Executive Summary Accreditation Report



Sts'ailes Health and Family Services

Accredited

Sts'ailes Health and Family Services has met the requirements of the Qmentum accreditation program and has shown a commitment to quality improvement.

Sts'ailes Health and Family Services 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 **Sts'ailes Health and Family Services** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

Accreditation Canada

We are independent, not-forprofit, 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

March 12, 2023 to March 15, 2023

Locations surveyed

- **1 location** was 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** as of the date of this report.

See **Appendix A** for a list of the locations that were surveyed.

Standards used in the assessment

• 6 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.

There has been tremendous growth since the last survey which was in November 2018. Sts'ailes Yeqwethet Ten-Year Plan 2019-2029 is exceptional. There is evidence that the mission statement to deliver culturally holistic services by blending Sts'ailes culture, traditions, and modern medicine to build strong people from birth to spirit is lived and embraced! The plan begins with an opening prayer and outlines an introduction, the team, services, engagement, goals (including quality and safety) strengths, challenges, priorities and the future.

There is a Chief and Council and a council member is assigned to the Health Portfolio. They are visionary and committed to the health of the community. Sts'ailes is commended for its care to Elders and the development of the 10-member youth council which mimics the Chief and Council. The population of the community is 1200 with 800 residents and it was noted more and more people are returning home. Home is on the banks of the beautiful Harrison River, surrounded by green hills and mountains, 100 km east of Vancouver, British Columbia

Congratulations on the completion of the 3 of the survey tools and best of luck as you review and develop your response and plan.

Leadership including the Health Director is described as supportive and approachable, understanding the needs of the health programs and people. There is access to policy which is culturally appropriate. There is evidence of regular meetings and even "all staff" meetings annually and there are planning meetings twice per year.

Community partnerships are strong both internally and externally including Fraser Health, FNHA(First Nations Health Authority), First Nations Police/RCMP, local fire department and public works, Community School (governed by Council), Indigenous Services Canada (Jordans Principal) and Seabird.

Delivery of care and services are designed with as much input as possible from community members.

One of the biggest challenges identified was mental health and addiction, lifestyle choices and chronic disease. There are excellent programs and services such as public health, home care and home support, mental health and palliative care. Programs support one another including Yeqwethet (Health), Finance, IT, Admin, Emergency Management living their guiding principles.

Clients were overwhelmingly pleased with the care and appreciated home visits and coming to the office. Elders felt respected, welcomed and enjoyed all the available activities.

Staff are engaged, enjoying a team environment. The majority of staff are working in their home communities. All staff are made to feel welcome. Retention rates are very high reaching almost 99%. There is education such as to lateral kindness, mental health first aid and opportunity for additional education and training to assist the team in understanding auality, reporting and safety.

There is opportunity for formalizing continuous quality improvement including data collection, development of indicators and evaluation. Great job with quality improvement initiatives such as Foot Care and Meals On Wheels.

There has so much improvement since the last survey, with more changes yet to come including the development of a Treatment Centre and a Community Health Centre.

The organization is commended for its Pandemic response and collaborative approach.

Wishing you all the best as you continue your accreditation journey.

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

Coordinate my care across the continuum

Efficiency: Make the best use of resources

Population Focus: Work with my community to anticipate and meet our needs

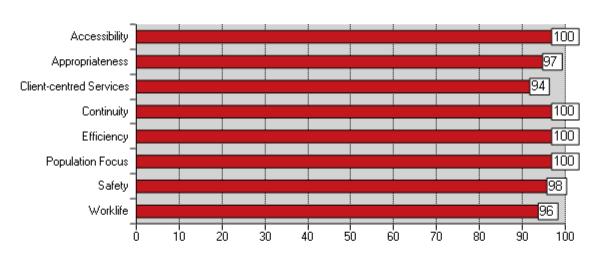
(A) Safety: Keep me safe

Morklife: 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



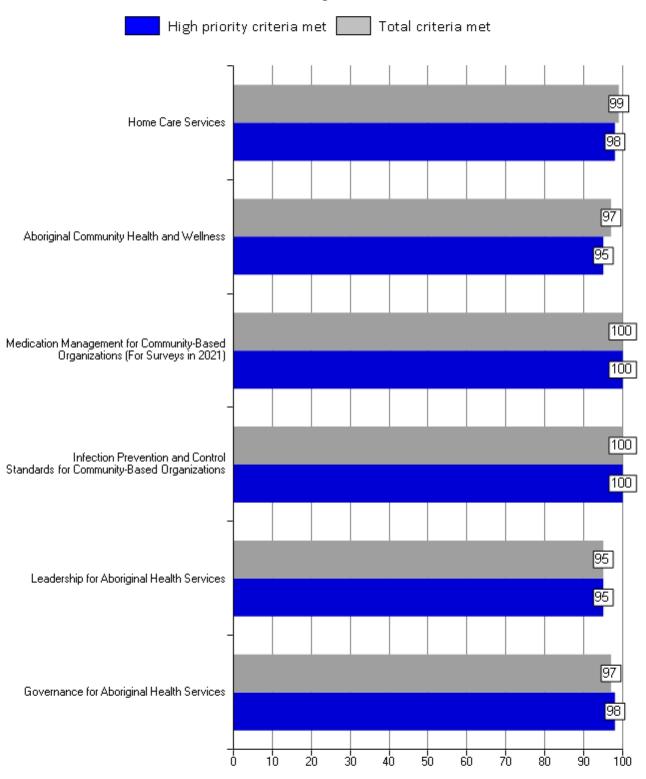
Overview: Standards results

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.

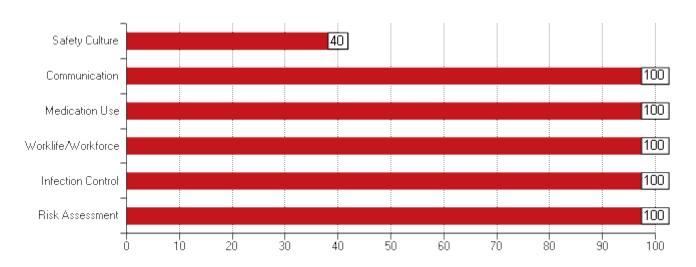
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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

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.

On-site survey Accreditation Report and Decision The organization submits data related Progress review Ongoing to accreditation. education, Self-assessment coaching, The organization Instrument results and support continues its quality and action plans improvement activities. Sentinel event summary Mid-cycle consultation Evaluate progress and identify concerns

Qmentum: A four-year cycle of quality improvement

As **Sts'ailes Health and Family Services** continues its quality improvement journey, it will conduct an indepth 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 Sts'ailes Health and Family Services

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 at care transitions
	The "Do Not Use" list of abbreviations
Medication Use	
	High-Alert Medications
Worklife/Workforce	
	Patient safety plan
	 Patient safety: education and training
	Preventive Maintenance Program
	Workplace Violence Prevention
Infection Control	
	Hand-Hygiene Compliance
	 Hand-Hygiene Education and Training
	Reprocessing
Risk Assessment	
	Home Safety Risk Assessment
	Skin and Wound Care
	Suicide Prevention