ACCREDITATION CANADA

Driving Quality Health Services

Executive Summary

Fraser Health Authority

Surrey, BC

Third Component

On-site survey dates: April 28, 2014 - May 2, 2014

Report issued: July 3, 2014

ACCREDITATION CANADA
AGRÉMENT CANADA

Driving Quality Health Services
Force motrice de la qualité des services de santé

Accredited by ISQua

About the Executive Summary

Fraser Health Authority (referred to in this report as "the organization") is participating in Accreditation Canada's Qmentum accreditation program. As part of this ongoing process of quality improvement, an on-site survey was conducted in April 2014.

This Executive Summary is an overview of the on-site survey results. More information is available in the Accreditation Report.

Confidentiality

This report is confidential and is provided by Accreditation Canada to the organization only. Accreditation Canada does not release the report to any other parties. Any alteration of this Executive Summary compromises the integrity of the accreditation process and is strictly prohibited.

In the interests of transparency and accountability, Accreditation Canada encourages the organization to disseminate this Executive Summary to staff, board members, clients, the community, and other stakeholders.

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Section 1   Executive Summary

Fraser Health Authority (referred to in this report as "the organization") is participating in Accreditation Canada's Qmentum accreditation program. Accreditation Canada is an independent, not-for-profit organization that sets standards for quality and safety in health care and accredits health organizations in Canada and around the world.

As part of the Qmentum accreditation program, the organization has undergone a rigorous evaluation process. Following a comprehensive self-assessment, external peer surveyors conducted an on-site survey during which they assessed this organization's leadership, governance, clinical programs and services against Accreditation Canada requirements for quality and safety. These requirements include national standards of excellence; required safety practices to reduce potential harm; and questionnaires to assess the work environment, patient safety culture, governance functioning and client experience. Results from all of these components are included in this report and were considered in the accreditation decision.

This report shows the results to date and is provided to guide the organization as it continues to incorporate the principles of accreditation and quality improvement into its programs, policies, and practices.

The organization is commended on its commitment to using accreditation to improve the quality and safety of the services it offers to its clients and its community.

1.1 Accreditation Decision

Fraser Health Authority's accreditation decision is:

> ## Accredited (Report)

The organization has succeeded in meeting the fundamental requirements of the accreditation program.

1.2 About the On-site Survey

- **On-site survey dates: April 28, 2014 to May 2, 2014**

  This on-site survey is the third and final sequential visit of the current accreditation cycle for this organization. Collectively, themare used to assess the full scope of the organization's services and program.

- **Locations**

  The following locations were assessed during the on-site survey. All sites and services offered by the organization are deemed accredited.

  1   Abbotsford Community Dialysis Unit - Abbotsford
  2   Abbotsford Regional Hospital and Cancer Centre - Abbotsford
  3   CareLife/Fleetwood - Surrey
  4   Cottage-Worthington Pavillion, Abbotsford
  5   Eagle Ridge Manor - Port Moody
  6   Fellburn Care Centre - Burnaby
  7   Fraser Hope Lodge - Hope
  8   Langley Memorial Hospital - Langley
  9   Mountain View Manor - Delta
  10   Newton Community Dialysis Unit - Surrey
  11   Peace Arch Hospital
  12   Royal Columbian Hospital - New Westminster
  13   Surrey Memorial Hospital - Surrey

- **Standards**

  The following sets of standards were used to assess the organization's programs and services during the on-site survey.

  Service Excellence Standards

  1   Operating Rooms
  2   Surgical Care Services
  3   Ambulatory Care Services
  4   Diagnostic Imaging Services
  5   Long-Term Care Services
  6   Medicine Services
  7   Reprocessing and Sterilization of Reusable Medical Devices

1.3 Overview by Quality Dimensions

Accreditation Canada defines quality in health care using eight dimensions that represent key service elements. Each criterion in the standards is associated with a quality dimension. This table shows the number of criteria related to each dimension that were rated as met, unmet, or not applicable.

Quality Dimension		Met	Unmet	N/A	Total
	Population Focus (Working with communities to anticipate and meet needs)	17	0	0	17
	Accessibility (Providing timely and equitable services)	40	0	0	40
	Safety (Keeping people safe)	204	12	25	241
	Worklife (Supporting wellness in the work environment)	56	2	1	59
	Client-centred Services (Putting clients and families first)	72	2	3	77
	Continuity of Services (Experiencing coordinated and seamless services)	29	0	0	29
	Effectiveness (Doing the right thing to achieve the best possible results)	241	10	20	271
	Efficiency (Making the best use of resources)	25	2	1	28
Total		**684**	**28**	**50**	**762**

1.4 Overview by Standards

The Qmentum standards identify policies and practices that contribute to high quality, safe, and effectively managed care. Each standard has associated criteria that are used to measure the organization's compliance with the standard.

System-wide standards address quality and safety at the organizational level in areas such as governance and leadership. Population-specific and service excellence standards address specific populations, sectors, and services. The standards used to assess an organization's programs are based on the type of services it provides.

This table shows the sets of standards used to evaluate the organization's programs and services, and the number and percentage of criteria that were rated met, unmet, or not applicable during the on-site survey.

Accreditation decisions are based on compliance with standards. Percent compliance is calculated to the decimal and not rounded.

Standards Set	High Priority Criteria *			Other Criteria			Total Criteria (High Priority + Other)		
	Met	Unmet	N/A	Met	Unmet	N/A	Met	Unmet	N/A
	# (%)	# (%)	#	# (%)	# (%)	#	# (%)	# (%)	#
Ambulatory Care Services	35 (100.0%)	0 (0.0%)	3	70 (97.2%)	2 (2.8%)	3	105 (98.1%)	2 (1.9%)	6
Diagnostic Imaging Services	43 (93.5%)	3 (6.5%)	21	41 (97.6%)	1 (2.4%)	19	84 (95.5%)	4 (4.5%)	40
Long-Term Care Services	24 (100.0%)	0 (0.0%)	0	70 (97.2%)	2 (2.8%)	0	94 (97.9%)	2 (2.1%)	0
Medicine Services	27 (100.0%)	0 (0.0%)	0	67 (97.1%)	2 (2.9%)	0	94 (97.9%)	2 (2.1%)	0
Operating Rooms	64 (92.8%)	5 (7.2%)	0	28 (93.3%)	2 (6.7%)	0	92 (92.9%)	7 (7.1%)	0
Reprocessing and Sterilization of Reusable Medical Devices	35 (92.1%)	3 (7.9%)	2	54 (94.7%)	3 (5.3%)	2	89 (93.7%)	6 (6.3%)	4
Surgical Care Services	30 (100.0%)	0 (0.0%)	0	64 (98.5%)	1 (1.5%)	0	94 (98.9%)	1 (1.1%)	0
Total	**258 (95.9%)**	**11 (4.1%)**	**26**	**394 (96.8%)**	**13 (3.2%)**	**24**	**652 (96.4%)**	**24 (3.6%)**	**50**

* Does not includes ROP (Required Organizational Practices)

1.5 Overview by Required Organizational Practices

A Required Organizational Practice (ROP) is an essential practice that an organization must have in place to enhance client safety and minimize risk. Each ROP has associated tests for compliance, categorized as major and minor. All tests for compliance must be met for the ROP as a whole to be rated as met.

This table shows the ratings of the applicable ROPs.

Required Organizational Practice	Overall rating	Test for Compliance Rating	
		Major Met	Minor Met
Patient Safety Goal Area: Communication			
Client And Family Role In Safety (Ambulatory Care Services)	Met	2 of 2	0 of 0
Client And Family Role In Safety (Diagnostic Imaging Services)	Unmet	0 of 2	0 of 0
Client And Family Role In Safety (Long-Term Care Services)	Met	2 of 2	0 of 0
Client And Family Role In Safety (Medicine Services)	Met	2 of 2	0 of 0
Client And Family Role In Safety (Surgical Care Services)	Met	2 of 2	0 of 0
Information Transfer (Ambulatory Care Services)	Met	2 of 2	0 of 0
Information Transfer (Long-Term Care Services)	Met	2 of 2	0 of 0
Information Transfer (Medicine Services)	Met	2 of 2	0 of 0
Information Transfer (Surgical Care Services)	Met	2 of 2	0 of 0
Medication reconciliation at care transitions (Ambulatory Care Services)	Met	7 of 7	0 of 0

Required Organizational Practice	Overall rating	Test for Compliance Rating	
		Major Met	Minor Met
Patient Safety Goal Area: Communication			
Medication reconciliation at care transitions (Long-Term Care Services)	Met	5 of 5	0 of 0
Medication reconciliation at care transitions (Medicine Services)	Met	5 of 5	0 of 0
Medication reconciliation at care transitions (Surgical Care Services)	Met	5 of 5	0 of 0
Safe Surgery Checklist (Operating Rooms)	Met	3 of 3	2 of 2
Two Client Identifiers (Ambulatory Care Services)	Met	1 of 1	0 of 0
Two Client Identifiers (Diagnostic Imaging Services)	Met	1 of 1	0 of 0
Two Client Identifiers (Long-Term Care Services)	Met	1 of 1	0 of 0
Two Client Identifiers (Medicine Services)	Met	1 of 1	0 of 0
Two Client Identifiers (Operating Rooms)	Met	1 of 1	0 of 0
Two Client Identifiers (Surgical Care Services)	Met	1 of 1	0 of 0
Patient Safety Goal Area: Medication Use			
Infusion Pumps Training (Ambulatory Care Services)	Unmet	0 of 1	0 of 0
Infusion Pumps Training (Long-Term Care Services)	Met	1 of 1	0 of 0
Infusion Pumps Training (Medicine Services)	Met	1 of 1	0 of 0

Required Organizational Practice	Overall rating	Test for Compliance Rating	
		Major Met	Minor Met
Patient Safety Goal Area: Medication Use			
Infusion Pumps Training (Operating Rooms)	Met	1 of 1	0 of 0
Infusion Pumps Training (Surgical Care Services)	Met	1 of 1	0 of 0
Patient Safety Goal Area: Infection Control			
Pneumococcal Vaccine (Long-Term Care Services)	Met	2 of 2	0 of 0
Patient Safety Goal Area: Falls Prevention			
Falls Prevention Strategy (Ambulatory Care Services)	Unmet	2 of 3	1 of 2
Falls Prevention Strategy (Diagnostic Imaging Services)	Unmet	0 of 3	0 of 2
Falls Prevention Strategy (Long-Term Care Services)	Met	3 of 3	2 of 2
Falls Prevention Strategy (Medicine Services)	Met	3 of 3	2 of 2
Falls Prevention Strategy (Surgical Care Services)	Met	3 of 3	2 of 2
Patient Safety Goal Area: Risk Assessment			
Pressure Ulcer Prevention (Long-Term Care Services)	Met	3 of 3	2 of 2
Pressure Ulcer Prevention (Medicine Services)	Met	3 of 3	2 of 2
Pressure Ulcer Prevention (Surgical Care Services)	Met	3 of 3	2 of 2
Venous Thromboembolism Prophylaxis (Medicine Services)	Met	3 of 3	2 of 2
Venous Thromboembolism Prophylaxis (Surgical Care Services)	Met	3 of 3	2 of 2

1.6 Summary of Surveyor Team Observations

The surveyor team made the following observations about the organization's overall strengths, opportunities for improvement, and challenges.

Fraser Health is congratulated for its commitment to the accreditation process and for embracing a culture of quality and safety throughout the organization. It is evident that the vision, purpose and values are demonstrated throughout all levels of the organization and that there is a sense of community and caring within the organization and throughout the community that it serves. There is also a commitment towards innovation and quality service delivery by leadership, staff and physicians.

Fraser Health continues to be challenged by a growing and aging population. They are the largest and fastest growing health authority in British Columbia. They are currently commissioning the Surrey Memorial Hospital expansion which is welcomed capacity to the region and will provide some needed relief. They continue to be challenged with some aging and crowded facilities and are supported in their efforts to address some of these challenges in the future with upcoming capital projects. Despite capacity challenges, the organization finds ways to ensure access to care. They have continued to evolve their program management structure which is evidenced by regional standardization and integration.

It is evident that Fraser Health's six strategic imperatives (capacity, quality and safety, integration, progressive partnerships, research and academic development ,and great workplaces) guide the organization's activities and improvements; this was evident at the program and service level. There is a consistent approach to support safety and quality. One example is the organization's participation in the National Surgical Quality Improvement Program (NSQIP) which supports and enables ongoing continuous quality improvement. The quality performance measurement system is a key enabler in supporting the quality agenda, not only for the programs but the organization as a whole.

There is a sense of stability among employees who are given opportunities to move into new positions yet remain within the organization. Staff education and training, the use of online learning as well as the various professional practice councils is evidence that the organization is committed to creating a sustainable empowering work environment. However, providing staff feedback was found to be variable and not consistent across the programs and services surveyed. A significant opportunity for the organization is the development and implementation of processes to ensure that employees receive regular performance appraisals, as well as mentoring and career development.

Since the previous accreditation survey, Fraser Health has successfully implemented a number of improvements and initiatives including medication reconciliation in the renal program and in residential care; the provision of written and verbal patient safety information; the implementation of venous thromboembolism (VTE) prophylaxis protocol; significant improvements in managing outbreaks; successful recruitment into infection prevention and control (IPAC) positions; the development and implementation of patient and family orientation materials; medical orders for scope of treatment (MOST); and, the implementation of an effective preventive maintenance program. The falls prevention strategy has been implemented in most areas, although there are areas where consistent application is not evident and evaluation has yet to be completed. Although implementation of new infusion pumps has commenced with a well designed process for initial training, ongoing training on current pumps is still required. Fraser Health is encouraged to continue to sustain the processes required to support all required organizational practices (ROPs).

Effective use of interdisciplinary teams supported by engaged medical and operational leaders was observed. Teams recognize and seize opportunities for improvement and are proud to share these achievements and successes. However, a challenge is the reliance on paper documentation until such time as an electronic health record becomes reality. In the meantime, the programs should explore opportunities to streamline and standardize documentation. The organization is encouraged to continue their ongoing efforts to move towards an electronic health record solution.

Overall, patients, clients, residents and families are very satisfied with the care and services they from Fraser Health. They comment that staff, physicians and volunteers are courteous, respectful and caring; those receiving care have confidence and trust in those caring for them.