



**ACCREDITATION  
AGRÉMENT**  
CANADA  
Qmentum

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# Progress Report

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## Alberta Health Services

Edmonton, AB

**4th Component (2014-17 Cycle)**

On-site survey dates: April 30, 2017 - May 5, 2017

Progress Report issued: November 30, 2017

## About the Progress Report

Alberta Health Services (referred to in this report as “the organization”) had an on-site survey in April 2017. To maintain or improve its accreditation decision, the organization needed to complete required follow-ups after the survey and submit evidence of action taken for Accreditation Canada’s review.

This Progress Report reflects the organization’s progress since the on-site survey. The report shows the organization’s compliance with the quality dimensions, the standards, and the Required Organizational Practices (ROP) at the time of the on-site survey and following Accreditation Canada’s progress review.

Any alteration of this Progress Report compromises the integrity of the accreditation process and is strictly prohibited.

## Confidentiality and Dissemination

This report is confidential. Accreditation Canada provides it to the organization and does not release it to any other parties.

In the interest of transparency and accountability, Accreditation Canada encourages the organization to disseminate its Progress Report to staff, board members, clients, the public, and other stakeholders.

*Accreditation Canada is a not-for-profit, independent organization that provides health services organizations with a rigorous and comprehensive accreditation process. We foster ongoing quality improvement based on evidence-based standards and external peer review. Accredited by the International Society for Quality in Health Care, Accreditation Canada has helped organizations strive for excellence for more than 50 years.*

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## Accreditation Decision

After the on-site survey, the organization's accreditation decision was:

**Accredited**

After the progress review in November 2017, the organization's accreditation decision is:

**Accredited**

## Overview by Quality Dimensions

Accreditation Canada defines quality in health care by focusing on eight dimensions that represent key service elements. Every criterion in the standards is associated with a quality dimension.

This table shows the organization's standards compliance for each quality dimension at the time of the on-site survey and following the progress review.

Quality Dimension	Compliance (%)	
	On-site survey May 2017	Progress review November 2017
Population Focus (Work with my community to anticipate and meet our needs)	92.42%	92.42%
Accessibility (Give me timely and equitable services)	92.13%	92.13%
Safety (Keep me safe)	84.86%	88.33%
Worklife (Take care of those who take care of me)	70.93%	70.93%
Client-centred Services (Partner with me and my family in our care)	88.33%	88.59%
Continuity (Coordinate my care across the continuum)	98.89%	98.89%
Appropriateness (Do the right thing to achieve the best results)	79.24%	79.42%
Efficiency (Make the best use of resources)	83.33%	83.33%

## Overview by Standards Set

Qmentum standards sets identify policies and practices that contribute to high-quality, safe, and effectively managed care. Each standard has associated criteria that contribute to achieving that standard.

System-wide sets of standards address quality and safety at the organizational level in areas such as governance and leadership, while population-specific and service excellence sets of standards address specific populations, sectors, and services. The sets of standards used to assess an organization’s programs are based on the type of services it provides.

This table shows the organization’s compliance with the applicable sets of standards at the time of the on-site survey and following the progress review.

Standards Set	Compliance (%)			
	On-site survey May 2017		Progress review November 2017	
	High priority criteria	All Criteria	High priority criteria	All Criteria
Population Health and Wellness	100.00%	100.00%	100.00%	100.00%
Aboriginal Integrated Primary Care	100.00%	100.00%	100.00%	100.00%
Critical Care	96.00%	96.48%	96.00%	96.48%
Home Care Services	75.51%	73.60%	75.51%	73.60%
Hospice, Palliative, End-of-Life Services	91.11%	94.12%	91.11%	94.12%
Long-Term Care Services	70.91%	75.97%	72.73%	76.62%
Medicine Services	48.89%	59.02%	51.11%	59.84%
Obstetrics Services	84.51%	89.94%	85.92%	90.57%
Perioperative Services and Invasive Procedures	73.91%	75.00%	78.26%	77.23%
Primary Care Services	93.10%	96.64%	93.10%	96.64%
Public Health Services	87.23%	85.34%	87.23%	85.34%

## Overview by Required Organizational Practices

In the Qmentum program, a Required Organizational Practice (ROP) is defined as an essential practice that an organization must have in place to enhance client safety and minimize risk. Each ROP has associated tests for compliance, categorized as major and minor. All tests for compliance must be met for the ROP to be rated as met.

This table shows the organization's compliance with the applicable ROPs at the time of the on-site survey and following the progress review.

Required Organizational Practice	Compliance	
	On-site survey May 2017	Progress review November 2017
Patient Safety Goal Area: Communication		
Client Identification (Aboriginal Integrated Primary Care)	Met	Met
Client Identification (Critical Care)	Met	Met
Client Identification (Home Care Services)	Met	Met
Client Identification (Hospice, Palliative, End-of-Life Services)	Met	Met
Client Identification (Long-Term Care Services)	Met	Met
Client Identification (Medicine Services)	Unmet	Met
Client Identification (Obstetrics Services)	Met	Met
Client Identification (Perioperative Services and Invasive Procedures)	Met	Met
Information transfer at care transitions (Aboriginal Integrated Primary Care)	Met	Met

Required Organizational Practice	Compliance	
	On-site survey May 2017	Progress review November 2017
Patient Safety Goal Area: Communication		
Information transfer at care transitions (Critical Care)	Met	Met
Information transfer at care transitions (Home Care Services)	Unmet	Unmet
Information transfer at care transitions (Hospice, Palliative, End-of-Life Services)	Met	Met
Information transfer at care transitions (Long-Term Care Services)	Unmet	Unmet
Information transfer at care transitions (Medicine Services)	Met	Met
Information transfer at care transitions (Obstetrics Services)	Met	Met
Information transfer at care transitions (Perioperative Services and Invasive Procedures)	Met	Met
Medication reconciliation at care transitions (Aboriginal Integrated Primary Care)	Met	Met
Medication reconciliation at care transitions (Critical Care)	Unmet	Unmet
Medication reconciliation at care transitions (Home Care Services)	Met	Met
Medication reconciliation at care transitions (Hospice, Palliative, End-of-Life Services)	Met	Met
Medication reconciliation at care transitions (Long-Term Care Services)	Met	Met



Required Organizational Practice	Compliance	
	On-site survey May 2017	Progress review November 2017
<b>Patient Safety Goal Area: Communication</b>		
Medication reconciliation at care transitions (Medicine Services)	Unmet	Unmet
Medication reconciliation at care transitions (Obstetrics Services)	Unmet	Unmet
Medication reconciliation at care transitions (Perioperative Services and Invasive Procedures)	Met	Met
Safe Surgery Checklist (Obstetrics Services)	Unmet	Met
Safe Surgery Checklist (Perioperative Services and Invasive Procedures)	Met	Met
<b>Patient Safety Goal Area: Medication Use</b>		
Infusion Pumps Training (Critical Care)	Met	Met
Infusion Pumps Training (Home Care Services)	Unmet	Met
Infusion Pumps Training (Hospice, Palliative, End-of-Life Services)	Met	Met
Infusion Pumps Training (Long-Term Care Services)	Met	Met
Infusion Pumps Training (Medicine Services)	Met	Met
Infusion Pumps Training (Obstetrics Services)	Unmet	Unmet
Infusion Pumps Training (Perioperative Services and Invasive Procedures)	Unmet	Unmet

Required Organizational Practice	Compliance	
	On-site survey May 2017	Progress review November 2017
Patient Safety Goal Area: Risk Assessment		
Falls Prevention Strategy (Aboriginal Integrated Primary Care)	Met	Met
Falls Prevention Strategy (Critical Care)	Met	Met
Falls Prevention Strategy (Home Care Services)	Unmet	Unmet
Falls Prevention Strategy (Hospice, Palliative, End-of-Life Services)	Met	Met
Falls Prevention Strategy (Long-Term Care Services)	Unmet	Unmet
Falls Prevention Strategy (Medicine Services)	Unmet	Unmet
Falls Prevention Strategy (Obstetrics Services)	Unmet	Unmet
Falls Prevention Strategy (Perioperative Services and Invasive Procedures)	Unmet	Unmet
Home Safety Risk Assessment (Home Care Services)	Unmet	Met
Pressure Ulcer Prevention (Critical Care)	Met	Met
Pressure Ulcer Prevention (Hospice, Palliative, End-of-Life Services)	Met	Met
Pressure Ulcer Prevention (Long-Term Care Services)	Met	Met

Required Organizational Practice	Compliance	
	On-site survey May 2017	Progress review November 2017
<b>Patient Safety Goal Area: Risk Assessment</b>		
Pressure Ulcer Prevention (Medicine Services)	Met	Met
Pressure Ulcer Prevention (Perioperative Services and Invasive Procedures)	Unmet	Unmet
Skin and Wound Care (Home Care Services)	Unmet	Unmet
Suicide Prevention (Aboriginal Integrated Primary Care)	Met	Met
Suicide Prevention (Long-Term Care Services)	Unmet	Met
Venous Thromboembolism Prophylaxis (Medicine Services)	Met	Met
Venous Thromboembolism Prophylaxis (Perioperative Services and Invasive Procedures)	Unmet	Unmet

## Summary

Alberta Health Services is using Accreditation Canada's Qmentum program to guide its quality improvement initiatives by assessing its services against Accreditation Canada's standards and using the results to make improvements.

Accreditation Canada has reviewed the evidence of action taken and reports that, as of November 2017, the organization's accreditation decision remains Accredited.

In the spirit of ongoing quality improvement, the organization is encouraged to continue to use the standards to improve the quality and safety of the services it offers.