



## Eastern Ontario Health Unit

### Accredited with Exemplary Standing

April, 2016 to 2020

**Eastern Ontario Health Unit** has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement. It is accredited until April 2020 provided program requirements continue to be met.

**Eastern Ontario Health Unit** 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 **Eastern Ontario Health Unit** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

### 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](http://www.isqua.org), a tangible demonstration that our programs meet international standards.

Find out more about what we do at [www.accreditation.ca](http://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

April 10, 2016 to April 14, 2016

### Locations surveyed

- **4** 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 with Exemplary Standing** as of the date of this report.

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

### Standards used in the assessment

- **4 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.

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Eastern Ontario Health Unit (EOHU) works with many partners to promote wellness and improve the health of the communities it serves. The survey team was impressed by the common vision of community partners and their understanding of the determinants that affect population health. The stakeholder group acknowledged the leadership role Eastern Ontario Health Unit has played in supporting strategies that cross all social sectors. Eastern Ontario Health Unit was commended for the data access and communication expertise it shares with partners. Recognition was given to the important role Eastern Ontario Health Unit has played in ensuring public health materials and communications are translated and available to Francophone residents. Stakeholders felt they were equal partners in planning and that each was able to leverage their unique roles. Many successful community initiatives have been possible due to Eastern Ontario Health Unit participation and facilitation, including the Green Food Box healthy food project, the Medi Drop unused medication disposal, the Triple P Positive Parenting Program, and smoke-free buildings, to name a few. Stakeholders encouraged Eastern Ontario Health Unit to continue to pursue excellence.

The leadership team has undergone a change since the last accreditation survey and there are still a few managerial vacancies. Emerging provincial health strategies and the nature of public health emergencies have required the team to be nimble and creative in managing resources. Under the leadership of Dr. Paul Roumeliotis, the team has strengthened and embedded the culture of quality and patient safety throughout the organization. The surveyors heard that the MOH and the management team were accessible and responsive.

There has been a strong focus on worklife balance for staff. Results from the Worklife Pulse Tool and Gallup surveys have been used to create quality improvement initiatives that address staff concerns. Staff engagement in this work has been positive.

The surveyors had an opportunity to see programs in action and to talk to many clients. Clients expressed feeling respected by staff. It was very important to clients not to be judged for their choices and staff are to be commended for this client- and family-centred approach.

On an individual level clients expressed that they were very satisfied. There is acknowledgement that programs would benefit from more formal client satisfaction and program evaluation. The organization is poised to begin a community engagement strategy that will enable it to continue to improve the health of clients, families, and the community.

Eastern Ontario Health Unit has been a champion for the accreditation process. The entire staff were knowledgeable and involved in the process. It was a pleasure to survey an organization that gets it!

## 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.

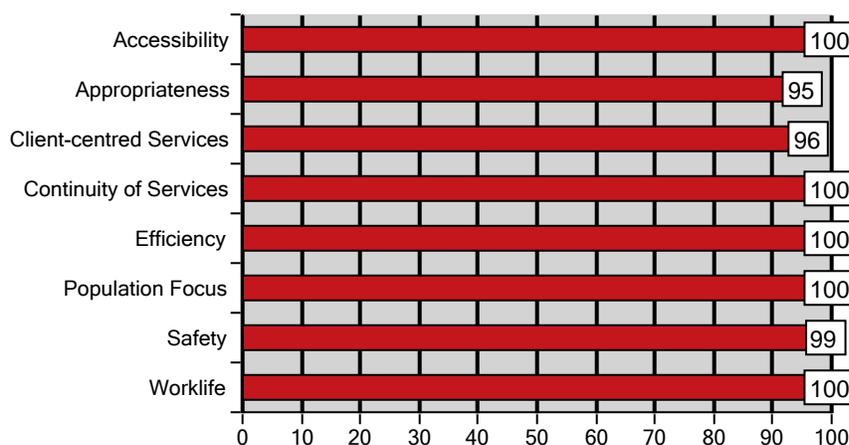
The quality dimensions are:

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

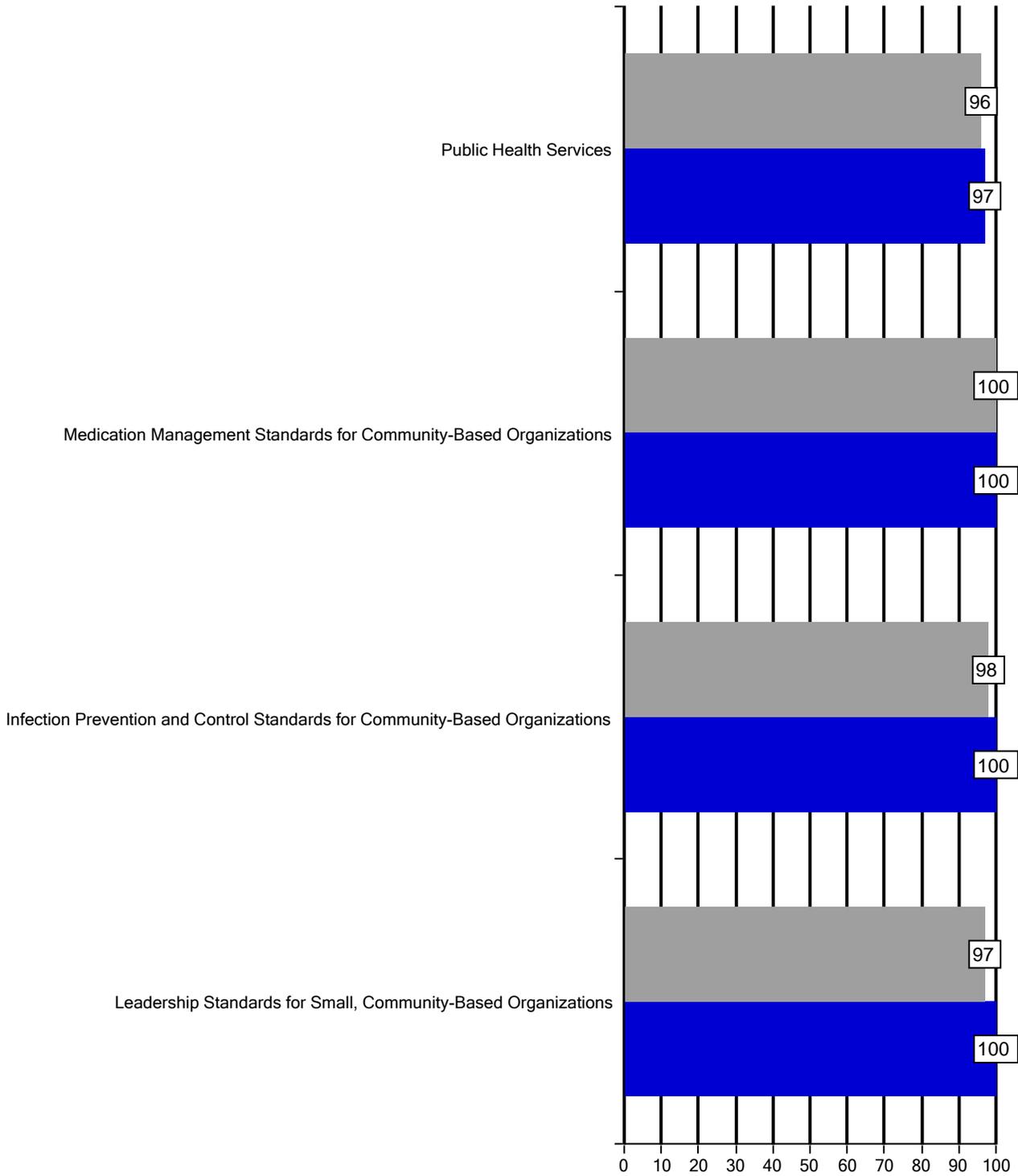
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

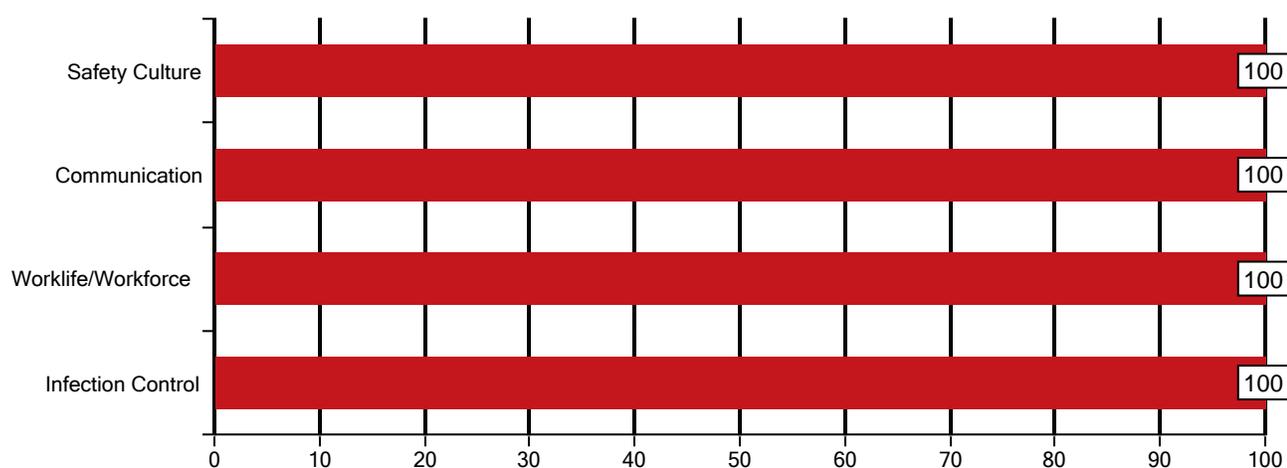
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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



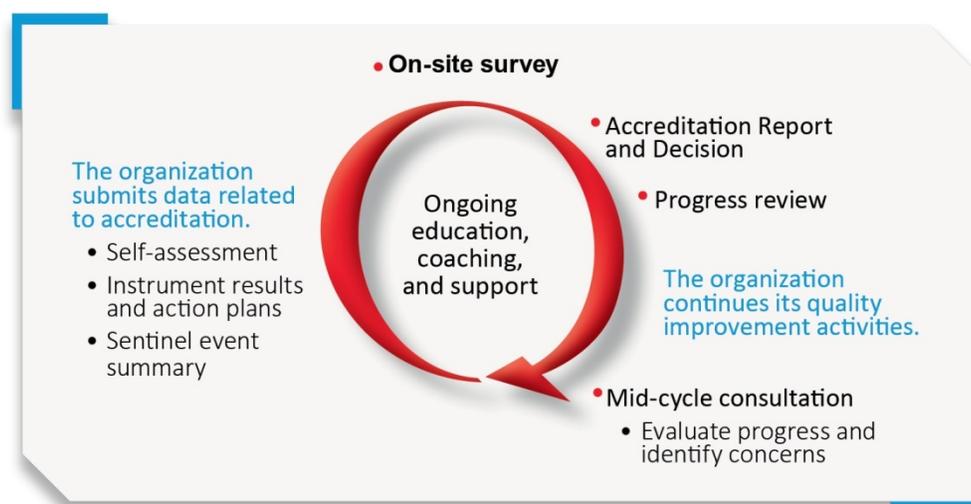
## The quality improvement journey

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 **Eastern Ontario Health Unit** 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 Eastern Ontario Health Unit, Casselman
- 2 Eastern Ontario Health Unit, Cornwall
- 3 Eastern Ontario Health Unit, Rockland
- 4 Eastern Ontario Health Unit, Winchester

## Appendix B

### Required Organizational Practices

#### Safety Culture

- Patient safety incident disclosure
  - Patient safety incident management
  - Patient safety quarterly reports
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#### Communication

- The “Do Not Use” list of abbreviations
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#### Worklife/Workforce

- Patient safety plan
  - Patient safety: education and training
  - Preventive maintenance program
  - Workplace violence prevention
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#### Infection Control

- Hand-hygiene compliance
  - Hand-hygiene education and training
  - Reprocessing
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