# **Executive Summary Accreditation Report**



#### **Venta Care Centre**

### Accredited with Exemplary Standing

**Venta Care Centre** has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement.

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

#### **Accreditation Canada**

We are independent, not-forprofit, 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

September 18, 2022 to September 21, 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

• 4 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.

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The family owned and operated Venta Care Centre (VCC) is commended for providing its residents with a family care approach. Their enthusiasm and pride in resident care was noted throughout the survey.

Leaders are supported, appreciated, and embrace a culture of safety and continuous quality improvement.

Comprehensive complex care is provided 24 hours per day, 7 days per week to residents with a bed capacity of 148. They have over 69 years of experience and while the building is older, it is cared for, continually renovated, upgraded, and is a friendly atmosphere.

VCC's vision is to provide innovative, holistic, and responsive long term care services in partnership with residents and families. The values spell VENTA and includes the terms visionary, excellence, nurturing, transparency, and accountability. Staff and leaders met throughout the survey referenced and lived these values.

There is evidence that Venta Care Centre's collaborative and planned approach during the pandemic proved successful- well done!

Community partnerships are significant. Strengths of VCC were identified by their partners as welcoming, professional, prompt, and well-organized. Communication was described as excellent. The home is considered "a favorite organization" and the "best site." The home's priorities were identified as quality and safety. Their partners identified other areas, such as a "residents-first" approach, as well as wound care, medication management, food services, incident reporting, emergency preparedness, and oxygen/medi-gases.

Care and service delivery are supported in a collaborative environment by the VCC inter-disciplinary team, resulting in excellent resident outcomes. With support from Alberta Health Services and many other partners, an innovative approach to living life to the fullest has resulted in many leading practices.

The home's staff state that they feel supported, valued, appreciated, and are part of the team/family. Staff have opportunity for education and advancement. The culture of VCC that has been fostered by the owner-operators is felt throughout the centre, and the enthusiasm is infectious.

Satisfaction ratings amongst residents and families are high due to in large part to the dedication from the leadership team to the direct care staff, to supportive services. These teams rely on transparent

communication and ongoing feedback to readjust programs and services and achieve care goals and quality of life outcomes. With a family approach to solving challenges and a resident focus on excellence in service delivery, resources -- while limited – are reallocated to where the biggest impact is achieved.

### **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:

(C) 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

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

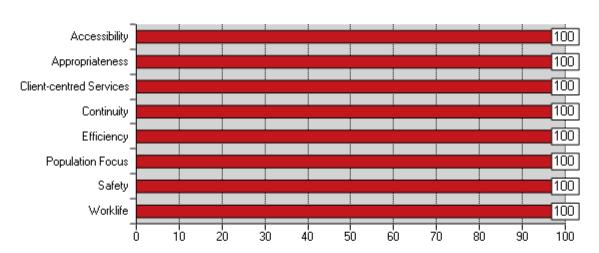
(A) Safety: Keep me safe

**Morklife:** 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**



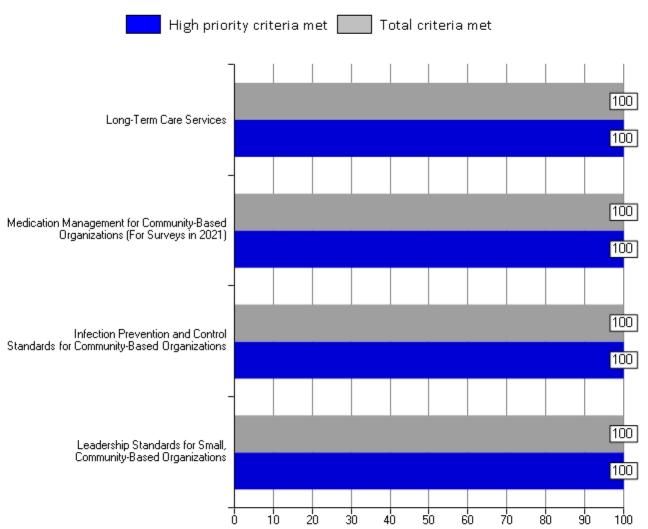
### **Overview: Standards results**

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



### **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.

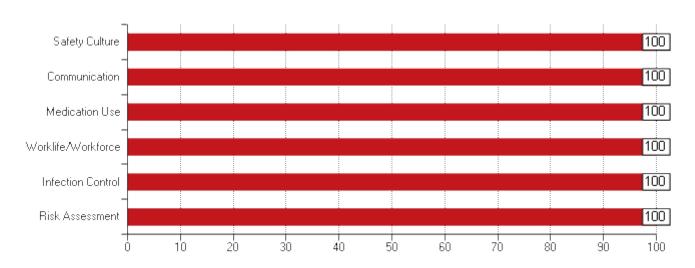
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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

#### On-site survey Accreditation Report and Decision The organization submits data related Progress review Ongoing to accreditation. education, Self-assessment coaching, The organization Instrument results and support continues its quality and action plans improvement activities. Sentinel event summary Mid-cycle consultation Evaluate progress and identify concerns

**Qmentum: A four-year cycle of quality improvement** 

As **Venta Care 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 Venta Care Centre

# **Appendix B**

	Required Organizational Practices
Safety Culture	
	Patient safety incident disclosure
	<ul> <li>Patient safety incident management</li> </ul>
	Patient safety quarterly reports
Communication	
	Client Identification
	<ul> <li>Information transfer at care transitions</li> </ul>
	<ul> <li>Medication reconciliation as a strategic priority</li> </ul>
	<ul> <li>Medication reconciliation at care transitions</li> </ul>
	<ul> <li>The "Do Not Use" list of abbreviations</li> </ul>
Medication Use	
	Concentrated Electrolytes
	Heparin Safety
	High-Alert Medications
	Narcotics Safety
Worklife/Workforce	
	Patient safety plan
	<ul> <li>Patient safety: education and training</li> </ul>
	Preventive Maintenance Program
	Workplace Violence Prevention
Infection Control	
	Hand-Hygiene Compliance
	<ul> <li>Hand-Hygiene Education and Training</li> </ul>
	Infection Rates
	Reprocessing
Risk Assessment	
	Falls Prevention Strategy
	Pressure Ulcer Prevention
	Suicide Prevention