

Better Data, Better Outcomes

Use of Standardized Tools in Ontario's Community Mental Health and Addiction Sector

Series 2: Ontario Common Assessment of Need (OCAN)

February 2, 2023



Land Acknowledgement



Data Literacy

Better Data, Better Outcomes

Use of Standardized Tools in Ontario's Community
Mental Health and Addiction(MHA) Sector

2022 Data Literacy Webinar Series! OCAN

Learning Objectives:

- Focus on what the OCAN is & why use it
- An overview, and examples of how to analyze the data to inform service delivery and decision making
- Answering your questions about OCAN data







Questions – January 12th 2023

"How can you address clients who are active in more than one functional centre (FC)? I understand that the OCAN is only completed once every 6 months by the primary worker. This would mean the data is attributed to one FC and the needs are not tagged to the other active FCs so they would be missing from the reports. Is this true, or would the OCAN data be pushed to all the other active programs in the client management system or IAR (Integrated Assessment Record)? "

"I was wondering, would we have the opportunity to learn to how to fill out an OCAN at some point? Will the MNI (Meet Need Index) be auto calculated for all agencies once the MHQI (Mental Health Quality Indicator) pilot is complete?"

"Is there a percentage of the OCAN Core required to be filled out?"

"I think that most orgs would benefit from a 'where we are vs where we want to be' discussion with an OCAN specialist. Is this possible?"

"Are all agencies involved uploading the data to IAR through their vendor regardless of whether the client consents or not? Or just the OCAN's that express consent is obtained?"

"As a mental health organization are you required to do assessments if OCAN is used for your intake process? Has some of the domains (e.g., accommodation, food) consider external impacts such as the economic climate (increased competition for accommodation and food)?"

How to Use OCAN Data

There are a number of key questions the community mental health sector is not able to answer

Key Questions

Who is using CMH services, which services, for how long?

What care needs do people we serve have?

What are service user outcomes?

Do outcomes differ across groups?

There are 3 sources of OCAN data that can be leveraged to answer these key questions

1. OCAN reports in the **Integrated Assessment Record (IAR)**
2. OCAN reports for organizations participating in the **Mental Health Quality Indicator (MHQI) study**
3. OCAN data within your **organization's software system**



FYI: OCAN Reports in the IAR



- Reports have CCIM logo, but this has been transitioned to **Ontario Health**



- Reports containing current version of OCAN 3.0 are reports **4A, 4B, 6A and 6B**
- Reports containing past version of OCAN 2.0 will be discontinued on **February 10, 2023**. Reports 1A, 1B, 1C, 2A, 2B, 3, 5A and 5B
- The **MHQI study** and **your feedback** will inform future reports



Our thanks to organizations that shared their reports and data for this workshop

A huge thank you to the following organizations:

- CMHA Kenora
- CMHA Niagara
- LOFT Community Services
- Support House



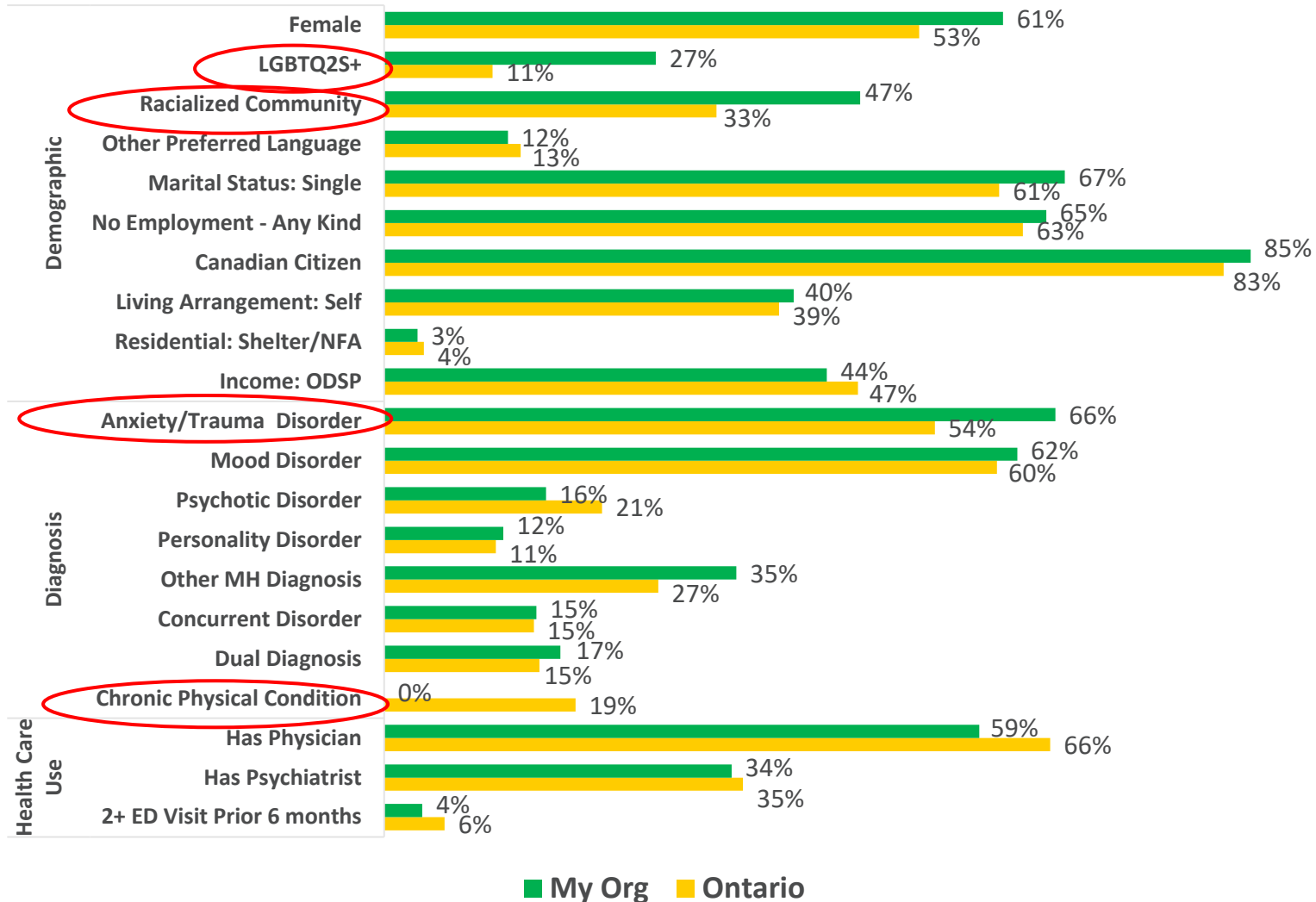


Who is using CMH Services,
Which Services, for how long?

Who do we serve?

MHQI Report #1

Clients within LOFT: Case management



What comes to mind when looking at the data:

- Higher proportion of LGBTQ2S+
- Higher proportion of racialized
- Higher rates of anxiety/trauma
- No data on chronic physical health conditions

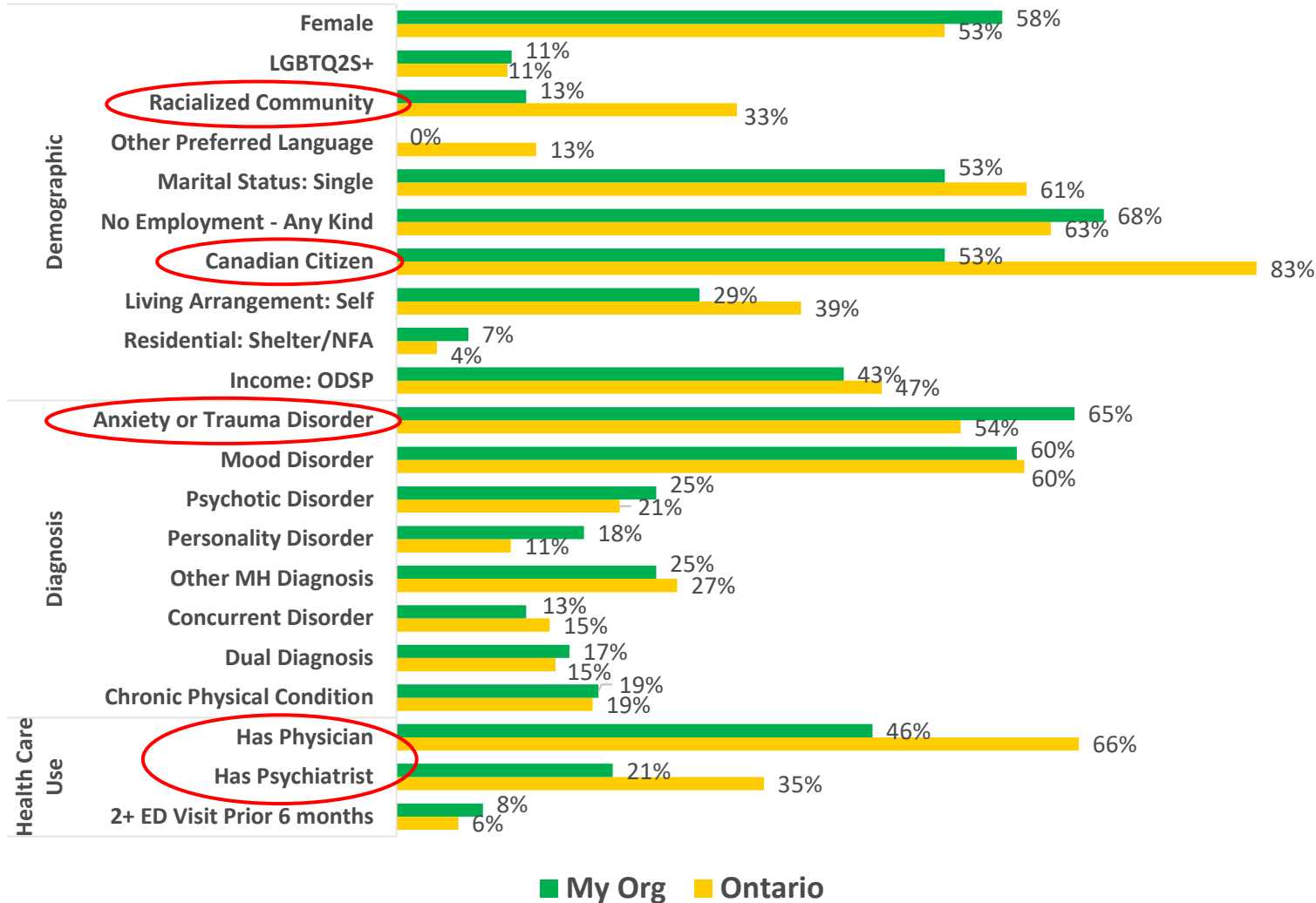
What questions do the data raise for you?

- How reflective are clients of community we serve?
- How reflective are staff of clients we serve?
- What's the relationship between the prevalence of specific diagnosis and need profile?
- Should we be collecting data on medical condition?



Who do we serve?

MHQI Report #1 Clients within CMHA Niagara: Case management



What comes to mind when looking at the data:

- Lower proportion of racialized
- Lower proportion Cdn citizen
- Higher rates of anxiety/trauma
- Lower rates of physician attachment

What questions do the data raise for you?

- How reflective are clients of community we serve?
- What's the relationship between the prevalence of diagnoses and need profile?
- What may be driving lower rates of citizenship, physician attachment?



Which services are people using?

- **OCAN IAR Reports 4 A&B and 6 A&B are broken down by functional centres (FCs)**
 - Provides data on clients in different FCs in your organization if the FC information is included in the OCAN
 - Reports can flag data quality issues to explore
 - **Examples:** CMHA Niagara and Support House

Report #4B: Need Analysis (Unmet + Met Needs) - Staff Assessments By Functional Centre Includes most recent OCAN assessment for active clients					
Organization: 402 - Canadian Mental Health Association, Niagara Branch					
Report Date Range (12 Months): January 13 2022 to January 13 2023					
# of OCANs: 289					
Domain	UNMET NEED		MET NEED		Total OCANs %
	OCAN #	OCAN %	OCAN #	OCAN %	
725 09 76 - Case Management (173 Assessment/s)					
725 10 76 40 - Vocational/Employment (45 Assessment/s)					
725 10 76 55 - Forensic (1 Assessment/s)					
725 51 76 12 - Alternative Businesses (1 Assessment/s)					

Ontario Common Assessment of Need (OCAN)					
Report#6B: Change in Unmet Need - Staff Assessment By Functional Centre Includes most recent set of OCAN assessments for active clients ¹					
Organization: 405 - Support and Housing - Halton					
Report Date Range (24 Months): December 14 2020 to December 14 2022					
# of OCAN sets: 58 (A set is defined as the 2 most recent OCANs for the same client within the 24 month report period)					
PREVIOUS ASSESSMENT			MOST RECENT REASSESSMENT		
Domain Name	# of UNMET NEED	# of Reassessed OCANs	Reassessment Rating Description	% of Reassessed OCANs	Graph of # Reassessed OCANs
725 107 699 - Other MH services not elsewhere classified (4 Assessment sets)					

- MHQI study provides reports for the following functional centres:
 - Intensive case management
 - Support within housing
 - Assertive Community Treatment (ACT)



How long are people using services?

Data quality issues currently hamper calculating the length of service but steps can be taken to address these issues

All SID Missing with Exit Disposition and completion dates regularly every 6 months							
Ax Count	FUNCTIONAL CENTRE	Client ID - Factitious	SERVICEINITIATION DATE	EXITDATE	EXIT DISPOSITION	COMPLETION DATE	START_DATE
1	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	19-Apr-12	11-May-11
2	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	05-Jul-12	18-Jun-12
3	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	17-Jun-13	17-Jun-13
4	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	11-Dec-14	11-Dec-14
5	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	08-Jun-15	08-Jun-15
6	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	10-Jun-16	10-Jun-16
7	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	09-Dec-16	09-Dec-16
8	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	09-Jun-17	09-Jun-17
9	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	05-Jun-18	05-Jun-18
10	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	13-Dec-18	12-Dec-18
11	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	11-Jun-19	11-Jun-19
12	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	12-Dec-19	12-Dec-19
13	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	16-Jun-20	16-Jun-20
14	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	16-Dec-20	16-Dec-20
15	7250976	797827	15-Oct-1582	15-Oct-1582	019-02	29-Jun-21	29-Jun-21

The Problem:

Data quality issues include:

- Missing Service Initiation Date
- Repeat Exit Dispositions

Solutions:

- 1) Orgs participating in the MHQI study receive MRNs (Report #2) of clients with these issues to support data quality improvement efforts
- 2) The mental health and addictions provincial data set (MHA-PDS) includes service use data. OH is working on full alignment between the common fields in the MHA-PDS and OCAN to improve accuracy and reduce the administrative burden of entering it multiple times.





What Care Needs do People we Serve have?

What Care Needs do People we Serve have?

OCAN IAR Report #4							
Report #4B: Need Analysis (Unmet + Met Needs) - Staff Assessments By Functional Centre Includes most recent OCAN assessment for active clients							
Organization:		323 - LOFT Community Services					
Report Date Range (12 Months):		January 13 2022 to January 13 2023					
# of OCANs:		256					
Domain	UNMET NEED		MET NEED		UNMET NEED %	MET NEED %	Total OCANs %
	OCAN #	OCAN %	OCAN #	OCAN %			
725 09 76 - Case Management (203 Assessment/s)							
Psychological Distress	57	28 %	76	37 %	28	37	65
Daytime Activities	50	25 %	80	39 %	28	30	64
Accommodation	95	47 %	29	14 %	47	14	61
Physical Health	48	24 %	65	32 %	24	32	56
Food	63	31 %	41	20 %	31	20	51
Condition and Treatment	54	27 %	37	18 %	27	18	45
Self-Care	33	16 %	50	25 %	16	25	41
Money	26	13 %	50	25 %	13	25	38
Looking After the Home	42	21 %	34	17 %	21	17	38
Company	14	7 %	51	25 %	7	25	32
Benefits	31	15 %	27	13 %	15	13	28
Psychotic Symptoms	39	19 %	17	8 %	19	8	27
Transport	21	10 %	31	15 %	10	15	25
Drugs	21	10 %	29	14 %	10	14	24
Safety to Self	23	11 %	16	8 %	11	8	19
Intimate Relationships	5	2 %	31	15 %	2	15	17
Alcohol	14	7 %	19	9 %	7	9	16
Other Addictions	8	4 %	16	8 %	4	8	12
Basic Education	7	3 %	13	6 %	3	6	9
Communication	5	2 %	11	5 %	2	5	7
Sexual Expression	4	2 %	10	5 %	2	5	7
Other Dependants	6	3 %	0	0 %	3		3
Safety to Others	3	1 %	2	1 %	1		2
Child Care	3	1 %	2	1 %	1		2

MHQI Study Report #3										
Need Domain	Source	Count of Need Status				Percentage Need Status				
		Unmet	Met	No Need	Unknown					
Accommodation	My Org	34	65	113	1	18%	31%	53%	0%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	291	771	1232	37	12%	33%	53%	2%	
Food	My Org	29	50	131	3	14%	23%	62%	1%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	223	625	1411	72	10%	27%	61%	3%	
Looking After Home	My Org	26	34	150	3	12%	16%	70%	1%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	235	535	1437	124	10%	23%	62%	5%	
Self Care	My Org	39	32	140	2	18%	15%	66%	1%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	187	400	1651	93	8%	17%	71%	4%	
Daytime Activities	My Org	65	56	92	0	31%	26%	43%	0%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	542	703	1004	82	23%	30%	43%	4%	
Physical Health	My Org	52	50	110	1	24%	23%	52%	0%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	450	779	1006	96	18%	33%	43%	4%	
Psychotic Symptoms	My Org	16	34	161	2	8%	16%	76%	1%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	169	484	1575	103	7%	21%	68%	4%	
Information on Condition/Tx	My Org	28	27	156	2	13%	13%	73%	1%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	217	551	1454	109	9%	24%	62%	5%	
Psychological Distress	My Org	69	65	78	1	32%	31%	37%	0%	<ul style="list-style-type: none"> Unmet Met No Need Unknown
	Province	744	937	560	90	32%	40%	24%	4%	

Report #4B: Need Analysis (Unmet + Met Needs) - Staff Assessments By Functional Centre
Includes most recent OCAN assessment for active clients

Organization:
Report Date Range (12 Months): January 13 2022 to January 13 2023
of OCANs: 122

Domain	UNMET NEED		MET NEED		UNMET NEED %	MET NEED %	Total OCANs %
	OCAN #	OCAN %	OCAN #	OCAN %			
725 10 76 12 - Counseling & Treatment (44 Assessment/s)							
Intimate Relationships	12	27 %	13	30 %	27	30	57
Psychological Distress	21	48 %	1	2 %	48	2	50
Safety to Self	15	34 %	1	2 %	34	2	36
Company	11	25 %	4	9 %	25	9	34
Daytime Activities	5	11 %	8	18 %	11	18	29
Physical Health	10	23 %	2	5 %	23	5	28
Condition and Treatment	10	23 %	1	2 %	23	2	25
Accommodation	8	18 %	2	5 %	18	5	23
Sexual Expression	6	14 %	2	5 %	14	5	19
Looking After the Home	8	18 %	0	0 %	18	0	18
Food	5	11 %	1	2 %	11	2	13
Drugs	3	7 %	3	7 %	7	7	14
Money	2	5 %	3	7 %	5	7	12
Psychotic Symptoms	3	7 %	1	2 %	7	2	9
Other Dependants	3	7 %	0	0 %	7	0	7
Transport	3	7 %	0	0 %	7	0	7
Other Addictions	1	2 %	2	5 %	2	5	7
Self-Care	3	7 %	0	0 %	7	0	7
Safety to Others	2	5 %	0	0 %	5	0	5
Alcohol	2	5 %	0	0 %	5	0	5
Basic Education	2	5 %	0	0 %	5	0	5
Benefits	2	5 %	0	0 %	5	0	5
Communication	2	5 %	0	0 %	5	0	5
Child Care	0	0 %	1	2 %	0	2	2

What needs do our clients have?

What comes to mind when looking at the data?

- Largest any need (met + Unmet):
 - Intimate Relationships (57%)
 - Psychological Distress (50%)
 - Safety to Self (36%)
 - Company (34%)
- Largest unmet need:
 - Psychological Distress (48%)
 - Safety to Self (34%)
 - Intimate Relationships (27%)
 - Company (25%)

What questions do the data raise for you?

- Does this validate that your providing C&T services to the right client population?
- What are the effective practices being used to help meet needs in intimate relationships?
- What are the prevalent issues clients are experiencing with psychological distress and safety to self?



What needs do our clients have?

Need Domain	Source	Count of Need Status				Percentage Need Status	
		Unmet	Met	No Need	Unknown		
Accommodation	My Org	34	65	113	1	My Org	16% Met 53% No Need 0% Unknown
	Province	291	771	1232	37	Province	12% Met 53% No Need 2% Unknown
Food	My Org	29	50	131	3	My Org	14% Met 62% No Need 1% Unknown
	Province	223	625	1411	72	Province	10% Met 61% No Need 3% Unknown
Looking After Home	My Org	26	34	150	3	My Org	12% Met 70% No Need 1% Unknown
	Province	235	535	1437	124	Province	10% Met 62% No Need 5% Unknown
Self Care	My Org	39	32	140	2	My Org	18% Met 66% No Need 1% Unknown
	Province	187	400	1651	93	Province	8% Met 71% No Need 4% Unknown
Daytime Activities	My Org	65	56	92	0	My Org	31% Met 43% No Need 0% Unknown
	Province	542	703	1004	82	Province	23% Met 43% No Need 4% Unknown
Physical Health	My Org	52	50	110	1	My Org	24% Met 52% No Need 0% Unknown
	Province	450	779	1006	96	Province	19% Met 43% No Need 4% Unknown
Psychotic Symptoms	My Org	16	34	161	2	My Org	8% Met 76% No Need 1% Unknown
	Province	169	484	1575	103	Province	7% Met 68% No Need 4% Unknown
Information on Condition/Tx	My Org	28	27	156	2	My Org	13% Met 73% No Need 1% Unknown
	Province	217	551	1454	109	Province	9% Met 62% No Need 5% Unknown
Psychological Distress	My Org	69	65	78	1	My Org	32% Met 37% No Need 0% Unknown
	Province	744	937	560	90	Province	32% Met 24% No Need 4% Unknown

What comes to mind when looking at the data:

- Comparable rates with province
- Largest any need:
 - Psychological Distress (63%)
 - Daytime Activities (57%)
 - Physical Health (47%)
- Largest unmet need:
 - Psychological Distress
 - Daytime Activities
 - Physical Health

What questions do the data raise for you?

- Do we have the optimal service mix to address needs?
- Are there services internally or externally we could leverage to met need?
- Should we be collecting data on medical condition?



What Needs do our Clients have?

***Culture Shift:
How Support House is using OCAN data***

Identifying Needs and Actions: Using OCAN with Clients

Sample of fictional client

Summary of actions		
Priority	Domain	Action(s)
1	10-safety to self	Accompany Joe to next psychiatrist appointment. Recommend to psychiatrist to see Joe more regularly.
2	09-psychological distress	Accompany Joe to next psychiatrist appointment.
3	15-company	Connect with people in the social rec. program by having conversations with them.
4	16-intimate relationships	Discuss a plan to reconnect with daughter and his desire to have a girlfriend.
5	03-looking after the home	Meet weekly with housing worker to build skills in tasks related to looking after the home.
6	23-money	Continue to work on budgeting during case management sessions.

Focusing on Client Needs: Using OCAN in Supervision

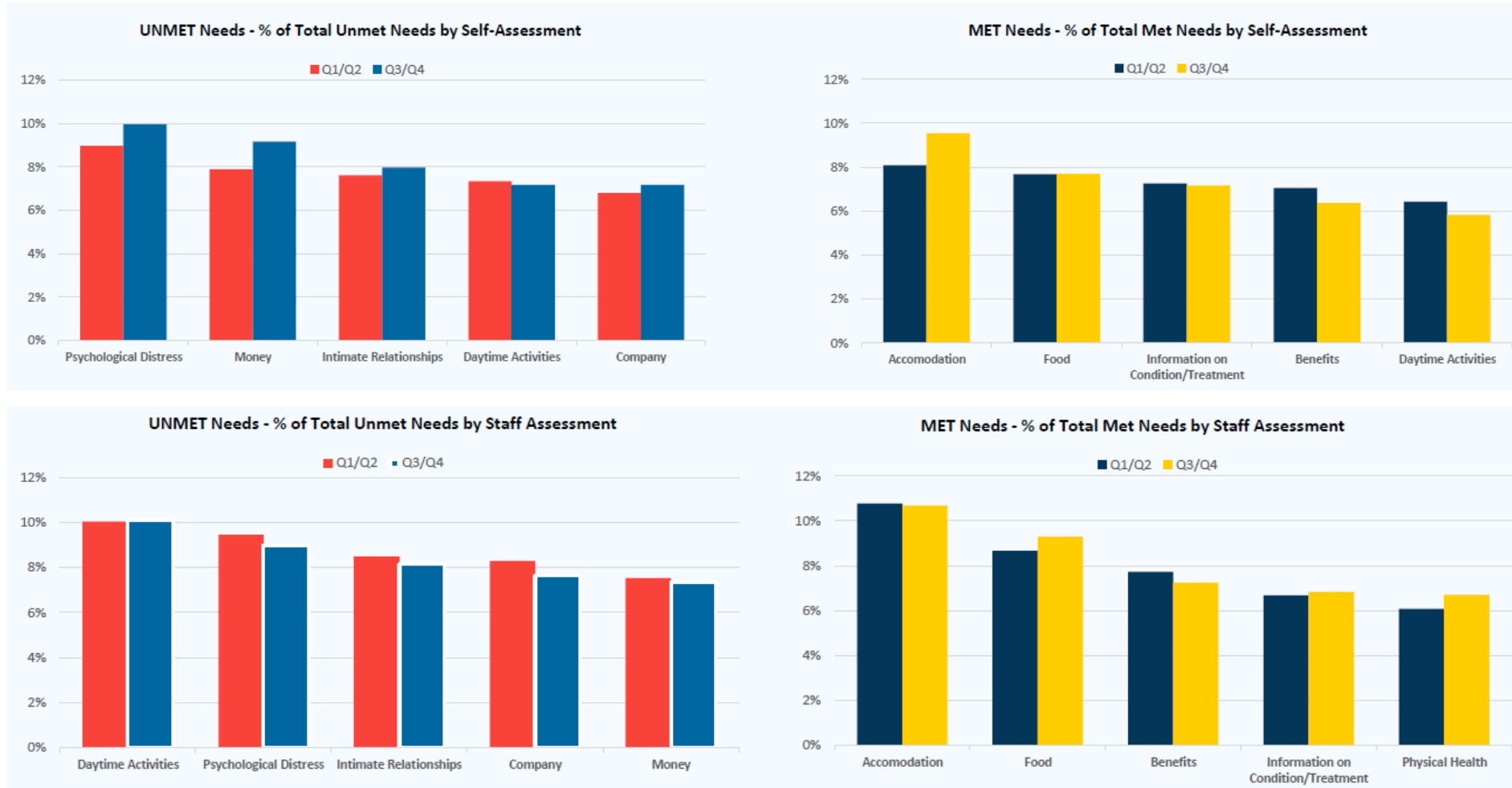


MONTHLY SUPPORTS SUPERVISION TEMPLATE

DATE:		STAFF NAME:		SUPERVISOR:	
Workload Review (amount, time, duties, etc.):					
Low Needs:					
Medium Needs:					
High Needs:					
Client Review:					
Client	LOCUS	OCAN Needs	What you're doing	Support Circle (In-Person - IP / Virtual - V)	Housing Situation



Understanding Client Population Needs: Using OCAN at the Organizational Level



What Care Needs do People we Serve have?

- What questions/curiosities do you have about what you're seeing in the report?
- What questions do you have for the subject matter experts?
- What ways have you used or plan to use your OCAN data with staff and/or clients?
- What Challenges have you had with these reports?





What are the Service Outcomes?

What are the Service Outcomes?

Software Generated Report: CMHA Niagara

Needs over Time (Consumer and Staff) Summary of Needs 2								
Domain	2021-02-13 Reassessment 2 - Consumer	2021-02-13 Reassessment 2 - Staff	Change	2022-05-02 Previous Assessment - Consumer	2022-05-02 Previous Assessment - Staff	Change	2022-07-18 Current Assessment - Consumer	2022-07-18 Current Assessment - Staff
01. Accommodation	Unmet Need	Unmet Need	✓	No Need	Met Need		NA	Met Need
02. Food	No Need	No Need	✓	No Need	Met Need		NA	Met Need
03. Looking After Home	Unmet Need	Unmet Need		Unmet Need	Unmet Need		NA	Unmet Need
04. Self Care	Met Need	No Need	✓	Unmet Need	Met Need		NA	Met Need
05. Daytime	Met Need	No Need	✓	Unmet Need	Met Need		NA	Met Need
06. Physical Health	No Need	No Need		No Need	No Need		NA	No Need
07. Psychotic Symptoms	Met Need	Met Need		Met Need	Met Need		NA	Met Need
15. Company	No Need	No Need		No Need	No Need		NA	No Need

What comes to mind when looking at the data?
Report can help guide conversations with client about....

- Positive outcomes:
 - accommodation – converted from Unmet Need to Met Need/No Need
 - psychotic symptoms – sustained Met Need
- Strengths: No Need in physical health and company
- Different Perspectives: food, self care and daytime activities
- Persistent Unmet Need: looking after the home

What questions do the data raise for you?

- What are some of the client's skills/strengths in areas of No Need and Met Need?
- What services helped address the Unmet Need in accommodation?
- What are the specific challenges with looking after the home? What interventions have been attempted and what new strategies can be explored?
- What is the client's and staff's rationale for different need ratings in food, self care and daytime activities?



What are the Service Outcomes?

Caution!: OCAN IAR report #6 does not provide the whole picture on service outcomes.

- For example, it does not credit organizations for their performance on helping clients maintain met needs over time

Report#6A: Change in Unmet Need - Consumer Self-Assessment By Functional Centre Includes most recent set of OCAN assessments for active clients ¹					
Organization: 323 - LOFT Community Services					
Report Date Range (24 Months): January 13 2021 to January 13 2023					
# of OCAN sets: 17 (A set is defined as the 2 most recent OCANs for the same client within the 24 month report period)					
PREVIOUS ASSESSMENT		MOST RECENT REASSESSMENT			
Domain Name	# of UNMET NEED	# of Reassessed OCANs	Reassessment Rating Description	% of Reassessed OCANs	Graph of # Reassessed OCANs
725 10 76 20 - Assertive Community Treatment Teams (12 Assessment sets)					
Psychological Distress	5	2	Met Need	40%	
		2	No Need	40%	
		1	Unmet Need	20%	
Company	4	1	Met Need	25%	
		1	No Need	25%	
		2	Unmet Need	50%	

What comes to mind when looking at the data:

- Be aware of numbers of assessments included
- What unmet needs are getting addressed:
 - Psychological Distress (80%)
 - Benefits (60%)
- What areas remain unmet
 - Company (50%)
 - Daytime Activities (64% and 84%)

Report#6B: Change in Unmet Need - Staff Assessment By Functional Centre Includes most recent set of OCAN assessments for active clients ¹					
Organization: 323 - LOFT Community Services					
Report Date Range (24 Months): January 13 2021 to January 13 2023					
# of OCAN sets: 165 (A set is defined as the 2 most recent OCANs for the same client within the 24 month report period)					
PREVIOUS ASSESSMENT		MOST RECENT REASSESSMENT			
Domain Name	# of UNMET NEED	# of Reassessed OCANs	Reassessment Rating Description	% of Reassessed OCANs	Graph of # Reassessed OCANs
725 40 76 30 - Supportive within Housing (24 Assessment sets)					
Daytime Activities	11	2	Met Need	18%	
		2	No Need	18%	
		7	Unmet Need	64%	
Benefits	5	2	Met Need	40%	
		1	No Need	20%	
		2	Unmet Need	40%	
725 09 76 - Case Management (141 Assessment sets)					
Daytime Activities	61	7	Met Need	11%	
		3	No Need	5%	
		51	Unmet Need	84%	

What questions do the data raise for you?

- What have been effective practices to help address needs?
- Are there internal or external services that we can leverage to better address unmet needs?
- Are there environmental impacts or service gaps that have made it challenging to help address some needs?



Service outcomes can also be measured by the Met Need Index

Met Need Index (MNI)

- Drawn from research literature
- Ratio of positive outcomes / total positive and negative outcomes
- Scoring is conditional on need status in previous assessment
- MNI measures change in needs between assessments
- MNI ratio ranges between 0 and 1
- Higher ratio = better outcomes
- Can be converted into a % of positive transitions by multiplying by 100
 - e.g. MNI score of 0.60 means that 60% of possible transitions had positive outcomes

Caution

- Measure is developmental
- Analyses limited by:
 - Convenience sample
 - Missing data
- Conclusions should not be drawn about performance of specific organizations or the CMH sector at this time

Staff Assessment by Functional Centre					Average Length of Stay:	
Date Range: Most recent assessment completed between Apr 1, 2022-Sept 30, 2022					My Org: 34 months	
Organization:			Functional Centre: Case Managemnt		Province:59 months	
Need Cluster	Need Domain	Met Need Index		% Positive Outcomes: My Org	# of Clients: My Org	
		Province	My Org			
Basic Needs	Accommodation	0.82	0.69	69%	24	
	Food	0.43	0.70	70%	14	
	Daytime Activities	0.67	0.58	58%	29	
	Total Basic Needs	0.64	0.66	66%		
Health Needs	Physical Health	0.67	0.53	53%	24	Relative Performance by Percentile: Below 40th Percentile Between 40th & 75th PRCTL Above 75th PRCTL
	Psychotic Symptoms	0.75	0.58	58%	17	
	Psychological Distress	0.65	0.52	52%	37	
	Safety to Self	0.80	0.83	83%	18	
	Safety to Others	0.73	0.40	40%	5	
	Alcohol Use	0.62	0.38	38%	8	
	Drug Use	0.57	0.63	63%	14	
	Other Addictions	0.58	0.36	36%	15	
	Total Health Needs	0.67	0.53	53%		
Functional Needs	Self-care	0.72	0.68	68%	15	
	Looking After Home	0.72	0.69	69%	20	
	Education	0.61	0.71	71%	14	
	Money	0.72	0.55	55%	30	
	Child Care	0.71	0.44	44%	7	
	Other Dependents	0.72	0.51	51%		
Total Functional Needs	0.70	0.60	60%			
Social Needs	Company	0.66	0.40	40%	24	
	Intimate Relationships	0.45	0.41	41%	19	
	Sexual Expression	0.23	0.18	18%	13	
	Total Social Needs	0.45	0.33	33%		
Service Needs	Info Condition/Tx	0.79	0.58	58%	23	
	Communication	0.75	0.50	50%	7	
	Transportation	0.79	0.90	90%	19	
	Benefits	0.77	0.50	50%	15	
	Total Service Needs	0.78	0.62	62%		
Summary MNI (all needs)		0.66	0.55	55%		

What comes to mind when looking at the data:

- Summary MNI: 55% of transitions positive outcomes
- MNI above provincial average for:
 - Food**
 - Safety to Self
 - Drugs
 - Education
 - Transportation
- MNI scores with largest difference from provincial average tend to have smallest counts of clients:
 - Safety to Others
 - Child Care
 - Alcohol
 - Communication
- Suggested areas of focus:
 - Psychological Distress
 - Money
 - Daytime Activities
 - Physical Health
 - Company

What questions do the data raise for you?

- What's contributing to successful outcomes for Food? Can we spread process to other FCs?
- Do we have the optimal service mix to address needs?
- How can we unpack what's driving lower MNI scores for the suggested needs of focus



What are the Service Outcomes?

- What questions/curiosities do you have about what you're seeing in the report?
- What questions do you have for the subject matter experts?
- What ways have you used or plan to use your OCAN data with staff and/or clients?
- What Challenges have you had with these reports?





Do Outcomes Differ Across groups?

Do outcomes differ across groups?

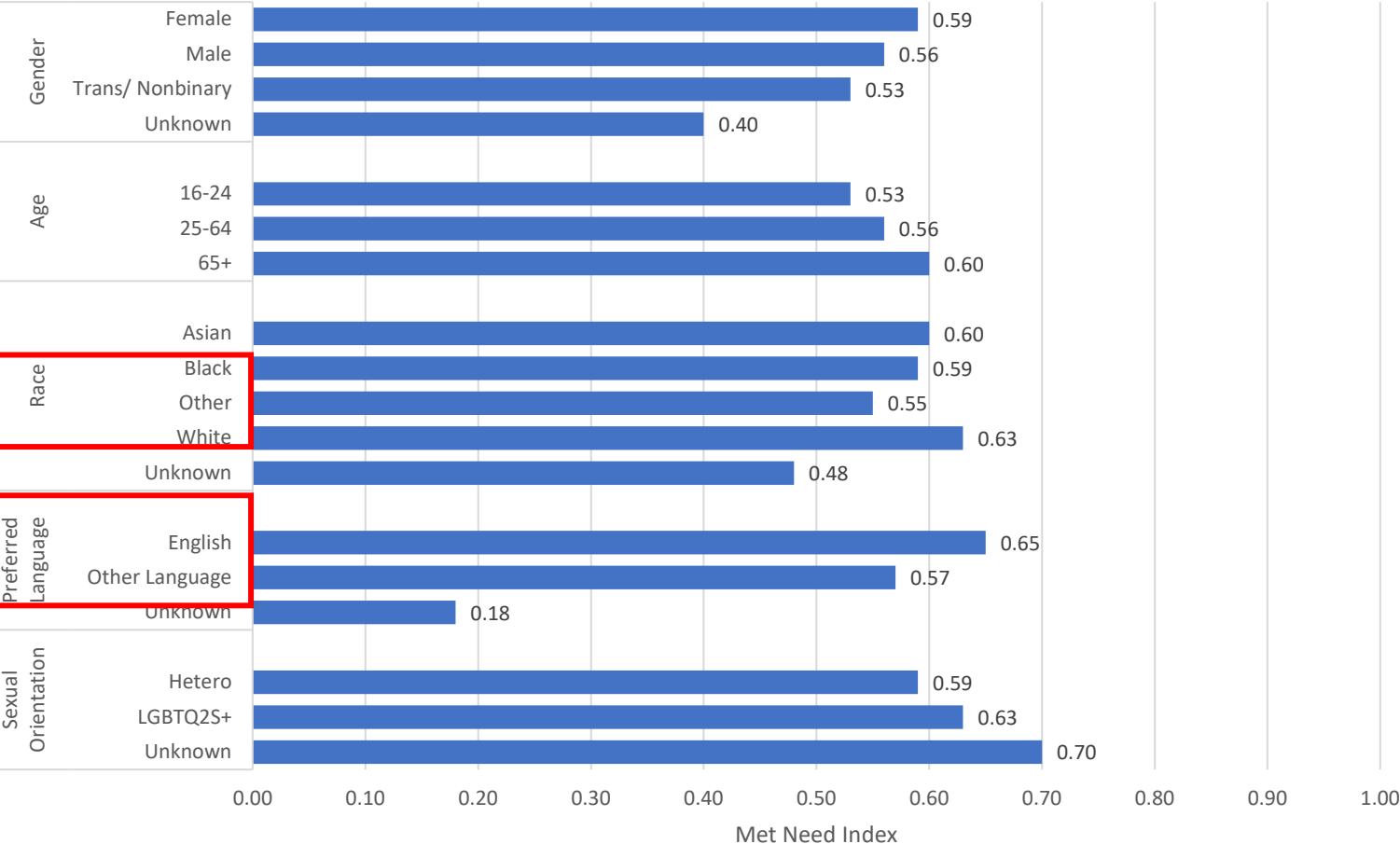
- OCAN IAR Reports: Does not yet have a report to answer this question
- MHQI Study: Report 9, reporting data from 2020, and developed annual basis

Do outcomes differ across groups?

MHQI Report #9

Clients within LOFT: ICM (FY2020)

Comparison of Summary Met Need Index Across Sociodemographic Characteristics



What comes to mind when looking at the data:

- Differences across groups are relatively small
- Largest differences are for Preferred Language and Race
- Average difference across groups comparing all groups to group with highest MNI (English) is 0.065 or 6.5% (average absolute deviation)



Do Outcomes Differ Across Groups?

- What questions/curiosities do you have about what you're seeing in the report?
- What questions do you have for the subject matter experts?
- What ways have you used or plan to use your OCAN data with staff and/or clients?
- What Challenges have you had with these reports?





Please provide your feedback!



TIME FOR ACTION

Questions and Curiosities



Better Data, Better Outcomes

Use of Standardized Tools in Ontario's Community
Mental Health and Addiction (MHA) Sector

Six-Part Data Literacy Webinar Series

Next in the series

Registration Link [HERE!](#)

Level of Care Utilization System (LOCUS)

Webinar: February 9th, 2023

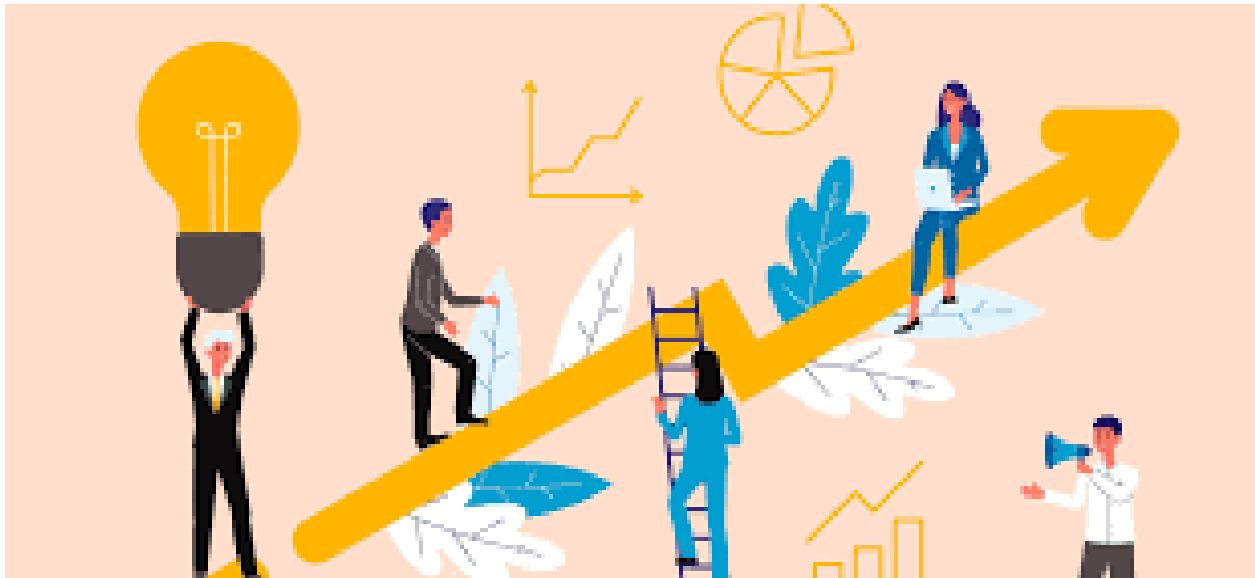
Workshop: February 23rd, 2023

quality@e-qip.ca



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E-QIP is delivered in partnership by

- ▶ Addictions and Mental Health Ontario
- ▶ Canadian Mental Health Association, Ontario Division
- ▶ Provincial System Support Program at CAMH
- ▶ E-QIP's work is funded by the MHA Centre of Excellence and will support the priorities as laid out in the Roadmap to Wellness



Thank you

danke 謝謝 ngiyabonga شكراً جزيلاً

спасибо faafetai lava mersi barka welalin tack teşekkür ederim mahalo tapadh leat

Баярлалаа nanni nandri kiitos dankie dhanyavad maururu vinaka blagodaram dank je misaotra matondo paldies grazzi хвала asante manana

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merc

Appendix

Calculation of MNI



Calculation of MNI

MNI= # positive outcomes / (# positive + # negative outcomes)

Positive Outcomes for MNI

- Unmet need → met or no need
- Met need → met need or no need
- Unknown need → met need or no need

Negative Outcomes for MNI

- Unmet need → unmet need
- Met need → unmet need
- Unknown need → unknown need

Neutral / Not Applicable Outcomes

- No need → unmet need
- No need → met need
- No need → unknown need
- No need → no need



Calculating MNI – An Example

Items	2010	2011	2012	2013	2014
Accommodation	unmet	unmet	met	met	unmet
Food	no need	unmet	met	no need	no need
Looking After Home	no need	unknown	unknown	met	met
Self-Care	no need	met	unmet	no need	met
Daytime Activities	unmet	no need	no need	unmet	no need

MNI Calculation:

- MNI scores range between 0 and 1
 - 1=positive outcome
 - 0= negative outcome
- Note: Higher score=better outcome (i.e. reduction in unmet or unknown need)

Items	2010 to 2011	2011 to 2012	2012 to 2013	2013 to 2014	Count of positive outcome	Total number of applicable years for each item	Calculation of MNI per domain	MNI	% transitions with positive outcome
Accommodation	0	1	1	0	2	4	$2/4 =$	0.50	50%
Food	NA	1	1	NA	2	2	$2/2 =$	1.00	100%
Looking After Home	NA	0	1	1	2	3	$2/3 =$	0.66	66%
Self-Care	NA	0	1	NA	1	2	$1/2 =$	0.50	50%
Daytime Activities	1	NA	NA	1	2	2	$2/2 =$	1.00	100%
Overall MNI					9	13	$9/13 =$	0.69	69%



Met Needs Index (MNI) – An Example

Items	2010	2011	2012	2013	2014
Accommodation	unmet	unmet	met	met	unmet
Food	no need	unmet	met	no need	no need
Looking after home	no need	unknown	unknown	met	met
self care	no need	met	unmet	no need	met
Daytime activities	unmet	no need	no need	unmet	no need

MNI Calculation:

- MNI scores range between 0 and 1
 - 1=positive outcome
 - 0= negative outcome

Note: Higher score=better outcome (i.e. reduction in unmet or unknown need)

Items	2010 to 2011	2011 to 2012	2012 to 2013	2013 to 2014	Count of positive outcome	Total number of applicable years for each item	Calculation of MNI per domain	MNI	% transitions with positive outcome
Accommodation	0	1	1	0	2	4	2/4 =	0.50	50%
Food	NA	1	1	NA	2	2	2/2 =	1.00	100%
Looking after home	NA	0	1	1	2	3	2/3 =	0.66	66%
self care	NA	0	1	NA	1	2	1/2 =	0.50	50%
Daytime activities	1	NA	NA	1	2	2	2/2 =	1.00	100%
Overall MNI					9	13	9/13 =	0.69	69%

