

CancerCare Manitoba

## Accredited with Exemplary Standing

November 2015 to 2020

**CancerCare Manitoba** has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement. It is accredited until November 2023 provided program requirements continue to be met.

**CancerCare Manitoba** 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 **CancerCare Manitoba** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

### CancerCare Manitoba (2019)

CancerCare Manitoba (CCMB), the first provincial cancer agency in Canada, operates under a legislative mandate and is Manitoba's major organizational strategy for cancer control.

CCMB provides direct clinical services via multiple sites (MacCharles, St Boniface, Screening Programs, Victoria, Concordia, Seven Oaks, and Grace Oncology sites) within Winnipeg. Radiation Therapy is also provided in Brandon (Western Manitoba Cancer Centre) and systemic therapy in 16 Community Oncology Program sites throughout the province.

CancerCare Manitoba strives to provide high quality, safe and seamless care for our patients via three pillars of excellence-clinical, operational & academic excellence

### 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**

November 17, 2019 to November 22, 2019

### Locations surveyed

- 7 locations were 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

• **7 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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CancerCare Manitoba (CCMB) is congratulated for its commitment to the Accreditation process and for embracing a culture of quality, safety and person-centred care throughout the organization. It is evident that the vision, mission and values are demonstrated throughout all levels of the organization and that there is a sense of community and caring within the organization. There is also a commitment to innovation and quality service delivery.

The board of CCMB is highly engaged and committed to the key priorities of the organization. This group of individuals are well versed on the strengths and opportunities facing the organization. They are representative of the community, well informed and they use their skills and abilities to ensure sound and effective governance of CCMB.

Delivering Excellence, the Manitoba Cancer Plan 2016-2021- is guiding the organization's priority setting and operational plans built on the framework of clinical excellence, academic excellence, and operational excellence. The 6 pillars of the strategic plan are:

- 1. Toward state-of-the-art patient care
- 2. Toward timely access to multidisciplinary care
- 3. Toward enhanced reporting on performance, quality, and safety
- 4. Toward building capacity to meet growing needs
- 5. Toward improved care for underserved populations
- 6. Toward broadened scope and enhanced strength of research

The organization is preparing to undertake the development of the 2021-2026 strategic plan entitled the "Roadmap to Cancer Control in Manitoba".

CCMB provides updates on the progress that the organization is making as it relates to their strategic and operational plans. Targeted outcomes, detailed action plans, current results and milestones achieved are reported. This reporting is also done in the spirit of transparency and enhanced visibility by sharing the results openly and using dashboards and the high caliber publications of the 2019 Manitoba Cancer System Performance Report and the 2019 Cancer Surgery Quality in Manitoba report. CCMB is congratulated on their openness to report their results as this is a demonstration of their commitment to being a learning and improving organization.

CCMB continually strives to provide quality and safe patient care to all Manitobans regardless of where they live. Their provincial mandate is planned and coordinated centrally and delivered

throughout the province with other regional health authorities and health care partners. CCMB is a leader in supporting care closer to home through the 17 community oncology sites, the provincial cancer referral and navigation services, mobile screening programs, and the establishment of the Department of Primary Oncology (the first in a Canadian Cancer Centre) to recognize the key role that primary care plays in the cancer patient journey.

CCMB is commended for their ongoing work in maturing the quality and safety agenda. The quality management program is integrated throughout the organization and aligned with the strategic directions. There is a high level of accountability and commitment to quality and safety throughout all levels of the organization.

The organization is continuing to build its capacity in bringing the voice of the patient and family into its client and patient centred approaches. The organization has recruited a significant number of Patient Advisors from throughout the province who are invited to engage and participate in initiatives and projects throughout CCMB. These individuals consistently praised the organization for their experiences and for the opportunity to be engaged in a broad range of activities within CCMB. The organization is supported in their efforts to continually mature their patient and family centred care structures and processes at the unit, program and organizational level. Those interviewed are honored to be a part of the CCMB family and they look forward to continuing their participation. The CCMB is commended on their commitment and investment in supporting and engaging underserved populations (UPP) such as the First Nations, Metis, Inuit, Elderly and Newcomers. Through a health equity lens, the UPP is working towards enhancing the patient experience by making all the CCMB services and care more responsive to the needs of the underserved and vulnerable populations.

There is a true sense of caring and pride that permeates throughout the organization. There is also a commitment towards excellence, innovation and quality service delivery by the leadership, physicians, staff and volunteers. There is a spirit of innovation and collaboration that supports the mission and vision of CCMB.

Overall, patients and families are extremely satisfied with the care they receive at the service and programs offered by CCMB. They consistently commented that the staff, physicians and volunteers are caring, compassionate, respectful and courteous; those receiving this care have a tremendous amount of confidence and trust in CCMB.

The demand for cancer services in Manitoba is projected to dramatically rise over the next two decades due to the aging population, the higher incidence of cancer in the older population as well as advances in cancer treatments. CCMB will need to prepare for this increase demand and ensure that the physical, human and fiscal resources are available to support this anticipated growth in service. Change can be expected to be ongoing and a dynamic occurrence in health care as Manitoba undergoes health system transformation. With the long history and experience that CCMB has as a provincial cancer program, it is well positioned to be a key contributor in the health transformation space. CCMB is encouraged to share its knowledge and expertise with its key partners Shared Health and the Transformation Team as Manitoba moves to transform health care in the province. CCMB has a great deal to offer to the people of Manitoba. They can take extreme pride in the many accomplishments and contributions they have and will continue to make for the people of Manitoba.

## **Overview: Quality dimensions results**

Accreditation Canada uses eight dimensions that all play a part in providing safe, high quality health care.

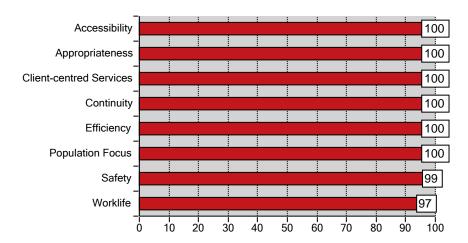
These dimensions are the basis for the standards, and each criteria in the standards is tied to one of the quality dimensions.

The quality dimensions are:

	Accessibility:	Give me timely and equitable services
<b></b>	Appropriateness:	Do the right thing to achieve the best results
	<b>Client-centred Services:</b>	Partner with me and my family in our care
$\bigcirc$	Continuity:	Coordinate my care across the continuum
Ĉ	Efficiency:	Make the best use of resources
	Population Focus:	Work with my community to anticipate and meet our needs
Œ	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.



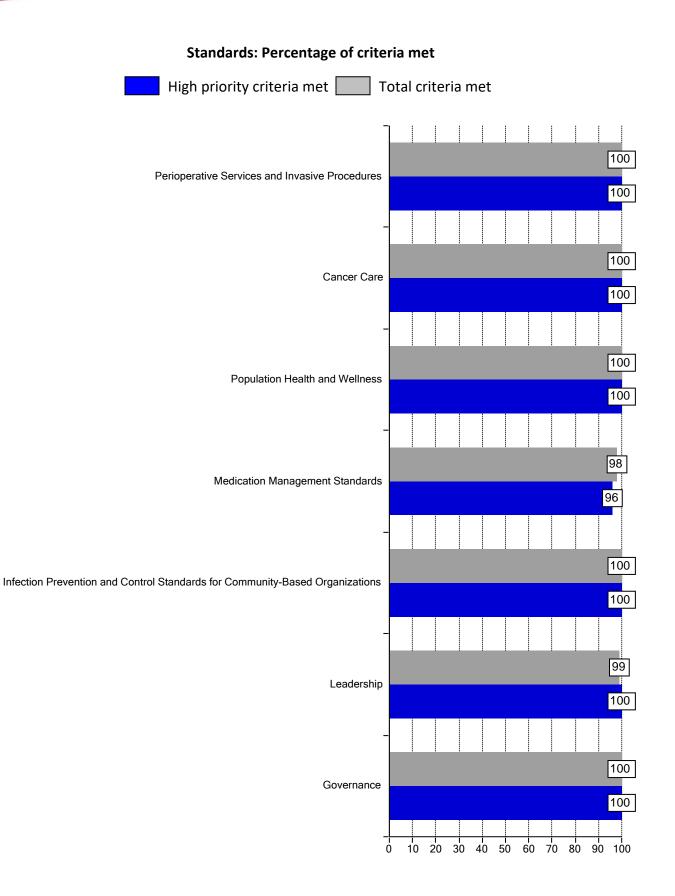
### **Quality Dimensions: Percentage of criteria met**

### **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.



### **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:

See **Appendix B** for a list of the ROPs in each goal area.

- 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

100 Safety Culture 100 Communication 100 Medication Use 100 Worklife/Workforce Infection Control 100 **Risk Assessment** 100 20 30 60 40 70 90 10 50 ò 80 100

#### **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 **CancerCare Manitoba** 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.

CancerCare Manitoba

# **Appendix A: Locations surveyed**

- 1 CancerCare Manitba (CCMB) MacCharles Site
- 2 CCMB Prevention and Screening Services
- 3 CCMB St. Boniface Site
- 4 CCMB Western Manitoba Cancer Centre (Brandon, MB)
- <sup>5</sup> Health Science Centre (GammaKnife Suite)
- 6 Kleyson Institute for Advanced Medicine (KIAM)
- 7 Victoria General Hospital Oncology Unit

# **Appendix B**

Safety Culture

# **Required Organizational Practices**

	<ul> <li>Accountability for Quality</li> </ul>
	<ul> <li>Patient safety incident disclosure</li> </ul>
	<ul> <li>Patient safety incident management</li> </ul>
	<ul> <li>Patient safety quarterly reports</li> </ul>
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>
	Safe Surgery Checklist
	<ul> <li>The "Do Not Use" list of abbreviations</li> </ul>
Medication Use	
	Concentrated Electrolytes
	Heparin Safety
	High-Alert Medications
	Infusion Pumps Training
	Narcotics Safety
Worklife/Workforce	
	Client Flow
	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>
	Reprocessing
Risk Assessment	
	Falls Prevention Strategy