



## Scarborough Health Network

### Accredited with Exemplary Standing

**Scarborough Health Network** has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement.

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

### Scarborough Health Network (2022)

Across our three hospitals and several community-based satellite sites, Scarborough Health Network (SHN) is shaping the future of care. Our innovative programs and services are designed for the specific needs of the Scarborough community. We operate Ontario's largest regional nephrology program and regional community-based cardiovascular rehabilitation service, as well as the designated cardiac centre for the Ontario Health East. As a community-affiliated teaching site for the University of Toronto; member of the Toronto Academic Science Health Network; and partner with other post-secondary institutions, we are helping to train the next generation of healthcare professionals.

### 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

November 13, 2022 to November 18, 2022

### Locations surveyed

- **3** 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

- **17 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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--- VIRTUAL---

To follow

--- ON-SITE ---

The Scarborough Health Network (SHN) team is commended on its commitment to quality improvement and patient safety through its active participation in the accreditation program. The on-site accreditation survey has demonstrated that SHN is extremely valued by its patients, families, and volunteers, and by its broad array of health service providers and partners. At SHN leaders, staff and physician are committed, engaged, and caring and provide exceptional care and services to its communities. With the introduction of Ontario Health Teams, SHN has engaged in high levels of integration and cooperation.

SHN serves one of Canada's most diverse and multicultural communities in Canada and provides care to a catchment area of over 850,000 people across Scarborough and beyond. It is Ontario's third largest community health network with three hospitals and several community-based satellite sites which include the Birchmount, the Centenary and the General sites.

In June of 2018 a strategic plan was launched. At that time, the vision, mission, and values were reviewed and refreshed, and input into the strategic plan and the hospital rebranding process were provided by staff, leaders, physicians, patients, families, and the community. The Board is familiar with its role and responsibilities as a governing body and is aware that oversight for patient safety, risk management and quality improvement are fundamental roles of governance. The Board takes ownership for board accountability, strategic planning, and fiscal oversight. The current Strategic Plan guides the organization with its mission - improving lives through exceptional care, its vision - Canada's leading community teaching health network-transforming your health experience, and its values - in all our interactions, we will be Compassionate-Inclusive-Courageous-Innovative.

The leadership team is committed to providing leadership support across all three sites. The pandemic's heavy impact on SHN resulted in the management of some of the highest volumes of COVID-19 patient cases in Ontario. Throughout the pandemic SHN continued to deliver exceptional care for patients and families and made every effort to keep a safe workplace environment for SHN teams.

SHN has a solid recruitment process and is considered an attractive employer. Employee satisfaction is carefully monitored, and the VIP chats promote fruitful exchanges between staff and leaders in an atmosphere that promotes collaboration and learning. A wellness program supports the quality of work life and promotes healthy environments for physician, staff, and leaders. SHN has created a robust human resource plan that outlines seven guiding principles and employee satisfaction surveys are inspired by them. The organization is engaging members of the Patient Family Advisory Council (PFAC), and staff in survey results action planning.

SHN has made deliberate decisions to put a focus on quality and safety across the organization. From a patient safety perspective SHN has rigorous and appropriate safety reporting policies in place and appropriate follow-up mechanisms of near misses and occurrences. Trends are identified and influence quality improvement projects. The SHN C.A.R.E.S. quality boards are visible throughout the network and are revised daily and weekly with front line staff, physicians, and leaders. Bright ideas are highlighted, quality indicators and metrics are revised to track progress towards outcomes/goals, and leading practices are implemented to close the gap between current and desired performances.

Patients and families spoke highly about the care they receive and SHN makes continued efforts to include their voice in a variety of ways. Patient satisfaction surveys are regularly reviewed, and patients can complete surveys with the assistance of QR codes that are posted in clinical areas and in hard copy formats. Patients can also access the SHN website and provide feedback on their care.

SHN has a well-developed patient and family advisory program that includes both corporate and department level Patient Family Advisory Councils (PFAC). The organization is encouraged to continue to recruit Patient Family Advisors (PFA) that are reflective of the diversity of Scarborough's community and to develop additional program level PFAs.









SHN has much to be proud of. The commitment, teamwork and dedication of the entire staff and community will serve as a valuable support as it continues its journey towards becoming one connected network.

## 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.

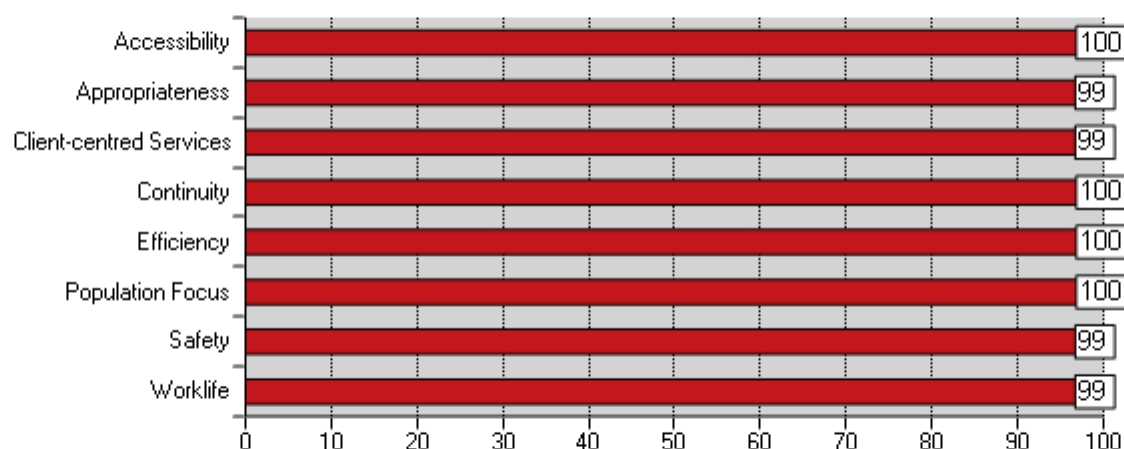
The quality dimensions are:

	<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:</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

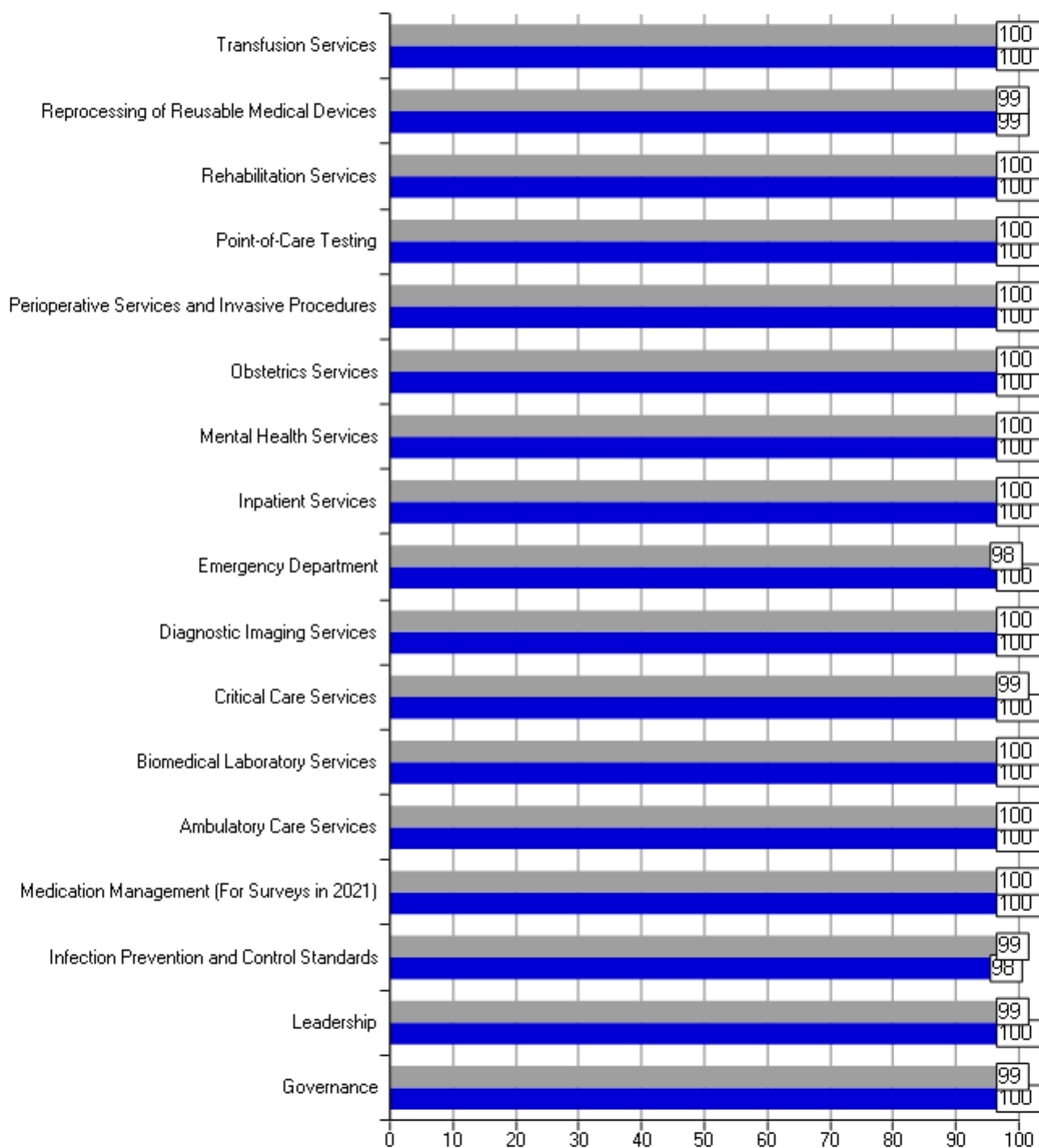
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

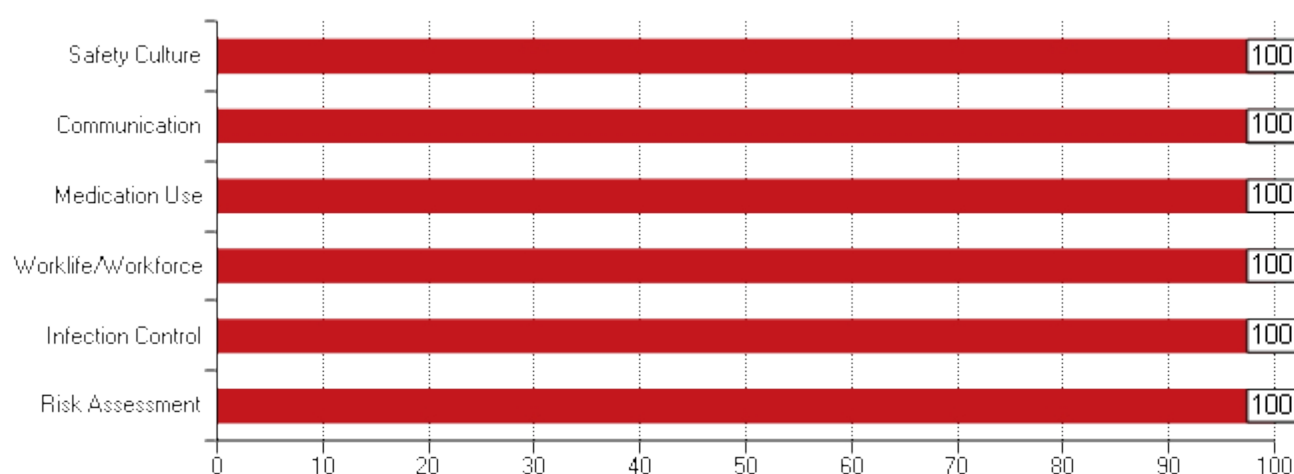
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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





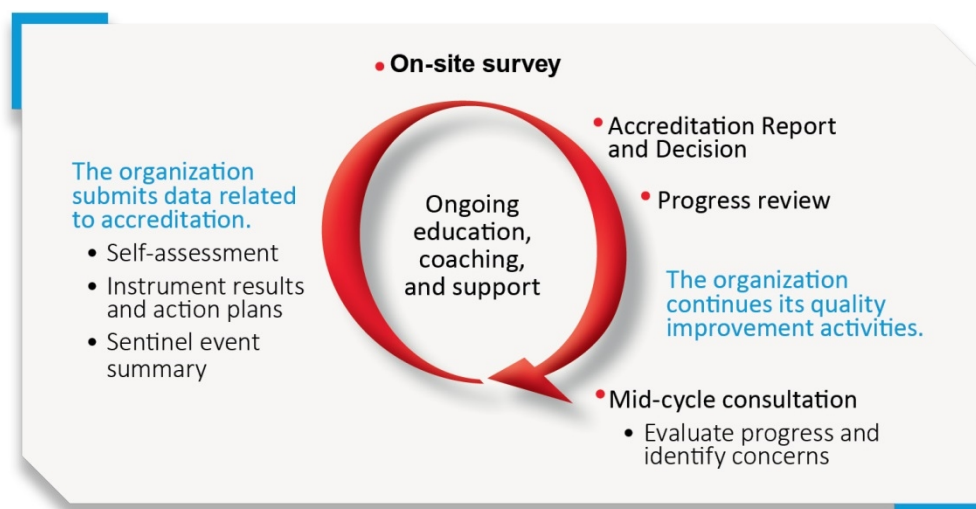
## The quality improvement journey

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 **Scarborough Health Network** 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 Scarborough Health Network: Birchmount hospital
- 2 Scarborough Health Network: Centenary hospital
- 3 Scarborough Health Network: General hospital

## Appendix B

### Required Organizational Practices

#### Safety Culture

- Accountability for Quality
- Patient safety incident disclosure
- Patient safety incident management
- Patient safety quarterly reports

#### Communication

- Client Identification
- Information transfer at care transitions
- Medication reconciliation as a strategic priority
- Medication reconciliation at care transitions
- Safe Surgery Checklist
- The “Do Not Use” list of abbreviations

#### Medication Use

- Antimicrobial Stewardship
- Concentrated Electrolytes
- Heparin Safety
- High-Alert Medications
- Infusion Pumps Training
- Narcotics Safety

#### 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 Strategy

## Required Organizational Practices

- Pressure Ulcer Prevention
  - Suicide Prevention
  - Venous Thromboembolism Prophylaxis
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