CAPITALIZE FOR KIDS

IMPACT PROJECT UPDATES

MARCH 2022

Capitalize for KIDS

UPDATE:
March 2022

BUILDING DATA CAPABILITIES

BENEFICIARY

- **Name(s):** Open Doors for Lanark Children and Youth and Rebound Child & Youth Services Northumberland
- **Geographic Scope of Services:** Lanark and Northumberland Counties, ON
- **Project timeline:** July 2021 – March 2022

CHALLENGES FACED

- **Lack of Operational Data –** Staff collect a significant amount of data in the health record systems, but the agencies have not yet developed the processes and tools to use that data to improve client experience and outcomes.
- **Time Spent on Data Reporting –** Data reporting to various agency stakeholders, including funders, can be very manual and often requires significant administrative resources to complete.

HOW WE'RE HELPING

- **Building Dashboards –** We are building easy-to-use dashboards using PowerBI that convert the data from health record systems to meaningful operational information that can inform leadership on ways to improve client experience and outcomes.
    - **Wait times** – average wait time by program; trends in wait times; components of wait times
    - **Client journeys** – most common program sequencing; client volumes
    - **Time allocation** – hours spent in direct service; components of time spent on administrative tasks

FOCUS FOR CHANGE

✓ Improved ability to make data backed decisions regarding operations
✓ Reduced administrative time spent pulling data requirements for stakeholders

UPDATES

- Completing data dashboards and integrating these tools into reporting and strategic processes
- Reviewing dashboards to determine most impactful opportunities to improve client experience

UPDATE:
March 2022

BUILDING DATA CAPABILITIES

BENEFICIARY

- **Name(s):** Crossroads Children's Mental Health Services
- **Geographic Scope of Services:** Ottawa
- **Project timeline:** October 2021 – July 2022

CHALLENGES FACED

- **Long wait times–** Crossroads has an Intensive Home-Based program with long wait times and doesn't service the desired number of clients annually.
- **Lack of Operational Data –** Management does not yet have access to data-based tools that provide insights into what aspects of the program are working and where changes can be made to improve processes and client outcomes

HOW WE'RE HELPING

- **Building Dashboards –** We are building easy-to-use dashboards using Power BI that convert the data from health record systems to meaningful operational information that can inform leadership on ways to improve client experience and outcomes.
    - **Wait times** – average wait time by program; trends in wait times; components of wait times
    - **Time allocation** – hours spent in direct service; components of time spent on administrative tasks
    - **Client outcomes –** see how different processes affect the change in client outcomes before and after service, allowing client-centric decisions to be made

FOCUS FOR CHANGE

- ✓ Improved ability to make data backed decisions regarding operations
- ✓ Diagnose what aspects of the Intensive Home-Based are working and where improvements need to be made

UPDATES

- Developed a draft of the dashboards, in the process of implementing client outcomes
- Continue to iterate development of dashboards with client feedback

UPDATE:
March 2022

OPTIMIZING ELECTRONIC HEALTH RECORDS

BENEFICIARY

- **Name(s):** Carizon Family and Community Centre and Lutherwood
- **Geographic Scope of Services:** Kitchener and Waterloo
- **Project timeline:** January 2022 – January 2023

CHALLENGES FACED

- **Staff Burnout –** Excessive admin work and medical record processing is a well documented source of clinician burnout in health care. The current process is a hybrid between paper and digital processes with wasted steps and duplicate data entry.
- **Data Quality –** Inconsistencies exist in how clinicians are collecting data and information. This limits both agencies' ability to make data-informed decisions to improve their program quality and best meet the needs of the kids they serve.

HOW WE'RE HELPING

- **Redesigning Process –** We are rebuilding their electronic health record data processes to reduce wasted steps and duplication, and to ensure that all clinicians are collecting data in the same way to produce high quality data for decision making.
    - Focus on integrating client data processes across all programs directly into the electronic heath record system
    - Creating solutions to obstacles that have stopped client data processes from being done directly in the system

FOCUS FOR CHANGE

✓ Reduced time to complete client information processes
    - Completing a form directly in an electronic health record can save 5 – 10 minutes per form

✓ Improved data quality and availability for managerial decision making to improve service quality

UPDATES

- Compiling a full inventory of client data processes across all programs, and whether or not these processes are done directly in electronic health record or not
- Designing solution for treatment plan documents and planning pilot for feedback

UPDATE:
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IMPLEMENTING ELECTRONIC HEALTH RECORD

BENEFICIARY

- **Name(s):** YouthLink
- **Geographic Scope of Services:** Scarborough
- **Project timeline:** November 2020 – January 2022 (+ ongoing evaluation)

CHALLENGES FACED

- **Inefficient technologies –** In addition to an outdated client record system, changes due to COVID resulted in a requirement for several additional systems. The initial process involved multiple separate technologies being used; YouthLink desired one central system.
- **Data entry & retrieval –** A poorly configured client database led to staff inefficiencies when working with client data; entering it and retrieving it. This caused unnecessary wasted time on administrative tasks that could be used for serving more kids.

HOW WE'RE HELPING

- **Implemented a new EHR –** While the new EHR has been procured and implemented, C4K is providing ongoing support for staff to get used to using the new system and retrieving the reports they need.
    - Coordinate and facilitate additional trainings on specific topics as needed
    - Conducting evaluation interviews and collecting post-implementation survey data to assess the impact of the project

FOCUS FOR CHANGE

✓ Reduced number of separate systems used
✓ Increased quality of data entry and confidence in data accuracy
✓ Easier and more efficient retrieval of data for reporting, staff supervision and internal decision making

UPDATES

- Most staff interviewed reported the new system overall is much easier to use, and they have more time for performing other work-related tasks including (for clinicians) serving more kids
- 13/50 post-implementation surveys have been completed, enabling quantitative calculations of impact

UPDATE:
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AUTOMATING APPOINTMENT REMINDERS

BENEFICIARY

- **Name(s):** Central Toronto Youth Services, Children's Aid Society of Toronto, and Centre Francophone
- **Geographic Scope of Services:** Toronto
- **Project timeline:** July 2020 – June 2022

CHALLENGES FACED

- **Wasted Capacity –** Client no-shows or late cancellations for appointments needlessly use clinical capacity that could be used towards meeting with other clients or completing other valuable clinical activities (planning, documenting, etc.).
  - No-shows at agencies range from 5 – 20% of scheduled appointments
- **Manual Processes –** Processes to remind clients of their upcoming appointments are manual and not very effective in ensuring that no-shows or late cancellations are mitigated.

HOW WE'RE HELPING

- **Automating Process –** We are implementing automated appointment reminder platforms that send SMS, email, and/or phone reminder to clients ahead of their scheduled sessions
  - Solution can integrate with other workflow and scheduling tools (e.g. Outlook)

FOCUS FOR CHANGE

✓ Reduced wasted capacity from no-shows and late cancellations
  ✓ Precedent engagements have resulted in a 30% reduction, with follow-on impacts to wait times
✓ Increase in number of staff hours able to be reallocated due to improved appointment cancellation notice
✓ Reduction in staff hours used to send appointment reminders

UPDATES

- CTYS & CF received training on YellowSchedule to scale implementation across the agency.
- Custom development completed to provide clinicians with an error message from YellowSchedule, similar to Outlook, when an incorrect email address is entered and message has not been delivered
- CAST has decided to upgrade their Electronic Health Record System since this project brought to light several shortcomings of their current technology

UPDATE:
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AUTOMATING POLICY MANAGEMENT

BENEFICIARY

- **Name(s):** Children's Mental Health Services of Hastings and Prince Edward Counties
- **Geographic Scope of Services:** Hastings and Prince Edward Counties
- **Project timeline:** November 2021 – April 2022

CHALLENGES FACED

- **Inaccessible Policies –** Staff cannot find the correct, up-to-date policies needed to guide consistent decisions because they are not housed in a central place.
    - Policies are therefore not followed consistently, opening the agency up to unnecessary financial and operational risks
- **Manual Processes –** Updating policies, particularly around accreditation, takes a significant amount of staff time, and often results in policies not being correctly reviewed and updated.

HOW WE'RE HELPING

- **Centralizing Policies –** We are implementing a policy management platform that will house all the agency's policies and procedures in one, easy-to-navigate place.
- **Automating Processes –** The policy management platform will automate the workflow process to create, review, and publish policies, including providing notifications and reminders to ensure policy drafting does not stall

FOCUS FOR CHANGE

- ✓ Improve quality/consistency of service through staff engaging with policies
- ✓ Reduce administrative burden of policy management workflow
- ✓ Reduce time staff spends looking for policies
- ✓ Reduce risk from staff not following up-to-date policies

UPDATES

- Completed upload of policies to HealthStream Policy Manager platform
- Completed management training into Policy Manager platform
- Planning roll-out of platform to all staff across the agency

UPDATE:
March 2022

OPTIMIZING CLIENT INTAKE PROCESS

BENEFICIARY

- **Name(s):** FIREFLY
- **Geographic Scope of Services:** Kenora and Rainy River Districts
- **Project timeline:** March 2021 – March 2022

CHALLENGES FACED

- **Long Intake times–** FIREFLY set the goal to complete 90% of all children's ,mental health intakes in 7 days or less. Pre-solution implementation the average length of intake was 9.3 days and 90% of clients were seen in 20 days or less.

HOW WE'RE HELPING

- **Data Analysis –** Analyzed current data to understand what parts of the intake process were slowing down and drill into where solutions should be focused
- **Online self-referral form –** Helped FIREFLY implement an online self-referral form to create a more seamless Intake process.

FOCUS FOR CHANGE

- ✓ Decrease the length of intake
- ✓ Reduce administrative burden
- ✓ Improve client experience though a more flexible and seamless intake process

UPDATES

- Online referral form has been implemented for self-referrals and is successfully being used
- For clients who use the online referral the average length of intake has already dropped to 3.5 days and 90% of clients were seen in 8 days or less, further improvements are expected
- C4K will periodically check in to monitor the success of the solution, while FIREFLY will take over managing the overall project