

**Accreditation, Quality and Healthcare Improvement**  
**Response to Accreditation Canada report (3<sup>rd</sup> Component 2014 – 2017 Cycle)**  
**July 20, 2016**

Alberta Health Services (AHS) continues to hold 'accredited' status, and is pleased to share the results of the May 1-6, 2016, [Accreditation Canada](#) on-site survey, which demonstrates our commitment to meeting national standards for quality and safety in providing health care services. The results accurately capture the successes and challenges of our province-wide, integrated health system.

In this report, Accreditation Canada surveyors recognized our passionate and caring staff who work collaboratively in strong interdisciplinary teams to meet the needs of patients, both within the organization and with community partners. During survey week, surveyors also acknowledged additional strengths contributing to AHS' ability to provide safe, quality patient care:

- Committed executive leadership and front line managers
- Positive interactions between staff, patients and families at the point of care
- Continued progress and dedication to quality improvement
- Significantly improved medication reconciliation practice from the last survey.

AHS recognizes the value of [Accreditation Canada's QMentum program](#) to guide ongoing quality improvement. Many of the opportunities for improvement outlined in this report had been self - identified by the organization and as a result, multiple initiatives are already underway to address them. Some examples include:

- Standardization and Spread of Best Practice – AHS is committed to improving standardization and spread of best practice, whether it be the utilization of standard forms to communicate important information when a patient is transferred from one facility to another or communication of new medications prescribed in hospital to providers responsible for care in the community. We also continue work on implementation of standard clinical pathways for target populations. [Chronic Obstructive Pulmonary Disease \(COPD\) Clinical Pathway](#) and standard order sets and [Alberta Rectal Cancer Clinical Pathway](#) are just a few of many examples.
- Achieving standardized practice across a large health system has its challenges, and solutions require a multi-pronged approach. Clinical knowledge content embedded into our upcoming Clinical Information System (CIS) will be very helpful to standardize clinical practice. Improved communication and engagement with physicians and staff and strong leadership will also help to successfully achieve practice change. All solutions and work toward standardization must be informed by the perspectives of those we serve, our patients/residents and their families.
- [AHS Patient First Strategy](#) – The Patient First Strategy is about strengthening AHS' culture and practices to fully embrace patient-and family centred care (PFCC). AHS is in the early stages of the Patient First Strategy, with the 2015/16 year focused on the roll out to implementation across the organization. Foundational to the Patient First Strategy are our [patient and family advisors](#) who are increasingly providing input to provincial committees, [Strategic Clinical Networks \(SCNs\)](#) and research activities. Our next steps will further integrate patient/family input closer to the point of care, within in local programs and quality committees. We will improve our efforts to capture the patient/family voice in real time, by further spreading many of our current patient centered practices such as bedside shift reports and leader rounding with patients. The Patient First Strategy walks

hand-in-hand with Our People Strategy, [Strategy for Clinical Health Research, Innovation & Analytics](#) and Information Management/Information Technology Strategy.

- [AHS Improvement Way](#) (AIW) - will be utilized to increase efficiency, decrease waste, manage variation, while measuring the change associated with these efforts. In its simplest form, the AHS Improvement Way (AIW) is a common organization-wide approach for solving problems, making improvements and managing change based on LEAN and Six Sigma principles. It is an improvement process designed for all levels of our organization, whether frontline, leadership or administrative roles. While many AHS staff have AIW training, the application of AIW principles to guide day-to-day improvement initiatives will receive greater attention as we further our work to implement operational best practices.
- Greater staff engagement in quality improvement processes – in 2015/16 AHS began implementing Quality Councils at the provincial, zone, site, program and unit levels. Implementation will be ongoing until all clinical service areas are engaged in the work of quality councils.
- The [2015-2018 AHS Health and Business Plan](#) is transitioning to a balanced scorecard/Quadruple Aim Approach. Using input from patients and families, we will also identify other meaningful quality indicators that translate to enhanced patient safety moving forward.
- Provincial Clinical Information System (CIS) - With the recent funding announcement by Alberta Health, AHS will soon issue a Request for Proposal to select a vendor for our new provincial CIS. Full implementation will span seven years, connecting and unifying information that exists in more than 1,300 different clinical information systems across the province. The CIS will enable care transformation so that Albertans can benefit from the same quality and standards wherever they are in the province. This will be accomplished through clinician access to expert clinical knowledge content reflecting evidence based best practices. The transition from paper based health records to electronic will enhance patient/resident safety and make their information accessible only to those who are authorized through provider registry. Essentially, all care-givers will be working from the same set of standardized best practices to ensure patients, families, care-givers and staff, get the right information, at the right time and place in order to make the best possible health care choices.

Finally, we are proud of our organizational response to assist residents of Fort McMurray due to the [wildfires](#). Accreditation Canada surveyors reviewing AHS services and facilities witnessed firsthand AHS' emergency response in action. One surveyor safely escaped Fort McMurray as the Northern Lights Regional Health Centre went into evacuation mode the afternoon of May 3, 2016. A systems response directed by dedicated, compassionate staff resulted in the safe evacuation and transport of 73 acute care patients and 32 continuing care residents within a span of two hours.

AHS stands alongside all people who live and work in the Fort McMurray area; we are committed to meeting your health needs even under the worst of circumstances, and in the coming weeks and months will continue to serve you as the city and surrounding industry work toward full restoration. On behalf of the people of Fort McMurray, we wish to thank Accreditation Canada surveyors for their support, compassion and generous donation to the Red Cross during the survey week.