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2004 ACCREDITATION POST SURVEY REPORT LONG TERM CARE AND SENIORS BRANCH

The Health and Emergency Medical Services Committee recommends the adoption of the recommendations contained in the following report, August 11, 2004, from the Commissioner of Health Services:

1. RECOMMENDATIONS

It is recommended that:

1. Health and Emergency Medical Services Committee and Regional Council receive the appended Accreditation Survey Report (*see Attachment 1*) from The Canadian Council on Health Services Accreditation, regarding the findings of the accreditation surveyors during the recent Accreditation Survey of the Newmarket Health Centre, Maple Health Centre, Long Term Care (LTC)/Alternative Community Living (ACL) Supportive Housing Programs and the LTC Day and Outreach Programs.
2. Management, staff, volunteers and community partners be commended for this significant achievement.

2. PURPOSE

This report is provided to the Health and Emergency Medical Services Committee and Regional Council, as the governing body of the Regional LTC 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. Specifically, the report provides details about the Accreditation Survey process recently undertaken by the Long Term Care and Seniors Branch.

3. BACKGROUND

Regional Council through the Health and Emergency Medical Services Committee, as the Committee of Management for the LTC facilities have a 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 Canadian Council on Health Services Accreditation (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.

3.1 Benefits of Accreditation

Participation in the Accreditation Program is voluntary. All health care facilities are not accredited. In 2002, the last year for which data is available, 327 health care organizations were accredited by CCHSA, of that 47% received an unconditional three year award; 52% received a conditional award with a report and/or follow-up site visit and 1% received no accreditation award.

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

One of the many benefits of participation in the Accreditation Program is that it provides an independent third party assessment of the standards of care and services being provided. 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.

3.2 Accreditation Standards

The accreditation standards are client focused and are based on well-researched and scientifically validated dimensions of quality. The 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

4.1 2004 Accreditation Survey Award

The York Region Health Services Long Term Care and Seniors Branch, which encompasses the Newmarket Health Centre, Maple Health Centre, LTC Supportive Housing/ACL Programs and LTC Day and Outreach Programs were surveyed by two surveyors from the CCHSA on May 26, 27, and 28, 2004.

On the basis of the surveyors' findings, the entire continuum of programs delivered by York Region Health Services Long Term Care and Seniors Branch was awarded a full three year accreditation standing. 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. In determining that award level, the Board of the CCHSA recognized that all essential services and programs administered by York Region Health Services Long Term Care and Seniors Branch had demonstrated a high level of compliance with the CCHSA's standards for LTC facility, community and outreach programs.

During this 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.

4.2 2004 Survey Highlights

4.2.1 Organization Strengths

The CCHSA Accreditation Survey Report indicates that "This is a very progressive and dynamic organization...The organization is well-recognized as a leader in the community, providing quality care through a wide range of programs."

The surveyors observed that there is a strong resident, client and staff focus. The recent introduction of an approach that asks the question "Is there anything else I can do for you? I have the time", reflects this commitment to excellence. The organization is supported in its work to continue to develop as a leader in long term and community support care.

The report also states, "The organization has advanced to a state of excellence and best practices with its continuous quality improvement (CQI) processes. CQI has been integrated into all aspects of the facility operation and service. The communication about CQI outcomes is effectively communicated to staff at all levels. The surveyors also found that policy and procedures have CQI processes built into them, and "the facility operates in a state of Continuous Quality Improvement."

4.2.2 Focus Group Findings

During the accreditation survey, the surveyors met with and interviewed three focus groups representing clients, staff and community partners. The following excerpts are from the summary report of the comments from each of the focus groups.

4.2.2.1 Client Focus Group

The client focus group representation was broad and included residents, families, day centre and supportive housing clients. Feedback was given openly with positive comments on the care and service provided. Management is seen as being very responsive and visible to families, which is appreciated. Most participants spoke highly of the staff.

Participants from the facilities feel that there is not sufficient staff. [Staffing levels in all LTC facilities in the province are below those of other jurisdictions and levels recommended by the sector. However, staffing levels in regional facilities are higher than the provincial average. The Region continues to lobby and advocate for additional staffing. Recent funding announcements and commitments by the Ministry of Health and Long-Term Care (MOHLTC) will facilitate continued improvements in this area.] Other areas of concern noted by the client focus group included limited menu selection at the Maple Health Centre and care of personal clothing at the Newmarket Health Centre. (Both of these areas are currently the subject of CQI Task Forces that had previously been struck to identify and implement improvements in these areas.)

Families indicated that they participate in care conferences and are well informed regarding advance directives. They reported very good communication from staff regarding their family member's health status. Participants indicated that they feel comfortable raising concerns. They stated that when questions are raised they receive appropriate attention. Overall, there was a high level of satisfaction with care and services.

4.2.2.2 Staff Focus Group

The staff focus group represented staff from all departments with the LTC facilities and staff from the community support programs. The surveyors reported that staff feel they are listened to and that they are involved in making decisions about their work. Areas of concern raised by staff included the length of time for recruitment, accessibility of computers, lack of help desk availability to support 24/7 operations and the volume of non-relevant email.

There was evident pride in working within the Long Term Care and Seniors Branch. The staff expressed support for the new program that ends interactions with the question "Is there anything else I can do for you? I have the time." They feel it is a reflection of the approach to care and services that is in keeping with their values and attitudes. Staff were found to relate well to the role they play in fulfilling the mandate of the organization.

4.2.2.3 Community Partners Focus Group

The Community Partners focus group included the York Region Community Care Access Centre, Southlake Regional Hospital, Whitby Mental Health Centre, Community Home Assistance to Seniors, the York Region Alzheimer's Society, Palliative Care Network York Region, Public Health, Housing York Inc., Emergency Medical Services, Brenda Rusnak Physiotherapy Services, Pharmacy Services and the York Region Aids Committee.

"The participants in the partners' focus group were unanimous in their opinion that the organization is responsive to community needs. They said the organization was terrific." The participants indicated that the organization's response to its client was 110%, and family members found it very responsive. All of the participants agreed the working environment and partnership arrangements were mutually beneficial and positive for those partners who had direct care delivery involvement. Strong leadership has been demonstrated by York Region Health Services.

4.2.3 Recommendations and Opportunities for Improvement

Four recommendations (see pages 13-14 of Attachment 1) and eight opportunities/areas for improvement (see page 7 of Attachment 1) were identified by the CCHSA to assist the Long Term Care and Seniors Branch in further improving the quality of care and services that it delivers. There were no 'High Urgency' and no 'Medium Urgency' recommendations related to patient safety.

It is important to note that the overall standards were found to be compliant and that there was no significant risk to resident care or safety identified.

The average number of recommendations made by CCHSA per survey per organization for large organizations, like the York Region Long Term Care and Seniors Branch, in 2002 was 13.2.

4.2.3.1 Overview of Recommendations

One of the recommendations relates to safety and exploring alternatives to the type of batteries used in motorized wheelchairs and scooters used by clients. The second recommendation relates to human resources and the need to further develop the Long Term Care and Seniors Branch's human resources plan. Two service delivery recommendations were also made: one related to the implementation of a pain assessment on all clients upon admission and the other related to documentation by unregulated health professionals on the health record.

The recommendations relate to criteria within the standards in which there are opportunities to further enhance compliance with the CCHSA's standards. The Long Term Care and Seniors Branch will be working with its CQI teams and staff over the next few months to facilitate implementing these recommendations and the suggestions offered.

4.3 Relationship to Vision 2026

Participation in the Accreditation Program and receipt of a three year accreditation award validates the Long Term Care and Seniors Branch's commitment to delivering high-quality services that promote the health, well-being and independence of our clients and provides confirmation that the Long Term Care and Seniors Branch's activities support the goals of Vision 2026.

The accreditation survey findings indicate that the Long Term Care and Seniors Branch has contributed to the attainment of Vision 2026 goals of developing Quality Communities for a Diverse Population and Responding to the Needs of our Residents. The Long Term Care and Seniors Branch offers a continuum of community-based, outreach, day and institutional services that support clients with a diverse range of care and support needs. The CCHSA survey findings indicated that these initiatives and programs demonstrate a good knowledge of needs in the community. The Long Term Care and Seniors Branch was commended by CCHSA for having developed "an in-depth understanding of the population it serves and of the programs that are available to meet the needs of the population. The underlying philosophy of promoting wellness, independence and autonomy in their client programs leads to good planning for their future needs and very satisfying outcomes for the clients."

In addition, the CCHSA survey findings indicated that the Long Term Care and Seniors Branch has supported the Vision 2026 goal of ensuring/providing Housing Choices for our Residents. The survey report indicated that the Long Term Care and Seniors Branch has demonstrated expertise in creating new supportive housing environments in established settings, as well as adapting to ordinary apartment housing. CCHSA has suggested that the Long Term Care and Seniors Branch "publish a paper about the outcomes of its programs and some of its innovative best practices."

5. FINANCIAL IMPLICATIONS

The MOHLTC provides enhanced funding of \$0.33/client/day to service providers that maintain their accreditation standing with CCHSA. These funds, which total \$25,990.80, have been included in the Branch's 2004 budget. The accreditation award will ensure the continuation of these funds over the next three years.

6. LOCAL MUNICIPAL IMPACT

The results of the Accreditation Survey Report provide confirmation that the Long Term Care and Seniors Branch is continuing to deliver high quality health services for the residents of all local municipalities.

7. CONCLUSION

The Accreditation Program provides Regional Council as 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 Health Services Department would also like to acknowledge the support and participation of our corporate partners, namely, Audit Services, Information Technology Services and Human Resource Services. Staff from these departments actively contributed during the accreditation preparation process. Additionally, during the survey interviews, they were able to provide the surveyors with valuable examples of how these internal partnerships function within The Region.

As indicated in the Accreditation Survey Report, “The organization has excellent partnerships, both at the corporate and departmental level. These include human resource associations, community colleges, staffing agencies and the internal partners such as the information technology department.”

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 Regional Clerk's office.)