



Thunder Bay Regional Health Sciences Centre

Accredited with Exemplary Standing

May 2022 to 2026

Thunder Bay Regional Health Sciences Centre has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement. It is accredited until May 2026 provided program requirements continue to be met.

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

Thunder Bay Regional Health Sciences Centre (2022)

TBRHSC (expand), a 375-bed academic specialized acute care facility, is a national leader in Patient and Family Centred Care. As the only tertiary care provider in Northwestern Ontario, TBRHSC provides comprehensive services to a population of over 250,000 residents. Effectively addressing the health care of patients and families has earned TBRHSC both Innovation Awards and Leading Practice Designations. As an academic health sciences centre, TBRHSC teaches the next generation of health care providers and advances medical research. Patients benefit from interprofessional teams of dedicated health care providers and access to leading-edge medical technology and clinical trials.

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 15, 2022 to May 19, 2022

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 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

- **19 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.

TBRHSC Summary

Thunder Bay Regional Health Sciences (TBRHSC) continues to provide quality care to its community and the Northwest Region. It serves a population of over 250,000 with 88% Northwestern Ontario patients receiving their care at the Health Centre. The catchment area is a large geographical area, and as it is designated a Regional Academic Health Sciences Centre. Twenty-five percent of the population served are Indigenous peoples. The organization supports the surrounding hospitals and acts like a collaborative Regional Hospital.

TBRHSC has developed several partnerships with community health care providers who work together to create an integrated health care system. Partners indicated that over the past few years, they have seen a significant improvement in engagement and respect for what each organization contributes, regardless of size. Partners feel they have an equal voice at the table. Excellent collaboration is noticeable at all levels within the organization with a focus on what is best for the patient and community. There has been a big shift to "our" collective patients and the need to work together to meet the health care needs of the community.

Partners expressed that they acknowledge the high patient demands on the hospital and indicated that they could contribute more to an active role in assisting TBRHSC in over crowding and patient flow. For example, providing health care services closer to home.

There are strong partnerships with academic institutions including Lakehead University, Northern Ontario School of Medicine (NOSM) and Confederation College. They work together creatively to address current and future health human resources challenges. Students are welcomed and provide an excellent recruitment opportunity.

Regional hospital CEOs meet on a regular basis in addition to Vice Presidents, and Chief Nursing Executives. These forums provide opportunities to share ideas and resources. TBRHSC senior leadership encourages two-way dialogue and is an active community partner.

Partners commended TBRHSC for its leadership in the management of the pandemic. Community

partners expressed their gratitude to for their assistance during this challenging time. The pandemic has impacted many areas including surgical and Diagnostic wait times, and availability of Health Human Resources. The team implemented many creative solutions and are encouraged to continue.

TBRHSC is recognized for its commitment and implementation of engaging and responding to patients and families. Their focus on patient and family centred care continues to evolve with more involvement in co-design at the clinical level. During the survey, surveyors had the opportunity to meet with several Patient and Family Advisors and hear firsthand how their contribution working along side clinical teams, improved lives. As the organization rolls out its Strategic plan to cascade to the departmental level, the Patient Family Advisor Committee are engaged in the process and look forward to contributing even more at the clinical departmental level.

The organization is commended for its commitment to improving indigenous health challenges, and Equity, Diversity, and Inclusion (EDI). Since the last survey TBRHSC has made tremendous strides in adding leadership positions to support outreach and engagement of Indigenous peoples and advance EDI. For example, a Vice President, Indigenous Collaboration, Equity and Inclusion, Manager Indigenous Care, indigenous navigators and coordinators and EDI specialist.

The Board of Directors and leadership are well respected and are fully committed to patient safety and quality. They are also committed to improving staff experience with many resources available to support staff wellness. When complex decisions need to be made, patient safety, staff safety and quality remain the priority.

Teams are very dedicated and kind to patients. They demonstrate caring and a commitment to give the best they can. This was highlighted during the height of the pandemic.

TBRHSC recently approved a new Mission, Vision, Values and 2026 Strategic Plan. The process was inclusive and engaged staff and community partners. Patient Family Advisors and community partners felt involved in the process and their feedback was considered. The organization considered lessons learned from the previous implementation of the strategic plan and determined that an achievable number of initiatives and performance measures would be rolled out methodically over time. A soft internal launch of the Mission, Vision, Values and Strategic Plan has started with a robust external roll out plan in the summer.









TBRHSC teams have adopted a focus on quality improvement, and patient safety and quality improvement are at the forefront. During the survey, many quality improvements were noted throughout the organization which demonstrated a patient safety culture. The roll out of the new strategic plan provides an opportunity to introduce a process to formalize goals objectives and performance metrics at the front-line level. With full engagement of staff, TBRHSC is poised to enter a new chapter in achieving its new Vision-Exceptional care for every patient, every time.

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.

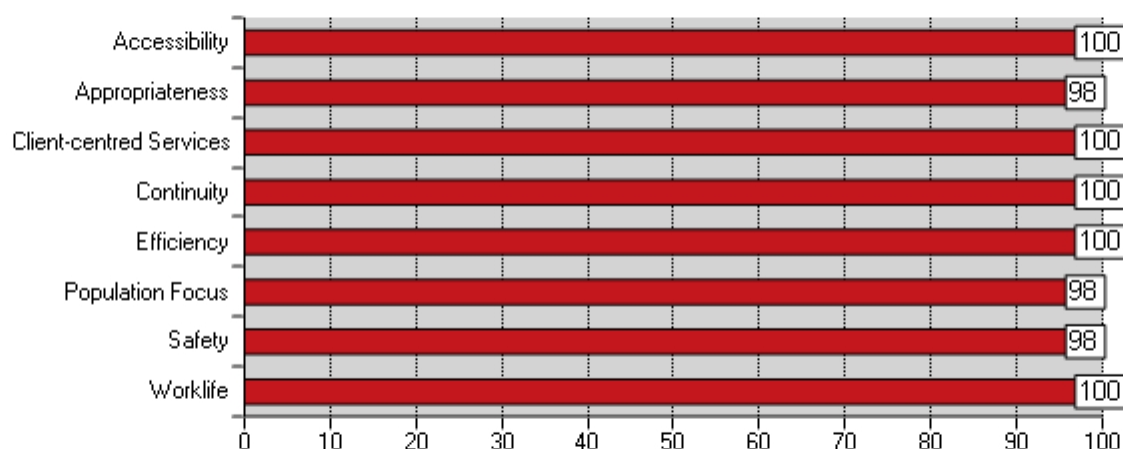
The quality dimensions are:

	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

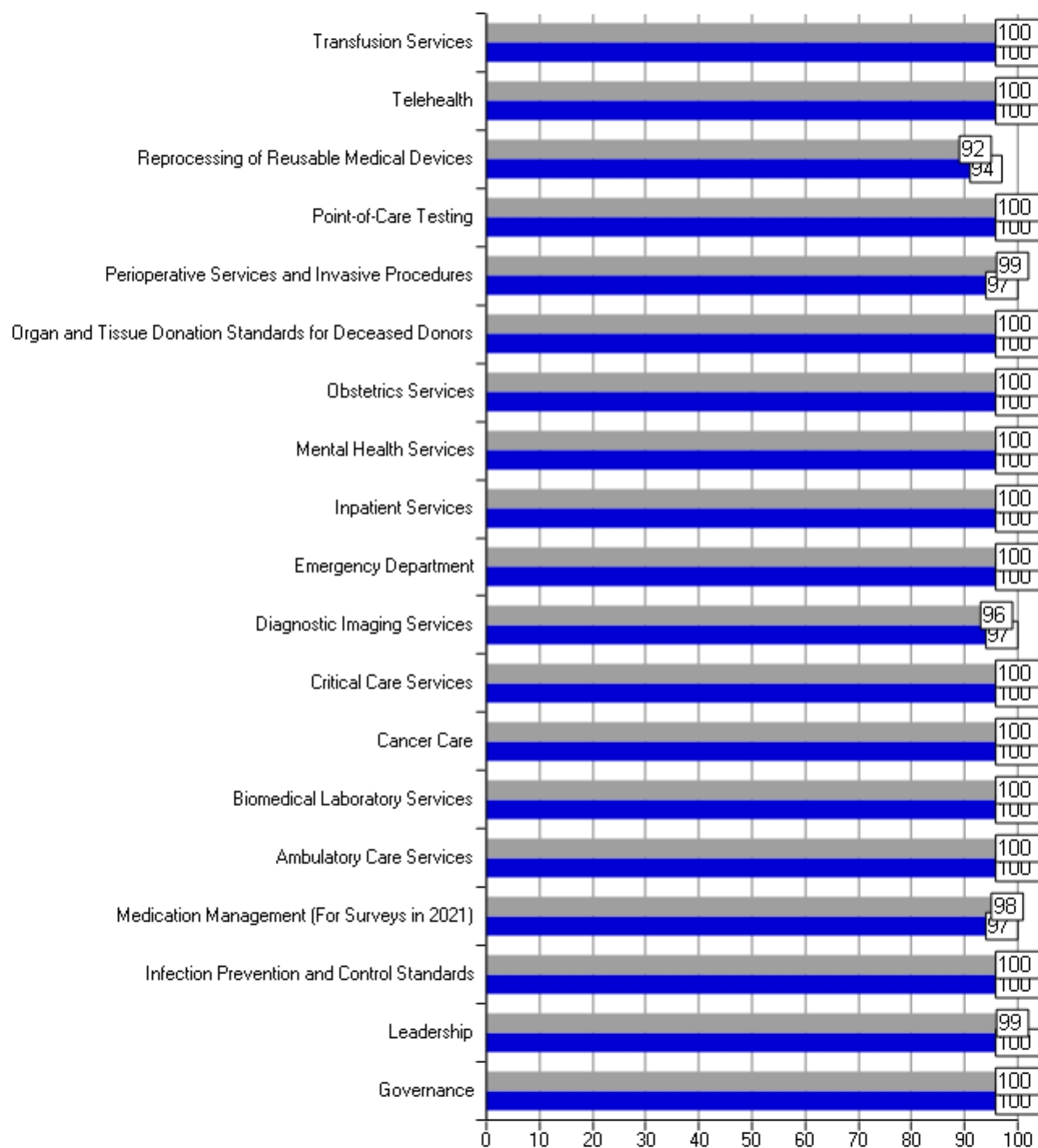
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

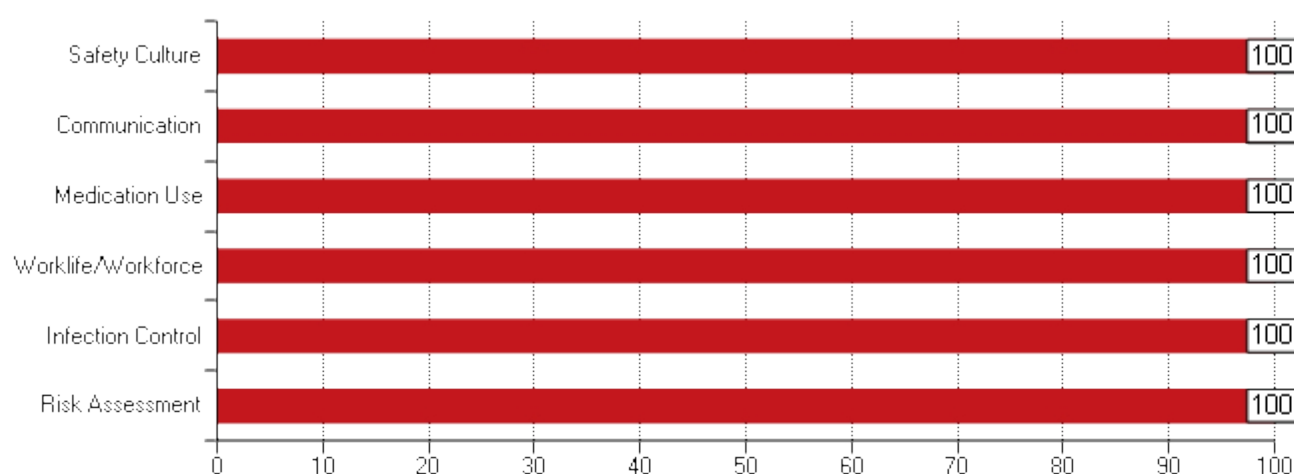
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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



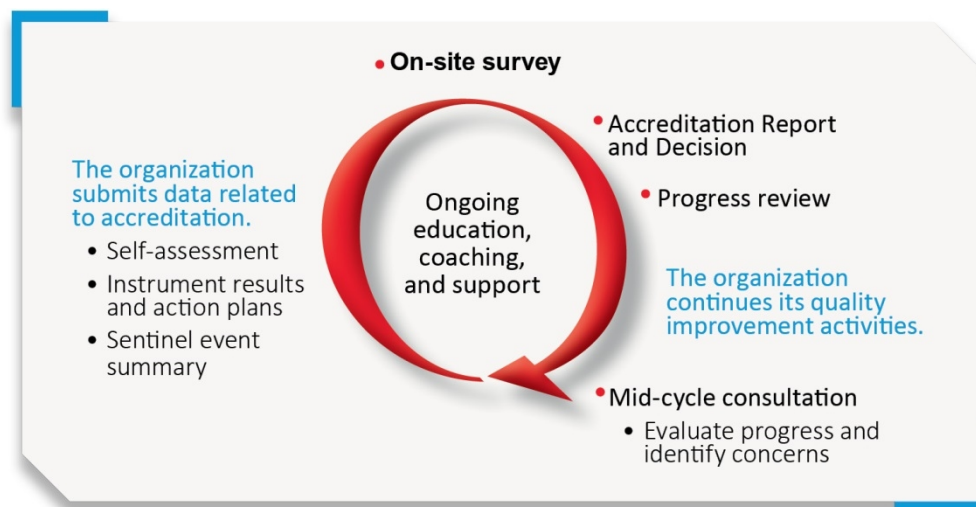
The quality improvement journey

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 **Thunder Bay Regional 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 Thunder Bay Regional Health Sciences Centre

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

Medication Use

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

Worklife/Workforce

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

Infection Control

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

Risk Assessment

- Falls Prevention Strategy

Required Organizational Practices

- Pressure Ulcer Prevention
 - Suicide Prevention
 - Venous Thromboembolism Prophylaxis
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