



London Health Sciences Centre

Accredited with Exemplary Standing

London Health Sciences Centre has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement.

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

London Health Sciences Centre (2023)

London Health Sciences Centre (LHSC) is one of Canada's largest acute care teaching hospitals. LHSC encompasses University, Victoria, and Children's Hospitals, as well as Nazem Kadri Surgical, Westmount Kidney Care, Byron and Victoria Family Medical Centres, 54 Riverview Avenue site, Lawson and Children's Health Research Institutes, CSTAR (Canadian Surgical Technologies & Advanced Robotics), Fowler Kennedy Sport Medicine Clinic, and Children's and London Health Sciences Foundations. LHSC is committed to collaborating with patients, families and system partners to deliver excellent care, educate providers of tomorrow, and advance innovations that optimize the health of those we serve.

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

February 12, 2023 to February 16, 2023

Locations surveyed

- **3** 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

- **22 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.

Working together to shape the future of health is the mission of London Health Sciences Centre (LHSC). They are committed to keeping the patient at the heart of all they do. Since the last accreditation visit, the organization has completed a Strategic Plan for submission to the Board in the coming weeks as well as a Master Plan exercise for submission to the Ministry. Because of the pandemic, the strategic plan due to end in 2020 was extended until 2022.

With the new restructure and realignment of LHSC, it is committed to being bold and forward thinking. The Strategic Plan is aligned with the direction and vision of the organization realignment.

An engaged Board of Directors (Board), fully committed to quality and safety of patients and families, ensures that the leadership team assumes its obligation in meeting the mandate and the goals and objectives put forth. The Board is committed to patient partnerships and provides space for the lived experience perspectives of patient and family partners to sit on the committees of the Board. Leadership values patient and family partnerships and encourages teams to find ways to work in partnership with patients and families.

There is commendable work done within LHSC on the Quality Improvement journey. There is significant effort to support learning of quality improvement methodology. Cohorts of trained staff appreciate the value of their engagement and are eager to engage with patients and families in finding creative ways to build engagement capacity. It is important to always ensure that the patient and family voice is present in decision-making conversations and to close the loop and share learnings with other patient and community partners.

There are extensive partnerships to support and meet clinical, teaching and research initiatives. Partners report that regular meetings with LHSC in the context of the pandemic provided opportunities to improve the continuity of care for patients between organizations. It is important for clients to be able to return to their clinical setting close to their homes once they have received tertiary and quaternary care at LHSC.

Patient satisfaction is informal at present and in some clinical areas is carried out through bedside rounds. QR codes asking for feedback do not appear to have had the expected success, but LHSC is committed to reinstating organization-wide surveys in the coming months.

The delivery of care and services is exceptionally well done; it is collaborative, integrated and organized for the most part across programs.

In order to ensure the delivery of safe and quality care given the number of new hires and the increased turnover on the units, much attention was given to provide nursing staff the necessary support, training and education. Staff indicated that they work as a cooperative group, helping and supporting each other especially during challenging situations. There is a strong presence of mentoring and coaching that supports staff in their growth and development. Necessary adjustments to staffing ratios and staff mix were made to ensure the availability of staff to provide safe care. The surveyor team met staff committed to giving safe and team-based care which was evident in their exchanges with patients and families.

Staff report feeling very supported by the team, considerably more so during and since the pandemic. LHSC is committed to the Just Culture approach to lead to an increased trust in reporting incidents. LHSC is commended for the outstanding Wellness Program and its numerous components to address the well-being of staff in the context of the pandemic.

Being unable to enter the following comments in the sites and services to be reviewed in the next survey, the surveyor team highly recommends including:

- 1) Medical Devices Reprocessing at the Nazem Kadri Surgical Centre, and
- 2) Emergency Department and Critical Care at Children's Hospital

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.

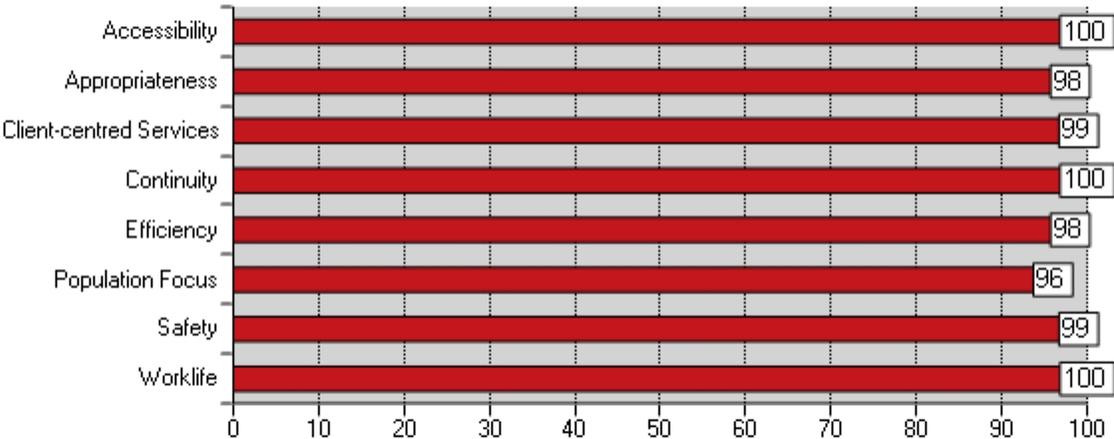
The quality dimensions are:

-  **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:** 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

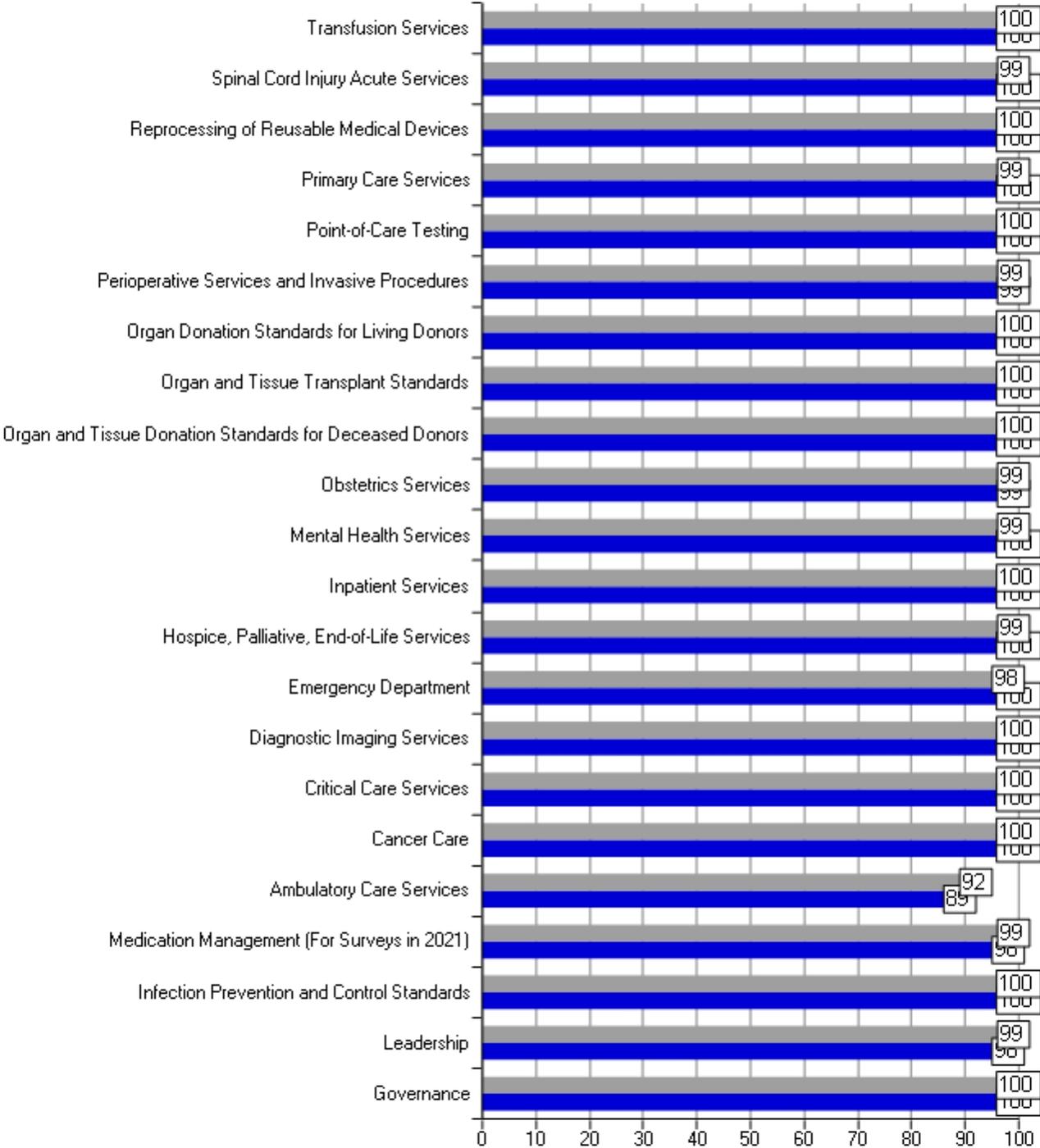
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

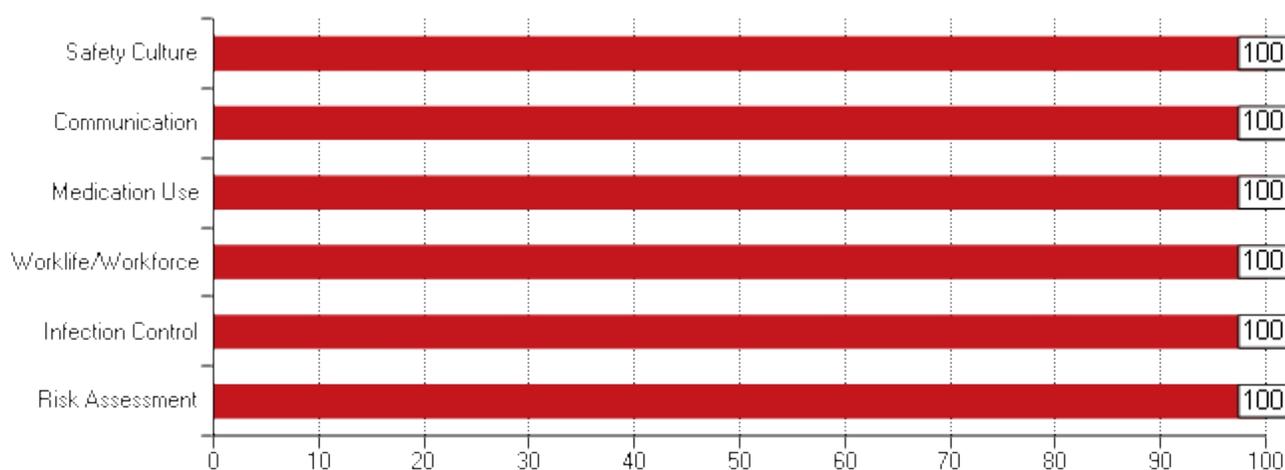
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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



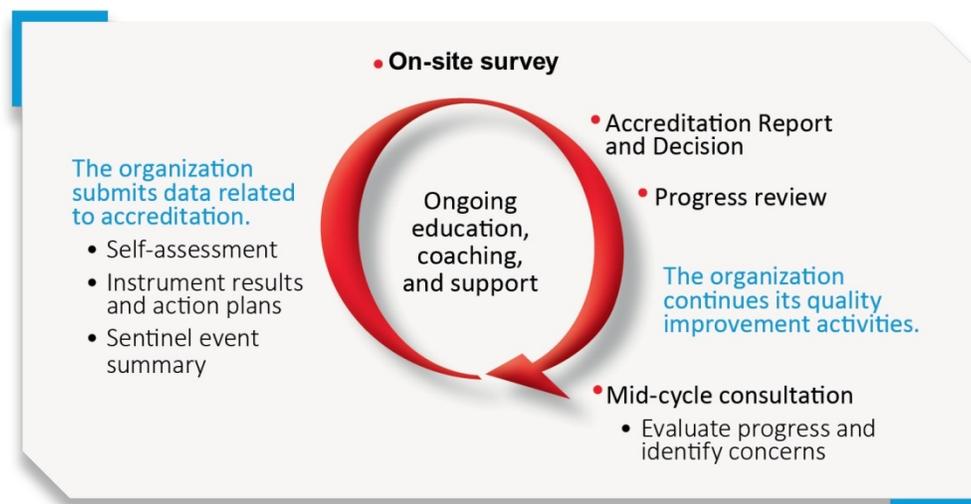
The quality improvement journey

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 **London Health Sciences Centre** 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 Byron Family Medical Centre
- 2 University Hospital
- 3 Victoria Hospital

Appendix B

Required Organizational Practices

Safety Culture

- Accountability for Quality
 - Patient safety incident disclosure
 - Patient safety incident management
 - Patient safety quarterly reports
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Communication

- Client Identification
 - Information transfer at care transitions
 - Medication reconciliation as a strategic priority
 - Medication reconciliation at care transitions
 - Safe Surgery Checklist
 - The “Do Not Use” list of abbreviations
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Medication Use

- Antimicrobial Stewardship
 - Concentrated Electrolytes
 - Heparin Safety
 - High-Alert Medications
 - Infusion Pumps Training
 - Narcotics Safety
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Worklife/Workforce

- Client Flow
 - Patient safety plan
 - Patient safety: education and training
 - Preventive Maintenance Program
 - Workplace Violence Prevention
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Infection Control

- Hand-Hygiene Compliance
 - Hand-Hygiene Education and Training
 - Infection Rates
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Risk Assessment

- Falls Prevention Strategy

Required Organizational Practices

- Pressure Ulcer Prevention
 - Suicide Prevention
 - Venous Thromboembolism Prophylaxis
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