



**ACCREDITATION
AGRÉMENT**
CANADA
Qmentum

Accreditation Primer Report

Victoria Hospice Society

Victoria, BC

On-site survey dates: November 5, 2018 - November 7, 2018

Report issued: December 12, 2018

About the Accreditation Primer Report

Victoria Hospice Society (referred to in this report as “the organization”) is participating in Accreditation Canada's Accreditation Primer program. As part of this ongoing process of quality improvement, an on-site survey was conducted in November 2018. Information from the on-site survey was used to produce this Accreditation Primer Report.

Accreditation Primer results are based on information provided by the organization. Accreditation Canada relies on the accuracy of this information to plan and conduct the on-site survey and produce the Accreditation Primer Report.

Confidentiality

This report is confidential. Accreditation Canada only provides it to the organization; it is not released to any other parties.

In the interest of transparency and accountability, Accreditation Canada encourages the organization to disseminate its Accreditation Primer Report to staff, board members, clients, the community, and other stakeholders.

Any alteration of this Accreditation Primer Report compromises the integrity of the accreditation process and is strictly prohibited.

A Message from Accreditation Canada

On behalf of the Board of Directors of Accreditation Canada, I would like to extend my sincere congratulations to your Board, your leadership team, and your staff on your participation in the Accreditation Primer. As the first step in your quality journey with Accreditation Canada, I am confident that the process will be helpful in identifying strengths and areas where your organization can focus its quality and safety improvement efforts. The Accreditation Primer is how organizations begin to realize the full value of our Qmentum program.

Attached for your review is your Accreditation Primer Report, which includes the accreditation decision and the final results from your organization's on-site survey. The information in this report, as well as your online Quality Performance Roadmap, is designed to guide your organization's quality improvement activities.

Thank you for your leadership and for demonstrating your ongoing commitment to quality by partnering with Accreditation Canada on your quality journey.

As always, your feedback is welcome. We too are focused on improvement, and your input provides us with an opportunity to strengthen our program to ensure that it remains relevant to your organization.

Should you have any questions, your Program Manager or Client Services Coordinator is available to assist you.

I look forward to our continued partnership.

Sincerely,



Leslee Thompson
Chief Executive Officer

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Executive Summary

Victoria Hospice Society (referred to in this report as “the organization”) is participating in the Accreditation Canada Accreditation Primer program. This is the first step on its quality improvement journey with Accreditation Canada—an independent, not-for-profit organization that sets standards for quality and safety in health care and accredits health care organizations in Canada and around the world.

The Accreditation Primer program involves an evaluation of the quality and safety of the organization's programs and services. Following a comprehensive self-assessment, external peer surveyors conducted an on-site survey during which they assessed the organization against Accreditation Canada standards. The results are included in this report and were considered in the accreditation decision.

This report shows the results to date and is provided to guide the organization as it continues to incorporate quality improvement principles into its programs, policies, and practices. At this point, we congratulate the organization and encourage it to continue its journey to begin the Qmentum program.

The organization is commended on its use of accreditation to improve the services it offers to clients and the community.

Accreditation Decision

Victoria Hospice Society's accreditation decision is:

Take action and proceed

The organization has achieved Accreditation Primer Award Accreditation Canada recommends that the organization create a plan to address the items identified with red and yellow flags. The organization should contact its Accreditation Specialist to discuss strategies for success as it begins Qmentum.

About the On-site Survey

- **On-site survey dates: November 5, 2018 to November 7, 2018**

- **Location**

The following location was assessed during the on-site survey.

1. Victoria Hospice

- **Standards**

The Primer Standards were used to assess the organization's programs and services during the on-site survey:

1. Primer - Service Excellence Standards

Overview by Quality Dimensions

Accreditation Canada defines quality in health care using eight dimensions that represent key service elements. Each criterion in the standards is associated with a quality dimension. This table shows the number of criteria related to each dimension that were rated as met, unmet, or not applicable.

Quality Dimension	Met	Unmet	N/A	Total
 Population Focus (Work with my community to anticipate and meet our needs)	2	0	0	2
 Safety (Keep me safe)	30	0	0	30
 Worklife (Take care of those who take care of me)	8	0	0	8
 Client-centred Services (Partner with me and my family in our care)	13	0	0	13
 Continuity (Coordinate my care across the continuum)	1	0	0	1
 Appropriateness (Do the right thing to achieve the best results)	26	2	0	28
Total	80	2	0	82

Overview by Standards

The Accreditation Primer is an opportunity for the organization and Accreditation Canada to work together to establish the supports, structures, and processes necessary for accreditation, with a particular focus on the fundamental elements of quality and safety. Accreditation Canada's programs use national standards to assist organizations in improving the quality and safety of their services. Results from on-site surveys are used by the organization to identify areas for improvement and determine priorities for action.

The Accreditation Primer standards identify policies and practices that contribute to high-quality, safe, and effectively-managed care. This table shows standards used to evaluate the organization's programs and services, and the number and percentage of criteria that were met, unmet, or not applicable during the on-site survey.

Standards Set	Total Criteria		
	Met	Unmet	N/A
	# (%)	# (%)	#
Primer	80 (97.6%)	2 (2.4%)	0
Total	80 (97.6%)	2 (2.4%)	0

Summary of Surveyor Team Observations

The surveyor team made the following observations about the organization's overall strengths, opportunities for improvement, and challenges.

Since 1980 Victoria Hospice has been a leader in providing interdisciplinary end-of-life care to residents of Vancouver Island. Care is provided in a 17 bed in-patient unit, in homes and in the larger community through palliative care consults to patients in acute and long-term care facilities. The organization has contributed to the development of evidence-based best practices and clinical tools in palliative care across Canada and internationally through its active engagement in research, education and training. They have built a reputation for excellence earning many accolades and awards, as well as securing grants and donations to further their work.

There is strong governance of the organization, provided by two boards and their committees: the Victoria Hospice Society (VHS) which oversees operations and the Victoria Hospice and Palliative Care Foundation (VH & PCF) which is the fund/investment management side of the organization. Board members are actively engaged and committed to the vision, mission and values of the organization. There is mutual respect and trust between the board and senior staff.

The organization has just completed an extensive strategic planning process to set their goals and priorities for the next five years (2019 – 2024). With a new CEO starting this month (November 2018) they are excited to move forward and begin to execute this ambitious Strategic Plan. It will be important to build annual operation plans, as well as department plans, that are aligned with the new strategic directions and that have clear, measurable deliverables that will allow management and the board to monitor progress, course correct as necessary, and celebrate achievements. It will be important for the organization to find ways to continue to invest in the technology and infrastructure needed to ensure success of their strategic goals and priorities. A robust information management system that supports efficient work flows, documentation, and enables the tracking and monitoring of key performance indicators will be an asset as the organization continues to grow and evolve in response to changes in the health care environment.

VHS has a reputation of being a strong collaborator and partner in the community – in service delivery, advocacy, research, education and friend and fund raising. The organization prides itself on being as donor-centric in their work as they are client and family centred. Partnering with their donors they have achieved record fundraising revenues in the past two fiscal years which has provided the resources to fund needed initiatives and help build healthy financial reserves to ensure the stability of the organization, particularly since half their budget is reliant on donor dollars with the rest through government funding through their Island Health contract. The organization is wise to continue to seek to diversify their funding sources as much as possible in the years ahead. It will be important to have compelling outcome data and impact stories given there are so many worthy charities competing for scarce public and private funds.

Victoria Hospice's 2015 – 2018 Strategic Plan opens with this assertion: "For over thirty-eight years Victoria Hospice has provided compassionate, evidence-based palliative and hospice care to thousands of individuals

and families across southern Vancouver Island.” Based on our observations during the survey this is true and in fact in every domain of delivery of care and services Victoria Hospice excels. It is particularly reassuring from an accreditation perspective, that these services are not only directed to individuals and their families in the in-patient unit at 1952 Bay Street but also to individuals registered with them in their homes. The compassion and ethics has even further impact in supporting those family physicians and nurse practitioners and home care nurses and families who, in a careful and committed way, support people at home.

Making a difference is a shared goal of all the leaders, professional staff, support staff and volunteers the surveyors were privileged to meet and interview. These perspectives were validated by patients/clients, family members and friends of individuals and families. Importantly, staff and volunteers are aware of gaps in community-based and institutional-based services. The strong Bereavement Program appreciates the emerging needs of families and friends of individuals trying to cope with the sudden death of loved ones as a result of opioid misuse and overuse. The effectiveness of the professional and support staff and volunteers benefits from excellent board and senior administrative leadership in spite of changing times and changing leadership. Victoria Hospice can rightfully feel proud. It is a leader in provision of palliative and hospice services in Canada.

Considering a specific QI initiative, engaging not only the current family physicians providing hospice care but all family physicians in the greater Victoria area, may enhance the impact of the overall palliative care workforce. Questions for consideration - How can Victoria Hospice can be more helpful to the ones already engaged? How might the organization engage those who currently have little or no interest or skill in hospice or palliative care?

A noteworthy strength of this organization is its impressive volunteer program. Over 300 volunteers with an average length of service of just under 8 years, enrich all aspects of the Hospice’s operations and programs. They are a passionate and committed group of people who make a huge difference in the quality of care provided by VHS. The organization has recently rejuvenated a Patient Partner Advisory Group and are encouraged to continue to identify ways to amplify patient and partner voices in all aspects of their operations. For example, in co-designing new programs, as active committee/work group members, to orient new staff, and as part of hiring panels.

Client satisfaction, just one of many measurement parameters of quality, is exceptional. People really feel they are a core participant and collaborator in good quality end of life care. Families are engaged and the multiple Words of Gratitude that adorn the wall are testaments to values important to individuals and families. Many volunteers became engaged with Victoria Hospice based on their experience in caring for loved ones there. They witness reliable and compassionate staff respect the people for whom they care. Many volunteers come from a nursing background and in retirement can be true to their ethics and values. The care, attention, and respect accorded a young mother of two children (aged 7 and 10) in effectively dealing with her pain and her adjustment to her realities was ably and compassionately supplemented with facilitating her going Trick-or-Treating in a wheel chair on Halloween in the residential area around Victoria Hospice. This is but one of many examples that demonstrate a profound commitment to client and family-centred care. This is, without a doubt, the hallmark of Victoria Hospice.

Detailed On-site Survey Results

This section provides the detailed results of the on-site survey. Results are presented by priority process and standard set.

Accreditation Canada defines priority processes as critical areas and systems that have a significant impact on the quality and safety of care and services. Priority processes provide a different perspective from that offered by the standards, organizing the results into themes that cut across departments, services, and teams.

For instance, the episode of care priority process includes criteria from a number of sections in the Accreditation Primer standards that address various aspects of client care. These include intake or admitting, assessment, service planning, service delivery, follow up, and transitions. This provides a comprehensive picture of the care clients receive as they move through the organization.

During the on-site survey, surveyors rate the organization's compliance with the criteria, provide rationale for the rating, and comment on each priority process.

Priority process comments are below. The rationale for unmet criteria can be found in the organization's online Quality Performance Roadmap.

Priority Process Results for System-wide Standards

The results in this section are presented first by priority process and then by standards set.

Some priority processes in this section also apply to the service excellence standards. Results of unmet criteria that also relate to services should be shared with the relevant team.

Priority Process: Planning and Service Design

Developing and implementing infrastructure, programs, and services to meet the needs of the populations and communities served.

Unmet Criteria

Standards Set: Primer

1.9 The organization has an annual operational plan.

Surveyor comments on the priority process(es)

2018 marks the final year of Victoria's Hospice's current Strategic Plan (2015-2018). Over the past several months the organization has been engaged in a planning process to chart their future course, setting new strategic goals and priorities. This process involved engaging consulting support (from the PeplerGroup) to undertake a comprehensive environmental scan that included a global literature review of best practices, input from numerous stakeholders (i.e. the board, volunteers, staff, donors, service users/families, funders and community partners) and scenario planning to test out possible "what-if" futures. A strengths, opportunities, weaknesses and threats (SWOT) analysis was conducted and the vision, mission and values reviewed and updated to reflect the organization's current realities and aspirations. The 2019-2024 Strategic Framework which has five key priorities is awaiting final board approval and will then be launched and widely disseminated before the year-end. Development of an Operating Plan is still required to align with their new Strategic Plan.

There is a robust annual budgeting process in place which ensures department requests are critically reviewed, priorities determined and detailed information provided to the board for their decision-making and ongoing monitoring.

Client and family centred care has been at the heart of Victoria Hospice since its inception 38 years ago. It continually seeks to provide the best possible care and quality of life to patients as they approach death and support families during the dying process and through bereavement. As well, they are equally focused on helping clinicians and staff (their own and others) who provide this care, keep current with best practices and support their well-being in such emotionally charged work.

The organization is well connected to the community and populations served and is continually identifying gaps in service and developing programs to meet those gaps. In partnership with Island Health and others they have introduced a number of new clinical programs – an ambulatory palliative clinic (and another one to open in 2019) and outreach services to more non-cancer care patients, as well as to marginalized and vulnerable communities. The organization is well aware that the demographics are changing and the political environment in which they operate is never static. Their success is in large part due to their ability to be nimble and responsive to changes as they occur and proactively get out in front of them when they can.

Priority Process: Human Capital

Developing the human resource capacity to deliver safe, high quality services.

The organization has met all criteria for this priority process.

Surveyor comments on the priority process(es)

Victoria Hospice has approximately 80 staff (many are part-time/casual) and over 300 mighty volunteers who enrich all aspects of the Hospice's operations and programs. Nursing staff (RNs, LPNs and health care aids) are contracted employees of Island Health and are unionized. Significant HR support is provided by Island Health to the Hospice as needed by an assigned Business Partner. Leadership and non-contracted staff (fundraising, finance, and education) are hired directly by the Hospice. The CFO assumes responsibility for the HR functions of these non-contract staff.

There are current job descriptions for all positions and performance appraisals are done for all staff at probation and annually for nurses and every two years for other staff. There is a comprehensive orientation for all new hires both on-line and in-person, as well as onboarding support provided by buddy/mentor partners.

It is evident from the staff and volunteers that the surveyors met, they are passionate about their work, feel valued and respected, and love being part of such a caring organization. There are many long-service staff who have been with the organization for 15 – 25 years plus. Staff and volunteers alike feel comfortable in approaching any member of the team and any leader if they have questions/concerns. A noteworthy strength of this organization is its impressive volunteer program.

The organization and its leadership is to be commended for the support they have built in for all their staff and volunteers. They ensure the caregivers are equally as supported as patients and families. In addition to an EAP they have retained a former hospice counsellor to be available for anyone who wants this support. There is a Staff Support Group that plans a number of events throughout the year to celebrate and acknowledge everyone's contributions – from teas, food treats, on-site massages and holiday parties. Recently they have adopted the 'Framework for Improving Joy at Work' by the Institute of Healthcare Improvement to better understand the barriers to joy in the workplace, to enhance staff satisfaction and engagement and ultimately improving patient care. As well, they are in the process of developing a new initiative – 'Code Lavender' – to how best support anyone who has experienced a distressing event.

Staff safety is also a priority. Island Health has an active Joint Occupational Health and Safety Committee and representatives from the Hospice, the Union Stewards, sit on this group and carry out all related tasks for their unit, e.g. workplace inspections.

The organization provides extensive educational opportunities for staff and volunteers, nurturing ongoing learning and development. An active Research and Education Department has diversified their education strategies to offer online, in person and webinar options, over the past few years. They have developed

strong partnerships with UVIC and UBC to conduct research, sponsor special learning events and develop needed course curriculum. The organization has worked hard to develop a culture of inquiry/curiosity and to encourage more point of care staff to identify areas of research interest and build their capacity to lead/co-lead studies. There is also an Educational Support Fund that staff can access for external courses.

The organization is encouraged to continue to consider how best to recruit and support their casual staff pool as it is a challenge to ensure they have the requisite competencies needed for the job and that there is a sufficient supply of human resources when required.

Priority Process: Integrated Quality Management

Using a proactive, systematic, and ongoing process to manage and integrate quality and achieve organizational goals and objectives.

Unmet Criteria

Standards Set: Primer

- 3.4 The organization's leaders monitor the progress and achievement of the quality improvement plan.

Surveyor comments on the priority process(es)

Victoria Hospice is commended for using the Accreditation Primer as a key tool to accelerate their quality improvement program. The organization has historically had a culture of safety and quality, continually identifying opportunities to improve every aspect of their operations, from client care to fundraising. Investing time and resources into the accreditation process has helped formalize a lot of what they were already doing informally and intuitively. As one staff person said the work to meet the standards was in essence “a reframing of everything we know”. Quality, safety and risk are taken very seriously by everyone in the organization from the board to front line staff and volunteers.

The organization does not have a separate Quality Improvement Committee but uses existing Committees for this oversight. It is the Clinical Coordinating Group that will monitor quarterly the progress on the Quality and Client Safety Plan and at the Board level, the Governance Committee is assuming oversight.

In developing both their Quality and Safety Plans the organization did a very comprehensive deep dive into what was already in existence and where the gaps were using the key quality dimensions. They identified goals, performance measures, targets, who gathers the data, who is responsible for actions and alignment to their strategic goals/objectives and priorities. Following this step they then completed a ranking exercise to identify the top 10 -15 items to focus their efforts on. The organization is encouraged to continue to try and focus their QI efforts, selecting a few areas of focus each year to work on. It will be important to identify key performance indicators they want to track and trend over time, ideally those that will have the most impact on outcomes vs. process or activity indicators. As well, they may want to consider developing an annual Enterprise Risk Plan (as part of Quality or separate) that would rank overall risks (on severity and likelihood) and take action on the top “hot spots”.

Victoria Hospice, as part of their contract with Island Health, already collects data on a number of indicators that are rolled up province wide. Organizations get the results which can be benchmarked against others - such things as falls, medication errors, complaints and safety incidents. Quarterly the Director shares this information with the Board.

Victoria Hospice has much to be proud of in their ongoing efforts to improve care and the patient and family experience. They recently rejuvenated their Patient Partner Advisory Group and have sought their input to make patient and family centred care improvements.

Victoria Hospice has adopted the UBC Ethics Framework (also used by Island Health). The board approved its implementation in May of 2018 to guide clinical, leadership and governance actions and decisions. An Ethics Resource Committee has been developed to provide support as needed to any staff, patient, or family struggling with an ethical dilemma. Committee membership consists of representatives from the psychosocial, leadership, nursing, physician and volunteer teams. Initially the Committee has been focused on building its own ethics knowledge through guest presentations at their meetings so they can facilitate. Also available to the Committee and Hospice staff is ethics expertise within Island Health and an external bioethicist, if needed, for case consultation. To date there has been one request from a physician for a consult from two Committee members to help her step back and work through a very complex care situation. This support was described as being very helpful to land on the best path forward for all involved.

The Hospice have also developed an excellent on-line module that was launched this fall outlining the ethics framework and the support available to staff and how to access it. Plans are underway to offer in-person workshops as well once/twice a year in the future.

The organization is encouraged to document any requests for assistance and build a library of case vignettes. These real-life examples are an excellent resource for teaching and discussion purposes and helping to build ethics literacy across the organization. They might also want to consider building educational materials focused on common ethical dilemmas encountered in hospice care which can be used in ethics rounds/workshops, e.g. food and fluids, refusing pain medication, scarce resource allocation, and discharges when the unit is no longer the most appropriate site of care against the patient and family wishes.

The introduction of Medical Assistance in Dying (MAiD) in Canada was something all health care organizations and clinicians had to address. Victoria Hospice is to be commended for the very thoughtful and reflective way they arrived at their perspective on MAiD that, while it is not the destination of Victoria Hospice, patients and families requesting consideration will not be refused.

Long before the legislation was passed staff input was solicited via comprehensive surveys and discussion. Ultimately, three staff did choose to leave as they were not able to reconcile working where MAiD is supported but their decision was respected and honoured. The Hospice also made connections with the MAiD providers in the community so good relationships were in place to ensure patients and families were supported if this was their decision.

Priority Process: Physical Environment

Providing appropriate and safe structures and facilities to achieve the organization's mission, vision, and goals.

The organization has met all criteria for this priority process.

Surveyor comments on the priority process(es)

Victoria Hospice occupies two floors in the Richmond Pavilion on the grounds of Victoria's Royal Jubilee Hospital. Every effort has been made to make the physical space as bright, comfortable, warm and welcoming as possible which is not easy in a 70 year old institutional building. There are patient and family lounges and quiet spaces, including private counselling rooms. As well, there is a beautiful rooftop garden that patients and staff alike can enjoy. Clinical care is less than ideal with some shared rooms, small bathrooms to safely manoeuvre and only one shower and one tub room on the unit. Finding a new home is one of the five strategic priorities that the organization has set for itself over the next five years.

The benefit to leasing space from Island Health (for \$1 a year) is access to an array of services provided by them, e.g. housekeeping, maintenance, bio-medical, and food services. The physical plant is clean and well maintained. Windows are able to be opened which allows for fresh air. There is a small smoking area for patients set up to restrict any exposure to second hand smoke to others. In response to staff safety concerns, the organization is in the process of ensuring access to the building is restricted with keypads installed in three stairwell doors as well as a camera monitoring system.

The Hospice owns one car that is used by the Palliative Response Team working in the community and is regularly maintained.

As noted within the Emergency Preparedness standard there is a comprehensive disaster and emergency plan in place. As Victoria Hospice is required to comply with Island Health policies and protocols to manage emergency situations they use VIHA's emergency preparedness plan that has been developed for various scenarios - from fires, bomb threats, to earthquakes. The Hospice holds regular practice drills and ensures staff and volunteers understand their roles and responsibilities in the event of an emergency.

Priority Process: Emergency Preparedness

Planning for and managing emergencies, disasters, or other aspects of public safety.

The organization has met all criteria for this priority process.

Surveyor comments on the priority process(es)

Victoria Hospice is required to comply with Island Health policies and protocols to manage emergency situations. There is a detailed emergency preparedness plan in place that has been developed for various disasters/emergencies - from fires, bomb threats, to earthquakes. The leadership team assumes responsibility for planning for and managing emergencies (vs. a separate committee). The Hospice holds regular practice drills and ensures staff and volunteers understand their roles and responsibilities in the event of an emergency. The organization also participates in any system wide drills run by Island Health - e.g. earthquakes.

This past year they conducted Code Red and Green drills (fire and evacuation) on both day and evening shifts that they were able to learn from and modify their response. The organization made two excellent videos on these recent drills that can be used for staff orientation/training, one that demonstrates what to do in the event of a fire and evacuation, the other outlining the top 5 lessons learned from the drill. They have plans to run a Code Blue next month.

The organization keeps their communication fan out staff numbers up to date and a hard copy is made available within the plan itself in a sealed envelope to ensure confidentiality. Managers also have current copies available to them at home should they be required. The Hospice may want to consider making the plan and the fan out numbers available electronically for ease of access and version control. As well, they are encouraged to consider other potential emergencies in their community programs and/or in-hospital that staff could walk through in a table-top exercise. These could be integrated into a team meeting vs. a stand-alone event.

The Hospice is proactive in ensuring the safety of its patients, families, staff, volunteers and the general public. Efforts are made to prevent an emergency situation from happening in the first place, such as a controlled and monitored smoking area, restricted access to the units, and training in de-escalating violent situations.

Priority Process: Medical Devices and Equipment

Obtaining and maintaining machinery and technologies used to diagnose and treat health problems.

The organization has met all criteria for this priority process.

Surveyor comments on the priority process(es)

Victoria Hospice ably meets these priority processes. This is in part because of its contractual relationship with Island Health and its understanding of the importance of procedures and processes with respect to Medical Devices and Equipment.

Service Excellence Standards Results

The results in this section are grouped first by standards set and then by priority process.

Priority processes specific to service excellence standards are:

Infection Prevention and Control for Primer

- Implementing measures to prevent and reduce the acquisition and transmission of infection among staff, service providers, clients, and families

Medication Management for Primer

- Using interdisciplinary teams to manage the provision of medication to clients

Competency

- Developing a skilled, knowledgeable, interdisciplinary team that can manage and deliver effective programs and services.

Episode of Care

- Partnering with clients and families to provide client-centred services throughout the health care encounter.

Decision Support

- Maintaining efficient, secure information systems to support effective service delivery.

Standards Set: Primer - Direct Service Provision

Unmet Criteria	
Priority Process: Competency	
The organization has met all criteria for this priority process.	
Priority Process: Episode of Care	
The organization has met all criteria for this priority process.	
Priority Process: Decision Support	
The organization has met all criteria for this priority process.	

Surveyor comments on the priority process(es)**Priority Process: Competency**

The competencies of professional and support staff and volunteers is not in question. Victoria Hospice invests in professional development and learning and is attentive to credentialing and documentation. Recertification of skills is the norm. All staff and volunteers appreciate the investment in their skill development and maintenance.

Priority Process: Episode of Care

Episodes of care and interaction are regularly and reliably documented. All of the priority processes are met.

Priority Process: Decision Support

Decision Support is evident through the use of evidence-informed guidelines. A standard reference used is Up To Date-a high quality decision support electronic reference. Information management may be encumbered by the dominance of the written record. Possible benefits of an Electronic Medical Record (EMR)/Electronic Health Record (EHR) specific to palliative and hospice service could be considered.

Priority Process: Infection Prevention and Control for Primer

Implementing measures to prevent and reduce the acquisition and transmission of infection among staff, service providers, clients, and families

The organization has met all criteria for this priority process.

Surveyor comments on the priority process(es)

As with other priority processes, Victoria Hospice's relationship with Island Health is enabling in meeting these priority processes. Staff and volunteers are very well informed and are agents for prevention and control.

Priority Process: Medication Management for Primer

Using interdisciplinary teams to manage the provision of medication to clients

The organization has met all criteria for this priority process.

Surveyor comments on the priority process(es)

The Medication Management priority processes are very well addressed in the conventional situation of institutional-based services. In addition, Victoria Hospice provides support for patients/clients, their families and the health professionals caring for them at home. The PRT locked boxes provide the common essential medications for management in the home environment. Conventional Medication Management priority processes are enabled through a relationship with a community-based pharmacist and pharmacy. Medication reconciliation and proper disposal of outdated drugs are reliably performed, in keeping with established best practices. Rexall on Douglas and its pharmacists are to be commended for enabling Victoria Hospice to provide these important and essential medication services.

Appendix A - Accreditation Primer

Health care accreditation contributes to quality improvement and patient safety by enabling a health organization to regularly and consistently assess and improve its services. The Accreditation Primer program offers a customized process aligned with each client organization's needs and priorities.

As part of the Accreditation Primer process, organizations complete a Self-Assessment, have the option of completing and submitting survey instrument data, and undergo an on-site survey during which trained peer surveyors assess their services against national standards. The surveyor team provides preliminary results to the organization at the end of the on-site survey. Accreditation Canada reviews these results and issues the Accreditation Primer Report within 10 business days.

An important adjunct to the Accreditation Primer Report is the online Quality Performance Roadmap (QPR), available to the organization through its portal. The organization uses the information in the QPR in conjunction with the Accreditation Primer Report to develop comprehensive action plans.

Throughout the Accreditation Primer program, Accreditation Canada provides ongoing support to help the organization address issues, develop action plans, and monitor progress.

Action Planning

Following the on-site survey, the organization uses the information in its Accreditation Primer Report and QPR to develop action plans to address areas identified as needing improvement. The organization uses this information to make continuous quality improvements so it can begin the Qmentum program.