivesteyn (ext. 6974) or Maluah Dewhurst (ext. 6771) in Professional Practice by Wednesday, December 19.

#### What has made you most proud professionally recently?

“Used 80s music fed through the quiet room speaker to sooth a self-injuring patient through the night. Patient is normally very tormented. This was added to the patient’s care plan and behavioural profile. The next day got a ghetto blaster and batteries and left for her in the room. This is an example of validation, proactive care, and reframing experiences for patients. Helping them to discover the positive”.

(Jessyca Zelsman, RPN)

### Who is your Interprofessional Practice Team?

**Dr. Barb Mildon, VP Professional Practice and Research and CNE**

mildonb@ontarioshores.ca

**Sanaz Riahi, Director, Professional Practice**

riahis@ontarioshores.ca

**Maluah Dewhurst, Administrative Assistant, Professional Practice**

dewhurstm@ontarioshores.ca

**Chris Uranis, Clinical Practice Leader**

uranisc@ontarioshores.ca

**Andrea Porter, Clinical Educator**

portera@ontarioshores.ca

**Cathy Duivesteyn, Clinical Educator**

duivesteync@ontarioshores.ca

**Rose-Marie Fraser, Social Work Professional Practice Leader**

fraserr@ontarioshores.ca

**Ross Violo, Behaviour/Rehabilitation Therapy Professional Practice Leader**

violor@ontarioshores.ca

**Pamela Wilansky-Traynor, Psychology Professional Practice Leader**

wilansky-traynorp@ontarioshores.ca

**Kelly Braun, Vocational Rehabilitation Professional Practice Leader**

braunk@ontarioshores.ca

**Bob Heeney, Child and Youth Counsellor Professional Practice Leader**

heeneyb@ontarioshores.ca

**Heather Parker, Pharmacy Professional Practice Leader**

parkerh@ontarioshores.ca

**Rama Arora-Persaud, Occupational Therapy Professional Practice Leader**

arora-persaudr@ontarioshores.ca

**Paul Hutcheson, Therapeutic Recreation Professional Practice Leader (interim)**

hutchesonp@ontarioshores.ca

**Dr. Ian Dawe, Physician-in-Chief**

dawei@ontarioshores.ca

## Did you know?

The prevalence of trauma among mental health consumers has been reported to be as high as 90% (Rosenberg, 2011; Champagne & Stromberg, 2004)

Trauma produces:

- Neurological, biological, psychological and social effects, including changes in brain neurobiology
- Social, emotional and cognitive impairment
- Relative treatment resistance, and/or treatment rejection

- Adoption of health risk behaviours as coping strategies (i.e. eating disorders, smoking, substance use, self-harm, violence, etc.)

- Severe and persistent behavioural health, health and social problems, and early death

- Contributed to the establishment, and perpetuation of major mental illness, including depression and schizophrenia

(Felitti et al., 1998; Herman, 1992)

For Interprofessional Practice inquiries please contact :

Sanaz Riahi

riahis@ontarioshores.ca

905.430.4055 ext 6798 or

Maluah Dewhurst

dewhurstm@ontarioshores.ca

905.430.4055 ext 6771