
December 2, 2014

Population & Public Health

This is the first in a series of newsletters that will have a quality and accreditation focus.

What is Accreditation?

Accreditation is used by many health care organizations to improve client outcomes and system performance. It helps WRHA work together to create a focus on safety and quality.

The process is ongoing. We participate in accreditation to identify what we do well and where they could do better, and make improvements based on the results. Peer reviewers, called surveyors, visit the organization every four years to evaluate how we are meeting the standards. They share their expertise and make recommendations.

Accreditation Canada then evaluates the results of the peer review to determine whether the WRHA will be accredited, and provides an accreditation report that identifies strengths and areas for improvement. WRHA uses the report to create and implement action plans, continuing the cycle of ongoing quality improvement.

Accreditation Update

See Ebola Tabletop Exercise Article

How Does Accreditation Happen?

April 2016 will be the first time the entire region is being visited at once for the purpose of accreditation. In previous years selected programs were visited in rotation every four years. That is why there has been such little time since the last Population and Public Health accreditation visit in 2013.

The [Population and Public Health Quality Team](#) has been meeting since the 2013 accreditation. Before and after the visit the PPH Quality Team developed a [Quality Improvement Roadmap](#) which includes a focus on 1) Information Systems Development, 2) Health Communications Strategy Development, 3) Improving Information Transfer, 4) Program Evaluation, 4) Performance Evaluation, 5) Healthy Built Environments, 6) Resource Utilization, and 7) Health Equity Promotion.

The entire program has been working on quality improvement since that time.

Accreditation Visit Preparation Steps

1. Self-assessment questionnaire
April 7-19, 2015 - All PPH staff including administrative staff will be asked to participate in a questionnaire to help identify how we are meeting high priority requirements established by Accreditation Canada.
2. Revise and develop Quality Improvement Roadmap
The PPH Quality Team will update the roadmap considering the feedback provided by staff.
3. Site Visit
April 17-22, 2016 - Accreditation Canada surveyors will be visiting many sites in the region during this week.



In addition to these steps, we will publish occasional newsletters. We will provide content for and encourage discussion in team meetings. As we get closer to the date of the site visit the co-chairs of the Quality Team may visit teams.

Ebola Tabletop Exercise

Emergency Preparedness and Outbreak response are key criteria for accreditation.

On December 2 a table-top exercise was initiated to test our system's ability to address a few Ebola scenarios. Invited to the meeting were representatives from Disaster Management, Population and Public Health, Infection Prevention and Control, Occupational and Environmental Safety and Health, Manitoba Health, Public Health, City of Winnipeg Fire and Paramedic Service, among others.

The exercise validated the good preparatory work that has been completed. The lessons we learned from monitoring of people returning from affected countries was also evident. New lessons learned as a result of this table-top exercise will be shared with the various teams in our program once the day's exercise has been summarized.

Quality Team Membership and Roles

The team includes membership from most service areas. It also includes many roles working in PPH: Clinical Nurse Specialist, Communicable Disease Coordinator,

Public Health Nurse, Public Health Dietician, Families First Home Visitor, Centralized and Community Managers, Centralized Coordinator, PPH Medical Director, Centralized Manager of Facility and Support Services, Population Health Initiatives Leader, URIS Coordinator
The PPH Quality Team provides the structure to plan and co-ordinate program-level quality improvement initiatives. The team's purpose is to:

- Develop, support and monitor the Quality Improvement Roadmap
- Consider ethical aspects of quality improvement implementation and planning processes

- Prepare regular communication on quality processes (e.g., email bulletins, intranet postings)
- Regularly review occurrences, near misses and critical occurrences for trends and plan with others to mitigate risk
- Systematically review how Required Organizational Practices relevant to the program are implemented, and plan for improvements as necessary
- Facilitate and monitor the implementation and impact of quality initiatives
- Take a lead in the accreditation process.