



Fraser Health Authority

Accredited

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Fraser Health Authority is participating in the Accreditation Canada Qmentum accreditation program. Qmentum helps organizations strengthen their quality improvement efforts by identifying what they are doing well and where improvements are needed.

Organizations that become accredited with Accreditation Canada do so as a mark of pride and as a way to create a strong and sustainable culture of quality and safety.

Accreditation Canada commends **Fraser Health Authority** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

Fraser Health Authority (2016)

Fraser Health is the largest health authority in BC, serving more than 1.7 million people from Burnaby to Hope. We are committed to providing excellent health care to those in our care, whether they are in one of our 12 hospitals, in their homes or in our communities. The communities we serve are culturally and geographically diverse including approximately 38,100 First Nations residents associated with 32 bands, new Canadians and refugees. We care for newborns, centenarians and everyone in between. Our 25,000 employees, 2,600 physicians and 8,000 volunteers are committed to living our values of respect, caring and trust in the pursuit of our vision: 'Better health. Best in health care.'

Accreditation Canada

We are independent, not-for-profit, and 100 percent Canadian. For more than 55 years, we have set national standards and shared leading practices from around the globe so we can continue to raise the bar for health quality.

As the leader in Canadian health care accreditation, we accredit more than 1,100 health care and social services organizations in Canada and around the world.

Accreditation Canada is accredited by the International Society for Quality in Health Care (ISQua) www.isqua.org, a tangible demonstration that our programs meet international standards.

Find out more about what we do at www.accreditation.ca.

Demonstrating a commitment to quality and safety

Accreditation is an ongoing process of evaluating and recognizing a program or service as meeting established standards. It is a powerful tool for quality improvement. As a roadmap to quality, Accreditation Canada's Qmentum accreditation program provides evidence-informed standards, tools, resources, and guidance to health care and social services organizations on their journey to excellence.

As part of the program, most organizations conduct an extensive self-assessment to determine the extent to which they are meeting the Accreditation Canada standards and make changes to areas that need improvement. Every four years, Accreditation Canada surveyors, who are health care professionals from accredited organizations, visit the organization and conduct an on-site survey. After the survey, an accreditation decision is issued and the ongoing cycle of assessment and improvement continues.

This Executive Summary highlights some of the key achievements, strengths, and opportunities for improvement that were identified during the on-site survey at the organization. Detailed results are found in the organization's Accreditation Report.

On-site survey dates

October 16, 2016 to October 21, 2016

Locations surveyed

- **12** locations were assessed by the surveyor team during the on-site survey. Locations and sites visited were identified by considering risk factors such as the complexity of the organization, the scope of services at various sites, high or low volume sites, patient flow, geographical location, issues or concerns that may have arisen during the accreditation cycle, and results from previous on-site surveys. As a rule, sites that were not surveyed during one accreditation cycle become priorities for survey in the next.
- All sites and services are deemed **Accredited** as of the date of this report.

See **Appendix A** for a list of the locations that were surveyed.

Standards used in the assessment

- **12 sets of standards** were used in the assessment.

Summary of surveyor team observations

These surveyor observations appear in both the Executive Summary and the Accreditation Report.

During the on-site survey, the surveyor team undertook a number of activities to determine the extent to which the organization met the accreditation program requirements. They observed the care that was provided; talked to staff, clients, families and others; reviewed documents and files; and recorded the results.

This process, known as a tracer, helped the surveyors follow a client's path through the organization. It gives them a clear picture of how service is delivered at any given point in the process.

The following is a summary of the surveyor team's overall observations.

The board is engaged and committed to improving health outcomes for the populations served. Recently, the board created an additional committee focused on information management and innovation, as this was seen as a gap. The mission, vision, and values have not been formally reviewed since 2011; however, the board, executive, and staff commented that the current vision and values are popular and easily understood. The board works with the CEO and executive management to determine strategic priorities based on government direction in the context of the population health needs of the community. The board has used the ethical framework to help deal with clinical and resource allocation conflicts. The board is commended on its commitment to transparency and accountability. Board meeting summaries and decisions are posted on the website. The board is supportive of patient- and family-centred care. The Patient Advisory Council (PAC) is one mechanism used to embed the patient voice into the organization.

The organizational commitment to patient- and family-centred care has been strengthened by the creation of a patient experience portfolio. There has been an increasing demand for patient advisors or partners to participate in projects and committees. At present the structure for this support is not consistent throughout Fraser Health. The volunteers who fill these important roles are confident that Fraser Health is on the right path but are seeking clarity on the organization's expectations and vision for the future. The organization is encouraged to develop a more integrated approach to patient- and family-centred care at the site level, and to ensure goals and objectives at the program and service levels include guiding principles regarding the inclusion of patients/clients and their families.

There is evidence of strong communication strategies that flow both ways; the senior leaders and the board members have an increased presence at all sites. The organization has initiated a talent management program for middle managers and aspiring leaders. There are numerous examples of innovation throughout the organization. A noteworthy initiative is the program of Engagement Radicals that addresses staff engagement and maintaining the gains. There is a PAC, as well as a patient engagement strategy that includes education and skill development for staff and physicians at the team level. There is evidence of patient involvement in several quality improvement projects. In some programs there is still no commitment to involve patients and families in the decision-making process.

In discussions about goals and objectives and quality improvement plans, front-line leaders and staff in the obstetrics and neonatal intensive care units talked about indicators mandated by the Ministry of Health. The discussion identified program-specific quality initiatives that are not readily identified as such with outcome measures and evaluation. More rigour and a more formalized quality improvement process, so middle managers and front-line staff can clearly identify changes and initiatives that are part of a program or unit-level quality improvement program, would be helpful. There is excellent consistency on practices and policies across the sites.

Strengths of the pediatric service include the passion of the clinical staff and the quality of care delivered at the front line, as well as collaborative partnerships developed and sustained with BC Children's Hospital and Child Health BC. The educational support available to clinical staff, including orientation, ongoing education and training, and professional development, is also noteworthy. The most significant opportunity for ongoing quality improvement is engagement and partnership with patients and families in planning service delivery and ongoing assessment of quality. There is also an opportunity to formalize systems and evaluate use and quality across all sites and services to ensure standardization and reduce variability in care delivery, aligning operations with consistent evidence-informed care.









Staff members and physicians in the perioperative service are very engaged, professional, and patient- and family-centred in their approach to care. There is a strong and supportive presence by the managers, and there appears to be a very positive interprofessional dynamic. The areas of care are well laid out and conducive to a calm atmosphere. The quality, knowledge, and availability of the nurse educators and patient care coordinators to the front-line staff nurses are evident. Standardization and implementation of clinical guidelines and clinical pathways, with the endorsement of the physician, is commendable. The passion, enthusiasm, and engagement of clinical staff members are noticeable. Middle managers are encouraged to engage staff in the performance review process. The space in the endoscopy suite at the Abbotsford Regional Hospital and Cancer Centre needs to be re-evaluated to prevent cross-contamination.

Overview: Quality dimensions results

Accreditation Canada uses eight dimensions that all play a part in providing safe, high quality health care.

These dimensions are the basis for the standards, and each criteria in the standards is tied to one of the quality dimensions.

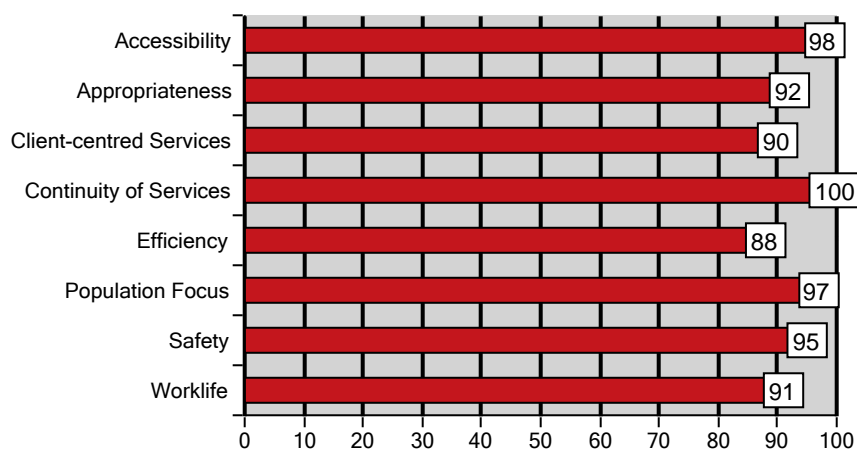
The quality dimensions are:

	Accessibility:	Give me timely and equitable services
	Appropriateness:	Do the right thing to achieve the best results
	Client-centred Services:	Partner with me and my family in our care
	Continuity of Services:	Coordinate my care across the continuum
	Efficiency:	Make the best use of resources
	Population Focus:	Work with my community to anticipate and meet our needs
	Safety:	Keep me safe
	Worklife:	Take care of those who take care of me

Taken together, the dimensions create a picture of what a high quality health care program or service “looks like.” It is easy to access, focused on the client or patient, safe, efficient, effective, coordinated, reflective of community needs, and supportive of wellness and worklife balance.

This chart shows the percentage of criteria that the organization met for each quality dimension.

Quality Dimensions: Percentage of criteria met



Overview: Standards results

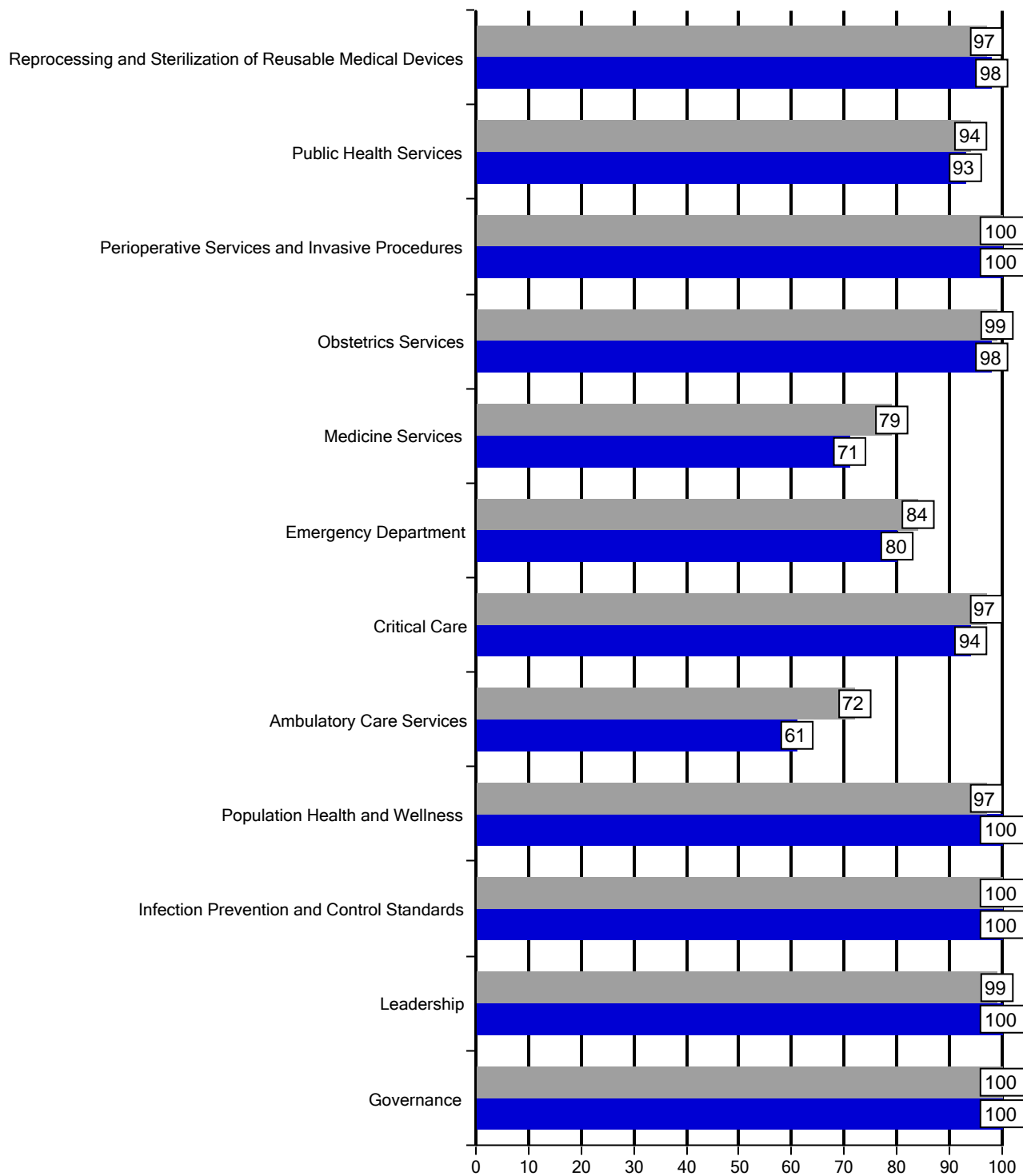
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

Some criteria—specifically those related to safety, ethics, risk management, or quality improvement—are considered high priority and carry more weight in determining the accreditation decision.

This chart shows the percentage of high priority criteria and the percentage of all criteria that the organization met in each set of standards.

Standards: Percentage of criteria met

■ High priority criteria met
 ■ Total criteria met



Overview: Required Organizational Practices results

Accreditation Canada defines a Required Organizational Practice (ROP) as an essential practice that must be in place for client safety and to minimize risk. ROPs are part of the standards. Each one has detailed tests for compliance that the organization must meet if it is to meet the ROP.

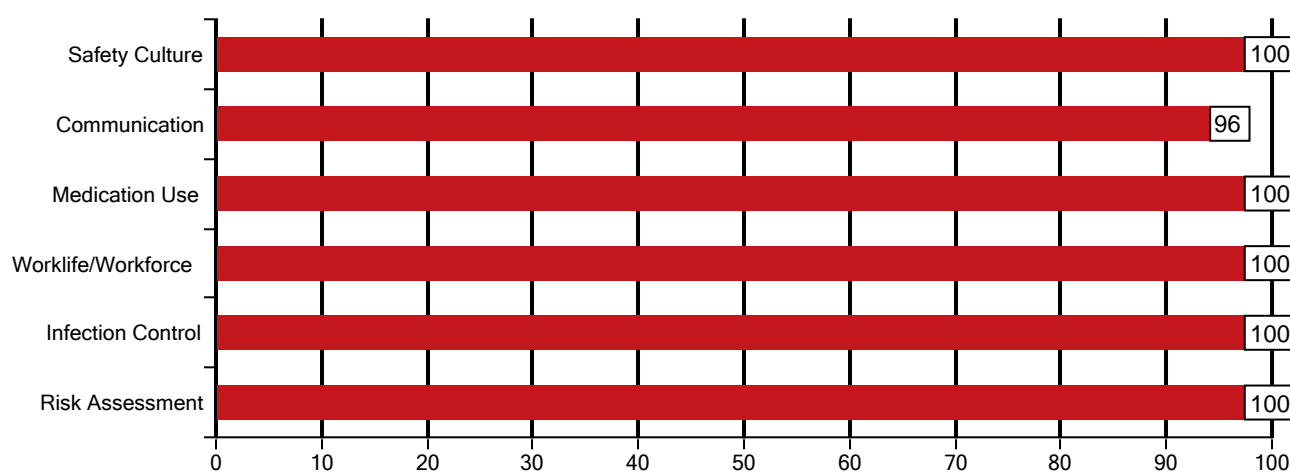
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes how select ROPs are being met across the country.

ROPs are categorized into six safety areas, each with its own goal:

- **Safety culture:** Create a culture of safety within the organization
- **Communication:** Improve the effectiveness and coordination of communication among care and service providers and with the recipients of care and service across the continuum
- **Medication use:** Ensure the safe use of high-risk medications
- **Worklife/workforce:** Create a worklife and physical environment that supports the safe delivery of care and service
- **Infection control:** Reduce the risk of health care-associated infections and their impact across the continuum of care/service
- **Risk assessment:** Identify safety risks inherent in the client population

See **Appendix B** for a list of the ROPs in each goal area.

ROP Goal Areas: Percentage of tests for compliance met



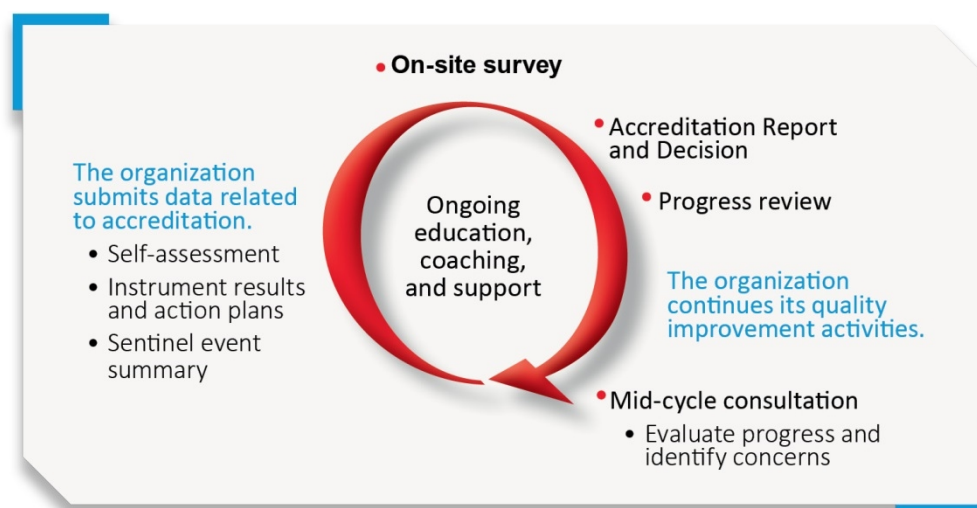
The quality improvement journey

The Qmentum accreditation program is a four-year cycle of assessment and improvement, where organizations work to meet the standards and raise the quality of their services. Qmentum helps them assess all aspects of their operations, from board and leadership, to care and services, to infrastructure.

The program identifies and rewards quality and innovation. The time and resources an organization invests in accreditation pay off in terms of better care, safer clients, and stronger teamwork. Accreditation also helps organizations be more efficient and gives them structured methods to report on their activities and what they are doing to improve quality.

In the end, all Canadians benefit from safer and higher quality health services as a result of the commitment that so many organizations across the country have made to the accreditation process.

Qmentum: A four-year cycle of quality improvement



As **Fraser Health Authority** continues its quality improvement journey, it will conduct an in-depth review of the accreditation results and findings. Then a new cycle of improvement will begin as it incorporates any outstanding issues into its overall quality improvement plan, further strengthening its efforts to build a robust and widespread culture of quality and safety within its walls.

Appendix A: Locations surveyed

- 1 Abbotsford Regional Hospital and Cancer Centre - Abbotsford
- 2 Burnaby Hospital
- 3 CareLife/Fleetwood - Surrey
- 4 Central City Tower
- 5 Chilliwack General Hospital
- 6 Chilliwack Health Unit
- 7 Jim Pattison Outpatient Care and Surgery Centre
- 8 O = y
- 9 Peace Arch Hospital
- 10 Royal Columbian Hospital - New Westminster
- 11 Surrey Memorial Hospital - Surrey
- 12 Tri-Cities Health Unit

Appendix B

Required Organizational Practices

Safety Culture

- Accountability for quality
 - Patient safety incident disclosure
 - Patient safety incident management
 - Patient safety quarterly reports
 - Patient safety-related prospective analysis
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Communication

- Client Identification
 - Information transfer at care transitions
 - Medication reconciliation as a strategic priority
 - Medication reconciliation at care transitions
 - Safe surgery checklist
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Medication Use

- Infusion pump safety
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Worklife/Workforce

- Client Flow
 - Patient safety plan
 - Patient safety: education and training
 - Preventive maintenance program
 - Workplace violence prevention
-

Infection Control

- Hand-hygiene compliance
 - Hand-hygiene education and training
 - Infection rates
-

Risk Assessment

- Falls prevention
 - Pressure ulcer prevention
 - Suicide prevention
 - Venous thromboembolism prophylaxis
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