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### **2004 ACCREDITATION PRESURVEY REPORT LONG TERM CARE AND SENIORS BRANCH**

**The Health and Emergency Medical Services Committee recommends the adoption of the recommendation contained in the following report, March 15, 2004, from the Commissioner of Health Services:**

#### **1. RECOMMENDATION**

It is recommended that:

1. Health and Emergency Medical Services Committee and Regional Council receive the following report regarding the Accreditation Program and the Corrective Action Status Report (*see Attachment 1*) outlining the corrective action taken by staff to address the recommendations and suggestions made during the Accreditation Survey conducted by the Canadian Council on Health Services Accreditation (CCHSA) in 2001.

#### **2. PURPOSE**

This report is provided to the Health and Emergency Medical Services Committee and Regional Council, as the governing body of the Regional Long Term Care Facilities, to facilitate their legislated responsibility for ensuring that the programs and services delivered by the Long Term Care and Seniors Branch are in compliance with applicable legislation and standards for the provision of health and long term care services.

#### **3. BACKGROUND**

Regional Council through the Health and Emergency Medical Services Committee, as the Committee of Management for The Regional Municipality of York's Long Term Care Facilities has legislative responsibility to ensure that the facilities have a quality management system that is developed and implemented for monitoring, evaluating and improving the quality of care and services provided to the residents and is ultimately accountable for the standards of care provided.

The CCHSA is a national organization that assists health care organizations across Canada to examine and improve the quality of care and services they provide to their patients, residents and clients. Participation in the Accreditation Program is voluntary. All health care facilities are not accredited. In 2002, 327 health care organizations were accredited. Of those organizations, 154 (47%) received an unconditional three year award; 170 (52%) received a conditional award with a report and/or follow-up site visit; and 3 (1%) received no accreditation award.

Four main factors are considered in determining the accreditation award level. Those factors are: 1) quality, 2) risk, 3) number of high level/priority recommendations related to specific issues as identified by CCHSA, and 4) the number of other high level recommendations given to a specific team.

One of the many benefits of participating in the Accreditation Program is that it provides an independent third party assessment of the standards of care and services being provided by a facility. That assessment is achieved through a comprehensive evaluation of programs and services conducted by specially trained health care professionals, to determine the organization's level of compliance against national standards that have been established by CCHSA.

The accreditation standards address all aspects of the facility's operations and include standards related to: Accounting Practices, Administration and Governance, Community Support Programs, Dental Care, Diagnostic and Therapeutic Services, Emergency Preparedness, Facility Organization, Financial Management, Fire Safety, Health Records, Housekeeping, Human Resources Management, Infection Control, Information Services, Physical Plant and Maintenance, Laundry, Library Services, Medical Care, Nursing Services, Nutrition and Food Services, Pharmacy, Policies and Procedures, Quality Assurance, Risk Management, Recreational Programs, Restorative Care, Staff Development, Safety and Security and Volunteer Services.

CCHSA establishes these national standards in collaboration with the various segments and organizations that make up the Canadian health care community. CCHSA is comprised of the following professional bodies, corporate and consumer members/representatives:

- Canadian Medical Association
- Canadian Hospital Association
- Canadian Long Term Care Association
- Royal College of Physicians and Surgeons of Canada
- Canadian College of Health Service Executives
- Canadian Nurses Association
- The College of Family Physicians of Canada
- The Association of Canadian Teaching Hospitals
- Consumer Representatives

#### **4. ANALYSIS AND OPTIONS**

The Long Term Care (LTC) Facilities and Day Centres were last surveyed by the CCHSA on May 4, 5, & 6, 2001.

On the basis of the findings of the surveyors, the LTC Facilities and Day Centres were awarded a three year accreditation standing. In determining that award level, the Board of CCHSA recognized that all the essential services and programs were demonstrating a

high level of compliance with CCHSA's standards for facility and community long term care programs.

The highest level of accreditation a health service organization is eligible to receive is three years. A three year award is given if all of the conditions/standards for continuous quality improvement and effective risk management are achieved and if the majority of all other standards are rated as substantial and no standard is rated as non-compliant or minimally compliant.

The results of the survey are finalized and the findings documented in a report to the Administrator and the Governing Body. During the 2001 survey, all programs and services were found to be meeting a very high standard of compliance with CCHSA standards. A number of comments, suggestions and recommendations were offered within the report to assist in the facility's continuous efforts to improve compliance with CCHSA's standards and the quality of care provided to residents and clients.

In preparation for the survey, the Long Term Care and Seniors Branch – Corrective Action Status Report from the Administrator, regarding the corrective action planned and/or taken to address the recommendations and suggestions made to the facility during the last Accreditation Survey by the CCHSA, has also been prepared and is appended for Committee and Council review and information.

The LTC Facilities, Day Centres and Supportive Housing Programs (Alternative Community Living Programs) are scheduled next to be resurveyed on May 26, 27 & 28, 2004. This will be the first time that the LTC Supportive Housing Programs have been surveyed by CCHSA. Interdisciplinary CQI Teams involving staff, clients, residents, volunteers, service partners and families, have been meeting regularly for the past 18 months to conduct program assessments and evaluations against the CCHSA Accreditation Standards. It is anticipated that the CCHSA will find a very high level of compliance with these standards.

## **5. FINANCIAL IMPLICATIONS**

The Ministry of Health and Long-Term Care (MOHLTC) provides enhanced funding to service providers that maintain their accreditation standing with CCHSA. The MOHLTC provides an accreditation per diem of 33¢ per bed day. This translates into approximately \$24,100 per year for The Region's LTC Facilities. The expenses associated with the accreditation survey average approximately \$7,000 per year. Therefore, the cost of accreditation is more than offset by the increase in provincial funding. All accreditation costs have been included in the 2004 LTC budget. All accreditation costs have been included in the 2004 LTC budget.

## **6. LOCAL MUNICIPAL IMPACT**

The Ministry of Health and Long-Term Care Compliance review provides confirmation that we are continuing to deliver high quality long term care services for the residents of all local municipalities

## **7. CONCLUSION**

The Accreditation Program provides the Governing Body with an independent third party assessment of the programs and services provided by the Long Term Care and Seniors Branch. This assessment includes an evaluation of the quality and risk management systems that the organization has established to monitor, assess and improve quality and reduce exposure to risk.

Participation in the program also provides our clients, their families and the public with the additional assurance of quality provided by an independent review of our programs and certification that they meet or exceed national standards for the delivery of health services.

The Senior Management Group has reviewed this report.

*(A copy of the attachment referred to in the foregoing is included with this report and is also on file in the Office of the Regional Clerk.)*