



Shared health
Soins communs
Manitoba

Provincial Accreditation Model 2025-2028

Basil Evan
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September 11, 2023

SH Provincial Accreditation Team

1. Basil Evan, Provincial Accreditation Lead, Shared Health
 2. Clarence Panergo, Provincial Accreditation Consultant, Shared Health
 3. (vacancy), Provincial Accreditation Consultant, Shared Health
- SH Provincial Accreditation Team reports to:
 - Holly Mulvihill, Interim Director, Quality, Patient Safety, Accreditation and Patient Relations, Shared Health
 - SH Provincial Accreditation Team works in partnership with:
 - Corene Debreuil, Exec. Director, Quality & Citizen Experience, MB Health
 - Provincial Quality Network and HA/SDO Accreditation Leads (SHSDO, WRHA, PMH, NRHA, SH-SS, IERHA, CCMB)

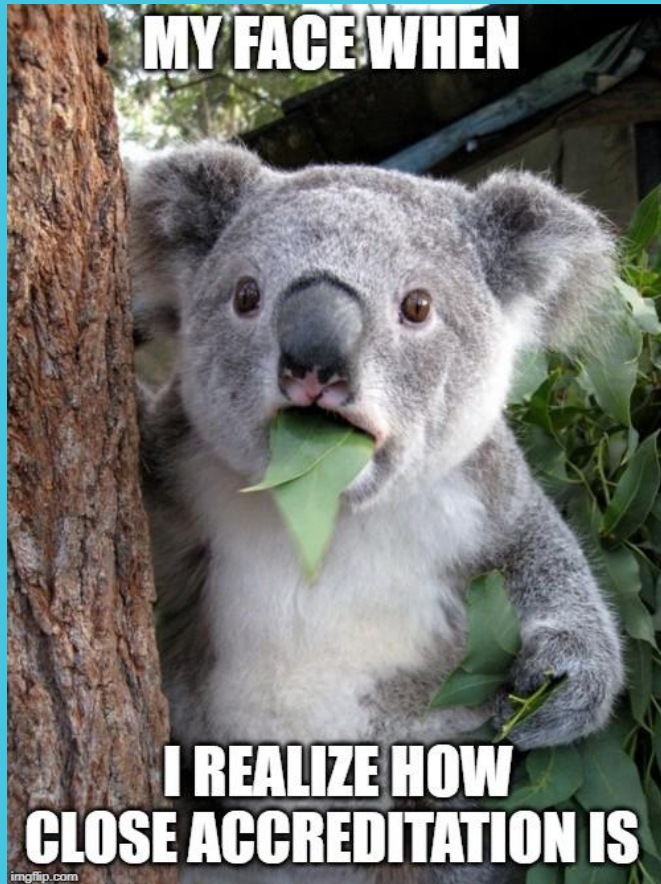
Health Authority Accreditation Directive

- Under The Health System Governance and Accountability Act (Act) all Health Authorities (HAs) must:
 - Be accredited by a health accreditation body or bodies approved by the Minister.
 - Maintain accreditation at all times.
 - Provide a copy of the final accreditation report to the Minister.
 - Publish the final report on the HAs website within 60 days of receipt.
 - Participate in provincial accreditation when implemented.

“Getting Ready”



“Being Ready”



Background

- The COVID-19 pandemic placed extraordinary demands on all organizations. In the face of these challenges, necessary steps were taken to navigate health system transformation, addressing accreditation gaps that will improve health system resilience.
- Until recently, Manitoba's HAs/SDOs held separate contracts with Accreditation Canada (AC). This meant each HA/SDO was assessed separately on different 4-year cycles.
- The first provincial contract between MB Health and Accreditation Canada (AC) was established in May 2023. With one provincial contract a sequential survey process can occur, whereby all HAs/SDOs can be assessed simultaneously during the same cycle year.

Provincial Model

- In accordance with the provincial contract, Shared Health (SH) developed a provincial model for accreditation in consultation with government representatives and health system stakeholders across all provincial health organizations.
- The model ensures SH will lead and coordinate system-wide accreditation activities that support a continuous cycle of quality improvement, creating a culture of client service and learning that is enhanced and sustained throughout the accreditation process.
- The Accreditation Decision Committee (ADC) approved the new provincial model (i.e., sequential survey process) in August 2023.

Key Responsibilities

- **MB Health** will hold and manage the provincial accreditation contract.
 - Includes processing payments for provincial accreditation services, fees and invoices.
- **SH** will lead and coordinate sequencing and provincial processes.
 - Includes establishing a Provincial Accreditation Advisory Committee (i.e., working group) to operationalize the contract and ensure the coordination of accreditation processes in partnership with the Provincial Quality Network.
- **HAs/SDOs** will implement and coordinate local accreditation processes.
 - Includes clarifying issues, formulating strategies and standardizing resources.

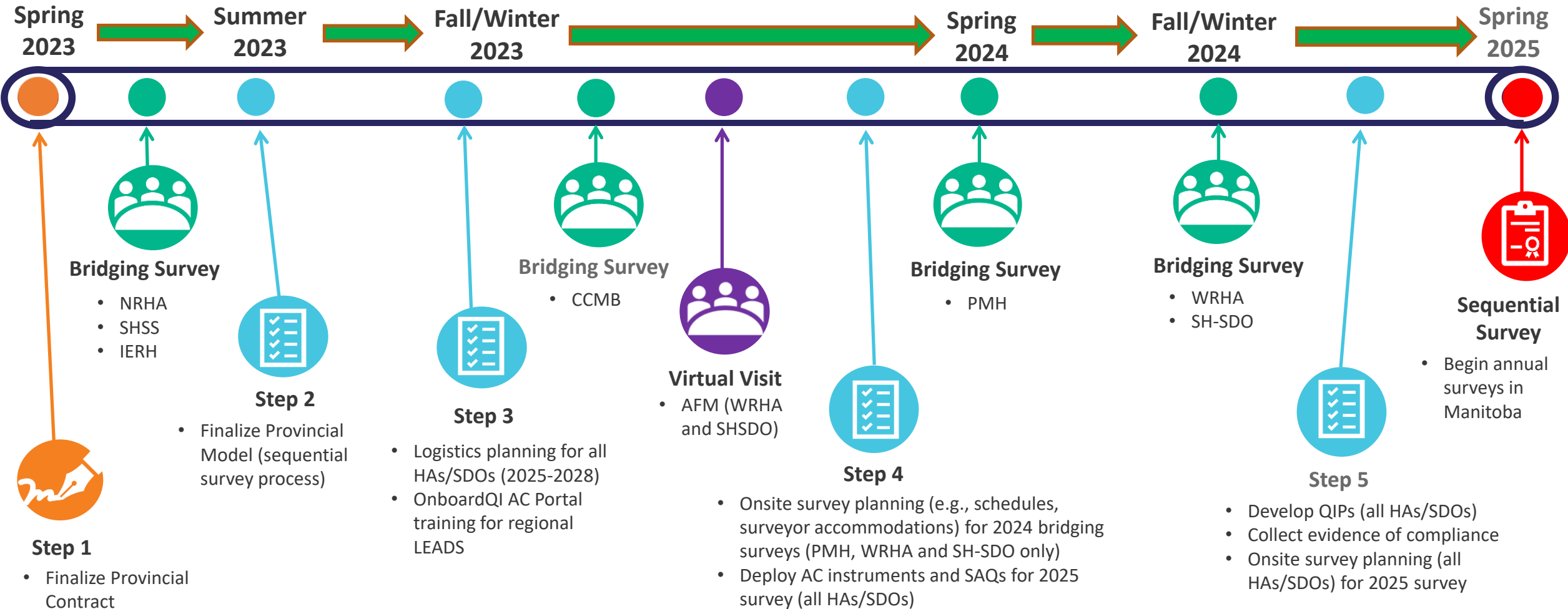
Next Steps

- **Complete Bridging Surveys (2023-2024)**
 - 2023-NRHA, SH-SS, IERHA, CCMB
 - 2024-PMH, WRHA, SH
- **Operationalize Provincial Model (2023-2028)**
 - 2023-Logistics Planning, OnboardQI Portal Training for Leads
 - 2024-Deploy AC instruments and Self-Assessment Questionnaires (SAQs), Develop Quality Improvement Plans (QIPs)
 - 2025-Onsite survey planning; sequential surveys will take place every year late May/early June (2025-2028), and beyond...

Bridging Surveys vs. Sequential Surveys

- **Bridging Surveys** - 2019 AC Standards, Version 14
 - Ensures HAs/SDOs maintain accredited status during transition.
 - Provides a starting point for all HAs/SDOs.
- **Sequential Surveys** – New/Updated AC Standards, Effective 2021
 - Focus on specific standards for each sequence year (e.g., Sequence #1: Core Standards=Governance, Leadership, Emergency & Disaster Management, Medication Management, Infection Prevention & Control).
 - Identify the HAs/SDOs & Programs assessed with specific standards (e.g., Sequence #2: Service-Based Standard for Emergency Department; HAs/SDOs=IERHA, NHR, PMH, SH-SS, SH, and WRHA; Programs=Child Health, and Emergency).

Accreditation Transition Timeline (2023-2025)



Sequence 1-4; Years 2025-2028

2025-Sequence 1	2026-Sequence 2	2027-Sequence 3	2028-Sequence 4
Governance	Perioperative & Invasive Procedures	Mental Health (including CBMH)	Population Health and Wellness
Leadership	Critical Care	Substance Abuse and Problem Gambling	Public Health
Emergency & Disaster Management	Emergency Department	Ambulatory Care	Spinal Cord Injury
	Organ Donation	Cancer Care	Acquired Brain Injury
	EMS & Interfacility Transport	Long Term Care	Rehabilitation
	Inpatient	Palliative Care	Intellectual and Developmental Disabilities
	Obstetrics		Primary Care
	Home Care (WRHA only)		Home Care
	Diagnostic Services		
	Reprocessing of Reusable Medical Devices		
	Service Excellence as applicable		
Medication Management, and Infection Prevention & Control			

Qmentum Global™ Program

- ✓ New program content
- ✓ New program platform
- ✓ 4-Year Accreditation Cycle

Qmentum Global™ Four-Year Cycle

- STEP 5**
Attestation (optional, once available)
6 months before on-site survey
- STEP 4**
Submit accreditation information
Up to 12 months before on-site survey
- STEP 3**
Complete instruments
12 to 24 months before on-site survey
- STEP 2**
Complete self-assessments (optional)
12 to 24 months before on-site survey
- STEP 1**
Create Accreditation Canada Manual
12-24 months before the on-site survey



- STEP 6**
Plan on-site survey activities and logistics
3 to 6 months before on-site survey
- STEP 7**
On-site survey
- STEP 8**
Receive Accreditation Final Report and Award
15 to 20 days after on-site survey
- STEP 9**
Submit evidence for progress review (if applicable)
Within 5 months after on-site survey
- STEP 10**
Submit evidence for progress review (if applicable)
Within 11 months after on-site survey
- STEP 11**
Begin preparation for next cycle
After on-site survey

Accreditation Canada Instruments

1. Governance Functioning

- a. Pilot Study completed in 2023.
- b. Instrument will be deployed in 2024 for use by all HAs/SDOs.

2. Workforce Survey on Wellbeing, Quality and Safety (WSWQS)

- a. Pilot Study completed in 2023.
- b. Instrument will be deployed in 2024 for use by all HAs/SDOs.

3. Self-Assessment Questionnaire (SAQ)

- a. Focus on Required Organizational Practices and High Priority Criteria.
- b. To be developed in partnership with all HAs/SDOs for each cycle year.

New and Updated Standards

- **Example: Emergency and Disaster Management (New)**
 - Guides organizations to adopt an all-hazards approach and proactively establish and sustain a culture of emergency and disaster preparedness and resilience.
 - “High Priority” = Use an inclusive approach to engage the community, and gain an understanding of the community’s diverse needs in emergencies.
- **Example: Governance (Updated)**
 - New definitions and content-specific updates in the areas of people-centred care, workforce, organizational health and safety, equity, diversity and inclusion, cultural safety and humility, systemic racism and environmental stewardship.
 - “High Priority” = Addressing Indigenous-specific systemic racism.

HSO Quality Dimensions



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



Accessibility: Give me timely and equitable services



Safety: Keep me safe



Worklife: Take care of those who take care of me



Client-centred Services: Partner with me and my family in our care



Continuity: Coordinate my care across the continuum



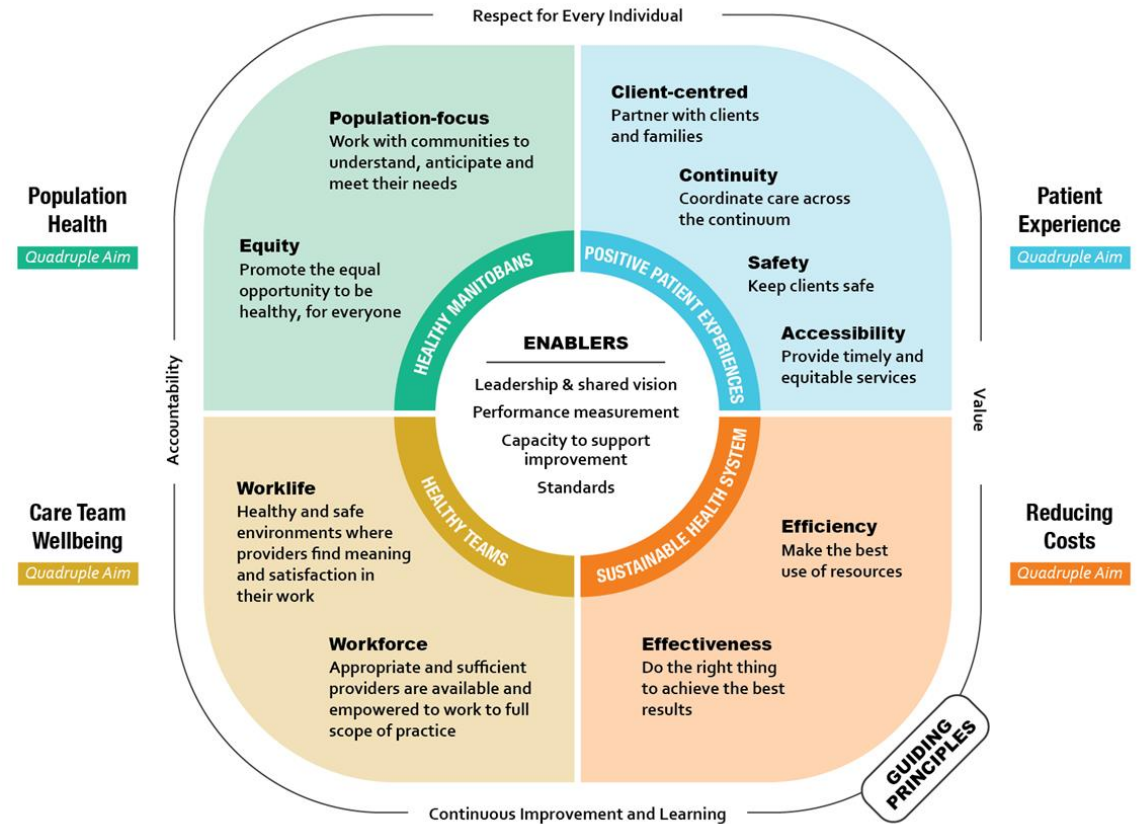
Appropriateness: Do the right thing to achieve the best results



Efficiency: Make the best use of resources

Manitoba Quality & Learning Framework

- The MQLF is inclusive of patient safety, a key dimension of quality, and accreditation, a key quality process.
- Accreditation Standards drive continuous learning and improvement.
- Clear roles and responsibilities are needed to support the full implementation of the MQLF, and operationalize the provincial model.



Available online:

<https://sharedhealthmb.ca/patient-care/quality-patient-safety-learning/framework/>

Key Roles of Stakeholders

RACI Chart		<i>Is a diagram that identifies the key roles of stakeholders along major tasks within a 'project'. RACI charts serve as a visual representation of the functional role played by each stakeholder group involved in the 'project'. It is a living document which is used to depict the task roles of a 'project'. The RACI chart is <u>not</u> meant to replace a true project plan. The RACI is only a simple visual of the different roles along major project tasks.</i>
RACI		Role Description
R	Responsible	Those who are responsible to carry out the task, have it in place and complete the task (e.g. project owner). More than one may be identified if the task requires combined effort of leadership or expertise. When they delegate a task, they retain their overall responsibility for the process/ project.
A	Accountable	Those who are to have resources in place to have task complete. Typically only one is identified. In complex processes, may have one identified within each jurisdiction. (e.g final approver - responsible for whole task). Accountable person ensures 'Responsible' roles are identified and approved.
C	Consulted	Those who have expertise. Those who can provide insight for those who are responsible and accountable to have task complete. They are the content experts.
I	Informed	Those who are kept informed on the progression /milestones/ completion of the task by those who are responsible and accountable.
		<i>Note: No 'S - Support' role included in this RACI Model, as 'Support' is too broad a term to accurately reflect actionables</i>

RACI - Examples of Key Roles

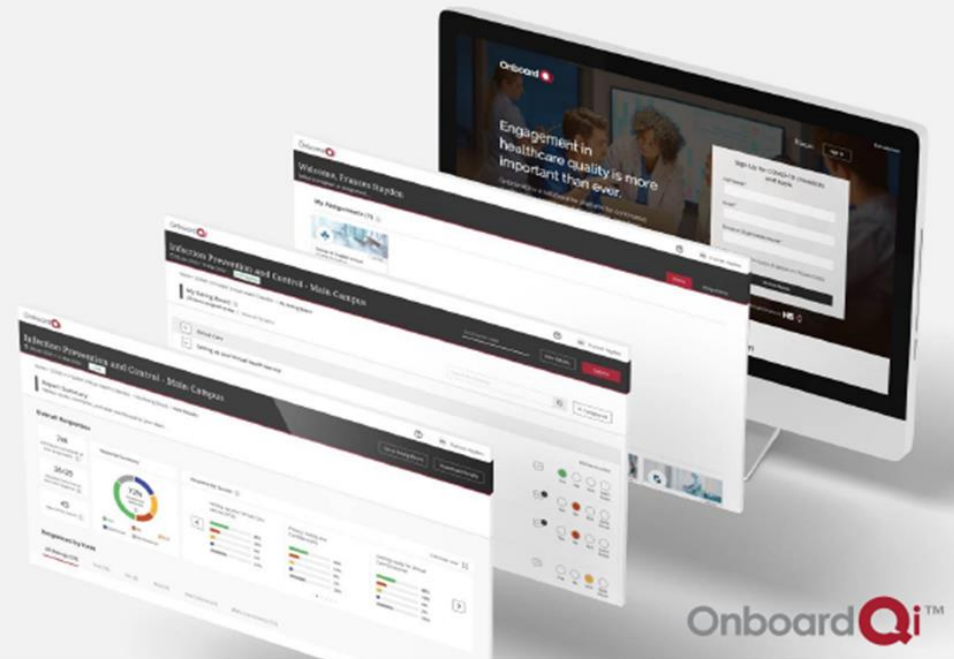
RACI - Transitional State	Manitoba Health	Accreditation Canada	SH Gov/ Leadership	Provincial Accreditation Team	SDO Gov/ Leadership	SDO QPSA	SDO Accreditation Lead
Continue to Provide & Roll-out Accreditation Education and Learnings			I	C	A	R	R
Share New and Updated Health Standards Organization (HSO)/Accreditation Canada (AC) Requirements, Standards, Tools & Resources	I	R	I	R	I	A	A
Maintain current SDO Accreditation Service Agreements/Contracts	I	C	A	C	A	R	R

Qmentum Global - OnboardQi

OnboardQi is a collaborative platform for continuous quality improvement – available anytime, anywhere.

OnboardQi gives people the ability to:

- Build and customize assessments based on evidence-based standards and content
- Include the right people in the assessment, from front line staff to third party assessors
- Generate ideas for improvement and assign actions
- Bring standards and criteria to life by tracking ratings over time
- Work and share data in a transparent way




Provincial Accreditation - SharePoint

SharePoint

Search this site

PA Provincial Accreditation Home Documents HSO Communication and Resources Provincial Accreditation Advisory Committee Calendar Notebook ... Edit Private group Not following 44 members

+ New Page details Analytics Published 7/19/2023 Edit



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Provincial Accreditation

Shared Health leads Manitoba's development of a provincial model for accreditation in collaboration and consultation with health system stakeholders across all provincial health organizations. Our goal is to establish an accreditation model that supports a continuous cycle of quality improvement; creating a culture of client service and learning that is enhanced and sustained throughout the accreditation process.

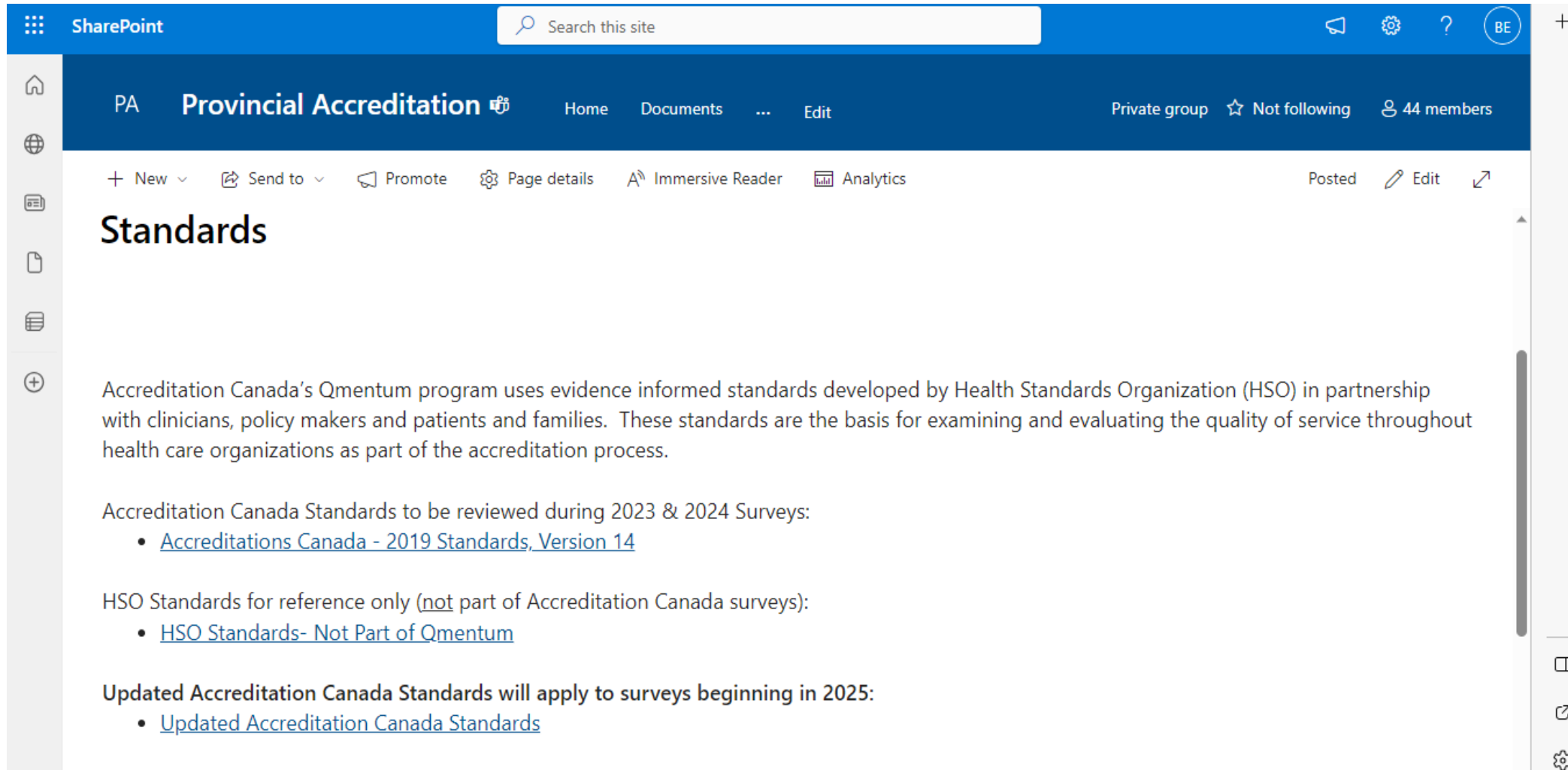
Statement of Acknowledgement of Indigenous Ancestral and Territorial Lands

Health services across Manitoba are provided in facilities located on the original lands of First Nations, Inuit, and on the homeland of the Métis Nation. Manitoba's health authorities respect that First Nations treaties were made on these territories, acknowledge harms and mistakes, and we dedicate ourselves to collaborate in partnership with First Nations, Inuit, and Métis peoples in the spirit of reconciliation.

What is Accreditation?

Accreditation is used by health care organizations to ensure they are providing the best care possible. It is an ongoing process in which organizations evaluate their services against national standards of excellence to identify what they do well and where they could do better, and make improvements based on the results. Accreditation is a valuable tool for improving the quality and safety of care. [Please click here for a copy of the info graphic.](#)

Accreditation Resources



The screenshot shows a SharePoint page for a group named 'Provincial Accreditation'. The page title is 'Standards'. The content includes a paragraph about Accreditation Canada's Qmentum program, followed by two sections of links to standards documents. The first section is for surveys in 2023 & 2024, and the second is for surveys beginning in 2025.

SharePoint

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PA Provincial Accreditation

Home Documents ... Edit

Private group ☆ Not following 👤 44 members

+ New ▾ ↗ Send to ▾ 📣 Promote ⚙ Page details A Immersive Reader 📊 Analytics

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Standards

Accreditation Canada's Qmentum program uses evidence informed standards developed by Health Standards Organization (HSO) in partnership with clinicians, policy makers and patients and families. These standards are the basis for examining and evaluating the quality of service throughout health care organizations as part of the accreditation process.

Accreditation Canada Standards to be reviewed during 2023 & 2024 Surveys:

- [Accreditations Canada - 2019 Standards, Version 14](#)

HSO Standards for reference only (not part of Accreditation Canada surveys):

- [HSO Standards- Not Part of Qmentum](#)

Updated Accreditation Canada Standards will apply to surveys beginning in 2025:

- [Updated Accreditation Canada Standards](#)

Contact Information

- The Shared Health Provincial Accreditation Team is the point of contact for the accrediting bodies and health system stakeholders, each Health Authority (HA) and every Service Delivery Organization (SDO).
- Email us at shprovaccreditation@sharedhealthmb.ca

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Questions?

