UBC Department of Psychiatry

Mind Space Group Medical Visits: A Quality Improvement Approach to Equity, Diversity, and Inclusivity Implementation

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Introduction

The COVID-19 pandemic significantly impacted mental health in Canada, disproportionately impacting marginalized populations.

By analyzing ongoing patient evaluations and staff feedback, the Mind Space Association, a MSP-funded group mental health skills program for patients with mild-to-moderate mental health conditions within primary care settings, identified sociocultural barriers, finding some of the language and examples used both within the participant workbook and by facilitators to be non-inclusive or representative of the population's diversity in gender, socioeconomic status, or culture and racialization. To reduce this barrier, equity, diversity, and inclusivity (EDI) principles needed to be incorporated to improve the services offered by the organization and facilitators hosting the intervention.

The Mind Space Program implemented new EDI interventions through a series of Plan-Do-Study-Act (PDSA) quality improvement (QI) cycles to meet the diverse needs of its widening demographic.

PDSA Cycles

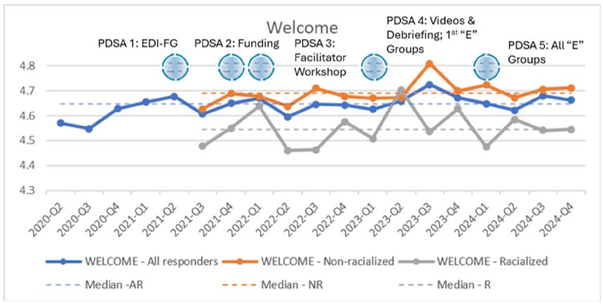
Five PDSA cycles were implemented from 2021 to 2024.

- **PDSA #1 (2021)** introduced an EDI Facilitator Guide; however, facilitators found it overwhelming, leading to its redesign as a non-evaluative reference tool.
- **PDSA #2 (2021 – 2022)** secured funding for experiential training (SharedCare & VDoFP)
- **PDSA #3 (2021 – 2022)** launched EDI workshops and translated handouts.
- **PDSA #4 (2023)** developed training videos and piloted EDI-informed "E" Groups.
- **PDSA #5 (2024)** implemented a revised participant workbook and facilitator guide across all groups.

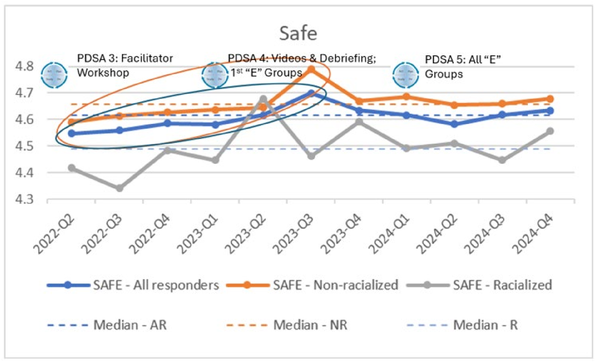
Aim

To improve participant reported metrics of welcomeness, safety, relevance to lived experience, and facilitator respectfulness scores by 10% within three years in the provincial cohorts with implementation of EDI interventions over time.

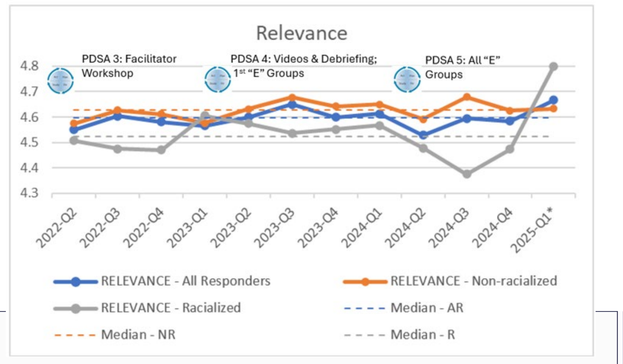
This will highlight changes reported in all responders (AR) and disaggregate racialized and non-racialized population sub-groups.



WELCOME: No shift, trends, or non-statistical number of runs for all subgroups.



SAFE: Upward trend for all responders and non-racialized group post-PDSA 3 intervention. No shifts in any population group, although a near-shift (not meeting minimum 6 data points above median center line) is seen for the non-racialized group after PDSA 4. Too few runs (2) for non-racialized group suggests the intervention may have had a shift or systematic change.



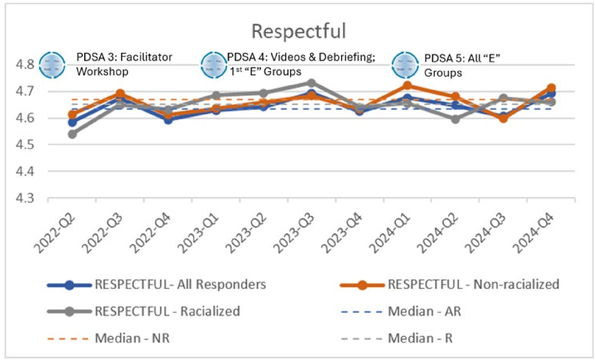
RELEVANCE: No shift or trend for any group. Near-shift for racialized group starting in 2023-Q1; insufficient number of non-median data points for All Responders and non-racialized groups.

Methods

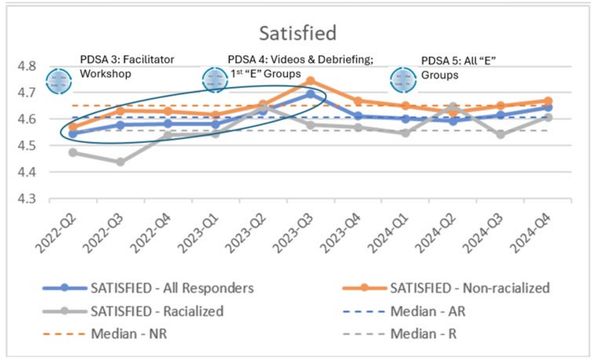
A total of 14,619 evaluation surveys (April 2020–February 2025) were analyzed by quarter using IHI run chart tools, comparing responses by racialized and non-racialized groups for various metrics using Likert scales (range 1-5). Balancing measures included tracking participants' satisfaction ratings. A larger analysis of gender diversity and socioeconomic status will be completed in another report for publication.

Response rates

- All quartiles were over 50% (54.4% - 68.2%)
- The majority of respondents were from Non-Racialized groups (average 78.9%), followed by Racialized groups (18.6%), with an average of 2.5% participants preferring not to answer.



RESPECTFUL: No shifts, trends, or abnormal number of runs to suggest non-random variation of significant change.



SATISFIED: No shifts in the data for all groups; upwards trend observed for All Responders after PDSA 3, however no trends noted disaggregated groups. No abnormal number of runs.

Results

- No metric achieved the 10% improvement target; however, average scores for all five metrics were high at baseline and continued to improve across population groups.
- "Safe" showed the clearest upward trend, especially following PDSA #3.
- "Relevance" improved briefly but declined post-rollout of the revised workbook with PDSA #5, then rebounded in an upwards trend over time.
- "Respect" remained high
- "Satisfaction" improved overall with reduced disparity between groups.

Discussion & Conclusion

This QI project demonstrates that EDI interventions within the Mind Space program are needed as the minority of participants who identified as racialized reported lower levels of welcomeness, safety, relevance, and satisfaction in the group interventions than those identifying as non-racialized.

Although the numeric target wasn't met —likely due to factors such as high baseline scores, limited data points, and late data collection—all key metrics (welcome, safety, relevance, respect, and satisfaction) showed improvement across all groups. Results suggest that EDI interventions contributed to incremental positive change without negatively impacting participant experience.

The project effectively introduced experiential learning, self-reflection, and lived experience into facilitator training, aligning with best practices identified in the literature. Continued monitoring and broader intersectional analysis are planned moving forward, as is a full-write up that will outline components of facilitator training, an identified gap in the literature.