

# Ontario Structured Psychotherapy Program (OSPP) Champlain

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# Agenda

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1. OSSP Champlain
2. Core Activities
3. Accomplishments
4. Lessons Learned
5. Next Steps

# OSPP Champlain

*Ontario Structured Psychotherapy Program*

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- One of four Service Lead Organizations for the OSP program
- Providing short-term Cognitive Behavioural Therapy (CBT) for adults who are experiencing depressive and anxiety disorders, Obsessive-Compulsive Disorder (OCD), and Post-Traumatic Stress Disorder (PTSD)



## OSPP Champlain

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The OSP Program at the Royal is consistent with a hub and spoke model. The Royal acts as a quality, training and administrative hub that provides support for clinical service delivery across various settings in the community.

- Includes 30 trained therapists delivering 10-20 sessions of CBT
- Delivered in collaboration with community-based providers
  - Primary care (community health centres)
  - Community mental health agencies
  - Family service organizations

Between 90% to 98% of our referrals at this time are from a family physician or nurse practitioner

# OSPP Champlain

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- The Royal (service lead organization)
- Family Services Ottawa
- Hawkesbury and District General Hospital
- Sandy Hill Community Health Centre
- CMHA Ottawa
- Pembroke Regional Hospital
- Cornwall Community Hospital
- Montfort Hospital
- Lanark Renfrew Health and Community Services
- Jewish Family Services



# Core Activities

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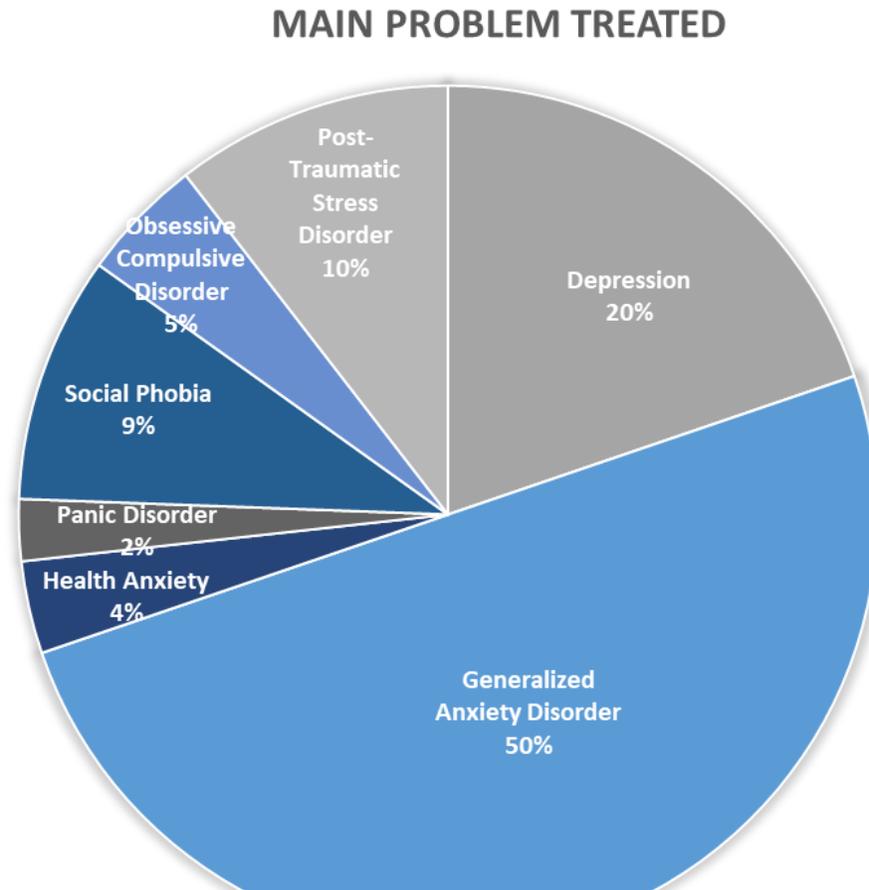
- Triaging and facilitating central access
- Identifying the right treatment, at the right dose for the correct population
- Providing protocol driven, structured and time limited structured psychotherapy
- Offering competency based training based on a standardized curriculum
- Weekly individual and group consultation, modelling and observation based training

# Accomplishments

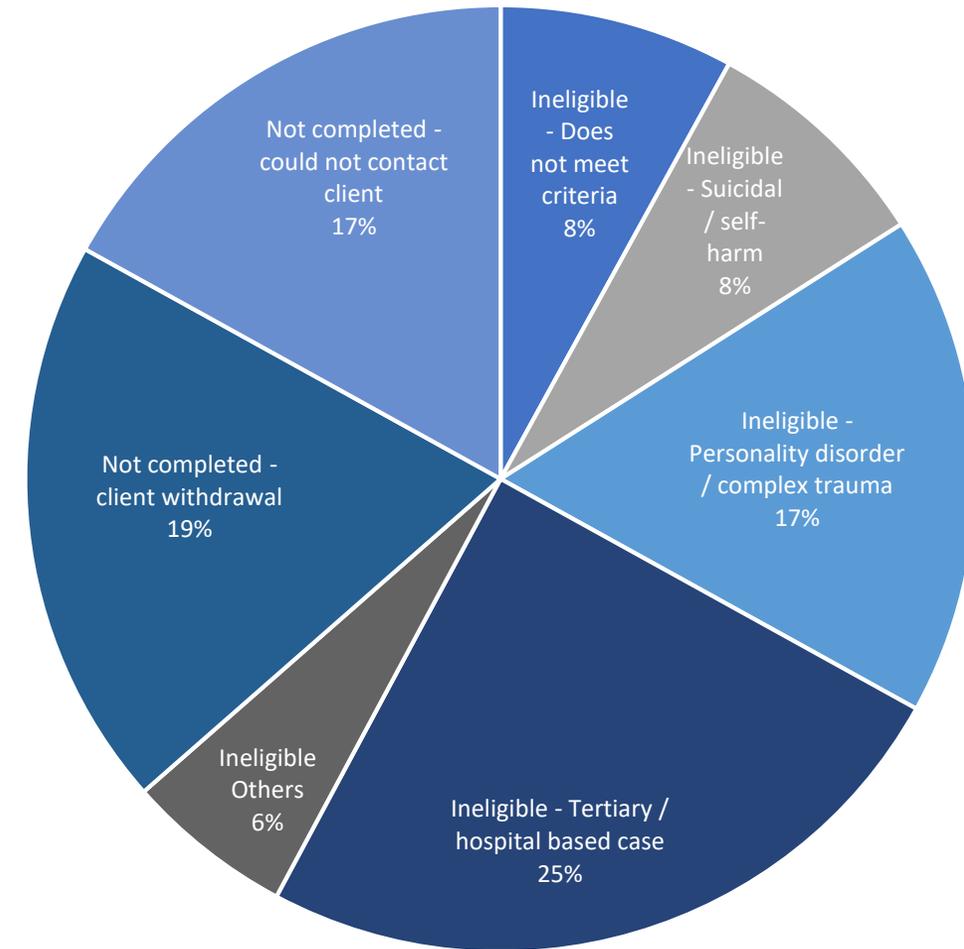
**30**  
CBT therapists in  
community settings

**179**  
**7**  
Number of  
IASP referrals

  
**387**  
Number of new  
clients enrolled  
into IASP



## Exit Dispositions at Clinical Intake and Triage Assessment



# OSSP Champlain - Outcomes

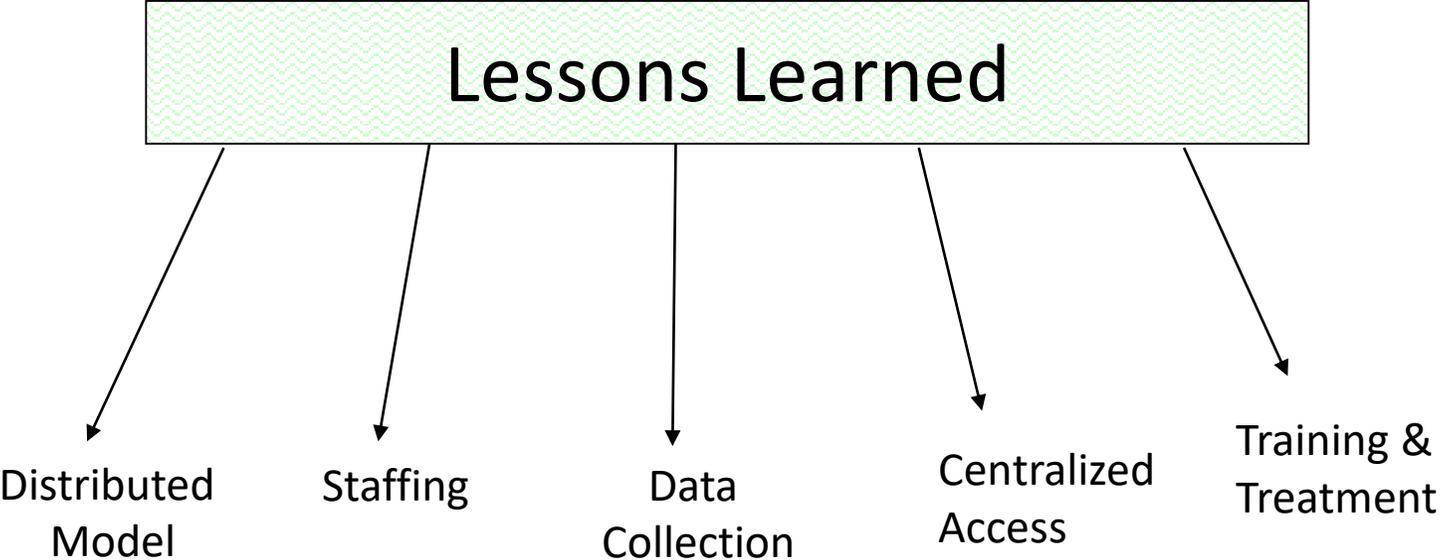
OUTCOME	DEFINITION	CUMULATIVE (Q2 FY 18/19 – Q1 FY 19/20)
Recovery Rate	% of clients who moved from above caseness to below caseness on PHQ9/GAD7 at treatment completion or exit	46%
Reliable Improvement Rate	% of clients who improve by a set number of points on the PHQ-9 or GAD-7 scales, irrespective of caseness at completion or exit	60%

**Note:**

- Based on definitions from IAPT UK
- Analysis has not yet been done of treatment population to know if it's a comparable sample to UK
- Calculated for clients who have completed treatment OR clients who have exited after two or more sessions
- Still in early implementation and working on improving data quality

# OSPP Champlain

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# Lessons Learned

	Category	Lesson Learned
1.	Distributed Service Delivery Model	<ul style="list-style-type: none"><li>• Allows treatment delivery to be close to home in both community and hospital settings</li><li>• Requires strong leadership across each organization with a focus on relationship building and clear accountability structures</li></ul>
2.	Staffing at the Appropriate Level of Experience and Training	<ul style="list-style-type: none"><li>• Ensure that clinical staff consists of highly skilled therapists and experienced leaders</li><li>• Recruitment can be a challenge for therapists as well as consulting psychologists, especially with rural partners</li><li>• Retention challenges associated with demonstration phase</li></ul>
3.	Data Collection	<ul style="list-style-type: none"><li>• Essential for both operational based decisions and outcome assessment</li><li>• Requires significant amount of time, human resources and ongoing data audits and quality improvement processes</li></ul>

# Lessons Learned Cont'd

	Category	Lesson Learned
4.	Central Access, Coordination and Referrals	<ul style="list-style-type: none"><li>• Requires efficient and standardized triage and assessment</li><li>• High proportion of clients presenting with higher severity of symptoms require step up to more intensive care</li><li>• Availability of more intensive services varies by problem area</li></ul>
5.	Standardized CBT Treatment	<ul style="list-style-type: none"><li>• Appropriate time must be given for training and consultation, with the development of clear benchmarks and associated job planning focusing on caseload management</li><li>• The structured approach of CBT requires effective change management strategies to be fully adopted across organizations</li></ul>

## Next Steps

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- Initiate self-referral process
- Implement next stage of the stepped care approach with system navigation role emphasized
- Continue to implement high intensity group therapy option
- Pilot low Intensity therapies, including iCBT

# Thank you

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