Sustaining a culture of continuous learning at the Aventa Centre of Excellence for Women with Addictions

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Staff at the Aventa Centre of Excellence for Women with Addictions. Photo courtesy of Aventa.

Community Mental Health Action Plan

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"One of the reasons I enjoy working at Aventa
is we are always ahead of the curve."
"We're constantly looking at best practices."

[AVENTA STAFF MEMBERS]

The complexity and dynamism of the people and communities we serve, the issues they face, and the systems we work in makes optimizing the results of our efforts – making a difference in the lives of people we serve - a daunting challenge. To achieve the best possible outcomes in this environment, organizations need to continually learn, adapt and improve. Building and sustaining these abilities or capacities requires dedication and effort and we can learn from the experiences and wisdom of those who have succeeded in this regard.

For decades, the Aventa Centre of Excellence for Women with Addictions has fostered and sustained a culture devoted to ongoing learning and quality improvement. In this story, we map out how this award-winning organization has managed to make it work.

This story began with another about how Aventa integrates gender responsive trauma informed care (GR-TIC) into everything it does [link to story]. As Capri Rasmussen, Clinical Administrative Manager, kindly described Aventa's efforts in that regard, the organization's commitment to ongoing learning and quality improvement shone through. We heard about the strength of leadership around not only GR-TIC, but also around learning and improving. The terms, "continuous quality improvement" and "PDSA cycles" surfaced innumerable times. So did the importance of training and ongoing professional development; of reflective practice through clinical supervision; of monitoring and evaluating efforts; of continually seeking new ideas, evidence, and understanding what other organizations are doing – all in the interest of improving the care and services provided to women living with trauma and addiction.

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Capri: "I think it's an underlying philosophy, continuous quality improvement. People who are not afraid to try new things. We're not afraid to go, 'Okay, it didn't work, we'll try something else'…We have that freedom as a team - people come up with suggestions like, 'Oh well, why did we do it this way?' Well, let's look at that, and understand.

And I think staff bring up those suggestions a lot, too. We get suggestions from clients that we respond to and try to incorporate wherever possible…. It's just continuous quality improvement. Looking at, 'What's the evidence?', 'What are our partners doing? What are they expecting? What's Accreditation Canada expecting? What are new developments from Stephanie Covington and things like that. We always make sure, for instance, that if there's any curriculum changes, we buy the latest materials. We're not using old materials."

We returned to Capri and asked if she would tell us more about how Aventa sustains its culture of ongoing learning and improvement. She described numerous practices and structures that we have organized into two sets of "key ingredients" that seem to make it work. The first is organizational abilities or capacities that enable learning and quality improvement to occur. The second set of key ingredients is the processes through which learning and ongoing improvement occur.

Figure: Organizational conditions and processes for continuous learning at the Aventa Centre of Excellence for Women with Addictions

Organizational supports for ongoing learning and quality improvement

At Aventa, a number of organizational supports or capacities provide the foundation for learning and improvement. These include the commitment of leaders and champions to ongoing learning and quality improvement; supportive values; a continuous learning environment; dedicated resources and formalized roles.

LEADERS, CHAMPIONS AND COMMITMENT

Aventa has numerous formal and informal leaders who are committed to ongoing learning and quality improvement for the purposes of optimizing care, services and outcomes for clients. There is an obvious passion for being on the forefront, for always seeking ways to improve.

Here are some things these leaders do to encourage and sustain a culture of learning and improving:

- Continually reinforce the importance on ongoing learning and quality improvement – the desire for excellence, for the benefit of women with trauma and addiction.
- Place strong emphasis on training and professional development.
- Sustain an environment conducive to learning (see continuous learning environment below).
- Enact the commitment to learning and improving by providing tangible resources including, for example, dedicated time for learning and reflection; purchase of the most up-to-date treatment curricula; resources for training; and dedicated roles to support learning.
- Place a strong emphasis on clinical supervision/reflective practice (for clinical staff).
- Monitor and evaluate efforts and use the findings to improve care and services.
- Seek external validation of quality by maintaining accreditation with Accreditation Canada.
- Share learnings and knowledge with partners and other organizations.

VALUES AND A CONTINUOUS LEARNING ENVIRONMENT

Continuous quality improvement and a commitment to lifelong learning as individuals, as an organization, and even for the entire sector are part of the culture of Aventa. There is constant discussion about new ideas and what changes could be made. A core value is, *"Excellence: incorporating safety and best practices in the delivery of client-centred programs and services."*

Another consideration is that as a non-profit organization, Aventa has less "red tape" to navigate, making it more nimble and able to adjust practices more quickly and fluidly. This may help to positively reinforce improvement efforts as results can be seen and evaluated more quickly.

> Capri: "*I guess maybe it's a culture thing – we talk about continuous quality improvement. We have a quality improvement committee – so we're always talking about what's a new idea, how do we make change and whether that's in our training or policies and procedures. So, I just think we're just open to that and we're nimble as a non-profit; we can move quickly. We don't have a lot of red tape. Maybe big organizations might not? So, we can respond to that and if it doesn't work, we can go, 'Okay, that didn't work, so let's try something different'.*
>
> *It's about that continuous quality improvement. So, as we respond to both the issues, the feedback, the staff, clients and families and what's available, too – just that continuous. It's kind of an evolution, right? Lifelong learning, individually and collectively as an agency and a sector."*

One of the foundational requirements for organizational learning is psychological safety – "*a climate in which people feel free to express relevant thoughts and feelings*[1]". While that might sound simple, it's not! In fact, being able to seek help and tolerate mistakes while colleagues watch can be very difficult. Aventa recognizes this and aims for psychological safety through a continuous learning environment:

> *Capri: "We even talk about that as part of trying to have a no-fault environment. So, obviously not malicious type things, but basically having people be willing to say, like, "Oh, this happened, and this is a near miss, and this is what we can learn from it." … it's all of that; this just seems normal to me."*

Alongside this is ongoing attention to staff wellbeing and sustaining a sense of "team" where people know and respect one another. This probably helps create a space where people feel safe enough to speak frankly about things that might not be working so well and that need to be improved without fear of being sanctioned for speaking out.

FORMAL ROLES AND DEDICATED RESOURCES

> *Capri: "I do think you have to have some dedicated resources, you have to have someone who's responsible for components of that to make sure it happens and it is spread around the agency."*

Embedded in Aventa's organizational structure are formal roles dedicated to ongoing learning and quality improvement. These include, for example:

- Executive Director, Kim Turgeon, who champions and sets the tone for learning and improvement and provides concrete supports to enable it to happen.

  "We are firmly rooted in a framework of evidence-informed practice and accountability. As a centre of excellence, we strive to provide excellent care that is responsive to our clients' ongoing and emerging needs[2]*."*
- Program managers who work with staff, including clinical supervision, to improve practice.
- A PhD prepared clinical supervisor [Dr. Beverly Frizzell, PhD, R. Psych] who facilitates weekly group clinical supervision with counselors to work through practice-related issues.
- A Clinical Administrative Manager (Capri Rasmussen) who looks at training, and drafts policies and procedures to reinforce that training. This person also identifies and organizes new training, and coordinates accreditation processes, which includes training requirements.
- Aventa has several internal committees with membership of staff from across the agency. The purpose of these committees is to provide feedback to the Senior Management Team and Aventa Board of Directors as it relates to agency policies and procedures. Some of the Committees include:

[1] Edmondson, A. 2012. *Teaming. How organizations learn, innovate and compete in the knowledge economy.* San Francisco: Jossey-Bass, pg. 118.
[2] Turgeon, K. 2018. In *Aventa Centre of Excellence for Women with Addictions. Annual report* 2017-2018.

- A Quality Improvement Committee: This committee discusses quality Improvement themes, makes recommendations, and implements quality improvement initiatives.
- Ethics Committee: This committee encourages reflection and increases the level of consciousness about ethical issues among staff with the Aventa Ethical Framework, discussing ethical themes and making recommendations, and arranging staff education activities.
- Joint Health, Safety & Risk Management Committee: This Committee consists of staff and management representatives working cooperatively to improve health and safety performance.

The commitment of the organization to ongoing quality improvement includes allocation of dedicated resources to make it happen. This includes providing time, resourcing and dedicated roles for professional development and clinical supervision, and for monitoring, evaluation, quality improvement and accreditation processes.

The Aventa Centre of Excellence for Women with Addictions. Photo by Fraser GermAnn, Community Mental Health Action Plan.

Learning and quality improvement processes

Undergirded by the foundational supports described above, learning and quality improvement occurs through numerous processes at Aventa. These include training and professional development; clinical supervision; "intelligence gathering"; and monitoring, evaluation, and accreditation.

TRAINING AND PROFESSIONAL DEVELOPMENT

Great attention is paid to competencies, ongoing learning and professional development. There are formalized positions to support training/professional development, clinical supervision, and evaluation.

Clinical staff at Aventa typically have a bachelor's or master's degree in helping services and thus fall under the Health Professions Act which requires professionals to undertake several hours professional development each year. Aventa makes sure that staff are responsible for doing this and provides opportunities for them fulfill this requirement. Nevertheless, this means that while the organization has a focus on learning, so must its staff:

> *Capri: "We make sure that staff are responsible to keep their licenses, but we give them opportunities for that, so professionalization and the regulation of the Health Professions Act does spur [learning]… so, it's not just the agency then; you individually have to have an attitude of continuous learning."*

For clinical staff, Aventa has determined that four critical areas of understanding are gender-responsive trauma informed care, addiction, mental health, and process group counseling. Once hired, clinical staff receive extensive training, including experiential learning around facilitating group processes. Beyond induction training, Aventa provides numerous professional development opportunities, including foundational topics but also topics relevant to current issues or challenges (e.g., most recently, opioid use).

[See the story, "*Trauma-Informed Care is Our Foundation*" for more information about training and professional development at Aventa.

In reflecting upon all of the attention given to training at Aventa, Capri observed that it is all important because it builds a culture of continuous quality improvement, it reduces mistakes, improves staff morale and skills and development, and it probably also saves time:

> *"It's all important because it builds a culture of continuous quality improvement. And, that's just the way it is… I think it also reduces mistakes. And I think having a responsive approach to training improves staff morale and skills and their own development whether they intend to be a practitioner at Aventa long term or even their career development when they leave here one day. It just adds to a more competent sector in workforce…. And I don't think it has to necessarily cost a lot of money, per se because there is going to be induction training, there's going to be costs and time associated with that. But there's also going to be costs and time associated with [not having training and] people being slower to be able to uptake and get ready to go, too."*

Staff meeting room. Photo by Fraser Germann, Community Mental Health Action Plan

CLINICAL SUPERVISION

Clinical staff also participate in various clinical supervision activities, including a weekly group session to discuss challenges in practice. This is a critical aspect of learning and improving. [See the story, "*Trauma-Informed Care is Our Foundation*" *for* more information about clinical supervision at Aventa.

INTELLIGENCE GATHERING

Capri: "Our evidence is fed from many directions."
"We're not afraid to respond to what other people identify as being a good practice."

The people at Aventa are continually gathering intelligence - scanning the broader environment for new ideas, new practices, new research, and so on. They often look to see whether good practices underway in other organizations might be a good fit for Aventa.

MONITORING, EVALUATION, QUALITY IMPROVEMENT AND ACCREDITATION, AND REPORTING

> *Capri: "And then… we do our own evaluations about the outcomes that we want to see change and improve for the women."*

Alongside training and professional development processes, monitoring, evaluation, accreditation and reporting play a central role in ongoing learning and quality improvement at Aventa.

Capri spoke about PDSAs (plan-do-study-act) being a fundamental way of learning how things are working and adapting them in order to improve. PDSAs are ongoing cycles of planning, acting and reflecting on how things went, then adapting and trying again. The key parts are the simple questions: *Well, how did that go? What can we do differently?* These two simple but rich questions are a foundation for continuous learning and quality improvement. At Aventa, this process is applied both to small and to large change efforts. What likely makes it work, however, is Aventa's strong culture of, and investment in, learning and continually improving.

Evaluations are completed for areas of our practice that we want to trial and improve. This includes, for example, new training. When Aventa started some new online training related to its curriculum, staff were asked to reflect on the pilot. Feedback was used to make adjustments, and then the program was fully instituted.

In terms of client experiences and outcomes, Aventa develops a client outcome report each year. This report includes benchmarks and quality improvement indicators for the next year. The larger internal document is shared with staff. A synopsis of this report is released to the public on the website. [Click here for the 2017-2018 report.]

In 2011, Aventa became an accredited organization through Accreditation Canada. The organization has "Exemplary Status" from Accreditation Canada. The decision to become accredited was not a requirement, but rather, a desire on the part of Aventa to seek an external validation of the quality of its services. It is evidence of Aventa's commitment to evidence and quality improvement:

> *Capri: "Our commitment to the evidence and quality improvement and that kind of evolution is why we became voluntarily accredited with Accreditation Canada…we have an external validation of quality."*

Accreditation Canada's standards and requirements direct data collection and staff training in some regards. In this way, the accreditation process has a become another foundational support for ongoing learning and improvement. [Click here to read the 2018 Accreditation Report for Aventa.]

Inspired? Intrigued? Encouraged? Want to make similar changes in your practice or organization? For a smorgasbord of ideas for how you can make it happen, search for "*Shared Wisdom for Supporting Mental Health in the Community*" on the Community Mental Health Action Plan website at **mentalhealthactionplan.ca**

Trauma-Informed Care Resources

Alberta Health Services. *Trauma informed care modules*. https://www.albertahealthservices.ca/info/page15526.aspx

Alberta Health Services. *Why Welcoming is Important* handout: https://www.albertahealthservices.ca/assets/info/amh/if-amh-ecc-why-welcoming-is-important-qrs.pdf

Arthur, E., Seymour, A., Dartnall, M., Beltgens, P., Poole, N., Smylie, D., … Schmidt, R. (2013). *Trauma-informed practice guide*. Vancouver, B.C: BC Provincial Mental Health and Substance Use Planning Council.

Barnett Brown, V. 2018. *Through a trauma lens. Transforming health and behavioral health systems.* New York: Routledge.

Bloom, S. & Farragher, B. 2013 *Restoring sanctuary. A new operating system for trauma-informed systems of care.* New York: Oxford University Press.

Canadian Centre on Substance Abuse *Trauma Informed Care*
http://www.ccsa.ca/Resource%20Library/CCSA-Trauma-informed-Care-Toolkit-2014-en.pdf

Harris, M., & Fallot, R. D. (2001). Envisioning a trauma-informed service-system: A vital paradigm shift. *New Directions in Mental Health Services,* 89, 3-22.

Manitoba Trauma Information and Education Centre (MTIEC). 2013. *Trauma-informed: The trauma toolkit (2nd ed.)*. Winnipeg, MB: Author.

Manitoba Trauma Information and Education Centre: http://trauma-informed.ca

Poole, N., & Greaves, L. (Eds.). 2012. *Becoming trauma informed*. Toronto, ON: CAMH.

SAMHSA. 2013. TIP 57 *Trauma-informed care in behavioral health systems.* Author.