


Selected research, publications, and resources to promote evidence-informed safety and risk management in Canadian healthcare organizations. Prepared by Healthcare Risk Management staff at the Healthcare Insurance Reciprocal of Canada (HIROC). Titles with an open lock icon  indicate that a publication is open access. For all others a subscription or library access is required; the librarian at your organization may be able to assist you. Please contact riskmanagement@hiroc.com for assistance if required.

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EDITOR'S NOTE



Dan Altenberg

The March issue of Risk Watch includes nine open articles on topics ranging from leadership and governance, to pandemic response, and telemedicine practices. Five articles have a Mental Health sector focus, including topics such as the impact of online treatment modalities (Karyotaki et al.; King et al.; Shang et al.); the development of a behaviour risk screening tool (Corovic et al.) and the association of cannabis use and self-harm among adolescents and young adults with mood disorder diagnoses. Three additional articles focus on leadership and governance, exploring staff engagement (Janes et al.), quality improvement (Pfaff et al.) and pandemic responses. Our lead article relates to leadership and pandemic response within the Long Term Care (LTC) sector in a Canadian study from Havaei et al.

The Long Term Care (LTC) sector has been cited in many instances to be the epicentre of the COVID-19 pandemic in Canada, accounting for the majority of deaths in the first wave of the pandemic. Research demonstrated that LTC homes accounted for over 80% of all COVID-19-related deaths during the first wave (CIHI, 2020). However, outcomes in different provinces have also demonstrated that targeted responses may effectively mitigate against outbreaks and deaths (Liu M, et al., 2020). The study by Havaei et al. describes the leadership strategies that helped manage the pandemic in one COVID-19-free LTC facility in British Columbia. Qualitative interviews were conducted and analyzed from among four executive leaders. The facility implemented most provincial guidelines to prevent or mitigate virus spread. Crisis leadership competencies and safety prioritization helped this site's successful management of the pandemic. The authors conclude with the statement that there continues to be room for improvement in communication and staffing practices and policies in the facility.

References:

1. Canadian Institute for Health Information. [Pandemic Experience in the Long-Term Care Sector: How Does Canada Compare With Other Countries?](#) Ottawa, ON: CIHI; 2020.
2. Liu M, Maxwell CJ, Armstrong P, et al. [COVID-19 in long-term care homes in Ontario and British Columbia](#). CMAJ. 2020 Nov 23;192(47):E1540-E1546

If you have feedback about this month's articles or Risk Watch, please send them to me at daltenberg@hiroc.com.

HOT OFF THE PRESS

LEADERSHIP/ LONG-TERM CARE/COVID

[Leading a Long-Term Care Facility through the COVID-19 Crisis: Successes, Barriers and Lessons Learned](#)

Havaei F, MacPhee M, Keselman D, Staempfli S. Healthc Q. 2021 Jan; 23(4):28-34.

Study from a Canadian long-term care (LTC) facility describing the leadership strategies for maintaining an outbreak-free facility during the pandemic. Semi-structured interviews with executive leaders revealed key learnings, including having an essential services plan, proactively planning for resource use and the importance of tracking.

MENTAL HEALTH/RISK-BEHAVIOUR SCREENING

[Developing and Implementing a Patient Behaviour Risk Screening, Communication and Care Planning Intervention for Hospital Settings](#)

Corovic M, Fuciarelli S, Johnson D, Caspersen E, DeBono T, Spithoff K, Principi E, Brouwers M, Schwalm JD. Healthc Q. 2021 Jan;23(4):53-59. doi: 10.12927/hcq.2020.26392. PMID: 33475493.

Canadian study on developing a patient behaviour risk screening, communication and care planning intervention for hospitals. Survey results indicated that staff confidence in identifying, managing and providing best care to patients significantly increased with use.

MENTAL HEALTH/SELF-HARM

[Association of Cannabis Use With Self-harm and Mortality Risk Among Youths With Mood Disorders](#)

Fontanella CA, Steelesmith DL, Brock G, Bridge JA, Campo JV, Fristad MA. JAMA Pediatr. 2021 Jan 19:e205494.

US study on cannabis use and cannabis use disorder (CUD) among youths and young adults with mood disorders, and its association with self-harm, suicide, and overall mortality risk which remains poorly understood. These findings should be considered as various jurisdictions contemplate legalizing medical and recreational marijuana, both of which are associated with increased CUD.

PATIENT SAFETY/SAFETY CULTURE

[The Association Between Health Care Staff Engagement and Patient Safety Outcomes: A Systematic Review and Meta-Analysis](#)

Janes G, Mills T, Budworth L, Johnson J, Lawton R. J Patient Saf. 2021 Jan 8; Publish Ahead of Print. doi: 10.1097/PTS.0000000000000807. Epub ahead of print. PMID: 33427792.

UK systematic review and meta-analysis to investigate the relationship between engagement and both safety culture scores and errors/adverse events. This systematic review and meta-analysis explored whether the beneficial relationship between staff engagement and safety outcomes identified in other sectors was evident in health care. The authors cautiously conclude that increasing staff engagement could be an effective means of enhancing patient safety, stating that further research is needed to determine causality.

MENTAL HEALTH/TOOLS

[Internet-Based Cognitive Behavioral Therapy for Depression: A Systematic Review and Individual Patient Data Network Meta-analysis](#)

Karyotaki E, Efthimiou O, Miguel C, et al. JAMA Psychiatry. 2021 Jan 20. doi: 10.1001/jamapsychiatry.2020.4364. Epub ahead of print. PMID: 33471111.

US systematic review and meta-analysis to provide personalized estimates of short-term and long-term relative efficacy of guided and unguided iCBT for depression using patient-level information. The authors found that guided iCBT was associated with more effectiveness than unguided iCBT for individuals with depression, benefits were more substantial in individuals with moderate to severe depression. The authors conclude that personalized treatment selection is entirely possible and necessary to ensure the best allocation of treatment resources for depression.

MENTAL HEALTH/TOOLS

[Prospective Development and Validation of the Computerized Adaptive Screen for Suicidal Youth](#)

King CA, Brent D, Grupp-Phelan J, et al. JAMA Psychiatry. 2021 Feb 3:e204576. doi: 10.1001/jamapsychiatry.2020.4576. Epub ahead of print. PMID: 33533908; PMCID: PMC7859874.

US prognostic study to develop and independently validate a novel Computerized Adaptive Screen for Suicidal Youth (CASSY) for use as a universal screen for suicide risk in medical emergency departments (EDs). Over 2000 adolescent patients at 13 geographically diverse US EDs were enrolled in two studies involving surveys and telephone follow-ups. The authors conclude that the adaptive and personalized CASSY demonstrated excellent suicide attempt risk recognition, with the potential to facilitate linkage to services.

GOVERNANCE/ QUALITY IMPROVEMENT

[Social determinants of the impact of hospital management boards on quality management: a study of 109 European hospitals using a parsonian approach.](#)

Pfaff, H., Hammer, A., Ballester, M. et al. BMC Health Serv Res 21, 70 (2021).

This article examines the social determinants of implementation power of hospital boards using Talcott Parsons' sociological concept of adaptation, goal attainment, integration, and latency (AGIL); focusing on the G (goal attainment) and I (integration) factors of this concept. The study helps to test the hypothesis that understanding hospital board conditions can foster hospital wide quality improvement and the overall success of the quality improvement initiatives.

TELEMENTAL HEALTH/ EXAMING GAPS

[Experiences of psychiatrists and support staff providing telemental health services to Indigenous peoples of Northern Quebec.](#)

Shang, Z., Arnaert, A., Hindle, Y. et al BMC Health Serv Res 21, 85 (2021).

This Canadian study examined the collaborative telemental health services offered to Indigenous peoples in Northern clinics. Understanding regional, professional and resource barriers to serving the mental health needs of this population can support the provision of culturally appropriate care and help to address the gaps in Northern communities.

COVID-19/ EXAMING PPE FACTORS

[COVID-19 hospital outbreaks: Protecting healthcare workers to protect frail patients. An Italian observational cohort study.](#)

Vimercati L, De Maria L, Quarato M, Caputi A, Stefanizzi P, Gesualdo L, Migliore G, Fucilli FIM, Cavone D, Delfino MC, Sponselli S, Chironna M, Tafuri S. *Int J Infect Dis.* 2021 Jan;102:532-537.

This Italian study looked at 5750 healthcare workers that were in contact with COVID-19 patients to determine the a high-risk or a low-risk group based on contact type (PPE- or non-PPE-protected). The results highlight that the correct use of PPE and the early identification of symptomatic workers are essential factors to avoiding nosocomial clusters of the SARS-CoV-2 infections.

QUALITY IMPROVEMENT/TEAM RESILIENCE

[Building Resilience within Institutions Together with Employees \(BRITE\): Preliminary experience with implementation in an academic cancer centre](#)

Elliott M, Macedo A, Escaf M. *Healthc Manage Forum.* 2021 Jan 22:840470420981595. doi: 10.1177/0840470420981595. Epub ahead of print. PMID: 33478263.

A Canadian article describing the design and development of BRITE (Building Resilience within Institutions Together with Employees), a program designed to equip healthcare workers with skills to foster their resilience as they work. The article describes the context, development, and preliminary implementation results. The authors conclude that the findings support continued use of BRITE and formal evaluation of implementation and intervention efficacy.

QUALITY INDICATORS/ MENTAL HEALTH FRAMEWORK

[The Quality Mental Health Care Network: A roadmap to improving quality mental healthcare in Canada](#)

Follwell EJ, Chunduri S, Samuelson-Kiraly C, Watters N, Mitchell JI. *Healthc Manage Forum.* 2021 Jan 8:840470420974713.

This article describes the developmental work that was undertaken to create the dimensions of Canadian quality mental healthcare framework. This collaborative project reinforces the need for a comprehensive approach to mental healthcare and highlights the opportunities for improvement including addressing needs for both patients and providers.

SAFETY/SYSTEMS CHANGE

[Mental health and policing: Picking up the pieces in a broken system](#)

Pepler EF, Barber CG. *Healthc Manage Forum.* 2021 Jan 27:840470420979635.

A Canadian study exploring the intersection of public safety and public health which attempts to demonstrate the need to break down traditional silos of agencies serving vulnerable populations. The authors use a variety of sources to demonstrate that inadequate community-based mental health services continues to contribute to the increasing reliance on police in responding to people who are either in, or approaching, mental health crisis.

RISK MANAGEMENT/SUPPLY CHAIN

[Key Characteristics of a Fragile Healthcare Supply Chain: Learning from a Pandemic](#)

Snowdon A, Saunders M, Wright A. *Healthcare Quarterly Pre-Release April 2021* : 1-8.doi:10.12927/hcq.2021.26415

Canadian article on a national research study documenting the key features of the Canadian health supply chain. Results from interviews and thematic analysis suggest that the fragility of the health supply chain contributes to substantive challenges across health systems, thus limiting or precluding proactive and comprehensive responses to pandemic management. These findings inform strategies to strengthen supply chain capacity and performance.

 **Other Resources of Interest (all )**

[**A guide to patient safety improvement: integrating knowledge translation & quality improvement approaches**](#) (CPSI, September 2020). Canadian Patient Safety Institute guide to support teams in using an integrated approach to improvement.

[**Canadian Surveillance of COVID-19 in Pregnancy: Epidemiology, Maternal and Infant Outcomes**](#) (UBC, last updated Feb 2021) Website provides information on the national surveillance project related to COVID-19 in pregnancy.

[**Suicide Risk Assessment Toolkit**](#) (CPSI, January 2021) This resource for healthcare workers and organizations provides a high-level overview of what to consider when using suicide risk assessment tools, along with a non-exhaustive list of available Canadian and international tools, and their characteristics.

[**WEBINAR: Considerations in effective policy development for addiction and mental health in the workplace.**](#) (OHS, March 18 2021) This free webinar will provide individuals and organizations with practical information on comprehensive policy development, the value of referring to high quality treatment, and the importance of return-to-work planning and monitoring.

[**ESSENTIAL TOGETHER TOOL - Identifying Strengths and Improvements to Reintegrate**](#) (CIHI, December 2020)

CIHI-developed tool to support organizations to identify strengths and improvements to safely reintegrate essential care partners in hospitals, long-term care, residential care and other congregate care settings.

[**Hand Hygiene by Healthcare Workers Increased. Then Decreased, during the Pandemic, Study Says**](#) (ECRI, January 2021) Brief ECRI article citing the results of a study on hand hygiene performance during the COVID-19 pandemic, as well as a list of ECRI resources.

[**Implementing Filtering Facepiece Respirator \(FFR\) Reuse, Including Reuse after Decontamination, When There Are Known Shortages of N95 Respirators**](#) (CDC, October 2020) CDC article on contingency and crisis capacity strategies for N95 Filtering Facepiece Respirator (FFR) reuse.

[**Report shines a light on ‘time-critical’ emergency associated with the birth of larger babies and shoulder dystocia**](#) (HSIB, February 2021). Summary of NHS maternity national report, examined the factors that increase the likelihood that shoulder dystocia will occur with larger babies, from pregnancy to labour and birth.

[**Canadian Privacy Law 2020 Year in Review**](#) (Blakes, January 2021). Review of changes to privacy legislation in 2020 across Canada.

[**Superior Court of Quebec dismisses authorization to institute a class action pursuant to the dispute resolution provision of insurance policy**](#) (Miller Thomson, January 2021). The COVID-19 pandemic has resulted in class action law suits. In Québec, the Superior Court decline jurisdiction in favour of mediation and arbitration proceedings, in accordance with the organizations insurance policy.

[**Supreme Court leaves the standard of care in medical negligence untouched**](#) (BLG, February 2021). The Supreme Court of Canada heard the Armstrong v. Ward case, which centered on the appropriate standard of care for a surgeon and the proper order of the elements of negligence.