

Royal Ottawa Health Care Group (The/Le Royal)

Accredited with Exemplary Standing

October, 2015 to 2019

Royal Ottawa Health Care Group (The/Le Royal) has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement. It is accredited until October 2019 provided program requirements continue to be met.

Royal Ottawa Health Care Group (The/Le Royal) 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 **Royal Ottawa Health Care Group (The/Le Royal)** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

Royal Ottawa Health Care Group (The/Le Royal) (2015)

The Royal is one of Canada's foremost mental health care and academic health science centres. Our mandate is simple: to get more people living with mental illness into recovery faster. The Royal combines the delivery of specialized mental health care, advocacy, research and education to transform the lives of people with complex and treatment resistant mental illness. The Royal's Institute of Mental Health Research is proudly affiliated with the University of Ottawa. The Royal Ottawa Foundation for Mental Health raises funds that support The Royal's work. The Royal places a sharp focus on awareness building through the You Know Who I Am campaign and the DIFD youth initiative.

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, a tangible demonstration that our programs meet international standards.

Find out more about what we do at 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

October 4, 2015 to October 8, 2015

Locations surveyed

- 2 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

• 9 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.

The organization, The Royal Ottawa Health Care Group (The/Le Royal) is commended on preparing for and participating in the Qmentum survey program. The Royal Ottawa Mental Health Care Group (Royal Ottawa) is a regional provider of tertiary mental health that includes in-patient and out-patient, community and outreach services.

The senior management team leads the quality initiatives and promotes a culture of safety. The team has supported the implementation of a variety of changes and updates including the consolidation of community programs, and the introduction of the electronic medical record (EMR), the quality improvement plan (QIP) and the integrated ethics framework. The Royal has purchased a positron emission tomography–magnetic resonance imaging (PET MRI), with a committed focus on research for the next five years.

The organization also has a major leadership role in the Regional Capacity Program, intended to identify and address gaps in service delivery and improve access by way of collaboration. Given the complexities of the clients and patients served, the team is challenged to plan strategically for risk management and mitigation. The organization has not received global funding increases for the past six years which presents understandable challenges for the Royal Ottawa's operation. It has however, established a positive working relationship with the Local Health Integrated Network (LHIN) and has secured some alternate sources of revenue for specialized treatment.

The organization's board and its members is an active, competent and involved team that understand their accountabilities for quality and quality management. The board regularly reviews safety issues and quality indicators of performance for effective oversight. The board recently approved a new five-year strategic plan. Members continually assess their own functioning to plan their development goals. The board will need to continue a proactive approach to support relevant and safe services.

Community partners report that relations with The Royal have improved during the past years. Partners indicate that efforts on the part of The Royal Ottawa Health Care Group to become more transparent and improve communications are realizing success. The organization offers consultation and support for difficult and complex cases and provides useful case conferencing. The organization is considered to be provincial leaders in regards to Ontario Telehealth Network (OTN) services. Outreach support is also a valued service and the centralized processes are appreciated. Opportunities to improve patient flow have been identified and recommendations for change include standardizing processes for patient access and working more collaboratively with partners to coordinate admissions and discharges have been discussed. At the same time, the need for flexibility and appropriate triage is recognized. Partners understand the funding challenges that The Royal Ottawa Health Care Group needs to manage and recognize the limits on service development requests.

A robust volunteer program supports programs and services and overall, volunteers contribute hours that equate to 15.14 full-time equivalent (FTE) positions. In addition, the Client Empowerment Council (CEC) is a group of clients that support and advocate for clients and patients at the clinical and organizational level. In turn, members report that their participation consistently contributes to their own personal recovery.

Staff members provide quality care using a client-centred model and are increasing efforts to engage and involve families in programs and services. The teams are focused on evidence-based care and are accessing education and training opportunities to develop new and innovative practices.

Interdisciplinary teams are actively involved in all aspects of programs. There is evidence of improvement in employee and physician engagement. Teamwork is clearly evident across the organization. Wellness initiatives are promoted by the organization. Clients report positive experiences with care providers and services offered. Annually, the client satisfaction results are analyzed and improvements are implemented.

Overview: Quality dimensions results

Accreditation Canada uses eight dimensions that all play a part in providing safe, high quality health care.

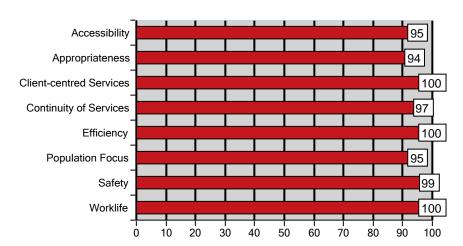
These dimensions are the basis for the standards, and each criteria in the standards is tied to one of the quality dimensions.

The quality dimensions are:

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



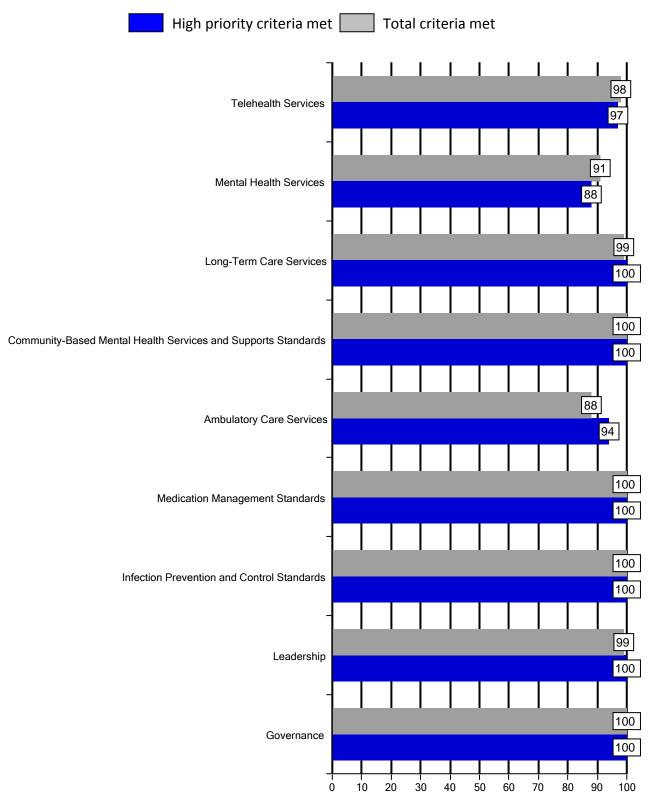
Quality Dimensions: Percentage of criteria met

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

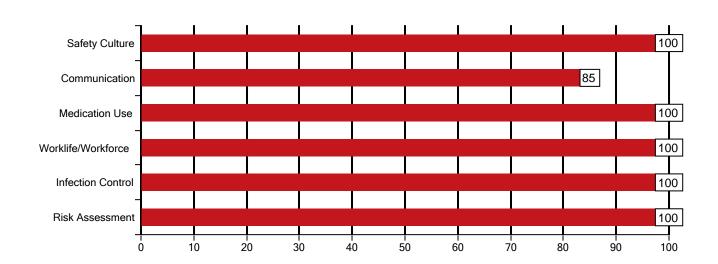
Overview: Required Organizational Practices results

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



ROP Goal Areas: Percentage of tests for compliance met

See **Appendix B** for a list of the ROPs in each goal area.

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 **Royal Ottawa Health Care Group (The/Le Royal)** 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.

Royal Ottawa Health Care Group (The/Le Royal)

Appendix A: Locations surveyed

- 1 Brockville Mental Health Centre
- 2 Royal Ottawa Health Care Group (The Royal)

Appendix B

Required Organizational Practices

Safety Culture

| Safety Culture | |
|--------------------|---|
| | Accountability for Quality |
| | Adverse Events Disclosure |
| | Adverse Events Reporting |
| | Client Safety Quarterly Reports |
| | Client Safety Related Prospective Analysis |
| Communication | |
| | Client And Family Role In Safety |
| | Dangerous Abbreviations |
| | Information Transfer |
| | Medication reconciliation as a strategic priority |
| | Medication reconciliation at care transitions |
| | Two Client Identifiers |
| Medication Use | |
| | High-Alert Medications |
| | Infusion Pumps Training |
| Worklife/Workforce | |
| | Client Safety Plan |
| | Client Safety: Education And Training |
| | Preventive Maintenance Program |
| | Workplace Violence Prevention |
| Infection Control | |
| | Hand-Hygiene Compliance |
| | Hand-Hygiene Education and Training |
| | Infection Rates |
| | Pneumococcal Vaccine |
| | Reprocessing |
| Risk Assessment | |
| | Falls Prevention Strategy |
| | Pressure Ulcer Prevention |
| | |

• Suicide Prevention