



Alberta Health Services

Accredited

Alberta Health Services continues to be Accredited until the next accreditation decision is calculated in 2017.

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

Alberta Health Services (2016)

Alberta Health Services (AHS) is Canada's largest healthcare organization serving over four million Albertans. More than 104,000 skilled and dedicated health professionals, support staff, volunteers and physicians promote wellness and provide healthcare every day in 450 hospitals, clinics, continuing care and mental health facilities, and community sites throughout the province. Our Health and Business plan outlines our goals of ensuring quality throughout the health system while placing the patient experience at the centre of everything we do. This supports our mission to "provide a patient-focused, quality health system that is accessible and sustainable for all Albertans".

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

May 1, 2016 to May 6, 2016

Locations surveyed

- **89** 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** as of the date of this report.

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

Standards used in the assessment

- **13 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.

Alberta Health Services (AHS) is the largest health system in Canada and continues to evolve as an integrated system providing comprehensive services to Albertans and, in many cases, other parts of Canada. Since the last accreditation on-site survey, a new seven-person board was established and a new acting president and chief executive officer was appointed. The organization has had to adapt to a changing economic environment while remaining focused on its mission to provide a patient-focused, quality health system that is accessible for all Albertans and sustainable for the province. Developed through extensive engagement sessions with staff, the new AHS vision statement is "Healthy Albertans. Healthy Communities. Together."

The accreditation on-site survey process continues to be an integral part of the organization's commitment to quality. An important part of this survey cycle was the incorporation of new standards related to patient- and family-centred care. One of the foundational strategies for AHS is its Patient First Strategy, which was officially launched in June 2015. The strategy is intended to strengthen culture and practices to fully embrace patient- and family-centred care throughout the organization and to empower and enable Albertans to be at the centre of their health care team. A range of activities has been identified to enable patients and families to have a voice and influence not only their personal care but also strategies, policies, and evaluation of AHS.

The organization is at various stages of implementing patient- and family-centred care, with some wonderful examples where input from and partnerships with patients and families are an integral part of how services are planned, delivered, evaluated, and continuously improved. For example, units using the CoACT model are well on their way. In other instances, teams are in the early stages of exploring how to hear the voices of patients and families and enhance their involvement. The organization is encouraged to leverage the many pockets of excellent patient- and family-centred care to expand this culture and practices across the organization. AHS may wish to explore good practices and learnings from other organizations that have experience and well-established practices related to patient- and family-centred care. The accreditation standards and this accreditation report can also serve as resources to inform that important work.

AHS continues to demonstrate its commitment to quality improvement. The organization has established a quality framework and each zone has a quality framework supported by a variety of councils and working groups. The maturity of these strategies and structures varies considerably. The survey team observed examples where quality councils, quality improvement plans, quality improvement initiatives, and performance indicators are well established. In many instances this improvement work is being led and coordinated at the organization, zone, or strategic clinical network level, with implementation at the operational level in different programs, units, and sites. Some teams have well-enunciated quality plans and performance metrics. In some areas and programs, teams are at the early stages of developing and implementing quality plans and will require continued support. These teams can benefit and learn from the experience of their colleagues. The organization is encouraged to build on this foundation to ensure all programs and units have defined quality improvement plans and relevant performance indicators that are analyzed to manage and continuously improve care and services.

Given the scale of AHS, the development, adoption, and spread of best practices and standardization of how things are done are challenging and time consuming. Strong leadership is being provided by the strategic clinical networks, zone councils, and other leadership groups. Progress is being made, although much work remains. Surveyors observed considerable variation in some practices and an opportunity to accelerate the spread of good practices, especially those related to the quality and safety of patient and client care. In some cases, strategic clinical networks and quality committees are new or just being established.

There appears to be some resistance to adopting an organizational approach that requires changes in practices even when accommodation is made to the unique environment of a particular site or program. As well, change fatigue may be a factor, given the many changes experienced across AHS since its inception. Good progress has already been made on implementing many of the Required Organizational Practices (ROPs) across AHS, and the organization has demonstrated the ability to establish many safety processes as standard practice across the organization. The organization is encouraged to consider an accelerated spread strategy for those ROPs that are most critical for safe care and which continue to require broader implementation across the organization.

Another area for improvement and more consistency is in the development of care plans, which are done well in some programs and sites but are not in place or insufficiently completed in other instances.

The Alberta Improvement Way (AIW) has been used by various teams to improve services. However, there has been limited adoption of this methodology in many sites and programs. The organization may wish to consider ways to facilitate learning and broader adoption of the AIW methodology.

In some cases, challenges to ensure coordinated, sustainable services are impacted by the need for supportive infrastructure. The recently announced approval and funding for a comprehensive clinical information system (CIS) is welcomed by the organization and will enable AHS to address many risks and inefficiencies associated with disconnected electronic information systems and paper-based documentation throughout the system. Although full implementation of the new CIS will take many years, it is anticipated to have tangible benefits for patients and care providers. This and other enablers will assist AHS in fulfilling its mandates for excellence in care, teaching, and research.

The AHS structure is intended to enable and enhance continuity of care across the continuum. Many partnerships have been created with other organizations and community agencies. The ability of the organization to work effectively as a large provincial system in collaboration with others was powerfully demonstrated during the on-site survey, which coincided with the horrific forest fire that required evacuation of Fort McMurray. AHS staff, physicians, and volunteers rallied with many other people and agencies to respond to this crisis, demonstrating their compassion and dedication to serving the people of Alberta. AHS is congratulated for the efficiency, effectiveness, and compassion it demonstrated and continues to demonstrate related to the Fort McMurray fire.

Throughout the on-site survey, the dedication and enthusiasm of AHS staff, physicians, and volunteers impressed the survey team. Staff expressed a high level of satisfaction and pride in being part of the AHS team and appreciated the support from their leaders. Staff expressed appreciation for the many learning opportunities within AHS, confirming the organization's commitment to be a learning organization that values its people. AHS has identified collaboration and respect as core values, which many staff indicated were important and appreciated aspects of being part of AHS.

Surveyors also had many opportunities to hear directly from clients, patients, and families about their care experience. They heard a high level of satisfaction from clients, patients, and families and appreciation for the hard work and dedication of the many people and teams providing care and services. It is apparent that the culture of quality improvement and commitment to high-quality care throughout AHS is having a tangible, positive impact on the experience of clients, patients, and families.

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.

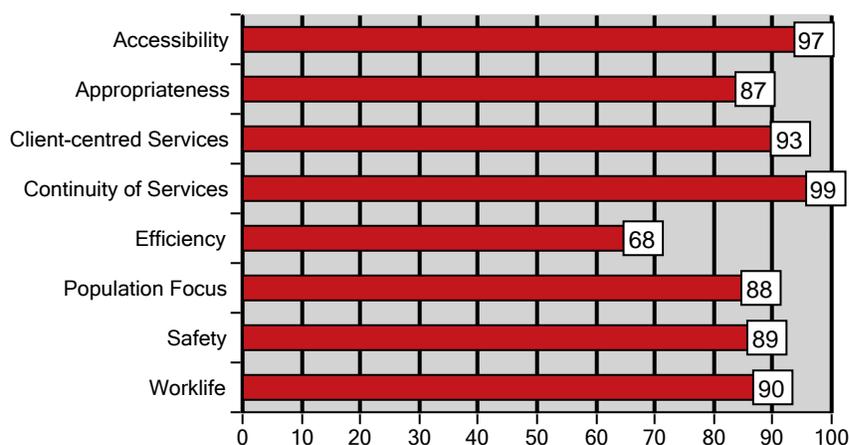
The quality dimensions are:

-  **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
-  **Continuity of Services:** 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
-  **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

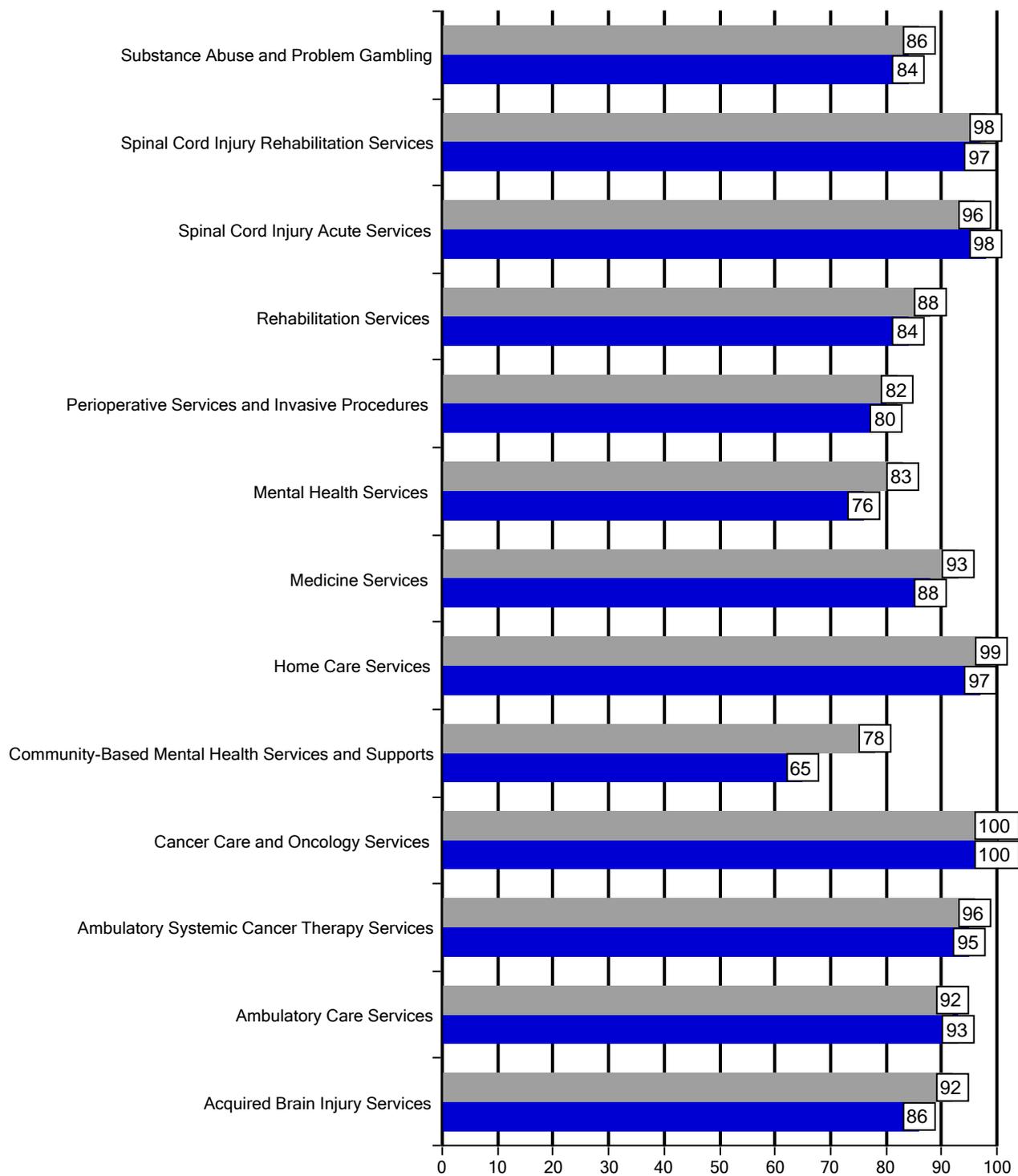
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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

■ 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.

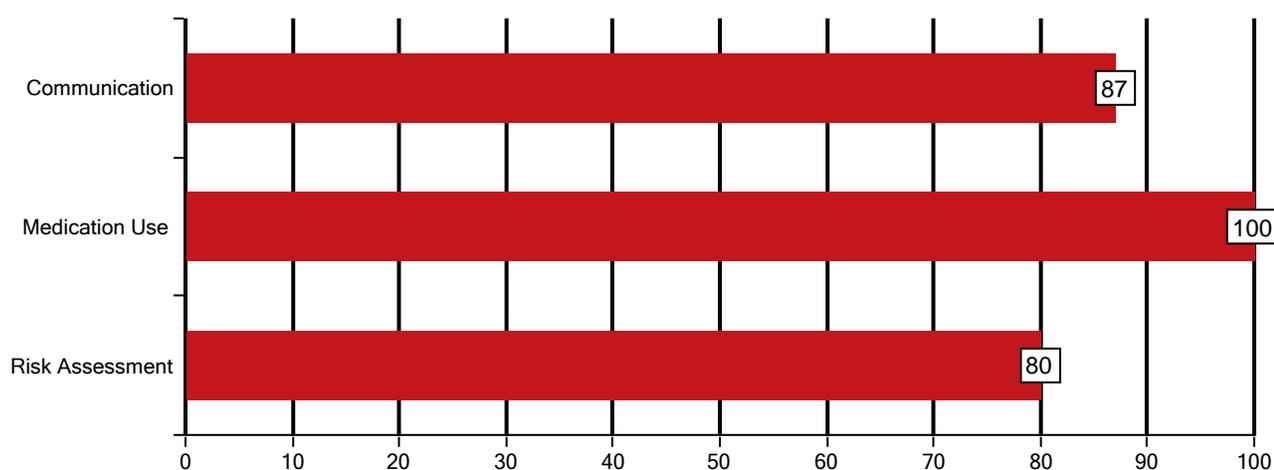
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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



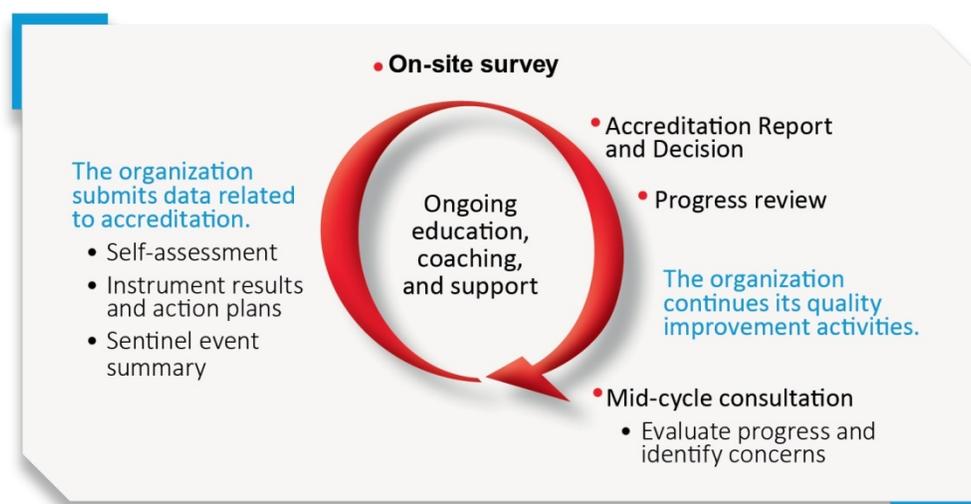
The quality improvement journey

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 **Alberta Health Services** 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 Aberhart Centre
- 2 Addiction Recovery Centre
- 3 Addiction Services Edmonton
- 4 Alberta Children's Hospital
- 5 Alberta Hospital Edmonton
- 6 Athabasca Community Health Services
- 7 Barrhead Community Cancer Centre
- 8 Barrhead Healthcare Centre
- 9 Bonnyville Community Cancer Centre
- 10 Bonnyville New Park Place
- 11 Bridgeland Seniors Health Centre
- 12 Brooks Health Centre
- 13 Calgary Youth Addiction Services
- 14 Camrose Community Cancer Centre
- 15 Carewest - Sarcee
- 16 Centennial Centre for Mental Health & Brain Injury
- 17 Central Alberta Cancer Centre
- 18 Centre Hope Building
- 19 Chestermere Community Health Centre
- 20 Chinook Regional Hospital
- 21 Claresholm Centre for Mental Health and Addictions
- 22 Cochrane Community Health Centre
- 23 Cross Cancer Institute
- 24 Drayton Valley Community Cancer Centre
- 25 Drayton Valley Community Health Centre
- 26 Drumheller Health Centre
- 27 East Calgary Health Centre
- 28 East Edmonton Health Centre
- 29 Edmonton General Continuing Care Centre
- 30 Foothills Medical Centre
- 31 Forensic Assessment and Community Services
- 32 Fort Macleod Health Centre
- 33 Fort McMurray Community Cancer Centre
- 34 Fort McMurray Provincial Building
- 35 Glenrose Rehabilitation Hospital
- 36 Grande Prairie Cancer Centre

- 37 Grande Prairie Virene Building
- 38 Henwood Treatment Centre
- 39 High River Community Cancer Centre
- 40 Jack Ady Cancer Centre
- 41 Kaye Edmonton Clinic
- 42 Kentwood Place
- 43 Kingsway Professional Building
- 44 Lander Treatment Centre
- 45 Lethbridge Centre
- 46 Lethbridge Provincial Building
- 47 Lethbridge Youth Residential Treatment Centre
- 48 Lloydminster Community Cancer Centre
- 49 Lois Hole Hospital for Women
- 50 Margery E. Yuill Cancer Centre
- 51 Mazankowski Alberta Heart Institute
- 52 Medicine Hat Regional Hospital
- 53 Mother Rosalie Health Services Centre
- 54 Northeast Community Health Centre
- 55 Northern Addictions Centre
- 56 Northern Lights Regional Health Centre
- 57 Northgate Centre
- 58 Olds Provincial Building
- 59 Peter Lougheed Centre
- 60 Queen Elizabeth II Hospital
- 61 Red Deer 49th Street Community Health Centre
- 62 Red Deer Bremner Avenue Community Health Centre
- 63 Red Deer Provincial Building
- 64 Red Deer Regional Hospital Centre
- 65 Regional Resource Centre
- 66 Renfrew Recovery Centre
- 67 Rocky Mountain House Health Centre
- 68 Rockyview General Hospital
- 69 Royal Alexandra Hospital
- 70 Sheldon M. Chumir Health Centre
- 71 South Calgary Health Centre
- 72 South Health Campus
- 73 Southern Alberta Forensic Psychiatric Centre
- 74 St. Albert Provincial Building
- 75 St. Therese - St. Paul Healthcare Centre

- 76 Stettler Addictions Office
- 77 Stollery Children's Hospital
- 78 Strathcona Community Hospital
- 79 Sturgeon Community Hospital
- 80 Sunridge Mall - 2580
- 81 Sylvan Lake Community Health Centre
- 82 Taber Health Centre
- 83 Tom Baker Cancer Centre
- 84 Two Hills Health Centre
- 85 University of Alberta Hospital
- 86 Vegreville Community Health Centre
- 87 Vermilion Provincial Building
- 88 Wetaskiwin Provincial Building
- 89 Youth Residential Addiction Services

Appendix B

Required Organizational Practices

Communication

- Client Identification
 - Information transfer at care transitions
 - Medication reconciliation at care transitions
 - Safe surgery checklist
-

Medication Use

- Infusion pump safety
-

Risk Assessment

- Falls prevention
 - Home safety risk assessment
 - Pressure ulcer prevention
 - Skin and wound care
 - Suicide prevention
 - Venous thromboembolism prophylaxis
-