# **Executive Summary Accreditation Report**



### **Middlesex Hospital Alliance**

### **Accredited with Commendation**

**Middlesex Hospital Alliance** has gone beyond the requirements of the Qmentum accreditation program and is commended for its commitment to quality improvement. It is accredited, provided program requirements continue to be met.

**Middlesex Hospital Alliance** 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 **Middlesex Hospital Alliance** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

### Middlesex Hospital Alliance (2021)

The Middlesex Hospital Alliance is comprised of two partner sites that serves around 78,000 residents in Middlesex, Lambton, Elgin & Kent counties. Strathroy Middlesex General Hospital(SMGH) and Four Counties Health Services(FCHS) provide 24/7 emergency care, diagnostics, surgical services, OB, outreach programs, ambulatory/outpatient clinics and rehabilitation.

Within our Middlesex Hospital Alliance family includes approximately 705 staff, physicians and specialists, plus volunteers to provide care for the patients in our communities.

#### **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

October 3, 2021 to October 8, 2021

### **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 Commendation** as of the date of this report.

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

#### Standards used in the assessment

• 14 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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Middlesex Hospital Alliance is commended on its decision to invite Accreditation Canada to assess its compliance with Accreditation Canada's standards and Required Organizational Practices. It was evident that the hospital was well prepared for the survey, and that staff actively participated in the process.

Middlesex Hospital Alliance is located in southwestern Ontario, and includes the Strathroy Middlesex General Hospital in Strathroy and the Four Counties Health Services site in Newbury. This organization serves approximately 78,000 residents of Middlesex, Lambton, Elgin, and Kent Counties. Middlesex Hospital Alliance shares a board, leadership team, medical staff, management team, and corporate services. There are two foundations, one for the Newbury hospital site and the other for the Strathroy hospital site.

Strathroy Middlesex General Hospital is the third largest employer in the municipality of Strathroy-Caradoc. It has 54 acute inpatient beds with over 24,753 emergency visits, 39,196 ambulatory visits, 2,256 surgical visits, and 82 births per year. Four Counties Health Services has 12 inpatient beds with 10,710 emergency visits and 8,338 ambulatory visits in the past year.

In 2020, Middlesex Hospital Alliance became an Ontario Health Team partner with Western Ontario Health (London-Middlesex). The leaders are pleased to be part of this team, and are committed to doing their part to streamline healthcare services and improve patient outcomes.

The board of directors is skills-based, and uses a talent matrix when recruiting new members. They recently revised their roles and responsibilities as a governing body, and are aware that oversight for patient safety, risk management, and quality improvement are fundamental roles of governance. The board takes ownership of board accountability, strategic planning, and fiscal oversight. The board is regularly briefed on quality and safety incidents, data, cause and effect analysis, and clinical outcomes. Regular reporting to the board of directors through an aligned committee structure ensures the organization's priorities related to quality and safety are accessible and addressed. The board is proud of its efforts, and that of the organization, in driving quality from the boardroom to the

bedside.

Work has begun on the pre-capital planning submission, which has been presented to the Ministry of Health and Long-Term Care, and Ontario Health. Middlesex Hospital Alliance is working towards constructing new operating rooms, intensive care unit, diagnostic imaging, and an obstetrical unit, with over 50,000 square feet of new buildings at the Strathroy hospital. Approximate 40,000 square feet of the current hospital will undergo redevelopment. This project is expected to cost approximately 95 million dollars. The two hospital foundations are working diligently with the community to assist with capital fund-raising.

Leadership at Middlesex Hospital Alliance is comprised of a mix of senior and new managers. Many of the new managers have been recruited from London hospitals, who noted that they like the culture of a smaller community hospital. The leadership teams meet regularly, and appear to work collaboratively with frontline staff. Staff noted leadership is visible and accessible when support is required. The employees working at Middlesex Health Alliance are dedicated, and care about the health of community members. In view of the current pandemic, staffing shortages do occur, and recruitment and retention of staff is a concern.

The Strathroy Middlesex General Hospital site and the Four Counties Health Services work with the Trillium Gift of Life Network. These hospitals have policies and processes in place for tissue, kidney, and ocular retrievals.

The emergency preparedness program at Middlesex Hospital Alliance has been reviewed, with an update of all emergency procedures and plans. The pandemic plan in place prior to the current pandemic has been modified to reflect the reality of managing a pandemic within the hospital's infrastructure, and maintaining critical services required by the supported community. The pandemic operations committee is an active and engaged multidisciplinary team, that is capable of ramping up and down to respond to the changing requirements of the pandemic.

Middlesex Hospital Alliance works closely with its' community partners. Participants included in the discussions were: regional hospitals' chief executive officers, the chief of police, the director of home and community care, pastoral care, director of client care at Southwest Ontario Aboriginal Health Access Centre, and the western Ontario Health Team. Adjectives used to describe the chief executive officer and leadership team were: "active participants, positive, collaborative, constructive, engaging, personable, team players, partnerships at the core, inclusive, and respectful." Numerous examples were provided by the community partners to demonstrate the stellar qualities, insightfulness, and openness this leadership team displays.

The chief of police appreciated the addition of around-the-clock security, and the transition protocols for mental health patients that are coming out of draft form. He hopes that the work on telehealth assessments and referrals as part of the treatment plan continues, and comes to fruition. The chief executive officer of a regional hospital noted that individual thanks and recognition was given to her staff by the chief executive officer of Middlesex Hospital Alliance during the pandemic, which meant a great deal to staff. The director of the First Nations wellness and health clinic at Four Counties Health Services noted that the leadership team at Middlesex Hospital Alliance are working toward

inclusiveness, and incorporating First Nations rituals into the hospital's practices and protocols. He felt that racism is being addressed, and that consideration is being given to a First Nations board member at Middlesex Hospital Alliance.

The board and leadership team are strategically developing plans on how to form better relationships with the First Nations community. The organization rented space at Four Counties Health Services for the development of the Southwest Ontario Aboriginal Health Access Centre. This clinic supports programs that meet the health and wellness needs of the First Nations community. Many employees from Middlesex Hospital Alliance recently attended and supported the tribute and recognition day events that were held locally. Middlesex Hospital Alliance is hoping to include First Nations rituals such as smudging and spiritual healing within the physical plants. Staff are required to complete Indigenous cultural training. Middlesex Hospital Alliance is commended and encouraged to continue their efforts to improve relations and incorporate the voice of the First Nations community into their work and space.

In speaking with patients, families, and visitors, the two community hospitals at Middlesex Hospital Alliance are a valued and important part of the community. Some community members who have retired from larger centres to Strathroy have noted that they did so because of the hospital, and its accessibility.

### **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

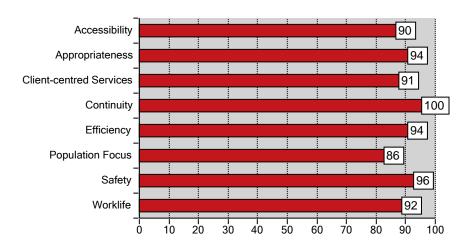
(A) Safety: Keep me safe

**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**

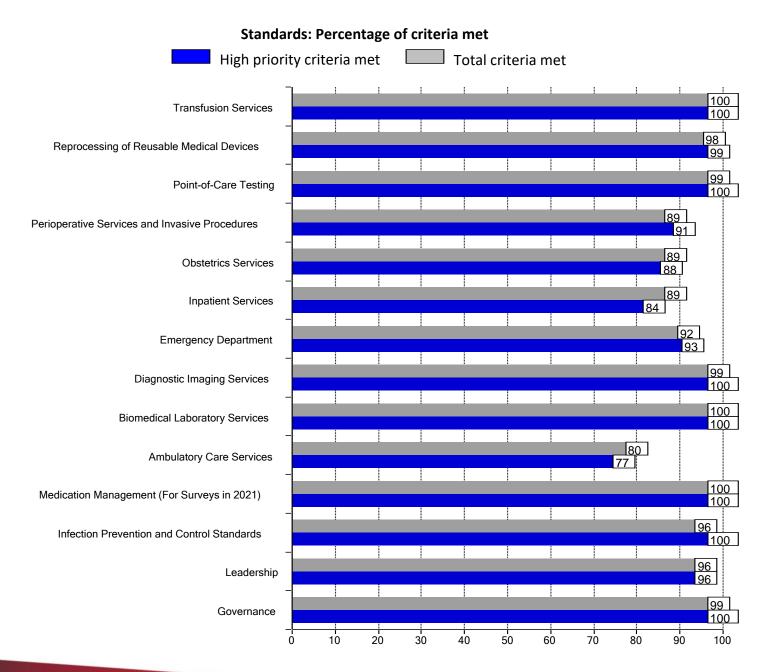


### **Overview: Standards results**

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.



### **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.

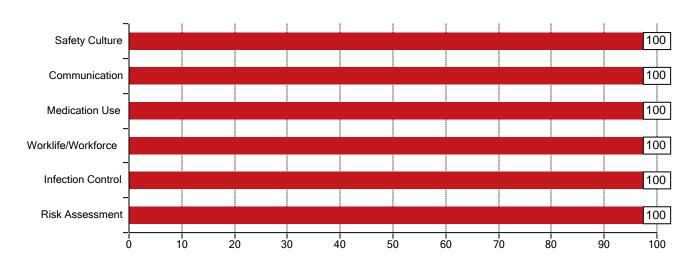
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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

- Four Counties Health Services
- 2 Strathroy Middlesex Hospital

# **Appendix B**

	<b>Required Organizational Practices</b>
Safety Culture	
	Accountability for Quality
	Patient safety incident disclosure
	Patient safety incident management
	Patient safety quarterly reports
Communication	
	Client Identification
	<ul> <li>Information transfer at care transitions</li> </ul>
	<ul> <li>Medication reconciliation as a strategic priority</li> </ul>
	<ul> <li>Medication reconciliation at care transitions</li> </ul>
	Safe Surgery Checklist
	<ul> <li>The "Do Not Use" list of abbreviations</li> </ul>
Medication Use	
	Antimicrobial Stewardship
	Concentrated Electrolytes
	Heparin Safety
	High-Alert Medications
	Infusion Pumps Training
	Narcotics Safety
Worklife/Workforce	
	Client Flow
	Patient safety plan
	<ul> <li>Patient safety: education and training</li> </ul>
	Preventive Maintenance Program
	Workplace Violence Prevention
Infection Control	
	Hand-Hygiene Compliance
	<ul> <li>Hand-Hygiene Education and Training</li> </ul>
	Infection Rates
Risk Assessment	
	Falls Prevention Strategy

# **Required Organizational Practices**

- Pressure Ulcer Prevention
- Suicide Prevention
- Venous Thromboembolism Prophylaxis